

**COMMUNITY BENEFITS REPORTING FORM**

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

FOR FISCAL YEAR BEGINNING 10/1/08

*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** -LRGHealthcare

**Street Address** 80 Highland Street

**City** Laconia

**County** 01 - Belknap

**State** NH **Zip Code** 3246

**Federal ID #** 20222150

**State Registration #** 6276

**Website Address:** www.lrgh.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:** Thomas Clairmont -5272801 tclairmont@lrgh.org

**Board Chair:** Judie Reeve -5242644 reeverj@metrocast.net

**Community Benefits**

**Plan Contact:** Sally Minkow -5272998 sminkow@lrgh.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: LRGHealthcare's mission is to serve the Lakes Region, Franklin and surrounding communities by promoting physical, emotional, social, environmental and spiritual health and providing access to the fullest range of quality, modern and efficient health care services practical for the organization, regardless of race, sex, religion, primary language, disability or handicap, national origin or ability to pay.

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):

LRGHealthcare SERVICE AREA

Lakes Region General Hospital is located in the city of Laconia, in Belknap County. Franklin Regional Hospital is located in the city of Franklin, in Merrimack County. The LRGHealthcare service area contains towns located in the counties of: Belknap (eleven towns), Carroll (two towns), Grafton (three towns), and Merrimack (seven towns). The towns that comprise LRGHealthcare's service area are:

1. Alexandria
2. Alton
3. Andover
4. Barnstead
5. Belmont
6. Boscaawen
7. Bristol
8. Center Harbor
9. Danbury
10. Franklin
11. Gilford
12. Gilmanton
13. Hebron
14. Hill
15. Laconia
16. Meredith
17. Moultonboro
18. New Hampton
19. Northfield
20. Salisbury
21. Sanbornton
22. Tilton
23. Tuftonboro

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

LRGHealthcare, composed of Lakes Region General Hospital (LRGH), Franklin Regional Hospital (FRH) and all of our affiliated programs and services, provides comprehensive healthcare, including primary and specialty care for the Lakes and Three Rivers regions.

LRGH, a community and regional acute care facility with a licensed bed capacity of 137 beds, is a Level III Trauma Center. FRH is a 25-bed critical access community hospital. Together, LRGH, FRH and our affiliated programs and services provide comprehensive healthcare to the Lakes and Three Rivers regions. We offer a wide range of inpatient and outpatient medical, surgical, psychiatric, diagnostic, and therapeutic services, wellness education, support groups and other community outreach services.

The approximate total population for the LRGHealthcare service area is 97,000. We have a disproportionately high percentage of uninsured patients: only 79.6% of residents in the FRH service area and 77.3% of residents in the LRGH service area have any health care insurance coverage, compared to the New Hampshire state average of 89%.

Economic forecasts indicates that the Medicare population, age 65+, will grow to 36% of the Belknap County population by the year 2030.

The cities of Laconia and Franklin are Federally-designated as Medically Underserved Communities; and Belknap County is designated as a Physician Scarcity Area for Primary Care. LRGHealthcare works hard to combat these challenges.

**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?

The community needs assessment in the Three Rivers area was last completed in 2007. The last assessment completed in Lakes Region was in 2008. *(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	120
2	121
3	400
4	370
5	501
6	527
7	500
8	300
9	525

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
B	600
C	999
D	500
E	522
F	520
G	200

Please provide additional description or comments on community needs including description of “other” needs (code 999) if applicable. *Attach additional pages if necessary:*  
999 - Community Care Management Services. Please see Attachment A for program descriptions.



**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>	8 3 G	\$180,960.00	\$183,640.00
<i>Community-based Clinical Services</i>	A F --	\$233,431.00	\$304,815.00
<i>Health Care Support Services</i>	A B C	\$421,000.00	\$436,629.00
<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</i>	7 A --	\$20,111.00	\$20,410.00
<i>Intern/Residency Education</i>	-- -- --	\$0.00	\$0.00
<i>Scholarships/Funding for Health Professions Ed.</i>	1 7 A	\$338,287.00	\$381,834.00
<i>Other:</i>	-- -- --	\$0.00	\$0.00

<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: HealthFirst/prim.care</i>	1 A C	\$2,724,003.00	\$2,900,683.00
<i>Type of Service: Dental/speciality pract.</i>	2 -- --	\$1,786,204.00	\$1,736,044.00
<i>Type of Service: Chronic Dis. Mgmt.</i>	8 4 5	\$259,383.00	\$283,573.00
<i>Type of Service: Breast Health</i>	A C 8	\$18,000.00	\$18,270.00
<i>Type of Service:</i>	1 2 A	\$113,000.00	\$114,690.00

<i>Workforce Enhancement</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>	-- -- --	\$0.00	\$0.00
<i>Other:</i>	-- -- --	\$0.00	\$0.00

<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>	B 7 --	\$62,400.00	\$64,227.00
<i>Grants</i>	B 7 --	\$15,263.00	\$15,525.00
<i>In-Kind Assistance</i>	B 7 C	\$44,342.00	\$45,000.00
<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	\$0.00
<i>Economic Development</i>	-- -- --	\$0.00	\$0.00
<i>Support Systems Enhancement</i>	E F --	\$77,868.00	\$80,047.00
<i>Environmental Improvements</i>	F 7 --	\$72,550.00	\$22,770.00
<i>Leadership Development; Training for Community Members</i>	B -- --	\$600.00	\$650.00
<i>Coalition Building</i>	B 7 F	\$6,240.00	\$6,330.00
<i>Community Health Advocacy</i>	-- -- --	\$0.00	\$0.00

<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>	A -- --	\$5,986.00	\$6,070.00
<i>Community Needs/Asset Assessment</i>	-- -- --	\$0.00	\$0.00
<i>Other Operations</i>	-- -- --	\$0.00	\$0.00

<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>	A -- --	\$6,013,305.00	\$6,150,000.00

<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>	A -- --	\$11,076,646.00	\$10,000,000.00
<i>Medicaid Costs exceeding reimbursement</i>	A -- --	\$6,710,186.00	\$7,500,000.00
<i>Other Publicly-funded health care costs exceeding reimbursement</i>	-- -- --	\$0.00	\$0.00

**Section 5: SUMMARY FINANCIAL MEASURES**

<i>Financial Information for Most Recent Fiscal Year</i>	<i>Dollar Amount</i>
<i>Gross Receipts from Operations</i>	\$420,504,256.00
<i>Net Revenue from Patient Services</i>	\$183,780,365.00
<i>Total Operating Expenses</i>	\$189,639,476.00
<i>Net Medicare Revenue</i>	\$59,417,229.00
<i>Medicare Costs</i>	\$70,493,875.00
<i>Net Medicaid Revenue</i>	\$8,933,691.00
<i>Medicaid Costs</i>	\$15,643,877.00
<i>Unreimbursed Charity Care Expenses</i>	\$6,013,305.00
<i>Unreimbursed Expenses of Other Community Benefits</i>	\$6,379,628.00
<i>Total Unreimbursed Community Benefit Expenses</i>	\$12,392,933.00
<i>Leveraged Revenue for Community Benefit Activities</i>	\$0.00
<i>Total Community Benefits including Leveraged Revenue for Community Benefit Activities</i>	\$19,103,119.00

**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) Judie Reeve- State Representative, LRGHealthcare Board of Trustees	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
2) Dave Palfrey - State Representative, Chair, LRGHealthcare Community Relations Committee	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
3) Mike Seymour - Mayor City of Laconia, LRGHealthcare Board of Trustees	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
4) Alida Millham, State Representative, LRGHealthcare Community Relations Committee	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
5) Donald Flanders, State Representative, LRGHealthcare Board of Trustees	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
6) Elizabeth Merry, State Representative, LRGHealthcare Community Relations and advocacy	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
7) Annual Incorporators meeting	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8) Board of Trustees	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
9) Community Relations Committee- this 15 member committee, comprised of representatives of the communities we serve, meets quarterly with LRGHealthcare CEO and senior management. Meetings provide an opportunity for an open exchange of ideas and community concerns. Additionally, this committee annually reviews and comments on the Community Benefits Report. ( member list attached)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10) Lakes Region Community College, Health Professions Faculty- quarterly meeting with LRGHealthcare CEO and senior management to assess availability and quality of training in our service area for development of nursing and ancillary staff	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
11) Continuous Quality Improvement Council	<input checked="" 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):

LRGHealthcare collaborates with community partners to conduct a community needs assessment every 5 years. The most recent assessments were completed in the Three Rivers Region in 2007 and in the Lakes Region in 2008. The Lakes and Three Rivers Assessments used similar tools for measurement of community need including written survey, secondary data reports (such as the Behavioral Risk Factor Surveillance Survey), and focus groups. The Lakes Region 2008 survey also utilized a computer-based survey tool (Survey Monkey) to obtain additional responses.

The data collected through the written survey, secondary reports and focus groups is used to compile a narrative Community Needs Assessment Report that includes both quantitative population health information and qualitative information from our community.

In addition to the formal needs assessment process described above, LRGHealthcare engages with the community to assess and respond to need on an ongoing basis. An open dialogue on need and resources takes place within community workgroups such as the Community Relations Committee meetings (held every two months); at the Board of Trustees strategic planning sessions; and strategic planning meetings with local institutions of higher education such as Lakes Region Community College. LRGHealthcare employees also are active as Board/Committee members or volunteers for over 30 community agencies, providing a continuous source of valuable community feedback.

**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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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