

**EMHS Mission:** The mission of EMHS is to maintain and improve the health and well-being of the people of Maine through a well-organized network of local healthcare providers who together offer high quality, cost-effective services to their communities.

**EMHS System-wide Total Benefit: \$ 90,968,620**

Community Health Improvement Services: \$ 251,137	Community Benefit Operations: \$ 163,396
Health Professions Education: \$ 141,474	Charity Care: \$ 19,210,568
Subsidized Health Services: \$ 35,761	Unpaid Cost of Public Programs:
Research: \$ 1,734,929	Medicare: \$ 31,897,886      Medicaid: \$ 33,507,650
Financial Contributions: \$ 154,179	Unrecoverable interest cost on funds used to subsidize state Mainecare/Medicaid underpayments of \$ 78.8M: \$ 3,661,789
Community-Building Activities: \$ 209,851	

*\$1,834,140 is the total amount of donor funds used for community benefit through Healthcare Charities of EMHS.*

**Community Benefit by EMHS Non-profit Member**

**The Acadia Hospital**

**Total Community Benefit: \$ 9,969,333**

**Community Impact:** The Acadia Hospital partnered with The Penobscot Theatre during the weeks of May 10-14 and 17-21, providing more than 2,000 Maine middle school students with the opportunity to view the one-act play “Secret Life of Girls,” which addressed the issue of bullying in the era of social networking. The 45-minute touring play included a post-play discussion led by the Penobscot Theatre and an Acadia Hospital representative. Students from 12 different middle schools benefited, including Houlton, MDI, Deer Isle-Stonington, Camden-Rockport, Hampden, Orrington, and Old Town.

Health Professions Education: \$ 8,896	Unpaid Cost of Public Programs:
Community-Building Activities: \$ 7,690	Medicare: \$ 2,055,748
Community Benefit Operations: \$ 181	Unrecoverable interest cost on funds used to subsidize state Mainecare/Medicaid underpayments of \$ 6.8M: \$ 274,061
Community Health Improvement Services: \$ 13,111	
Charity Care: \$ 7,609,646	

*\$ 79,915 is the total amount of donor funds used for community benefit at The Acadia Hospital through Acadia Hospital Healthcare Charities.*

**The Aroostook Medical Center**

**Total Community Benefit: \$ 11,080,720**

**Community Impact:** The Aroostook Medical Center (TAMC) holds a variety of activities that improve the health of the community, including health fairs, flu vaccination clinics, health screenings, informative health-related classes, and more. In May, TAMC held a community health fair in the town of Mars Hill. TAMC offered free cholesterol and blood pressure screenings; information about diabetes, healthy eating, and how to stop smoking; and healthy exercise demonstrations for children and adults.

Community Health Improvement Services: \$ 26,359	Charity Care: \$ 1,129,841
Health Professions Education: \$ 29,068	Unpaid Cost of Public Program
Subsidized Health Services: \$ 35,761	Medicare: \$ 7,187,109      Medicaid: \$ 2,212,213
Financial Contributions: \$ 63,256	Unrecoverable interest cost on funds used to subsidize state Mainecare/Medicaid underpayments of \$ 8.3M: \$ 388,403
Community-Building Activities: \$ 3,288	
Community Benefit Operations: \$ 5,422	

*\$85,270 is the total amount of funds from grants used for community benefit at The Aroostook Medical Center.*

**TOGETHER We're Stronger**

## Blue Hill Memorial Hospital

**Total Community Benefit: \$ 1,144,743**

**Community Impact:** In its most recent fiscal year, Blue Hill Memorial Hospital provided \$1,160,433 in charity care. We remain committed to providing outstanding care to all of our patients, regardless of their financial circumstances.

Community Health Improvement Services: \$ 16,807  
Unpaid Cost of Public Programs:  
Medicare: \$ 284,194

Charity Care: \$ 633,371  
Unrecoverable interest cost on funds used to subsidize state Mainecare/Medicaid underpayments of \$ 4.9M: \$210,371

## Charles A Dean Hospital and Nursing Home

**Total Community Benefit: \$ 869,574**

**Community Impact:** CA Dean is strong community advocate, volunteering several hours per year to volunteer boards, school events, and town activities. This spirit of sharing and collaboration is a key building block to the continued growth of the Moosehead Lake region.

Community Health Improvement Services: \$ 658  
Health Professions Education: \$ 17,821  
Financial Contributions: \$ 3,356  
Charity Care: \$ 291,347

Unpaid Cost of Public Programs:  
Medicare: \$ 127,994      Medicaid: \$ 381,520  
Unrecoverable interest cost on funds used to subsidize state Mainecare/Medicaid underpayments of \$ .89M: \$ 46,878

## EMHS (data below reflects Home Office activity only)

**Total Community Benefit: \$ 276,013**

**Community Impact:** EMHS supports the 5-2-1-0 Goes to School message across Aroostook, Hancock, Kennebec, Penobscot, Piscataquis, Somerset and Washington counties. Through use of the 5-2-1-0 Goes to School framework, schools, teachers, nutrition programs, and parents can support a healthier school environment and encourage families to continue the healthy lifestyle practices outside of school. For more information on 5-2-1-0, visit [www.emh.org](http://www.emh.org) and click on 5-2-1-0.

Community Health Improvement Services: \$ 257  
Health Professions Education: \$ 1,655  
Financial Contributions: \$ 75,667

Community Benefit Operations: \$ 144,500  
Community-Building Activities: \$ 53,934

*\$27,766 is the total amount of donor funds used for community benefit at EMHS through EMHS Healthcare Charities.*

## Eastern Maine Homecare

**Total Community Benefit: \$ 211,740**

**Community Impact:** Pathfinders: Support for grieving children held its Spring, 2010 session from February – May. This 10-week session provided grief support services for 28 children and 17 adults. Pathfinders helped families coping with loss through illness, suicide, and murder

Charity Care: \$ 16,695

Medicaid: \$ 195,045

*\$23,989 is the total amount of donor funds used for community benefit at Eastern Maine Homecare through Eastern Maine Homecare Healthcare Charities*

**TOGETHER We're Stronger**

## Eastern Maine Medical Center

**Total Community Benefit: \$ 59,842,706**

**Community Impact:** Eastern Maine Medical Center is committed to caring for our patients, their families, the community, and one another. In our culture of safety, we emphasize patient safety as our number one priority. The other components of a safe environment include the safety of EMMC employees and contractors who work on our campus. We're proud to be able to continue that culture of safety by offering safety training to our employees annually and several times throughout the year to construction contractors who work onsite. We are committed to providing as safe an environment as we possibly can to all who come to EMMC, whether as patients, visitors, employees, or contracted workers.

Community Health Improvement Services: \$ 40,436  
Health Professions Education: \$ 82,989  
Research: \$ 1,734,929  
Community-Building Activities: \$ 2,411

Charity Care: \$ 7,306,774  
Unpaid Cost of Public Programs:  
Medicare: \$ 20,140,224      Medicaid: \$ 28,217,414  
Unrecoverable interest cost on funds used to subsidize state Mainecare/Medicaid underpayments of \$ 48.3M: \$ 2,317,529

*\$1,348,750 is the total amount of donor funds used for community benefit at Eastern Maine Medical Center through Eastern Maine Medical Center Healthcare Charities.*

## Inland Hospital

**Total Community Benefit: \$ 5,974,757**

**Community Impact:** Inland's 13th annual World of Women's Wellness, the hospital's biggest community health event of the year, was held at Thomas College on April 3. This year, more than 400 women attended and 1500+ health screenings were conducted - a 23 percent increase over the number of screenings from last year's event.

Community Health Improvement Services: \$ 48,742  
Health Professions Education: \$ 185  
Community-Building Activities: \$ 59,476  
Community Benefit Operations: \$ 13,176  
Financial Contributions: \$ 11,900

Charity Care: \$ 1,100,440  
Unpaid Cost of Public Programs:  
Medicare: \$ 1,950,693      Medicaid: 2,501,458  
Unrecoverable interest cost on funds used to subsidize state Mainecare/Medicaid underpayments of \$ 7.3M: \$ 288,687

*\$263,420 is the total amount of donor funds used for community benefit at Inland Hospital through the Inland Foundation.*

## Rosscare

**Total Community Benefit: \$ 1,162**

**Community Impact:** Valerie Sauda, Rosscare's geriatric nurse service instructor, celebrates the completion of the first academic year providing evidence based geriatric nursing curriculum and clinical competency development for 64 nursing students and enhancing the professional skill development for more than 25 nursing staff at the First Atlantic partnership homes.

Community Health Improvement Services: \$ 628

Health Professions Education: \$ 534

*\$ 5,030 is the total amount of funds from grants used for community benefit at Rosscare.*

## Sebasticook Valley Hospital

**Total Community Benefit: \$ 1,597,872**

**Community Impact:** Since October 1, 2009, Sebasticook Valley Hospital has provided 116 free mammograms to patients who do not have insurance. While the financial value of these services is \$17,980, for patients receiving the free mammograms, the value is in the peace of mind that they have been screened for breast cancer.

Community Health Improvement Services: \$ 104,139  
Community-Building Activities: \$ 83,052  
Health Professions Education: \$ 326  
Community Benefit Operations: \$ 117  
Charity Care: \$ 1,122,454

Unpaid Cost of Public Programs:  
Medicare: \$ 151,924  
Unrecoverable interest cost on funds used to subsidize state Mainecare/Medicaid underpayments of \$ 2.3M: \$ 135,860

**TOGETHER We're Stronger**

## Community Benefit Report Glossary of Terms

*Charity Care:* The cost of care provided to uninsured, low-income patients who are not expected to pay all or part of a bill. Charity Care does not include bad debts arising from the failure to pay by patients expected to pay for such services.

*Community Benefit:* A planned, managed, organized, and measured approach to a healthcare organization's participation in meeting identified community health needs. It implies collaboration with a "community" to "benefit" its residents- particularly the poor, minorities, and other underserved groups- by improving health status and quality of life. Community benefit responds to an identified community need and meet at least one of the following criteria:

Generate a low or negative margin	Community-building activities
Health professions education	Community benefit operations
Subsidized health services	Charity care
Research	Government-sponsored healthcare
Financial contributions	

*Community Benefit Operations:* Costs associated with dedicated staff, community health needs and/or assets assessment, and other costs associated with community benefit strategy and operations

*Community-Building Activities:* Includes cash, in-kind donations, and budgeted expenditures for the development of community health programs and partnerships. Enhancements include physical improvements, economic development, healthy community initiatives, partnerships, environmental improvements, and community leadership skills training.

*Community Health Services:* Activities carried out for the purpose of improving community health. They extend beyond patient care activities and are usually subsidized by the hospital

*Donor Funds:* The donor funds provided by each entity's Healthcare Charities branch are monies distributed to address recognized needs in the community. Donor funds are not included in the individual entity's total community benefit amount or the system-wide community benefit amount.

*Financial Contributions:* Includes funds and in-kind services donated to individuals and/or the community at large. In-kind services include hours donated by staff to the community while on the healthcare organization's work time, overhead expenses of space donated to not-for-profit community groups for meetings, etc., and donation of food, equipment, and supplies.

*Health Professions Education :* This category includes providing a clinical setting for undergraduate/vocational training, internships/clerkships/residencies, and residency education for physicians, nurses and medical students; funding for staff education that is linked to community services and health improvement; nursing scholarships or tuition payments for professional education to non-employees and volunteers; and a clinical setting for undergraduate training for lab and other technicians.

*Research:* Studies on healthcare delivery, unreimbursed studies on therapeutic protocols, evaluation of innovative treatments, and research papers prepared by staff professional journals

*Subsidized Health Services:* Costs for billed services that are subsidized by the healthcare organization. They include clinical patient care services that are provided despite a negative margin because, although they are needed in the community, other providers are unwilling to provide the services and the services would otherwise not be available to meet patient demand. Negative contribution margin departments and/or services can be categorized in the subsidized health services area.

*Unpaid Costs of Public Programs:* EMHS reports both Medicare, a federal government-sponsored healthcare benefit program, and MaineCare, Maine's Medicaid program. The loss for both Medicare and MaineCare is the shortfall that is created when a facility receives payments that are less than the costs incurred for caring for public program beneficiaries.

**Definitions derived from the CHA (Catholic Health Association), VHA Inc., Internal Revenue Service Schedule H of form 990, and Lyon Software - Community Benefit Reporting: Guidelines and Standard Definitions for the Community Benefit report for Social Accountability.**

EMHS' community benefit report comes out quarterly (the EMHS fiscal year starts in October). If you would like to request that another email address be added to our distribution list, request to be taken off our community benefit distribution list, or have any question or concern regarding the EMHS Community Benefit Report, please send an email to [communitybenefit@emh.org](mailto:communitybenefit@emh.org), or call (207) 973-7051. The most recent version of our report is always available on the EMHS website, [www.emh.org](http://www.emh.org).