

**COMMUNITY BENEFITS REPORTING FORM**

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

FOR FISCAL YEAR BEGINNING 04/01/2016

*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** Central New Hampshire VNA & Hospice

**Street Address** 780 North Main Street

**City** Laconia

**County** 01 - Belknap

**State** NH **Zip Code** 03246

**Federal ID #** 020324948

**State Registration #** 1572

**Website Address:** [www.centralvna.org](http://www.centralvna.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:** Margaret Franckhauser 6035248444 [mf@centralvna.org](mailto:mf@centralvna.org)

**Board Chair:** William Schwidder 6035248444 email address

**Community Benefits**

**Plan Contact:** Margaret Franckhauser 6035248444 [mf@centralvna.org](mailto:mf@centralvna.org)

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: The mission of Central New Hampshire VNA & Hospice is to promote dignity, independence and well-being through the delivery of quality home health, hospice and community based care service.

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 service area and/or a population segment.

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

The service area of Central New Hampshire VNA & Hospice includes all the towns of Belknap County and those of Southern Carroll County. In addition, the towns of Northfield and Parts of Franklin are included in the hospice program territory. By grant requirement, the pediatric programs entitled Healthy Families America and Home Visiting New Hampshire are open to all the communities of Carroll County. Staff are deployed from one of two offices central to the region served. The main office is located in Laconia and the branch office is located in Wolfeboro on the grounds of Huggins Hospital.

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

The agency provides home based health services to those who require professional health care in their place of residence, provided that the care can be provided safely in that setting. The term residence may refer to a private home, a group home, a residential care facility or a nursing home. In addition, pediatric health, education and support services may also be provided in community locations such as schools and child care centers. Services include hands on care as well as support, health education, health screening and disease monitoring to assist those recovering from acute illness or managing a chronic illness in the home setting. Care can be curative, restorative or adaptive and is focused on the unique needs of the client in the setting. The agency works to enhance the ability of clients and their families or other supportive caregivers to become as independent as possible in managing disease and maximizing function within the context of the health related condition and social setting.

Services include professional registered nurses, physical, occupational and speech therapists, licensed nursing assistants (also known as "home health aides"), social workers, spiritual care coordinators, a physician and nurse practitioner specializing in hospice & palliative care, bereavement counselors and volunteers.

The agency receives referrals from community and remote healthcare and social support providers including hospital discharge planners, community care coordinators, nursing home discharge planners, physicians and APRN practices, schools and social support networks and community and family members. In order to qualify for services, the agency requires that the individual have a home or residence in which healthcare services can be safely provided and the individual is likely to demonstrate medical or functional benefit from the receipt of services. In

addition, payors for services such as insurance companies routinely impose other qualifying criteria based on the benefits available to the beneficiary through their program.

Because of the community demographic profile, the availability of clinical practitioners and other resources available to the agency, the agency focuses its resources on the aging who carry a large burden of disease and on socially vulnerable children and families. This "vulnerability" may be expressed as poverty, low education, language barriers, unemployment, teenage parents, periodic homelessness, domestic violence, serious childhood illness and substance misuse. In the young family collection of services, the goal is to stabilize families and to assist them in developing reliable and solid supports so that their homes can become healthy places for children to learn and develop into productive adults. Both Belknap and Carroll Counties have a higher percentage of elder citizens and of young families living at or below the federal poverty level than the state at large.

The target population of Central New Hampshire VNA & Hospice includes those who have been discharged from an acute care facility or rehabilitation center, persons with chronic disease who have experienced an acute exacerbation or developed complications from their disease, individuals of any age at the end of life when attempts to achieve cure are no longer feasible and fragile families with young children at medical or social risk.

The agency services people of all ages, from birth through bereavement in three programs: Home Health, Hospice and Pediatric (Young Family Services). Additionally, the agency provides a number of "population health" services in the community that are designed to identify early illness or to prevent significant illness in the community. Examples include blood pressure screening clinics, foot care clinics and adult and pediatric immunization clinics.

Because of the agency's geographic location, we participate in two regional public health assessment and action efforts - those of Belknap County and Carroll County. These collective efforts are intended to improve healthcare access, implement healthy practices and lifestyles and conduct emergency preparedness. In the past year, the agency has also participated in intense regional efforts to address the growing and serious problem of substance misuse. The latter cooperative efforts are conducted in concert with the Winnepesaukee Regional Network and the North Country Regional Network.

Because the agency crosses two hospital services (HSAs), - that of Huggins Hospital in Wolfeboro and LRGHealthcare in Laconia and Franklin, we also participate in two community health assessment and planning efforts. On the eastern side of Lake Winnepesaukee, the agency participated in the 2013 Community Health Assessment and Plan submitted by Huggins Hospital, and we have already been involved in the followed up to be published later in 2016. On the western side of the territory, the agency participated in the LRGHealthcare assessment and plan that was released in 2014. This plan was further developed into a comprehensive plan by the Partnership for Public Health which released the Healthcare Report Card and priorities in 2015.

Continuing Impact of the Affordable Care Act (ACA): When the ACA became law in 2010, it was not until 2014 that the agency began to notice a significant impact on access to services.

New Hampshire participated in the Federal Healthcare Exchange, and the agency witnessed a number of previously uninsured patients enroll in the program and access services. Our experience is that the system stabilized somewhat during the past year as the insurance mandate came into existence. Specifically, the agency witnessed more patients moving from self pay to products obtained on the Exchange. Unlike the first year of the Exchange, we saw consumer purchase plans with lower out of pocket expenses so that the share of the cost at the time of service was reduced. Nonetheless, we did witness a moderate volume of beneficiaries of the new products who continued to require financial assistance because the out of pocket expenses were so high.

**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?

*(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	400
2	501
3	370
4	100
5	420
6	503
7	603
8	430
9	300

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	500
B	372
C	530
D	600
E	601
F	125
G	999

Please provide additional description or comments on community needs including description of “other” needs (code 999) if applicable. *Attach additional pages if necessary:*  
End of Life and related care

#### **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>	7 3 G	\$25,394.00	\$25,000.00
<i>Community-based Clinical Services</i>	9 8 D	\$19,552.00	\$20,000.00
<i>Health Care Support Services</i>	8 D B	\$18,352.00	\$18,000.00
<i>Other:</i>	-- -- --		

<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 Intern/Residency Education</i>	G 7 9	\$8,640.00	\$10,000.00
<i>Scholarships/Funding for Health Professions Ed.</i>	9 A 3	\$8,000.00	\$10,000.00
<i>Other: Education for Dartmouth MBA</i>	7 F A	\$700.00	\$700.00

<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: Pediatric Care &amp; Family Supp</i>	8 6 4	\$120,124.00	\$150,000.00
<i>Type of Service: Home Health/Telehealth</i>	9 7 2	\$30,108.00	\$65,000.00
<i>Type of Service: Hospice</i>	G 3 2	\$170,948.00	\$175,000
<i>Type of Service:</i>	-- -- --		
<i>Type of Service:</i>	-- -- --		

<b><i>D. Research</i></b>	<b><i>Community Need Addressed</i></b>	<b><i>Unreimbursed Costs (preceding year)</i></b>	<b><i>Unreimbursed Costs (projected)</i></b>
<i>Clinical Research</i>	-- -- --	\$0.00	\$0.00
<i>Community Health Research</i>	1 4 9	\$1,200.00	\$1,200.00
<i>Other:</i>	-- -- --		

<b><i>E. Financial Contributions</i></b>	<b><i>Community Need Addressed</i></b>	<b><i>Unreimbursed Costs (preceding year)</i></b>	<b><i>Unreimbursed Costs (projected)</i></b>
<i>Cash Donations</i>	1 4 9	\$1,600.00	\$1,000.00
<i>Grants</i>	-- -- --	\$0.00	\$0.00
<i>In-Kind Assistance</i>	8 D A	\$9,100.00	\$9,100.00
<i>Resource Development Assistance</i>	-- -- --	\$0.00	\$0.00

<b><i>F. Community Building Activities</i></b>	<b><i>Community Need Addressed</i></b>	<b><i>Unreimbursed Costs (preceding year)</i></b>	<b><i>Unreimbursed Costs (projected)</i></b>
<i>Physical Infrastructure Improvement</i>	-- -- --	\$0.00	\$6,000.00
<i>Economic Development</i>	D 2 1	\$300.00	\$500.00
<i>Support Systems Enhancement</i>	1 5 D	\$17,400.00	\$18,000.00
<i>Environmental Improvements</i>	-- -- --	\$0.00	\$0.00
<i>Leadership Development; Training for Community Members</i>	D 7 E	\$8,200.00	\$8,000
<i>Coalition Building</i>	1 3 2	\$8,250.00	\$10,000.00
<i>Community Health Advocacy</i>	9 B C	\$6,400.00	\$6,500

<b><i>G. Community Benefit Operations</i></b>	<b><i>Community Need Addressed</i></b>	<b><i>Unreimbursed Costs (preceding year)</i></b>	<b><i>Unreimbursed Costs (projected)</i></b>
<i>Dedicated Staff Costs</i>	1 2 3	\$1,000.00	\$1,000.00
<i>Community Needs/Asset Assessment</i>	1 2 3	\$240.00	\$500.00
<i>Other Operations</i>	-- -- --		

<b><i>H. Charity Care</i></b>	<b><i>Community Need Addressed</i></b>	<b><i>Unreimbursed Costs (preceding year)</i></b>	<b><i>Unreimbursed Costs (projected)</i></b>
<i>Free &amp; Discounted Health Care Services</i>	G 8 9	\$46,819.00	\$52,000.00

<b><i>I. Government-Sponsored Health Care</i></b>	<b><i>Community Need Addressed</i></b>	<b><i>Unreimbursed Costs (preceding year)</i></b>	<b><i>Unreimbursed Costs (projected)</i></b>
<i>Medicare Costs exceeding reimbursement</i>	G 8 9	\$71,860.00	\$80,000.00
<i>Medicaid Costs exceeding reimbursement</i>	8 B 2	\$131,449.00	\$140,000
<i>Other Publicly-funded health care costs exceeding reimbursement</i>	-- -- --		

**Section 5: SUMMARY FINANCIAL MEASURES**

<i>Financial Information for Most Recent Fiscal Year</i>	<i>Dollar Amount</i>
<i>Gross Receipts from Operations</i>	\$7,967,160.00
<i>Net Revenue from Patient Services</i>	\$7,544,742.00
<i>Total Operating Expenses</i>	\$7,656,911.00
<i>Net Medicare Revenue</i>	\$6,248,583.00
<i>Medicare Costs</i>	\$6,320,443.00
<i>Net Medicaid Revenue</i>	\$365,845.00
<i>Medicaid Costs</i>	\$497,294.00
<i>Unreimbursed Charity Care Expenses</i>	\$46,819.00
<i>Unreimbursed Expenses of Other Community Benefits</i>	\$660,935.00
<i>Total Unreimbursed Community Benefit Expenses</i>	\$707,754.00
<i>Leveraged Revenue for Community Benefit Activities</i>	\$393,368.00
<i>Total Community Benefits including Leveraged Revenue for Community Benefit Activities</i>	\$1,101,122.00

**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) LRGHealthcare	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2) Partnership for Public Health	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3) Winnepesaukee Public Health Council	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) Huggins Hospital	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5) Carroll County Public Health Coalition	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6) Genesis Behavioral Health	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7) Health First Family Care Center	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8) Lakes Region Community Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9) Memorial Hospital North Conway	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10) Town & School Officials from Various Towns	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11) Police, Fire & Rescue from various towns	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
12) Central New Hampshire VNA & Hospice	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13) Representatives of the Faith Community	<input checked="" type="checkbox"/>	<input checked="" 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>	Not Applicable
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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Notice of policy in waiting rooms	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Notice of policy in other public areas	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Notice given to recipients who are served in their home	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### **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