



**COMMUNITY BENEFITS REPORTING FORM**

*Pursuant to RSA 7:32-c-1*

FOR FISCAL YEAR BEGINNING 07/01/2015

*to be filed with:*

Office of the Attorney General  
Charitable Trusts Unit  
33 Capitol Street, Concord, NH 03301-6397  
603-271-3591

**Section 1: ORGANIZATIONAL INFORMATION**

**Organization Name** Elliot Hospital

**Street Address 1** Elliot Way

**City** Manchester

**County** 06 - Hillsborough **State** NH **Zip Code** 3103

**Federal ID #**

**State Registration #** 6272

**Website Address:** [www.elliethospital.org](http://www.elliethospital.org)

Is the organization's community benefit plan on the organization's website? Yes

Has the organization filed its Community Benefits Plan Initial Filing Information form? Yes

**IF NO**, please complete and attach the Initial Filing Information Form.

**IF YES**, has any of the initial filing information changed since the date of submission?

No **IF YES**, please attach the updated information.

**Chief Executive:** James Woodward 6036632090 [swhite@elliott-hs.org](mailto:swhite@elliott-hs.org)

**Board Chair:** Dianne Mercier 6036632090 [swhite@elliott-hs.org](mailto:swhite@elliott-hs.org)

**Community Benefits**

**Plan Contact:** Jennifer Driscoll 6036632958 [jdriscoll@elliott-hs.org](mailto:jdriscoll@elliott-hs.org)

Is this report being filed on behalf of more than one health care charitable trust? Yes

**IF YES**, please complete a copy of this page for each individual organization included in this filing.







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**Section 1: ORGANIZATIONAL INFORMATION**

**Organization Name VNA of Manchester & Southern NH, Inc.**

**Street Address 1070 Holt Avenue**

**City Manchester County 06 - Hillsborough State NH Zip Code 3103**

**Federal ID # State Registration # 2924**

**Website Address: [www.elliotohospital.org](http://www.elliotohospital.org)**

Is the organization's community benefit plan on the organization's website? Yes

Has the organization filed its Community Benefits Plan Initial Filing Information form? Yes

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**Elliot Health System and its Affiliates (EHS)**, Elliot Hospital, Elliot Physician Network, Elliot Professional Services, Mary & John Elliot Charitable Foundation and the VNA of Manchester & Southern, NH are pleased to present the FY 2015 Community Benefit Report.

**Elliot Hospital** – As the cornerstone of EHS, Elliot Hospital (EH) is a private, not for profit hospital established in 1890, and now a 296-bed acute care facility located in Manchester on EHS’s main campus. EH is a premier health care provider in many disciplines, serving as the designated trauma center for the greater Manchester area, and designated receiving facility for psychiatric patients in the region. It is also home to New Hampshire’s Hospital for Children (NHHC), the Elliot Regional Cancer Center, the Max K. Willscher Urology Center, and one of only three Level III Neonatal Intensive Care Units (NICU) in the state of New Hampshire.

**Elliot Physician Network & Elliot Professional Services** - EHS through the Elliot Physician Network (EPN), and Elliot Professional Services (EPS), both private, not for profit physician groups, provides primary care and specialty care via over 215 employed physicians as far north as Hooksett, east to Raymond, south to Windham and west to New Boston. The Elliot Physician Network has 25 physician practices in the Greater Manchester area.

**Mary & John Elliot Charitable Foundation** - The Mary & John Elliot Charitable Foundation is a not for profit, charitable organization created to provide financial support to the various needs of EHS. The Foundation is committed to building an ongoing circle of friends whose financial support will help EHS identify and meet emerging healthcare needs.

**VNA of Manchester & Southern NH** – As one of the region’s oldest and most comprehensive not for profit home health providers, the VNA is dedicated to improving the health and well being of our community by providing compassionate, caring, and accessible healthcare. Since 1897, the VNA has helped individuals and their families face the challenges of recovering from surgery, physical disabilities, and short-term, chronic, and life-limiting illnesses.

**Section 2: MISSION & COMMUNITY SERVED**

Mission Statement:

The Elliot Health System, through its subsidiary provider and development organizations, offers cost-effective strategies and solutions for meeting the region's health care challenges.

Has the Mission Statement been reaffirmed in the past year (RSA:7:32e-I)? Yes

Please describe the community served by the health care charitable trust. "Community" may be defined as a geographic services area and/or a population segment.

Service Area (Identify Towns or Region describing the trust's primary service area)

The Primary Service Area (PSA) & Secondary Service Area (SSA) jointly comprise twenty communities located in the Hillsborough, Merrimack and Rockingham counties. Communities in the PSA include: Auburn, Bedford, Candia, Chester, Deerfield, Deering, Derry, Frankestown Goffstown, Hooksett, Londonderry, Manchester, New Boston, and Raymond. Communities in the SSA include Allenstown, Amherst, Dunbarton, Litchfield, Merrimack, and Weare.

## Population Projections by Town & Service Area

		2010	2020	2030	2040	% Change 2010-2020	% Change 2020-2030	% Change 2030-2040
PSA	Bedford	21,203	23,967	24,859	25,067	13.0%	3.7%	0.8%
PSA	Deering	1,912	1,914	1,985	2,002	0.1%	3.7%	0.9%
PSA	Francestown	1,562	1,620	1,680	1,694	3.7%	3.7%	0.8%
PSA	Goffstown	17,651	18,084	18,757	18,915	2.5%	3.7%	0.8%
PSA	Manchester	109,565	110,163	114,263	115,221	0.5%	3.7%	0.8%
PSA	New Boston	5,321	6,502	6,744	6,800	22.2%	3.7%	0.8%
PSA	Hooksett	13,451	14,713	15,381	15,610	9.4%	4.5%	1.5%
PSA	Auburn	4,953	5,117	5,320	5,356	3.3%	4.0%	0.7%
PSA	Candia	3,909	3,799	3,950	3,977	-2.8%	4.0%	0.7%
PSA	Chester	4,768	5,717	5,944	5,984	19.9%	4.0%	0.7%
PSA	Deerfield	4,280	4,828	5,020	5,054	12.8%	4.0%	0.7%
PSA	Derry	33,109	31,189	32,429	32,649	-5.8%	4.0%	0.7%
PSA	Londonderry	24,129	24,453	25,425	25,598	1.3%	4.0%	0.7%
PSA	Raymond	10,138	10,373	10,785	10,858	2.3%	4.0%	0.7%
	<b>PSA Total</b>	<b>257,961</b>	<b>264,459</b>	<b>274,572</b>	<b>276,825</b>	<b>2.5%</b>	<b>3.8%</b>	<b>0.8%</b>
SSA	Amherst	11,201	11,448	11,874	11,973	2.2%	3.7%	0.8%
SSA	Litchfield	8,271	9,097	9,436	9,515	10.0%	3.7%	0.8%
SSA	Merrimack	25,494	25,393	26,338	26,559	-0.4%	3.7%	0.8%
SSA	Weare	8,785	9,708	10,069	10,153	10.5%	3.7%	0.8%
SSA	Allenstown	4,322	3,536	3,697	3,752	-18.2%	4.6%	1.5%
SSA	Dunbarton	2,758	3,213	3,359	3,409	16.5%	4.5%	1.5%
	<b>SSA Total</b>	<b>60,831</b>	<b>62,395</b>	<b>64,773</b>	<b>65,361</b>	<b>2.6%</b>	<b>3.8%</b>	<b>0.9%</b>
	<b>Total PSA/SSA</b>	<b>318,792</b>	<b>326,854</b>	<b>339,345</b>	<b>342,186</b>	<b>2.5%</b>	<b>3.8%</b>	<b>0.8%</b>

Service Population (Describe demographic or other characteristics if the trust primarily serves a population other than the general population): Services the General Population

**Section 3: COMMUNITY NEEDS ASSESSMENT**

In what year was the last community needs assessment conducted to assist in determining the activities to be included in the community benefit plan?

2013 – Copy of the Community Needs Assessment is available at:  
[http://elliothospital.org/website/downloads/2013CHNAFINAL7\\_10\\_13.pdf](http://elliothospital.org/website/downloads/2013CHNAFINAL7_10_13.pdf)

Was the assessment conducted in conjunction with other health care charitable trusts in your community? Yes

Based on the needs assessment and community engagement process, what are the priority needs and health concerns of your community?

	NEED (Please enter code # from attached list of community needs)
1	100 – Access to Care
2	121 – Access to Dental
3	300 – Chronic Disease
4	340 – Asthma
5	370 – Mental Health – General
6	420 - Obesity
7	501 – Aging Population
8	
9	

What other important health care needs or community characteristics were considered in the development of the current community benefits plan (e.g. essential needs or services not specifically identified in the community needs assessment)?

	NEED (Please enter code # from attached list of community needs)
A	200 – Maternal & Child Health
B	400 – Lifestyle incl. Substance Abuse
C	999 – Other
D	
E	
F	
G	

Please provide additional description or comments on community needs including description of "other" needs (code 999) if applicable. *Attach additional pages if necessary:*

**Section 4: COMMUNITY BENEFIT ACTIVITIES**

Identify the categories of Community Benefit activities provided in the preceding year and planned for the upcoming year (note: some categories may be blank). For each area where your organization has activities, report the past and/or projected unreimbursed costs for *all* community benefit activities in that category. For each category, also indicate the *primary* community needs that are addressed by these activities by referring to the applicable number or letter from the lists on the previous page (i.e. the listed needs may relate to only a subset of the total reported costs in some categories).

<i>A. Community Health Services</i>	<i>Community Need Addressed</i>	<i>Unreimbursed Costs (preceding year)</i>	<i>Unreimbursed Costs (projected)</i>
<i>Community Health Education</i>	3 A 6	\$59,455	\$60,000
<i>Community-based Clinical Services</i>	3 -A- --	\$83,000	\$83,000
<i>Health Care Support Services</i>	1	\$1,395	\$1400
<i>Other:</i>	-- -- --		

\$143,850

<i>B. Health Professions Education</i>	<i>Community Need Addressed</i>	<i>Unreimbursed Costs (preceding year)</i>	<i>Unreimbursed Costs (projected)</i>
<i>Provision of Clinical Settings for Undergraduate Training</i>	1 -- --	\$251,918	\$252,000
<i>Intern/Residency Education</i>	1 -- --	\$741,663	\$742,000
<i>Scholarships/Funding for Health Professions Ed</i>	-- -- --	1,865	\$1,900
<i>Other:</i>	1 -- -- --		

\$995,446

<i>C. Subsidized Health Services</i>	<i>Community Need Addressed</i>	<i>Unreimbursed Costs (preceding year)</i>	<i>Unreimbursed Costs (projected)</i>
<i>Type of Service: Behavioral Health Services</i>	5 -1- B	\$3,469,833	\$3,500,000
<i>Type of Service: Primary Care Services</i>	1 -- --	\$2,948,108	\$3,000,000
<i>Type of Service: Pediatrics &amp; Pediatric Specialists</i>	1 A --	\$3,630,295	\$3,700,000
<i>Type of Service: Adult Specialists</i>	1 3 4	\$5,064,285	\$5,100,000
<i>Type of Service: Maternal Fetal Medicine</i>	1 -A- --	\$479,540	\$480,000
<i>Type of Service: Other</i>	1 C 4	\$973,821	\$974,000

\$16,565,882

<i>D. Research</i>	<i>Community Need Addressed</i>	<i>Unreimbursed Costs (preceding year)</i>	<i>Unreimbursed Costs (projected)</i>
<i>Clinical Research</i>	C -- --	\$5,456	\$5,500
<i>Community Health Research</i>	-- -- --		
<i>Other:</i>	-- -- --		

\$5,456
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<i>E. Financial Contributions</i>	<i>Community Need Addressed</i>	<i>Unreimbursed Costs (preceding year)</i>	<i>Unreimbursed Costs (projected)</i>
<i>Cash Donations</i>	1 -A- --	\$355,137	\$356,000
<i>Grants</i>	-- --	\$91,700	\$92,000
<i>In-Kind Assistance</i>	1 8	\$194,676	\$195,000
<i>Resource Development Assistance</i>	-- -- --		

\$641,513
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<i>F. Community Building Activities</i>	<i>Community Need Addressed</i>	<i>Unreimbursed Costs (preceding year)</i>	<i>Unreimbursed Costs (projected)</i>
<i>Physical Infrastructure Improvement</i>	-- -- --		
<i>Economic Development</i>	-		
<i>Support Systems Enhancement</i>	-1- -- --	\$219,181	\$220,000
<i>Environmental Improvements</i>	-- -- --		
<i>Leadership Development; Training for Community Members</i>	-- -- --		
<i>Coalition Building</i>	-- -- --		
<i>Community Health Advocacy</i>	-- -- --		

\$219,181
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<i>G. Community Benefit Operations</i>	<i>Community Need Addressed</i>	<i>Unreimbursed Costs (preceding year)</i>	<i>Unreimbursed Costs (projected)</i>
<i>Dedicated Staff Costs</i>	C -- --	\$62,137	\$63,000
<i>Community Needs/Asset Assessment</i>	-- -- --		
<i>Other Operations</i>	C -- --	\$127,408	\$128,000

\$189,545
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<i>H. Charity Care</i>	<i>Community Need Addressed</i>	<i>Unreimbursed Costs (preceding year)</i>	<i>Unreimbursed Costs (projected)</i>
<i>Free &amp; Discounted Health Care Services</i>	1 A 5	\$8,809,814	\$9,000,000

\$8,809,814
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<i>L Government-Sponsored Health Care</i>	<i>Community Need Addressed</i>	<i>Unreimbursed Costs (preceding year)</i>	<i>Unreimbursed Costs (projected)</i>
<i>Medicare Costs exceeding reimbursement</i>	1 6 --	\$36,133,674	\$37,000,000
<i>Medicaid Costs exceeding Reimbursement*</i>	1 A 5	\$45,262,135	\$46,000,000
<i>Other Publicly-funded health care costs exceeding reimbursement</i>	-- -- --		

\$81,395,809
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\*Medicaid

Includes NH Medicaid Enhancement Tax

**Section 5: SUMMARY FINANCIAL MEASURES**

	<i>Financial Information for Most Recent Fiscal Year</i>	<i>Dollar Amount</i>
	<i>Gross Receipts from Operations</i>	\$1,051,478,133
	<i>Net Revenue from Patient Services</i>	\$473,437,707
	<i>Total Operating Expenses</i>	\$490,894,513
	<i>Net Medicare Revenue</i>	\$126,775,124
	<i>Medicare Costs</i>	\$162,908,798
	<i>Unpaid Medicare</i>	\$36,133,674
	<i>Net Medicaid Revenue</i>	\$35,946,019
1.	<i>Medicaid Costs</i>	\$81,208,154
	<i>Unpaid Medicaid</i>	\$45,262,135
	<i>Unreimbursed Charity Care Expenses</i>	\$8,809,814
	<i>Unreimbursed Expenses of Other Community Benefits</i>	\$18,760,873
2.	<i>Total Unreimbursed Community Benefit Expenses</i>	\$27,570,687
	<i>Leveraged Revenue for Community Benefit Activities</i>	\$0.00
2.	<i>Total Community Benefits including Leveraged Revenue for</i>	\$27,570,687
	<i>Unreimbursed Expenses of Other Community Benefits</i>	

1. Includes Medicaid Enhancement Tax
2. Excludes unpaid Medicare & unpaid Medicaid.

**OTHER NOTE:**

All above financials based on Not-For-Profit affiliates only.

**Section 6: COMMUNITY ENGAGEMENT in the Community Benefits Process**

<i>List the Community Organizations, Local Government Officials and other Representatives of the Public consulted in the community benefits planning process. Indicate the role of each in the process.</i>	<i>Identification of Need</i>	<i>Prioritization of Need</i>	<i>Development of the Plan</i>	<i>Commented on Proposed Plan</i>
1) Manchester City Health Department	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) NH Department of Health & Human Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) Manchester Sustainable Access Project Committee	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) Manchester Senior Center	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5) Manchester Rotary Club	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6) The Mental Health Center of Greater Manchester	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7) Catholic Medical Center	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8) Elliot Hospital	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
9)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please provide a description of the methods used to solicit community input on community needs (attach additional pages if necessary):

**Section 7: CHARITY CARE COMPLIANCE**

<b>Please characterize the charity care policies and procedures of your organization according to the following:</b>	<b>YES</b>	<b>NO</b>	<b>Not Applicable</b>
The valuation of charity does not include any bad debt, receivables or revenue	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Written charity care policy available to the public	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Any individual can apply for charity care	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Any applicant will receive a prompt decision on eligibility and amount of charity care offered	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Notices of policy in lobbies	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Notice of policy in waiting rooms	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Notice of policy in other public areas	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Notice given to recipients who are served in their home	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>