

Colorado Department of Healthcare Policy & Finance

Crosswalk – **SCL Health/Lutheran Medical Center (LMC)**

(Based on the 2018 IRS/990 report filing)

Schedule H Part I Categories	Description	Community Benefit Categories (Free or Discounted Healthcare Services; Programs that addresses Healthcare Barriers or Risk; Programs that address the Social Determinants of Health/SDOH)	Investments
Charity Care at cost	Health care services provided for free or at reduced prices to low income patients	Free or Discounted Healthcare Services	\$2,973,478.
Unreimbursed Medicaid	Government sponsored means-tested health care programs and services	<i>Discounted Government program services</i>	\$25,187,453.
Unreimbursed costs (other means tested government programs)	Government sponsored means-tested health care programs and services (e.g. State Children’s Health Insurance Programs, medical programs for low-income or medically indigent persons not eligible for Medicaid)	<i>Discounted Government program services</i>	\$155,873.
Community Health Improvement Services	Program services and activities carried out to improve community health, such as health education classes for disease management, disease prevention, support groups, health screenings, wellness and community based clinical services. <i>(Details of investments listed below)</i>		
Community Health Education	Examples include: A Perfect Homecoming, Baby’s First Ride, Community health & wellness education, Maternal addiction services, Falls prevention, Trauma education, and tobacco cessation	Programs that address Healthcare Barriers or Risk  <i>Need: Access to Care, Behavioral Health, SDOH (education)</i>	\$676,116.
Health Professions Education	Educating future and current health care professionals is a distinguishing characteristic of not-for-profit health care. It includes educational programs for physicians (interns and residents), medical students, nurses, nursing students, pastoral care trainees and other health professionals when that education is necessary for a degree, certificate or training required by state law, accrediting body or health profession specialty. <i>(Details of investments listed below)</i>		

Health Professions Education	Costs related to clinical training and licensing of Nurses/Nursing Students	Programs that address Healthcare Barriers or Risk; Programs that address the Social determinants of health  <i>Need: Access to Care, SDOH (Economic Development/Education)</i>	\$129,126.
Health Professions Education	Costs related to clinical training and licensing of Pharmacy Students, Radiology Students, Respiratory Students, Surgical Tech, Medical Imaging	Programs that address Healthcare Barriers or Risk  <i>Need: Access to Care, SDOH (Economic Development/Education)</i>	\$788,646.
Health Professions Education	Denver Public School – Student Intern Program	Programs that address the Social determinants of health  <i>Need: Access to Care, SDOH (Economic Development/Education)</i>	\$53,808.
Subsidized Services	Subsidized health services are patient care programs provided despite a financial loss so significant that losses remain after removing the effects of financial assistance, Medicaid shortfalls, and bad debt. The services are provided because they meet identified community health needs and if these services were no longer offered, they would be unavailable in the area, or the community's capacity to provide the services would be below the community's need, or provision of the services would become the responsibility of the government or other not-for-profit organization. Examples include: inpatient programs (such as addiction recovery); Outpatient programs (emergency and trauma services, home health programs, and satellite clinics designed to serve low-income communities). <i>(Details of investments listed below)</i>		
Community Health Improvement	Lutheran Medical Center subsidized services supporting cardiac rehab	Programs that address Healthcare Barriers or Risk  <i>Need: Access to Care, Behavioral Health, Cardiovascular Health</i>	\$499,909.
Community Health Improvement	Lutheran Medical Center subsidized services supporting Dialysis	Programs that address Healthcare Barriers or Risk  <i>Need: Access to Care, Behavioral Health</i>	\$358,000.

Community Health Improvement	Lutheran Medical Center subsidized services supporting Pulmonary Rehab	Programs that address Healthcare Barriers or Risk  <i>Need: Access to Care</i>	\$287,652.
Community Health Improvement	Lutheran Medical Center subsidized services supporting OB/Newborn	Programs that address Healthcare Barriers or Risk  <i>Need: Access to Care</i>	\$2,769,380.
Community Health Improvement	Lutheran Medical Center subsidized services supporting NICU	Programs that address Healthcare Barriers or Risk  <i>Need: Access to Care, Economic Stability</i>	\$395,702.
Community Health Improvement	Lutheran Medical Center subsidized services supporting Infusion Center	Programs that address Healthcare Barriers or Risk  <i>Need: Access to Care, Cancer, Economic Stability</i>	\$1,496,214.
Community Health Improvement	Lutheran Medical Center subsidized services supporting West Pines Psychiatric	Programs that address Healthcare Barriers or Risk  <i>Need: Access to Care, Behavioral Health</i>	\$1,195,567.
Cash/In-Kind	Category includes the value of cash and in-kind services donated by the health care organization to support others. Examples of in-kind services can include hours spent by staff as part of their work assignment while on the organization's work time, cost of meeting space provided to community groups, and donations of food, equipment and supplies. <i>(Details of investments listed below)</i>		
Cash Donations	Supporting community benefit activities delivered by community based organizations or entities that address an identified need in such areas as - access to health services, medical education, free clinic services, or social supports (transportation, housing, food security, safety, economic development).	Programs that address Healthcare Barriers or Risk; Programs that address the Social determinants of health	\$97,794.

	Lutheran Medical Center examples include support for: The Action Center, Catholic Charities, Jefferson Center, Community Detox Services and Project CURE	<i>Need: Access to Care, Behavioral Health, SDOH (housing, Isolation, food security)</i>	
In-kind Donations	Equipment/supply donations to local and international missions	Programs that address Healthcare Barriers or Risk <i>Need: a</i>	\$328,395.
In-kind Donations	Facilities usage for community non-profit organizations, free medication for indigent, and lab testing for medically underserved at community non-profits	Programs that address Healthcare Barriers or Risk; Programs that address the Social determinants of health  <i>Need: Access to Care, SDOH (economic stability)</i>	\$133,448.
<b>Schedule H Part II Categories</b>			
Community Building	Programs and/or activities that address underlying causes of health problems and thus improve health status and quality of life. They focus on root causes of health problems such as poverty, homelessness and environmental hazards. These activities enhance community assets by offering the expertise and resources of the health care organization. Examples include: physical improvements, economic development, environmental improvements, community support, coalition building, workforce development and leadership development and training for community members.		
<b>Other Categories</b>			
Financial Assistance Policy	<p>SCL Health System (SCL Health) is committed to providing financial assistance to persons who have health care needs and are uninsured, underinsured, ineligible for a government program, or otherwise unable to pay for medically-necessary care based on their household financial situation. Consistent with its mission to deliver compassionate, high-quality, affordable health care services and to advocate for those who are poor and vulnerable, SCL Health strives to ensure that the financial ability of people who need health care services does not prevent them from seeking or receiving care.</p> <p>SCL Health will provide, without discrimination, care of emergency medical conditions to individuals regardless of their ability to pay or their eligibility for financial assistance or for government assistance.</p> <p>Financial assistance shall be provided to patients who meet program qualifications and reside within one of SCL Health service areas. Financial assistance shall be provided, without discrimination, to patients from outside the SCL Health service areas, who otherwise qualify for the program, and who present with an urgent, emergent or life-threatening condition.</p>		

	SCL Health will use the most current Federal Poverty Guidelines to determine eligibility under its financial assistance policy. Patients qualifying for financial assistance may receive fully discounted care or pay a discounted fee under this policy. A medical hardship provision extends financial assistance to patients with incomes above the financial assistance eligibility threshold and medical bills that exceed a threshold percentage of the patient's household income.		
<b>Schedule H Part III Categories</b>	<b>Bad Debt, Medicare &amp; Collection</b>	<b>Category</b>	<b>Investment</b>
<b>Bad Debt</b>	Bad Debt	Other Costs	\$16,761,188.
<b>Medicare</b>	Medicare	Discounted Government program services	\$41,045,224.

Available evidence supporting community health improvement investments in prevention and control.

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<https://doi.org/10.1186/s12913-019-4300-1>.
3. Rodriguez, E.M., & Smith, L. Provider Perspectives on Stressors, Support, and Access to Mental Health Care for Latinx Youth. *Qualitative Health Research*. 2020. 30(4), 547-559
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5. Davis, E. L., Kelly, P. J., Deane, F. P., Baker, A. L., Buckingham, M., Degan, T., & Adams, S. (2020). The relationship between patient-centered care and outcomes in specialist drug and alcohol treatment: A systematic literature review. *Substance Abuse*, 41(2), 216. <https://doi-org.proxymu.wrlc.org/10.1080/08897077.2019.1671940>
6. Chaiyachati KH, Qi M, Werner RM. Nonprofit hospital community benefit spending and readmission rates. *Popul Health Manag*. 2019 May 29. [Epub ahead of print].
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9. Leviten-Reid, C., Matthew, R., & Wardley, L. (2020). Sense of community belonging: exploring the impact of housing quality, affordability, and safety among renter households. *Journal of Community Practice*, 28(1), 18-35.
10. Cordier, T., Y. Song, J. Cambon, G. S. Haugh, M. Steffen, P. Hardy, M. Staehly, A. Hagan, V. Gopal, P. D. Tye, and A. Renda. 2018. A bold goal: More healthy days through improved community health. *Population Health Management* 21(3):202–208.
11. Baggett, T. P., Berkowitz, S. A., Fung, V., & Gaeta, J. M. (2018). Prevalence of housing problems among community health center patients. *Jama*, 319(7), 717-719.
12. Gottlieb, L. M., H. Wing, and N. E. Adler. 2017b. A systematic review of interventions on patients' social and economic needs. *American Journal of Preventive Medicine* 53(5):719–729.