

COMMUNITY BENEFITS REPORTING FORM

Pursuant to RSA 7:32-c-1

FOR FISCAL YEAR BEGINNING 07/01/2015

RECEIVED

to be filed with:

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

SEP 15 2015

CHARITABLE TRUSTS UNIT

Section 1: ORGANIZATIONAL INFORMATION

Organization Name: Monadnock Family Services

Street Address: 64 Main St

City: Keene County 03 - Cheshire State: NH Zip Code: 03431

Federal ID # 02-6012230 State Registration # 1621

Website Address: www.mfs.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:	Phil Wyzik	6033574400	<u>pwyzik@mfs.org</u>
Board Chair:	A. John Santos	6033574400	<u>jsantos@mfs.org</u>
Community Benefits Plan Contact:	Peter Skalaban	6032831651	<u>pskalaban@mfs.org</u>

Is this report being filed on behalf of more than one health care charitable trust? No

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

Section 2: MISSION & COMMUNITY SERVED

Mission Statement:

Mission

Our mission is to be a source of health and hope for people and the communities in which they live. We foster mental and emotional wellness for individuals of all ages. We create services that heal, education that transforms, and advocacy that brings a just society.

Vision

MFS strives for respectful community response to the needs of citizens with mental illness and other behavioral disorders. Individuals and families will have access to support services and opportunities necessary to pursue a life course of their choosing.

Values in Action

Respect: courteous regard toward all

Excellence: exceed expectations in all areas of service

Access: timely and affordable care

Innovation: pursuit of better care through creativity

Inclusion: full integration into community life

Learning: empowerment through knowledge

Collaboration: achieving goals through alliances

Independence: freedom to achieve self-determination

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

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

Alstead, Antrim, Bennington, Chesterfield, Dublin, Fitzwilliam, Frankestown, Gilsum, Greenfield, Greenville, Hancock, Harrisville, Hinsdale, Jaffrey, Keene, Lyndeborough, Marlborough, Marlow, Nelson, New Ipswich, Peterborough, Richmond, Rindge, Roxbury, Sharon, Stoddard, Sullivan, Surry, Swanzey, Temple, Troy, Walpole, Westmoreland, Wilton, and Winchester.

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

Monadnock Family Service's consumers are adults, children and families of all ages who experience a range of disorders, illnesses and life challenges.

Our work involves treatment of mental health/behavioral health concerns and a full range of prevention services from infants to adolescents. We work with these consumers in schools, outpatient clinics, homes, jails, facilities serving the elderly, health care settings and residential supported living programs, offering a broad variety of counseling, psychiatric services, case management and emergency consultations.

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?

2012 *(Please attach a copy of the needs assessment if completed in the past year)*

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	507 508
2	503
3	501
4	505 509
5	506 504
6	401 403 203
7	527
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	100 407
B	430
C	600 601 602
D	122 370

E	522
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>	B C	(3,190)	-0-
<i>Community-based Clinical Services</i>			
<i>Health Care Support Services</i>	A C	35,203	35,000

<i>Other:</i>			
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<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>			
<i>Intern/Residency Education</i>			
<i>Scholarships/Funding for Health Professions Ed.</i>	C	7,829	8,000

<i>Other:</i>			
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<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: Emergency</i>	E C	122,883	125,000
<i>Type of Service: Adult Day Care</i>	A C	60,460	65,000
<i>Type of Service:</i>			
<i>Type of Service:</i>			
<i>Type of Service:</i>			

<i>D. Research</i>	<i>Community Need Addressed</i>	<i>Unreimbursed Costs (preceding year)</i>	<i>Unreimbursed Costs (projected)</i>
<i>Clinical Research</i>			
<i>Community Health Research</i>			
<i>Other:</i>			

<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>			
<i>Grants</i>			
<i>In-Kind Donations</i>	C	33,325	35,000
<i>Resource Development Assistance</i>			

<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>	5	5,751	6,000

<i>Support Systems Enhancement</i>	A	10,859	11,000
<i>Environmental Improvements</i>			
<i>Leadership Development; Training for Community Members</i>			
<i>Coalition Building</i>	A C	11,503	12,000
<i>Community Health Advocacy</i>			

<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	4,403	4,500
<i>Community Needs/Asset Assessment</i>	C	10,859	11,000
<i>Other Operations</i>	C	24,927	25,000

<i>H. Charity Care</i>	<i>Community Need Addressed</i>	<i>Unreimbursed Costs (preceding year)</i>	<i>Unreimbursed Costs (projected)</i>
<i>Free & Discounted Health Care Services</i>	A 2	1,107,927	1,200,000

<i>I. 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>	A D	1,176,331	1,200,000
<i>Medicaid Costs exceeding reimbursement</i>	A D	237,198	240,000

<i>Other Publicly funded health care costs exceeding reimbursement</i>			
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Section 5: SUMMARY FINANCIAL MEASURES

<i>Financial Information for Most Recent Fiscal Year</i>	<i>Dollar Amount</i>
<i>Gross Receipts from Operations</i>	\$10,787,732
<i>Net Revenue from Patient Services</i>	\$ 7,826,087
<i>Total Operating Expenses</i>	\$ 9,265,787
<i>Net Medicare Revenue</i>	\$ 158,760
<i>Medicare Costs</i>	\$ 395,958
<i>Net Medicaid Revenue</i>	\$ 7,064,372
<i>Medicaid Costs</i>	\$ 8,240,703
<i>Unreimbursed Charity Care Expenses</i>	\$ 1,107,927
<i>Unreimbursed Expenses of Other Community Benefits</i>	\$ 324,812
<i>Total Unreimbursed Community Benefit Expenses</i>	\$ 1,432,739
<i>Leveraged Revenue for Community Benefit Activities</i>	\$ 741,264
<i>Total Community Benefits including Leveraged Revenue for Community Benefit Activities</i>	\$ 2,174,003

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) Cedarcrest Center for Children with Disabilities	X	X	X	
2) Cheshire Medical Center / Dartmouth-Hitchcock Keene	X	X	X	
3) Crotched Mountain Rehabilitation Center	X	X	X	
4) Good Shepherd Rehabilitation and Nursing Center	X	X	X	
5) Home Healthcare Hospice and Community Services	X	X	X	
6) Monadnock Community Hospital	X	X	X	
7) Monadnock Family Services	X	X	X	
8) Monadnock United Way	X	X	X	
9) Prospect Place Assisted Living	X	X	X	
10) Rivermead	X	X	X	
11) Scott Farrar Home	X	X	X	

12)																			
13)																			
14)																			
15)																			
16)																			

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

On September 17, 2007, a Regional Community Benefits Steering Committee was formed to prepare a single Community Benefits Needs Assessment for the Monadnock Region. Since the group's inception, it has continued to meet on a regular basis. These regular meetings are coupled with much communication in between meetings. The work group consisted of representatives from the following organizations:

- Cedarcrest Center for Children with Disabilities
- Cheshire Medical Center/Dartmouth-Hitchcock Keene
- Crotched Mountain Rehabilitation Center
- Good Shepherd Rehabilitation and Nursing Center
- Home Healthcare Hospice and Community Services
- Monadnock Community Hospital
- Monadnock Family Services
- Monadnock United Way
- Prospect Place Assisted Living
- Rivermead
- Scott Farrar Home

The Steering Committee recognized the regional nature of many of the areas of need and decided to work together rather than conducting individual assessments at each organization.

The on going process includes:

- Continual review of the needs identified in the assessment. Identify collaborative efforts to address these needs. Identify any remaining gaps that require continued attention.
- Use of focus groups to further define the healthcare related findings.
- Annual consumer surveys to ascertain consumer needs and success in meeting those needs.

Section 7: CHARITY CARE COMPLIANCE

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

List of Potential Community Needs for Use on Section 3

100 - Access to Care; General

- 101 - Access to Care; Financial Barriers
- 102 - Access to Care; Geographic Barriers
- 103 - Access to Care; Language/Cultural Barriers to Care
- 120 - Availability of Primary Care
- 121 - Availability of Dental/Oral Health Care
- 122 - Availability of Behavioral Health Care
- 123 - Availability of Other Medical Specialties
- 124 - Availability of Home Health Care
- 125 - Availability of Long Term Care or Assisted Living
- 126 - Availability of Physical/Occupational Therapy
- 127 - Availability of Other Health Professionals/Services
- 128 - Availability of Prescription Medications

200 - Maternal & Child Health; General

- 201 - Perinatal Care Access
- 202 - Infant Mortality
- 203 - Teen Pregnancy
- 204 - Access/Availability of Family Planning Services
- 206 - Infant & Child Nutrition
- 220 - School Health Services

300 - Chronic Disease — Prevention and Care; General

- 301 - Breast Cancer
- 302 - Cervical Cancer
- 303 - Colorectal Cancer
- 304 - Lung Cancer
- 305 - Prostate Cancer
- 319 - Other Cancer
- 320 - Hypertension/HBP
- 321 - Coronary Heart Disease
- 322 - Cerebrovascular Disease/Stroke
- 330 - Diabetes
- 340 - Asthma
- 341 - Chronic Obstructive Pulmonary Disease
- 350 - Access/Availability of Chronic Disease Screening Services

360 - Infectious Disease — Prevention and Care; General

- 361 - Immunization Rates
- 362 - STDs/HIV
- 363 - Influenza/Pneumonia
- 364 - Food borne disease

365 - Vector borne disease

370 - Mental Health/Psychiatric Disorders — Prevention and Care; General

371 - Suicide Prevention

372 - Child and adolescent mental health

372 - Alzheimer's/Dementia

373 - Depression

374 - Serious Mental Illness

400 - Substance Use; Lifestyle Issues

401 - Youth Alcohol Use

402 - Adult Alcohol Use

403 - Youth Drug Use

404 - Adult Drug Use

405 - Youth Tobacco Use

406 - Adult Tobacco Use

407 - Access/Availability of Alcohol/Drug Treatment

420 - Obesity

421 - Physical Activity

422 - Nutrition Education

430 - Family/Parent Support Services

500 — Socioeconomic Issues; General

501 - Aging Population

502 - Immigrants/Refugees

503 - Poverty

504 - Unemployment

505 - Homelessness

506 - Economic Development

507 - Educational Attainment

508 - High School Completion

509 - Housing Adequacy

520 - Community Safety & Injury; General

521 - Availability of Emergency Medical Services

522 - Local Emergency Readiness & Response

523 - Motor Vehicle-related Injury/Mortality

524 - Driving Under Influence

525 - Vandalism/Crime

526 - Domestic Abuse

527 - Child Abuse/Neglect

528 - Lead Poisoning

529 - Work-related injury

530 - Fall Injuries

531 - Brain Injury
532 - Other Unintentional Injury

533 - Air Quality
534 - Water Quality
600 - Community Supports; General
601 - Transportation Services
602 - Information & Referral Services
603 - Senior Services
604 - Prescription Assistance
605 - Medical Interpretation
606 - Services for Physical & Developmental Disabilities
607 - Housing Assistance
608 - Fuel Assistance
609 - Food Assistance
610 - Child Care Assistance
611 - Respite Care

999 - Other Community Need