

**SCHEDULE H
(Form 990)**

Hospitals

OMB No. 1545-0047

2020

Open to Public Inspection

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, question 20.**
 ▶ **Attach to Form 990.**
 ▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Department of the Treasury
Internal Revenue Service

Name of the organization INDIANA UNIVERSITY HEALTH BALL MEMORIAL HOSPITAL INC	Employer identification number 35 0867958
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Part I Financial Assistance and Certain Other Community Benefits at Cost

	Yes	No
1a Did the organization have a financial assistance policy during the tax year? If "No," skip to question 6a	✓	
b If "Yes," was it a written policy?	✓	
2 If the organization had multiple hospital facilities, indicate which of the following best describes application of the financial assistance policy to its various hospital facilities during the tax year. <input checked="" type="checkbox"/> Applied uniformly to all hospital facilities <input type="checkbox"/> Applied uniformly to most hospital facilities <input type="checkbox"/> Generally tailored to individual hospital facilities		
3 Answer the following based on the financial assistance eligibility criteria that applied to the largest number of the organization's patients during the tax year.		
a Did the organization use Federal Poverty Guidelines (FPG) as a factor in determining eligibility for providing <i>free care</i> ? If "Yes," indicate which of the following was the FPG family income limit for eligibility for free care: <input type="checkbox"/> 100% <input type="checkbox"/> 150% <input type="checkbox"/> 200% <input checked="" type="checkbox"/> Other <u>300</u> %	✓	
b Did the organization use FPG as a factor in determining eligibility for providing <i>discounted care</i> ? If "Yes," indicate which of the following was the family income limit for eligibility for discounted care: <input type="checkbox"/> 200% <input type="checkbox"/> 250% <input type="checkbox"/> 300% <input type="checkbox"/> 350% <input type="checkbox"/> 400% <input type="checkbox"/> Other _____ %		✓
c If the organization used factors other than FPG in determining eligibility, describe in Part VI the criteria used for determining eligibility for free or discounted care. Include in the description whether the organization used an asset test or other threshold, regardless of income, as a factor in determining eligibility for free or discounted care.		
4 Did the organization's financial assistance policy that applied to the largest number of its patients during the tax year provide for free or discounted care to the "medically indigent"?	✓	
5a Did the organization budget amounts for free or discounted care provided under its financial assistance policy during the tax year?	✓	
b If "Yes," did the organization's financial assistance expenses exceed the budgeted amount?		✓
c If "Yes" to line 5b, as a result of budget considerations, was the organization unable to provide free or discounted care to a patient who was eligible for free or discounted care?		
6a Did the organization prepare a community benefit report during the tax year?	✓	
b If "Yes," did the organization make it available to the public?	✓	

7 Financial Assistance and Certain Other Community Benefits at Cost

	(a) Number of activities or programs (optional)	(b) Persons served (optional)	(c) Total community benefit expense	(d) Direct offsetting revenue	(e) Net community benefit expense	(f) Percent of total expense
Financial Assistance and Means-Tested Government Programs						
a Financial Assistance at cost (from Worksheet 1)		6,141	6,003,168	0	6,003,168	1.43
b Medicaid (from Worksheet 3, column a)		17,369	90,059,205	84,177,638	5,881,567	1.40
c Costs of other means-tested government programs (from Worksheet 3, column b)					0	0.00
d Total. Financial Assistance and Means-Tested Government Programs	0	23,510	96,062,373	84,177,638	11,884,735	2.84
Other Benefits						
e Community health improvement services and community benefit operations (from Worksheet 4)	22	15,515	2,693,765	117,217	2,576,548	0.61
f Health professions education (from Worksheet 5)	3	2,245	14,376,293	4,116,851	10,259,442	2.45
g Subsidized health services (from Worksheet 6)	2	1,031	1,828,819	326,927	1,501,892	0.36
h Research (from Worksheet 7)	1	110	1,622,195	502,777	1,119,418	0.27
i Cash and in-kind contributions for community benefit (from Worksheet 8)	3	1,564	1,689,864	1,299,000	390,864	0.09
j Total. Other Benefits	31	20,465	22,210,936	6,362,772	15,848,164	3.78
k Total. Add lines 7d and 7j	31	43,975	118,273,309	90,540,410	27,732,899	6.62

Part II Community Building Activities Complete this table if the organization conducted any community building activities during the tax year, and describe in Part VI how its community building activities promoted the health of the communities it serves.

	(a) Number of activities or programs (optional)	(b) Persons served (optional)	(c) Total community building expense	(d) Direct offsetting revenue	(e) Net community building expense	(f) Percent of total expense
1 Physical improvements and housing					0	0.00
2 Economic development	2	622	60,259	450	59,809	0.01
3 Community support					0	0.00
4 Environmental improvements					0	0.00
5 Leadership development and training for community members					0	0.00
6 Coalition building	1	1,370	114,043	0	114,043	0.03
7 Community health improvement advocacy	2	572	11,252	0	11,252	0.00
8 Workforce development	1	17	60,474	0	60,474	0.01
9 Other					0	0.00
10 Total	6	2,581	246,028	450	245,578	0.06

Part III Bad Debt, Medicare, & Collection Practices

Section A. Bad Debt Expense

		Yes	No
1	Did the organization report bad debt expense in accordance with Healthcare Financial Management Association Statement No. 15?	1	✓
2	Enter the amount of the organization's bad debt expense. Explain in Part VI the methodology used by the organization to estimate this amount	2	5,387,634
3	Enter the estimated amount of the organization's bad debt expense attributable to patients eligible under the organization's financial assistance policy. Explain in Part VI the methodology used by the organization to estimate this amount and the rationale, if any, for including this portion of bad debt as community benefit.	3	
4	Provide in Part VI the text of the footnote to the organization's financial statements that describes bad debt expense or the page number on which this footnote is contained in the attached financial statements.		

Section B. Medicare

5	Enter total revenue received from Medicare (including DSH and IME)	5	119,128,843
6	Enter Medicare allowable costs of care relating to payments on line 5	6	122,603,427
7	Subtract line 6 from line 5. This is the surplus (or shortfall)	7	(3,474,584)
8	Describe in Part VI the extent to which any shortfall reported on line 7 should be treated as community benefit. Also describe in Part VI the costing methodology or source used to determine the amount reported on line 6. Check the box that describes the method used: <input type="checkbox"/> Cost accounting system <input checked="" type="checkbox"/> Cost to charge ratio <input type="checkbox"/> Other		

Section C. Collection Practices

9a	Did the organization have a written debt collection policy during the tax year?	9a	✓
9b	If "Yes," did the organization's collection policy that applied to the largest number of its patients during the tax year contain provisions on the collection practices to be followed for patients who are known to qualify for financial assistance? Describe in Part VI	9b	✓

Part IV Management Companies and Joint Ventures (owned 10% or more by officers, directors, trustees, key employees, and physicians—see instructions)

(a) Name of entity	(b) Description of primary activity of entity	(c) Organization's profit % or stock ownership %	(d) Officers, directors, trustees, or key employees' profit % or stock ownership %	(e) Physicians' profit % or stock ownership %
1				
2				
3				
4				
5				
6				
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11				
12				
13				

Part V Facility Information

Section A. Hospital Facilities

(list in order of size, from largest to smallest—see instructions)

How many hospital facilities did the organization operate during the tax year? 1

Name, address, primary website address, and state license number (and if a group return, the name and EIN of the subordinate hospital organization that operates the hospital facility)

1 IU HEALTH BALL MEMORIAL HOSPITAL
 2401 UNIVERSITY AVE., MUNCIE, IN 47303
[HTTPS://IUHEALTH.ORG/FIND-LOCATIONS/IU-HEALTH-BALL-MEMORIAL-HOSPITAL](https://iuhealth.org/find-locations/iu-health-ball-memorial-hospital) STATE LICENSE NO. :
 20-005079-1

2

3

4

5

6

7

8

9

10

Licensed hospital	General medical & surgical	Children's hospital	Teaching hospital	Critical access hospital	Research facility	ER-24 hours	ER-other	Other (describe)	Facility reporting group
✓	✓		✓		✓	✓			

Part V Facility Information *(continued)*

Section B. Facility Policies and Practices

(complete a separate Section B for each of the hospital facilities or facility reporting groups listed in Part V, Section A)

Name of hospital facility or letter of facility reporting group IU HEALTH BALL MEMORIAL HOSPITAL

Line number of hospital facility, or line numbers of hospital facilities in a facility reporting group (from Part V, Section A): 1

		Yes	No
Community Health Needs Assessment			
1	Was the hospital facility first licensed, registered, or similarly recognized by a state as a hospital facility in the current tax year or the immediately preceding tax year?		✓
2	Was the hospital facility acquired or placed into service as a tax-exempt hospital in the current tax year or the immediately preceding tax year? If "Yes," provide details of the acquisition in Section C		✓
3	During the tax year or either of the two immediately preceding tax years, did the hospital facility conduct a community health needs assessment (CHNA)? If "No," skip to line 12	✓	
If "Yes," indicate what the CHNA report describes (check all that apply):			
a	<input checked="" type="checkbox"/> A definition of the community served by the hospital facility		
b	<input checked="" type="checkbox"/> Demographics of the community		
c	<input checked="" type="checkbox"/> Existing health care facilities and resources within the community that are available to respond to the health needs of the community		
d	<input checked="" type="checkbox"/> How data was obtained		
e	<input checked="" type="checkbox"/> The significant health needs of the community		
f	<input checked="" type="checkbox"/> Primary and chronic disease needs and other health issues of uninsured persons, low-income persons, and minority groups		
g	<input checked="" type="checkbox"/> The process for identifying and prioritizing community health needs and services to meet the community health needs		
h	<input checked="" type="checkbox"/> The process for consulting with persons representing the community's interests		
i	<input checked="" type="checkbox"/> The impact of any actions taken to address the significant health needs identified in the hospital facility's prior CHNA(s)		
j	<input type="checkbox"/> Other (describe in Section C)		
4	Indicate the tax year the hospital facility last conducted a CHNA: 20 <u>18</u>		
5	In conducting its most recent CHNA, did the hospital facility take into account input from persons who represent the broad interests of the community served by the hospital facility, including those with special knowledge of or expertise in public health? If "Yes," describe in Section C how the hospital facility took into account input from persons who represent the community, and identify the persons the hospital facility consulted	✓	
6a	Was the hospital facility's CHNA conducted with one or more other hospital facilities? If "Yes," list the other hospital facilities in Section C		✓
6b	Was the hospital facility's CHNA conducted with one or more organizations other than hospital facilities? If "Yes," list the other organizations in Section C		✓
7	Did the hospital facility make its CHNA report widely available to the public?	✓	
If "Yes," indicate how the CHNA report was made widely available (check all that apply):			
a	<input checked="" type="checkbox"/> Hospital facility's website (list url): <u>(SEE STATEMENT)</u>		
b	<input type="checkbox"/> Other website (list url): _____		
c	<input type="checkbox"/> Made a paper copy available for public inspection without charge at the hospital facility		
d	<input type="checkbox"/> Other (describe in Section C)		
8	Did the hospital facility adopt an implementation strategy to meet the significant community health needs identified through its most recently conducted CHNA? If "No," skip to line 11	✓	
9	Indicate the tax year the hospital facility last adopted an implementation strategy: 20 <u>19</u>		
10	Is the hospital facility's most recently adopted implementation strategy posted on a website?	✓	
a	If "Yes," (list url): <u>https://iuhealth.org/in-the-community/community-benefit</u>		
b	If "No," is the hospital facility's most recently adopted implementation strategy attached to this return?		
11	Describe in Section C how the hospital facility is addressing the significant needs identified in its most recently conducted CHNA and any such needs that are not being addressed together with the reasons why such needs are not being addressed.		
12a	Did the organization incur an excise tax under section 4959 for the hospital facility's failure to conduct a CHNA as required by section 501(r)(3)?		✓
12b	If "Yes" to line 12a, did the organization file Form 4720 to report the section 4959 excise tax?		
c	If "Yes" to line 12b, what is the total amount of section 4959 excise tax the organization reported on Form 4720 for all of its hospital facilities? \$		

Part V Facility Information *(continued)*

Financial Assistance Policy (FAP)

Name of hospital facility or letter of facility reporting group IU HEALTH BALL MEMORIAL HOSPITAL

		Yes	No
Did the hospital facility have in place during the tax year a written financial assistance policy that:			
13	Explained eligibility criteria for financial assistance, and whether such assistance included free or discounted care? If "Yes," indicate the eligibility criteria explained in the FAP:	✓	
a	<input checked="" type="checkbox"/> Federal poverty guidelines (FPG), with FPG family income limit for eligibility for free care of <u>3 0 0</u> % and FPG family income limit for eligibility for discounted care of <u> </u> %		
b	<input checked="" type="checkbox"/> Income level other than FPG (describe in Section C)		
c	<input checked="" type="checkbox"/> Asset level		
d	<input checked="" type="checkbox"/> Medical indigency		
e	<input checked="" type="checkbox"/> Insurance status		
f	<input checked="" type="checkbox"/> Underinsurance status		
g	<input checked="" type="checkbox"/> Residency		
h	<input checked="" type="checkbox"/> Other (describe in Section C)		
14	Explained the basis for calculating amounts charged to patients?	✓	
15	Explained the method for applying for financial assistance? If "Yes," indicate how the hospital facility's FAP or FAP application form (including accompanying instructions) explained the method for applying for financial assistance (check all that apply):	✓	
a	<input checked="" type="checkbox"/> Described the information the hospital facility may require an individual to provide as part of his or her application		
b	<input checked="" type="checkbox"/> Described the supporting documentation the hospital facility may require an individual to submit as part of his or her application		
c	<input checked="" type="checkbox"/> Provided the contact information of hospital facility staff who can provide an individual with information about the FAP and FAP application process		
d	<input type="checkbox"/> Provided the contact information of nonprofit organizations or government agencies that may be sources of assistance with FAP applications		
e	<input type="checkbox"/> Other (describe in Section C)		
16	Was widely publicized within the community served by the hospital facility? If "Yes," indicate how the hospital facility publicized the policy (check all that apply):	✓	
a	<input checked="" type="checkbox"/> The FAP was widely available on a website (list url): <u>(SEE STATEMENT)</u>		
b	<input checked="" type="checkbox"/> The FAP application form was widely available on a website (list url): <u>(SEE STATEMENT)</u>		
c	<input checked="" type="checkbox"/> A plain language summary of the FAP was widely available on a website (list url): <u>(SEE STATEMENT)</u>		
d	<input checked="" type="checkbox"/> The FAP was available upon request and without charge (in public locations in the hospital facility and by mail)		
e	<input checked="" type="checkbox"/> The FAP application form was available upon request and without charge (in public locations in the hospital facility and by mail)		
f	<input checked="" type="checkbox"/> A plain language summary of the FAP was available upon request and without charge (in public locations in the hospital facility and by mail)		
g	<input checked="" type="checkbox"/> Individuals were notified about the FAP by being offered a paper copy of the plain language summary of the FAP, by receiving a conspicuous written notice about the FAP on their billing statements, and via conspicuous public displays or other measures reasonably calculated to attract patients' attention		
h	<input checked="" type="checkbox"/> Notified members of the community who are most likely to require financial assistance about availability of the FAP		
i	<input checked="" type="checkbox"/> The FAP, FAP application form, and plain language summary of the FAP were translated into the primary language(s) spoken by Limited English Proficiency (LEP) populations		
j	<input checked="" type="checkbox"/> Other (describe in Section C)		

Part V Facility Information *(continued)*

Billing and Collections

Name of hospital facility or letter of facility reporting group IU HEALTH BALL MEMORIAL HOSPITAL

		Yes	No
17	Did the hospital facility have in place during the tax year a separate billing and collections policy, or a written financial assistance policy (FAP) that explained all of the actions the hospital facility or other authorized party may take upon nonpayment?	✓	
18	Check all of the following actions against an individual that were permitted under the hospital facility's policies during the tax year before making reasonable efforts to determine the individual's eligibility under the facility's FAP: a <input type="checkbox"/> Reporting to credit agency(ies) b <input type="checkbox"/> Selling an individual's debt to another party c <input type="checkbox"/> Deferring, denying, or requiring a payment before providing medically necessary care due to nonpayment of a previous bill for care covered under the hospital facility's FAP d <input type="checkbox"/> Actions that require a legal or judicial process e <input type="checkbox"/> Other similar actions (describe in Section C) f <input checked="" type="checkbox"/> None of these actions or other similar actions were permitted		
19	Did the hospital facility or other authorized party perform any of the following actions during the tax year before making reasonable efforts to determine the individual's eligibility under the facility's FAP? If "Yes," check all actions in which the hospital facility or a third party engaged: a <input type="checkbox"/> Reporting to credit agency(ies) b <input type="checkbox"/> Selling an individual's debt to another party c <input type="checkbox"/> Deferring, denying, or requiring a payment before providing medically necessary care due to nonpayment of a previous bill for care covered under the hospital facility's FAP d <input type="checkbox"/> Actions that require a legal or judicial process e <input type="checkbox"/> Other similar actions (describe in Section C)		✓
20	Indicate which efforts the hospital facility or other authorized party made before initiating any of the actions listed (whether or not checked) in line 19 (check all that apply): a <input checked="" type="checkbox"/> Provided a written notice about upcoming ECAs (Extraordinary Collection Action) and a plain language summary of the FAP at least 30 days before initiating those ECAs (if not, describe in Section C) b <input checked="" type="checkbox"/> Made a reasonable effort to orally notify individuals about the FAP and FAP application process (if not, describe in Section C) c <input checked="" type="checkbox"/> Processed incomplete and complete FAP applications (if not, describe in Section C) d <input checked="" type="checkbox"/> Made presumptive eligibility determinations (if not, describe in Section C) e <input type="checkbox"/> Other (describe in Section C) f <input type="checkbox"/> None of these efforts were made		

Policy Relating to Emergency Medical Care

21	Did the hospital facility have in place during the tax year a written policy relating to emergency medical care that required the hospital facility to provide, without discrimination, care for emergency medical conditions to individuals regardless of their eligibility under the hospital facility's financial assistance policy? If "No," indicate why: a <input type="checkbox"/> The hospital facility did not provide care for any emergency medical conditions b <input type="checkbox"/> The hospital facility's policy was not in writing c <input type="checkbox"/> The hospital facility limited who was eligible to receive care for emergency medical conditions (describe in Section C) d <input type="checkbox"/> Other (describe in Section C)	✓	
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Part V Facility Information *(continued)*

Charges to Individuals Eligible for Assistance Under the FAP (FAP-Eligible Individuals)

Name of hospital facility or letter of facility reporting group IU HEALTH BALL MEMORIAL HOSPITAL

		Yes	No
22	Indicate how the hospital facility determined, during the tax year, the maximum amounts that can be charged to FAP-eligible individuals for emergency or other medically necessary care.		
a	<input type="checkbox"/> The hospital facility used a look-back method based on claims allowed by Medicare fee-for-service during a prior 12-month period		
b	<input checked="" type="checkbox"/> The hospital facility used a look-back method based on claims allowed by Medicare fee-for-service and all private health insurers that pay claims to the hospital facility during a prior 12-month period		
c	<input type="checkbox"/> The hospital facility used a look-back method based on claims allowed by Medicaid, either alone or in combination with Medicare fee-for-service and all private health insurers that pay claims to the hospital facility during a prior 12-month period		
d	<input type="checkbox"/> The hospital facility used a prospective Medicare or Medicaid method		
23	During the tax year, did the hospital facility charge any FAP-eligible individual to whom the hospital facility provided emergency or other medically necessary services more than the amounts generally billed to individuals who had insurance covering such care?	23	✓
	If "Yes," explain in Section C.		
24	During the tax year, did the hospital facility charge any FAP-eligible individual an amount equal to the gross charge for any service provided to that individual?	24	✓
	If "Yes," explain in Section C.		

Part V, Section C

Supplemental Information. Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 2, 3j, 5, 6a, 6b, 7d, 11, 13b, 13h, 15e, 16j, 18e, 19e, 20a, 20b, 20c, 20d, 20e, 21c, 21d, 23, and 24. If applicable, provide separate descriptions for each hospital facility in a facility reporting group, designated by facility reporting group letter and hospital facility line number from Part V, Section A ("A, 1," "A, 4," "B, 2," "B, 3," etc.) and name of hospital facility.

Return Reference - Identifier	Explanation
<p>SCHEDULE H, PART V, SECTION B, LINE 3E - THE SIGNIFICANT HEALTH NEEDS OF THE COMMUNITY</p>	<p>IU HEALTH BALL MEMORIAL HOSPITAL'S 2018 COMMUNITY HEALTH NEEDS ASSESSMENT (CHNA) REPORT INCLUDES A PRIORITIZED DESCRIPTION OF SIGNIFICANT HEALTH NEEDS IN THE COMMUNITY. THE CHNA REPORT IDENTIFIED THE FOLLOWING SEVEN NEEDS AS PRIORITIES FOR IU HEALTH BALL MEMORIAL HOSPITAL:</p> <ul style="list-style-type: none"> - ACCESS TO HEALTH CARE SERVICES - DRUG AND SUBSTANCE ABUSE - FOOD INSECURITY AND HEALTHY EATING - MENTAL HEALTH - OBESITY, DIABETES, AND LACK OF PHYSICAL ACTIVITY - SMOKING AND TOBACCO USAGE - SOCIAL DETERMINANTS OF HEALTH

Return Reference - Identifier	Explanation
<p>SCHEDULE H, PART V, SECTION B, LINE 5 - INPUT FROM PERSONS WHO REPRESENT BROAD INTERESTS OF COMMUNITY SERVED</p>	<p>FACILITY NAME: IU HEALTH BALL MEMORIAL HOSPITAL</p> <p>DESCRIPTION: IN CONDUCTING ITS MOST RECENT COMMUNITY HEALTH NEEDS ASSESSMENT ("CHNA") IU HEALTH BALL MEMORIAL HOSPITAL TOOK INTO ACCOUNT INPUT FROM PERSONS WHO REPRESENT THE BROAD INTERESTS OF THE COMMUNITIES IT SERVES. PRIMARY DATA WERE GATHERED IN THREE DIFFERENT METHODOLOGIES FOR THIS ASSESSMENT: COMMUNITY MEETINGS, KEY STAKEHOLDER INTERVIEWS, AND A COMMUNITY SURVEY.</p> <p>FOR PURPOSES OF THIS CHNA, IU HEALTH BALL MEMORIAL HOSPITAL'S COMMUNITY IS DEFINED AS DELAWARE, JAY, AND RANDOLPH COUNTIES, INDIANA. THESE THREE COUNTIES ACCOUNTED FOR 80.9 PERCENT OF THE HOSPITAL'S INPATIENT CASES IN 2016.</p> <p>COMMUNITY MEETINGS - DELAWARE COUNTY</p> <p>ON MAY 10, 2018, TWO MEETINGS OF COMMUNITY REPRESENTATIVES WERE HELD AT THE IU HEALTH BALL MEMORIAL HOSPITAL IN MUNCIE, THE COUNTY SEAT OF DELAWARE COUNTY. THE FIRST MEETING WAS ATTENDED BY 23 COMMUNITY MEMBERS, AND THE SECOND MEETING WAS ATTENDED BY 14 COMMUNITY MEMBERS. THE COMMUNITY MEMBERS WERE INVITED BY IU HEALTH BECAUSE THEY REPRESENT IMPORTANT COMMUNITY ORGANIZATIONS AND SECTORS SUCH AS: LOCAL HEALTH DEPARTMENTS, NON-PROFIT ORGANIZATIONS, LOCAL BUSINESS, HEALTH CARE PROVIDERS, AND SCHOOLS.</p> <p>THROUGH THIS MEETING, IU HEALTH SOUGHT A BREADTH OF PERSPECTIVES ON THE COMMUNITY'S HEALTH NEEDS. THE SPECIFIC ORGANIZATIONS REPRESENTED AT THE MEETINGS ARE LISTED BELOW.</p> <ul style="list-style-type: none"> - ALPHA CENTER - BY5 - BALL STATE UNIVERSITY - BETHEL POINT REHAB - BRIDGES COMMUNITY SERVICES - BOYS AND GIRLS CLUB OF MUNCIE - BUILDING BETTER COMMUNITIES/BALL STATE UNIVERSITY - CANCER SERVICES OF EAST CENTRAL INDIANA - CITY OF MUNCIE - DELAWARE COUNTY GOVERNMENT - DELAWARE COUNTY HEALTH DEPARTMENT - DELAWARE COUNTY SENIOR CENTER - IU HEALTH BALL MEMORIAL HOSPITAL - IU HEALTH EAST CENTRAL REGION - MERIDIAN HEALTH SERVICES - MUNCIE/DELAWARE COUNTY CHAMBER OF COMMERCE - OPEN DOOR HEALTH SERVICES - PURDUE EXTENSION - SECOND HARVEST FOOD BANK - TRANSITION RESOURCES CORPORATION - HEAD START - WESTMINSTER VILLAGE - YWCA OF MUNCIE - YOUTH OPPORTUNITY CENTER <p>THE MEETING BEGAN WITH A PRESENTATION THAT DISCUSSED THE GOALS AND STATUS OF THE CHNA PROCESS AND THE PURPOSE OF THE COMMUNITY MEETINGS. THEN, SECONDARY DATA WERE PRESENTED, ALONG WITH A SUMMARY OF THE MOST UNFAVORABLE COMMUNITY HEALTH INDICATORS. FOR DELAWARE COUNTY, THOSE INDICATORS WERE (IN ALPHABETICAL ORDER):</p> <ul style="list-style-type: none"> - ADULT SMOKING - HOUSING PROBLEMS IN DELAWARE COUNTY - INFANT MORTALITY AND LOW BIRTH WEIGHT BIRTHS - MENTAL HEALTH AND SUPPLY OF MENTAL HEALTH PROVIDERS - PHYSICAL INACTIVITY AND ACCESS TO HEALTHY FOOD - POVERTY RATES AND CHILDREN IN POVERTY - SUPPLY OF PRIMARY CARE PHYSICIANS AND DENTISTS <p>PARTICIPANTS THEN WERE ASKED TO DISCUSS WHETHER THE IDENTIFIED, UNFAVORABLE INDICATORS ACCURATELY IDENTIFIED THE MOST SIGNIFICANT COMMUNITY HEALTH ISSUES AND WERE ENCOURAGED TO ADD ISSUES THAT THEY BELIEVED WERE SIGNIFICANT. SEVERAL ISSUES WERE ADDED AT THE MEETINGS, SUCH AS: CHRONIC DISEASE, CANCER, SERVICES FOR THE ELDERLY, ADVERSE CHILDHOOD EXPERIENCES, SOCIAL ASSOCIATIONS/ CONNECTEDNESS, OBESITY, HEALTH LITERACY, ADDICTIONS, ACCESS TO SPECIALTY PHYSICIANS, BUILT ENVIRONMENT, LEAD PROBLEMS, AND SUPPLY OF PRIMARY CARE PHYSICIANS AND DENTISTS. IN ADDITION, PHYSICAL INACTIVITY AND ACCESS TO HEALTHY FOOD WERE SPLIT INTO THEIR OWN LINE ITEMS, INSTEAD OF BEING COMBINED.</p> <p>DURING THE MEETINGS, A RANGE OF OTHER TOPICS WAS DISCUSSED, INCLUDING:</p> <ul style="list-style-type: none"> - DIFFERENCES IN SECONDARY DATA FOR MENTAL HEALTH INDICATORS - INTER-RELATEDNESS OF NEEDS - SERVICES FOR THE ELDERLY - DIFFERENCE BETWEEN OBESITY, PHYSICAL ACTIVITY, AND ACCESS TO HEALTHY FOOD <p>AFTER DISCUSSING THE NEEDS IDENTIFIED THROUGH SECONDARY DATA AND ADDING OTHERS TO THE LIST, EACH PARTICIPANT WAS ASKED THROUGH A VOTING PROCESS TO IDENTIFY "THREE TO FIVE" THEY CONSIDER TO BE MOST SIGNIFICANT. FROM THIS PROCESS, THE GROUPS IDENTIFIED THE FOLLOWING NEEDS AS MOST SIGNIFICANT FOR DELAWARE COUNTY:</p> <p>THE RESULTS FROM THE FIRST MEETING WERE AS FOLLOWS:</p> <ul style="list-style-type: none"> - MENTAL HEALTH AND SUPPLY OF MENTAL HEALTH PROVIDERS - POVERTY RATES AND CHILDREN IN POVERTY - OBESITY - TIED FOR FOURTH: ADULT SMOKING AND ADVERSE CHILDHOOD EXPERIENCES

Return Reference - Identifier	Explanation
	<p>THE RESULTS FROM THE SECOND MEETING WERE AS FOLLOWS:</p> <ul style="list-style-type: none"> - ADDICTIONS - PHYSICAL ACTIVITY/OBESITY - ACCESS TO HEALTHY FOODS - ADULT SMOKING - INFANT MORTALITY <p>INTERVIEWS - DELAWARE COUNTY</p> <p>ON MAY 10, 2018, AN INTERVIEW WAS ALSO CONDUCTED WITH A REPRESENTATIVE OF THE DELAWARE COUNTY HEALTH DEPARTMENT. THE INTERVIEW WAS CONDUCTED TO ASSURE THAT APPROPRIATE AND ADDITIONAL INPUT WAS RECEIVED FROM GOVERNMENTAL PUBLIC HEALTH OFFICIALS. THE RESULTS OF THE COMMUNITY MEETINGS WERE DISCUSSED AND INSIGHTS WERE SOUGHT REGARDING SIGNIFICANT COMMUNITY HEALTH NEEDS, WHY SUCH NEEDS ARE PRESENT, AND HOW THEY CAN BE ADDRESSED. THE INTERVIEW WAS GUIDED BY A STRUCTURED PROTOCOL.</p> <p>THE INTERVIEW WAS GUIDED BY A STRUCTURED PROTOCOL THAT FOCUSED ON OPINIONS REGARDING SIGNIFICANT COMMUNITY HEALTH NEEDS, DESCRIBING WHY SUCH NEEDS ARE PRESENT, AND SEEKING IDEAS FOR HOW TO ADDRESS THEM.</p> <p>THE INTERVIEWEE CONFIRMED THAT SOME OF THE TOP NEEDS IDENTIFIED BY THE COMMUNITY MEETING GROUP WERE SOME OF THE MOST SIGNIFICANT IN THE COMMUNITY. THESE NEEDS WERE:</p> <ul style="list-style-type: none"> - MENTAL HEALTH, ADDICTIONS, AND SUPPLY OF MENTAL HEALTH PROVIDERS (INCLUDING REHABILITATION AND ADDICTION SERVICES) - POVERTY RATES AND CHILDREN IN POVERTY - OBESITY - PHYSICAL INACTIVITY - ACCESS TO HEALTHY FOODS <p>DRUG ADDICTION WAS IDENTIFIED AS A MAJOR ISSUE, AND IT WAS BELIEVED THAT RECEIVING LONG TERM TREATMENT IS NOT AN OPTION FOR MANY SEEKING TREATMENTS. FEW RESOURCES WERE BELIEVED TO EXIST IN THE COUNTY, AND RESOURCES OUTSIDE OF THE COUNTY WERE THOUGHT TO HAVE LONG WAIT LISTS.</p> <p>POVERTY IS A SIGNIFICANT ISSUE, WITH DELAWARE COUNTY RANKING AS ONE OF THE HIGHEST POVERTY COUNTIES IN THE STATE. THE COMMUNITY WAS THOUGHT TO BE IN A DIFFICULT PERIOD AFTER THE DECLINE OF INDUSTRY IN THE REGION, WITH ISSUES STEMMING FROM THIS INCLUDING:</p> <ul style="list-style-type: none"> - LOSING POPULATION AND TAX BASE - POOR INFRASTRUCTURE, PARTICULARLY FOR ROADS - FAILURE TO ATTRACT EMPLOYERS TO THE AREA DUE TO INFRASTRUCTURE CONCERNS - FAILURE TO RETAIN A LOCALLY-EDUCATED POPULATION FROM THE LOCAL BALL STATE UNIVERSITY <p>ACCESS TO HEALTHY FOOD WAS IDENTIFIED AS A KEY CONTRIBUTOR TO THE SIGNIFICANT OBESITY ISSUE, EXACERBATED BY POVERTY AND THE GROWING RATE OF FAST FOOD RESTAURANTS IN THE COUNTY. WHILE HEALTHY OPTIONS WERE THOUGHT TO EXIST ON A SMALLER SCALE, CHEAPER UNHEALTHY FOOD IS MORE READILY ACCESSIBLE.</p> <p>A LACK OF REGULAR EXERCISE WAS ALSO IDENTIFIED AS A MAIN CONTRIBUTOR TO THE ISSUE OF OBESITY, PARTICULARLY AMONG POORER COMMUNITIES. MANY NEIGHBORHOODS DID NOT HAVE A BUILT ENVIRONMENT TO SUPPORT REGULAR EXERCISE, WITH ISSUES SUCH AS CRIME, LACK OF SIDEWALKS, HEAVY TRAFFIC, AND OTHERS CONTRIBUTING TO AN UNSAFE PHYSICAL ENVIRONMENT.</p> <p>INFANT MORTALITY WAS IDENTIFIED AS A SIGNIFICANT ISSUE, WITH A LACK OF PARENT EDUCATION ON CHILD SAFETY (SUCH AS INFANTS SLEEPING IN THE SAME BED AS PARENTS OR OTHER CHILDREN) CONTRIBUTING.</p> <p>A LACK OF SOCIAL ASSOCIATIONS, CONNECTEDNESS, AND SUPPORT SYSTEMS WAS THOUGHT TO PLAY A ROLE IN MANY OF THE COUNTY ISSUES, PARTICULARLY WITH MENTAL HEALTH AND ADDICTION PROBLEMS.</p> <p>COMMUNICABLE DISEASES, PARTICULARLY HEPATITIS C AND HIV, ARE INCREASINGLY COMMON DUE TO INTRAVENOUS DRUG USE IN THE COMMUNITY.</p> <p>THE NEED FOR A CENTRAL RESOURCE TO REFER RESIDENTS WITH MENTAL HEALTH, BEHAVIORAL HEALTH, AND ADDICTION NEEDS WAS IDENTIFIED AS A SIGNIFICANT NEED.</p> <p>THE NEED FOR MORE PUBLIC OUTREACH AND EDUCATION PROGRAMS ON NUTRITION AND PHYSICAL ACTIVITY, IN PLACES OTHER THAN A CLINICAL SETTING, WAS IDENTIFIED.</p> <p>ADULT SMOKING AND RESULTANT CHRONIC DISEASES WERE ALSO IDENTIFIED AS ISSUES.</p> <p>COMMUNITY MEETINGS - JAY COUNTY</p> <p>ON MAY 23, 2018, TWO MEETINGS OF COMMUNITY REPRESENTATIVES WERE HELD AT THE IU HEALTH JAY HOSPITAL IN PORTLAND, THE COUNTY SEAT OF JAY COUNTY. THE MEETINGS WERE ATTENDED BY 28 COMMUNITY MEMBERS INVITED BY IU HEALTH BECAUSE THEY REPRESENT IMPORTANT COMMUNITY ORGANIZATIONS AND SECTORS SUCH AS: LOCAL HEALTH DEPARTMENTS, POLICE/ FIRE DEPARTMENTS, NON-PROFIT ORGANIZATIONS, LOCAL BUSINESS, HEALTH CARE PROVIDERS, LOCAL POLICYMAKERS, FAITH-BASED ORGANIZATIONS, AND SCHOOLS.</p>

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<p>SCHEDULE H, PART V, SECTION B, LINE 5 - INPUT FROM PERSONS WHO REPRESENT BROAD INTERESTS OF COMMUNITY SERVED</p>	<p>FACILITY NAME: IU HEALTH BALL MEMORIAL HOSPITAL (CONT.)</p> <p>DESCRIPTION: THROUGH THE MEETINGS, IU HEALTH SOUGHT A BREADTH OF PERSPECTIVES ON THE COMMUNITY'S HEALTH NEEDS. THE SPECIFIC ORGANIZATIONS REPRESENTED AT THE MEETINGS ARE LISTED BELOW.</p> <ul style="list-style-type: none"> - COMMUNITY & FAMILY SERVICES - CROWN POINTE SENIOR LIVING - FIRST MERCHANTS BANK - FORT RECOVERY INDUSTRIES - GENEVA TOWN COUNCIL - IU HEALTH JAY HOSPITAL - JAY-RANDOLPH DEVELOPMENTAL SERVICES, INC. - JAY COUNTY CHAMBER - JAY COUNTY CHILD SERVICES - JAY COUNTY COMMUNITY DEVELOPMENT - JAY COUNTY COUNCIL - JAY COUNTY HEALTH DEPARTMENT - JAY COUNTY MINISTERIAL ASSOCIATION - JAY COUNTY TOURISM - JAY SCHOOLS - JOHN JAY CENTER FOR LEARNING - LIFE STREAM - MERIDIAN HEALTH SERVICES - PENNVILLE TOWN COUNCIL - PERSIMMON RIDGE REHAB - PORTLAND FIRE DEPARTMENT - PORTLAND FOUNDATION - PORTLAND POLICE DEPARTMENT - SWISS VILLAGE, INC. - UNITED WAY OF JAY <p>THE MEETING BEGAN WITH A PRESENTATION THAT DISCUSSED THE GOALS AND STATUS OF THE CHNA PROCESS AND THE PURPOSE OF THE COMMUNITY MEETINGS. THEN, SECONDARY DATA WERE PRESENTED, ALONG WITH A SUMMARY OF THE MOST UNFAVORABLE COMMUNITY HEALTH INDICATORS. FOR JAY COUNTY, THOSE INDICATORS WERE (IN ALPHABETICAL ORDER):</p> <ul style="list-style-type: none"> - ADULT SMOKING AND SMOKING DURING PREGNANCY - AIR POLLUTION - DIABETES MORTALITY RATE - FOOD ENVIRONMENT - INFANT MORTALITY RATES - LOW EDUCATIONAL ATTAINMENT LEVELS - OBESITY, PHYSICAL INACTIVITY, AND ACCESS TO EXERCISE OPPORTUNITIES - POVERTY RATES - UNDERSUPPLY OF PRIMARY CARE PHYSICIANS AND MENTAL HEALTH PROFESSIONALS <p>MEETING PARTICIPANTS THEN WERE ASKED TO DISCUSS WHETHER THE IDENTIFIED, UNFAVORABLE INDICATORS ACCURATELY IDENTIFIED THE MOST SIGNIFICANT COMMUNITY HEALTH ISSUES AND WERE ENCOURAGED TO ADD ISSUES THAT THEY BELIEVED WERE SIGNIFICANT. SEVERAL ISSUES WERE ADDED, SUCH AS: SUBSTANCE ABUSE, PREVENTATIVE CARE FOR CHILDREN, LOW HEALTH LITERACY, LACK OF PARENTING SKILL, PRESCRIPTION MEDICATION COST BARRIERS, CANCER, MENTAL HEALTH, CHILDHOOD OBESITY, FAITH AND SPIRITUALITY, SENIOR PROGRAMMING, AND BREASTFEEDING INITIATIVES.</p> <p>DURING THE MEETINGS, A RANGE OF OTHER TOPICS WERE DISCUSSED, INCLUDING:</p> <ul style="list-style-type: none"> - NEONATAL ABSTINENCE SYNDROME - GENERATIONAL POVERTY - SINGLE PARENT FAMILIES - RESPONSIBILITY AND ACCOUNTABILITY - QUALITY OF JOB APPLICANTS - LACK OF OPTIONS FOR HEALTHY FOOD <p>AFTER DISCUSSING THE NEEDS IDENTIFIED THROUGH SECONDARY DATA AND ADDING OTHERS TO THE LIST, EACH PARTICIPANT WAS ASKED THROUGH A VOTING PROCESS TO IDENTIFY "THREE TO FIVE" THEY CONSIDER TO BE MOST SIGNIFICANT. FROM THIS PROCESS, THE GROUPS IDENTIFIED THE FOLLOWING NEEDS AS MOST SIGNIFICANT FOR JAY COUNTY:</p> <ul style="list-style-type: none"> - SUBSTANCE ABUSE - MENTAL HEALTH - UNDERSUPPLY OF PRIMARY CARE PHYSICIANS AND MENTAL HEALTH PROFESSIONALS - PHYSICAL INACTIVITY - PARENTING SKILLS <p>INTERVIEWS - JAY COUNTY</p> <p>ON MAY 23, 2018, AN INTERVIEW WAS ALSO CONDUCTED WITH A REPRESENTATIVE OF THE JAY COUNTY HEALTH DEPARTMENT. THE INTERVIEW WAS CONDUCTED TO ASSURE THAT APPROPRIATE AND ADDITIONAL INPUT WAS RECEIVED FROM GOVERNMENTAL PUBLIC HEALTH OFFICIALS. THE RESULTS OF THE COMMUNITY MEETINGS WERE DISCUSSED AND INSIGHTS WERE SOUGHT REGARDING SIGNIFICANT COMMUNITY HEALTH NEEDS, WHY SUCH NEEDS ARE PRESENT, AND HOW THEY CAN BE ADDRESSED.</p> <p>THE INTERVIEW WAS GUIDED BY A STRUCTURED PROTOCOL THAT FOCUSED ON OPINIONS REGARDING SIGNIFICANT COMMUNITY HEALTH NEEDS, DESCRIBING WHY SUCH NEEDS ARE PRESENT, AND SEEKING IDEAS FOR HOW TO ADDRESS THEM.</p> <p>THE INTERVIEWEE IDENTIFIED THE FOLLOWING THREE NEEDS AS THE MOST SIGNIFICANT, WITH EACH OF</p>

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	<p>THESE NEEDS HAVING ALSO BEEN PRIORITIZED BY THE COMMUNITY MEETING PARTICIPANTS AS SIGNIFICANT:</p> <ul style="list-style-type: none"> - SUBSTANCE ABUSE - MENTAL HEALTH - PHYSICAL INACTIVITY <p>POVERTY AND DRUG ABUSE WERE THOUGHT TO BE SIGNIFICANT ISSUES IN THE COMMUNITY, AND CONTRIBUTING FACTORS IN THE NEED FOR IMPROVED PARENTING EDUCATION AND SKILLS DEVELOPMENT.</p> <p>FEW OPTIONS AND PROVIDERS ARE AVAILABLE FOR SUBSTANCE ABUSE AND MENTAL HEALTH TREATMENT, AND THERE IS ALSO LITTLE INFORMATION ABOUT WHERE TO GO OUTSIDE OF THE COUNTY FOR TREATMENT. THE NEED FOR INCREASED ACCESS TO REHABILITATION THAT IS CLOSER TO HOME AND AFFORDABLE WAS IDENTIFIED AS A PRIORITY.</p> <p>OBESITY WAS IDENTIFIED AS A SIGNIFICANT CONCERN, WITH PHYSICAL INACTIVITY A PRIMARY CONTRIBUTOR TO OBESITY AND RELATED CHRONIC CONDITIONS. WHILE THERE WAS THOUGHT TO BE AN ADEQUATE AMOUNT OF OUTDOOR SPACE FOR RECREATION, MORE EDUCATION FOR YOUNGER RESIDENTS ABOUT HEALTHY LIVING WAS IDENTIFIED AS A NEED TO ENSURE THAT MOTIVATION FOR PHYSICAL ACTIVITY REMAINS INTO ADULTHOOD.</p> <p>POOR DIET WAS ALSO THOUGHT TO BE AN ISSUE IN THE COMMUNITY, PARTICULARLY WITH THE MAJORITY OF RESTAURANT OPTIONS IN THE COMMUNITY BEING FAST FOOD.</p> <p>INVOLVEMENT AND COLLABORATION WITHIN THE BUSINESS COMMUNITY FOR HEALTHY LIVING INITIATIVES WAS IDENTIFIED AS A PROGRAMMATIC NEED. IF ORGANIZATIONS CAME TOGETHER FOR PHYSICAL FITNESS GOALS AND INSURANCE INCENTIVES FOR HEALTHY EATING AND EXERCISE, THERE COULD BE A LARGE REDUCTION OF OBESITY IN THE COMMUNITY.</p> <p>SMOKING WAS ALSO THOUGHT TO STILL BE AN ISSUE DESPITE PROGRESS BEING MADE, AND MORE SMOKING CESSATION EFFORTS WERE THOUGHT TO BE NEEDED.</p> <p>THE NEED FOR A CENTRAL RESOURCE THAT COULD DIRECT RESIDENTS TO ANY RESOURCE NEEDED IN THE COMMUNITY - WHETHER HEALTH OR BASIC LIVING NEEDS - WAS IDENTIFIED AS A NEEDED SERVICE.</p> <p>POVERTY WAS IDENTIFIED AS AN ISSUE, AND WHILE JOBS WERE THOUGHT TO BE AVAILABLE, SOME RESIDENTS WERE NOT PURSUING THESE OPPORTUNITIES DUE TO PERSONAL MOTIVATION, LOW PAY, OR MENTAL HEALTH REASONS.</p> <p>TRANSPORTATION WAS ALSO IDENTIFIED AS AN ISSUE IN BOTH ACCESSING HEALTHCARE SERVICES AND FOR EMPLOYMENT PURPOSES.</p> <p>COMMUNITY MEETINGS - RANDOLPH COUNTY</p> <p>A SEPARATE COMMUNITY MEETING WAS NOT HELD FOR RANDOLPH COUNTY; HOWEVER, FEEDBACK WAS OBTAINED FROM SEVERAL REPRESENTATIVES FROM THE RANDOLPH COUNTY HEALTH DEPARTMENT. THIS FEEDBACK APPEARS IN THE INTERVIEWS SECTION OF THIS REPORT.</p> <p>INTERVIEWS - RANDOLPH COUNTY</p> <p>ON JULY 28, 2018, AN INTERVIEW WAS ALSO CONDUCTED WITH REPRESENTATIVES OF THE RANDOLPH COUNTY HEALTH DEPARTMENT. THE INTERVIEW WAS CONDUCTED TO ASSURE THAT APPROPRIATE AND ADDITIONAL INPUT WAS RECEIVED FROM GOVERNMENTAL PUBLIC HEALTH OFFICIALS. THE RESULTS OF THE COMMUNITY MEETINGS WERE DISCUSSED AND INSIGHTS WERE SOUGHT REGARDING SIGNIFICANT COMMUNITY HEALTH NEEDS, WHY SUCH NEEDS ARE PRESENT, AND HOW THEY CAN BE ADDRESSED.</p> <p>THE INTERVIEW WAS GUIDED BY A STRUCTURED PROTOCOL THAT FOCUSED ON OPINIONS REGARDING SIGNIFICANT COMMUNITY HEALTH NEEDS, DESCRIBING WHY SUCH NEEDS ARE PRESENT, AND SEEKING IDEAS FOR HOW TO ADDRESS THEM.</p> <p>THE INTERVIEWEES CONFIRMED THAT THE FOLLOWING ISSUES, IDENTIFIED FROM PROBLEMATIC SECONDARY DATA INDICATORS, WERE SIGNIFICANT IN THE COMMUNITY:</p> <ul style="list-style-type: none"> - ADULT SMOKING - INFANT MORTALITY AND LOW BIRTH WEIGHT BIRTHS - MENTAL HEALTH AND SUPPLY OF MENTAL HEALTH PROVIDERS - PHYSICAL INACTIVITY AND ACCESS TO HEALTHY FOOD - POVERTY RATES AND CHILDREN IN POVERTY - SUPPLY OF PRIMARY CARE PHYSICIANS AND DENTISTS <p>DRUG OVERDOSES WERE ALSO IDENTIFIED AS AN ISSUE, AND THOUGHT TO BE A PRIMARY CONTRIBUTOR TO THE POOR OUTCOMES IN ACCIDENT MORTALITY RATES FOR RANDOLPH COUNTY.</p> <p>WHILE RANDOLPH COUNTY HAD A LOWER INFANT MORTALITY RATE THAN BORDERING JAY AND DELAWARE COUNTIES, INTERVIEWEES BELIEVED THIS MAY BE BECAUSE COMPLICATED INFANT HEALTH CASES WERE BEING SENT TO IU HEALTH BALL MEMORIAL HOSPITAL IN DELAWARE COUNTY.</p> <p>SUBSTANCE ABUSE AND ACCESS TO ADDICTION TREATMENT PROGRAMS WERE THOUGHT TO BE A SIGNIFICANT NEED.</p> <p>TRANSPORTATION WAS ALSO IDENTIFIED AS A SIGNIFICANT ISSUE.</p> <p>BOTH DRUG USE AND A RELATED RISE IN HEPATITIS C CASES WERE IDENTIFIED AS CURRENT ISSUES AND AS ISSUES THAT MAY INCREASE IN SEVERITY IN THE NEAR FUTURE.</p> <p>IN RESPONSE TO PROGRAMS MOST NEEDED IN THE COMMUNITY, INTERVIEWEES IDENTIFIED FUNDING FOR SMOKING CESSATION PROGRAMS, FREE GLUCOMETER PROGRAMS, EXPANDED IMMUNIZATION</p>

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	<p>CAPABILITIES, AND VACCINES FOR THE PUBLIC AS PARTICULAR NEEDS.</p> <p>COMMUNITY SURVEY</p> <p>TO INFORM THE CHNA, A COMMUNITY SURVEY WAS CONDUCTED BY THE INDIANA HOSPITAL COLLABORATIVE.</p> <p>ACROSS INDIANA, 9,161 COMPLETED QUESTIONNAIRES WERE RECEIVED BY ALL PARTICIPATING HOSPITALS IN THE INDIANA HOSPITAL COLLABORATIVE, FOR AN OVERALL RESPONSE RATE OF 11.6 PERCENT; 5,030 QUESTIONNAIRES WERE RECEIVED FROM THE 17 INDIANA COUNTIES SERVED BY ONE OR MORE IU HEALTH HOSPITALS.</p> <p>FOR IU HEALTH BALL MEMORIAL HOSPITAL, SURVEYS WERE RECEIVED FROM 851 COMMUNITY HOUSEHOLDS. ACCORDING TO THE RESPONSES, THESE HOUSEHOLDS INCLUDED 1,587 ADULTS.</p> <p>THE COMMUNITY SURVEY INDICATES THAT SUBSTANCE USE OR ABUSE, OBESITY, POVERTY, AND CHRONIC DISEASES REPRESENT TOP CONCERNS IN THE COMMUNITY SERVED BY IU HEALTH BALL MEMORIAL HOSPITAL.</p>
<p>SCHEDULE H, PART V, SECTION B, LINE 7 - HOSPITAL FACILITY'S WEBSITE (LIST URL)</p>	<p>https://iuhealth.org/in-the-community/community-benefit</p>

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<p>SCHEDULE H, PART V, SECTION B, LINE 11 - HOW HOSPITAL FACILITY IS ADDRESSING NEEDS IDENTIFIED IN CHNA</p>	<p>FACILITY NAME: IU HEALTH BALL MEMORIAL HOSPITAL</p> <p>DESCRIPTION: IN CONJUNCTION WITH THE CHNA, IU HEALTH BALL MEMORIAL HOSPITAL'S BOARD ADOPTED AN IMPLEMENTATION STRATEGY IN APRIL 2019 RELATED TO THE 2018 CHNA. IU HEALTH BALL MEMORIAL HOSPITAL PRIORITIZED AND DETERMINED WHICH OF THE COMMUNITY HEALTH NEEDS IDENTIFIED IN ITS MOST RECENTLY CONDUCTED CHNA WERE MOST CRITICAL FOR IT TO ADDRESS.</p> <p>IU HEALTH BALL MEMORIAL HOSPITAL WILL ADDRESS THE FOLLOWING COMMUNITY HEALTH NEEDS BETWEEN 2019 AND 2021:</p> <ul style="list-style-type: none"> - ACCESS TO HEALTHCARE SERVICES - DRUG AND SUBSTANCE ABUSE (INCLUDING OPIOIDS AND ALCOHOL) - FOOD INSECURITY AND HEALTHY EATING - MENTAL HEALTH - OBESITY, DIABETES, AND PHYSICAL INACTIVITY - SMOKING AND TOBACCO USAGE - SOCIAL DETERMINANTS OF HEALTH <p>IU HEALTH USES THE TERM "BEHAVIORAL HEALTH" TO REFER TO MENTAL HEALTH AND DRUG AND SUBSTANCE ABUSE (INCLUDING OPIOIDS AND ALCOHOL).</p> <p>ACCESS TO HEALTHCARE</p> <p>IU HEALTH BALL MEMORIAL HOSPITAL'S IMPLEMENTATION STRATEGY TO ADDRESS THE IDENTIFIED NEED OF ACCESS TO HEALTHCARE INCLUDES THE FOLLOWING:</p> <ul style="list-style-type: none"> - UTILIZE IU HEALTH'S INTERNAL RECRUITMENT RESOURCES. - LEVERAGE IU HEALTH BALL MEMORIAL RESIDENCY PROGRAMS FOR POTENTIAL RECRUITS. - MAINTAIN AND UPDATE FACILITIES' PLAN AND INITIATIVES TO SUPPORT INCOMING PRACTICES. - FORM WORK GROUPS AROUND IDENTIFIED HEALTH NEEDS FOR REGION. - COMPOSITION OF WORK GROUPS TO INCLUDE IDENTIFIED BALL STATE UNIVERSITY STAKEHOLDERS AND OTHER RELEVANT COMMUNITY PARTNERS. - DEVELOP COLLABORATION PLAN TO SUPPORT/ENHANCE/EXPAND IU HEALTH BALL MEMORIAL HOSPITAL COMMUNITY HEALTH NEEDS ASSESSMENT STRATEGIES AROUND IDENTIFIED HEALTH NEEDS. - RECRUIT NEW PRIMARY CARE, OBSTETRIC AND MENTAL HEALTH MEDICAL DOCTORS TO PRACTICE IN EAST CENTRAL REGION. - IN 2020, SIX NEW PRIMARY CARE PROVIDERS JOINED THE IU HEALTH EAST CENTRAL REGION (THREE PHYSICIANS, TWO FNPS, ONE WHNP). TWO OF THE NEW PROVIDERS ARE IN JAY COUNTY, TWO ARE BASED IN GRANT COUNTY, AND TWO IN DELAWARE COUNTY, WHERE THE PROVIDER FOOTPRINT WAS EXPANDED WITH THE ADDITION OF AN EXISTING PHYSICIAN PRACTICE INTO THE IU HEALTH PHYSICIAN NETWORK. ALSO, IN 2020, A NORTH MUNCIE PROVIDER WAS RELOCATED TO THE FAR EAST SIDE OF THE CITY TO EXPAND THE IU HEALTH PROVIDER FOOTPRINT FURTHER TO THE EAST IN DELAWARE COUNTY. ADDITIONALLY, VIRTUAL VISITS WERE EXPANDED SO THAT ALL PRIMARY CARE PROVIDERS HAVE THE CAPABILITY TO PROVIDE VIRTUAL VISITS TO THEIR PATIENTS AS INSURANCE ALLOWS. IN JAY COUNTY, A NEW PROGRAM FOCUSED SOLELY ON WOMEN'S HEALTH AND PRENATAL AND POSTNATAL CARE WAS ESTABLISHED. THESE NEW PRIMARY CARE PROVIDERS, LOCATIONS AND SERVICES ALLOW FOR INCREASED ACCESS AND EXPERTISE FOR EAST CENTRAL INDIANA PATIENTS. - PROVIDE TWO FAMILY MEDICINE DIRECTORS AND A RESIDENT ROTATION AT A SUBSIDIZED RATE TO LOCAL FEDERALLY QUALIFIED HEALTH CENTER (FQHC) OPEN DOOR HEALTH SERVICES TO EXPAND OBSTETRICS CAPACITY TO SERVE LOW-INCOME RESIDENTS. -IU HEALTH PROVIDED TWO FAMILY MEDICINE DIRECTORS PLUS A RESIDENT ROTATION AT A SUBSIDIZED RATE TO OPEN DOOR HEALTH SERVICES. THIS HAS ALLOWED OPEN DOOR TO EXPAND ITS OBSTETRIC CAPABILITY TO SERVICE LOW-INCOME RESIDENTS OF EAST CENTRAL INDIANA. THE TWO PHYSICIANS PROVIDED A TOTAL OF 7,912 PATIENT ENCOUNTERS IN 2020. OTHER OB SERVICES ARE OFFERED AT IU HEALTH BALL MEMORIAL HOSPITAL THROUGH ITS FAMILY MEDICINE PROGRAM, PERINATAL CENTER AND PHYSICIAN PRACTICE FACILITIES. SEVERAL OTHER PRIVATE PRACTICES OFFER OB SERVICES TO THE COMMUNITY AS WELL. - COLLABORATE WITH BALL STATE UNIVERSITY REGARDING HEALTH IMPROVEMENT INITIATIVES AT MUNCIE COMMUNITY SCHOOLS. - A COLLABORATION WITH BALL STATE UNIVERSITY HAS BEEN ESTABLISHED DEVELOP AND IMPLEMENT IN-SCHOOL PHYSICAL ACTIVITY AND NUTRITIONAL EDUCATION CURRICULUMS AT THE ELEMENTARY-SCHOOL LEVEL IN THE MUNCIE COMMUNITY SCHOOLS. THE PRIMARY TASKS COMPLETED IN YEAR 1 (2020) INCLUDED THE ASSEMBLY OF TEAM MEMBERS AND DEVELOPMENT OF A PHYSICAL ACTIVITY AND NUTRITION EDUCATION CURRICULUM INCLUDING ASSESSMENT PROCEDURES (AND PURCHASING OF EDUCATIONAL MATERIALS). AN INITIAL 6-WEEK PILOT PROGRAM AT SOUTHVIEW ELEMENTARY SCHOOL IN MUNCIE, DELIVERED VIA GOOGLE CLASSROOM WAS INITIATED WITH PHYSICAL ACTIVITY AND NUTRITION COMPONENTS. A TEACHER SURVEY WAS ADMINISTERED AND REPORTED 66% OF TEACHERS UTILIZED THE "BRAIN BREAK" ACTIVITY AND 75% FELT THE NUTRITION LESSONS WERE GRADE APPROPRIATE. BARRIERS WERE IDENTIFIED AND WILL INFORM OPERATIONS IN YEAR 2 (2021) OF THE PROGRAM. <p>BEHAVIORAL HEALTH (INCLUDES DRUG & SUBSTANCE ABUSE AND MENTAL HEALTH)</p> <p>IU HEALTH BALL MEMORIAL HOSPITAL'S IMPLEMENTATION STRATEGY TO ADDRESS THE IDENTIFIED NEED OF BEHAVIORAL HEALTH INCLUDES THE FOLLOWING:</p> <ul style="list-style-type: none"> - PROVIDE STRUCTURED THERAPEUTIC RECOVERY PROGRAM. - ASSIST IN THE ESTABLISHMENT OF A COMMUNITY NETWORK OF EXISTING SUBSTANCE USE DISORDERS

Return Reference - Identifier	Explanation
	<p>(SUD) RELATED CONCERNS.</p> <ul style="list-style-type: none"> - APPLY FOR HEALTH RESOURCES AND SERVICES ADMINISTRATION (HRSA) GRANT FUNDING FOR A FULL TIME PSYCHOLOGIST AND POSTDOCTORAL FELLOW TO BE PLACED IN THE INTERNAL MEDICINE RESIDENCY. - FORM WORK GROUPS AROUND IDENTIFIED HEALTH NEEDS FOR REGION. - COMPOSITION OF WORK GROUPS TO INCLUDE IDENTIFIED BALL STATE UNIVERSITY STAKEHOLDERS AND OTHER RELEVANT COMMUNITY PARTNERS. - DEVELOP COLLABORATION PLAN TO SUPPORT/ENHANCE/EXPAND IU HEALTH BALL MEMORIAL HOSPITAL COMMUNITY HEALTH NEEDS ASSESSMENT STRATEGIES AROUND IDENTIFIED HEALTH NEEDS. <p>- APPLY FOR GRANT FUNDING TO EXPAND VIRTUAL IOP TO SERVE OTHER EAST CENTRAL REGION FACILITIES.</p> <p>- THE IU HEALTH BALL ADDICTION TREATMENT AND RECOVERY CENTER OPENED IN 2019 AND NOW OFFERS AN INTENSIVE OUTPATIENT PROGRAM (IOP) - WHICH INCLUDES GROUP THERAPY RECREATION THERAPY AND INDIVIDUAL AND FAMILY COUNSELING SERVICES AND PEER RECOVERY COACHING. MEDICATION ASSISTED TREATMENT (MAT) IS ALSO OFFERED AS WELL AS AN INDIVIDUAL OUTPATIENT PROGRAM AND IOP AFTERCARE PROGRAM. BETWEEN JULY 2019 AND DECEMBER 2019 THE CENTER PROVIDED 67 ASSESSMENTS AND HAD 44 PERSONS ENROLLED IN IOP AND/OR INDIVIDUAL TRACK. THOSE NUMBERS INCREASED TO 130 AND 107, RESPECTIVELY IN 2020. PATIENTS WHO HAVE COMPLETED THE IOP DEMONSTRATE A 35% INCREASE IN SOBRIETY AND PREGNANT WOMEN HAVE DEMONSTRATED A 100% SOBRIETY RATE.</p> <p>VIRTUAL IOP SERVICES- IN SEPTEMBER OF 2020 A VIRTUAL IOP WAS LAUNCHED AT IU HEALTH JAY HOSPITAL WITH SUPPORT FROM THE CARA FIRST RESPONDERS GRANT. THIS ALLOWED THE EMPLOYMENT OF 2 PART TIME PEER RECOVERY COACHES. THEY ARE EMPLOYED BY THE JAY OUTPATIENT BEHAVIORAL HEALTH CLINIC AND SERVE AS CO-FACILITATORS OF THE IOP TO PATIENTS PRESENTING ON SITE AT THAT LOCATION. BOTH LOCATIONS RECEIVE THE IOP SERVICES, WITH PATIENT SETTINGS IN TWO DIFFERENT LOCATIONS.</p> <p>NUMEROUS COMMUNITY PARTNERS ARE ENGAGED FOR REFERRALS AND RESOURCES INCLUDING NA, AA, BRIANA'S HOPE, A BETTER LIFE, CELEBRATE RECOVERY, SMART RECOVERY, PLUS FAITH-BASED PARTNERSHIPS AND COMMUNITY RESOURCE PARTNERS. REFERRAL PARTNERS INCLUDE IU HEALTH BALL EMERGENCY DEPARTMENT AND FAMILY MEDICINE RESIDENCY, VOLUNTEERS OF AMERICA FRESH START IN WINCHESTER AND DELAWARE COUNTY CORRECTIONS.</p> <p>ATRC STAFF HAVE ALSO ENGAGED WITH THE ADDICTIONS COUNCIL OF DELAWARE COUNTY IN 2020 AND ARE SERVING ON SUBGROUPS. ONE SUBGROUP IS FOCUSING ON BRINGING A WOMEN'S RESIDENTIAL TREATMENT PROGRAM TO DELAWARE COUNTY AND THE OTHER IS A SYRINGE/NEEDLE EXCHANGE EFFORT.</p> <p>- EMPLOY PEER RECOVERY COACHES IN THE IU HEALTH BALL MEMORIAL HOSPITAL EMERGENCY DEPARTMENT (ED).</p> <p>- 2019 WAS THE FIRST YEAR THAT PEER RECOVERY SERVICES WERE OFFERED IN THE IU HEALTH BALL MEMORIAL HOSPITAL EMERGENCY DEPARTMENT. PATIENTS WHO ENTER THE EMERGENCY DEPARTMENT FOR AN OPIOID-RELATED HEALTH ISSUE ARE DEEMED INITIALLY ELIGIBLE FOR THE PLANNED OUTREACH, INTERVENTION, NALOXONE, AND TREATMENT (POINT) PROGRAM; THIS INCLUDES PATIENTS ADMITTED FOR OPIOID WITHDRAWAL SYMPTOMS, OPIOID INTOXICATION, OPIOID OVERDOSE, ENDOCARDITIS RELATED TO INJECTION OPIOID USE, AND ABSCESS RELATED TO INJECTION OPIOID USE. PEER RECOVERY COACHES (PRCS) ARE NOTIFIED OF THESE PATIENTS VIA THE EMR TRACK BOARD AND NURSE/PHYSICIAN ALERTS (PAGER, TELEPHONE CALL). THESE PATIENTS ARE THEN APPROACHED BY A PEER RECOVERY COACH AND ASKED TO COMPLETE AN OPIOID USE DISORDER (OUD) SCREENING TOOL. IF SYMPTOMS INDICATE AN OUD, THEY ARE OFFERED PEER RECOVERY COACHING SERVICES. ADDITIONALLY, OUTSIDE OF THEIR POINT PROGRAM RESPONSIBILITIES, PEER RECOVERY COACHES OFFER SERVICES TO PATIENTS PRESENTING WITH OTHER SUBSTANCE USE DISORDER ISSUES (NON-OPIOID). IN 2019, PRCS ENCOUNTERED A TOTAL OF 83 PATIENTS AND 75% ACCEPTED CARE. IN 2020, PRCS HAD 352 PATIENT ENCOUNTERS AND 77% ACCEPTED CARE.</p>

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<p>SCHEDULE H, PART V, SECTION B, LINE 11 - HOW HOSPITAL FACILITY IS ADDRESSING NEEDS IDENTIFIED IN CHNA</p>	<p>FACILITY NAME: IU HEALTH BALL MEMORIAL HOSPITAL (CONT.)</p> <p>DESCRIPTION: THE PROGRAM IS BUDGETED FOR 2 FULL TIME AND ONE PART TIME PEER RECOVERY COACHES AND IS TYPICALLY STAFFED FROM 8A-4PM OR 4PM-12AM MONDAY-SUNDAY. PEER RECOVERY COACHES WILL IMMEDIATELY PROVIDE SERVICES IF AVAILABLE. INDIANA UNIVERSITY IS THE ORGANIZATION PROVIDING THE FUNDING FOR THE PROGRAM AT BALL THROUGH A FEDERAL RESEARCH GRANT. SPECIFIC TO THE GRANT, CLEAN SLATE IS THE PRIMARY PROVIDER FOR MAT. THE IU HEALTH PSYCHIATRY HUB COLLABORATES WITH IUH JAY AND IUH BLACKFORD TO PROVIDE PEER RECOVERY COACH SERVICES. IN ADDITION, PATIENTS WITH SUD ARE BEING REFERRED TO THE CONTINUUM OF CARE OF SERVICES INCLUDING THE IUH BALL ATRC, MAT, INPATIENT FACILITIES AND OTHER LEVELS OF CARE AS INDICATED.</p> <p>- PROVIDE SCREENING, BRIEF INTERVENTION, AND REFERRAL TO TREATMENT (SBIRT) PROCESS FOR FAMILY MEDICINE CLINIC PATIENTS.</p> <p>- IN 2020, SBIRT SCREENING FOR ALL PATIENTS WAS DISCONTINUED MID-YEAR DUE TO ORGANIZATIONAL CHANGES IN TRACKING REQUIREMENTS FOR DEPRESSION SCREENING, WHICH WAS PREVIOUSLY EMBEDDED IN THE SBIRT TRACKING. A DEPRESSION-ONLY SCREENER IS CURRENTLY PROVIDED TO ALL PATIENTS.</p> <p>- PROVIDE PRESCRIPTION MEDICATION DISPOSAL KIOSKS AT IU HEALTH EAST CENTRAL REGION FACILITIES.</p> <p>- DRUG TAKE-BACK KIOSKS HAVE BEEN INSTALLED AT FOUR EAST CENTRAL INDIANA LOCATIONS: PAVILION PHARMACY AT IU HEALTH BALL MEMORIAL HOSPITAL IN MUNCIE; IU HEALTH YORKTOWN PHARMACY, YORKTOWN; IU HEALTH BLACKFORD PHARMACY, HARTFORD CITY; AND IU HEALTH JAY HOSPITAL, PORTLAND. THE KIOSKS ARE OPEN TO THE PUBLIC AND AVAILABLE DURING BUSINESS HOURS. IN 2019, 874 POUNDS OF PRESCRIPTION MEDS WERE RECOVERED AT PAVILION, 230 POUNDS AT BLACKFORD, 161 POUNDS AT YORKTOWN, AND 161 POUNDS AT JAY, FOR A TOTAL OF 1,426 POUNDS. IN 2020, 897 POUNDS OF MEDS WERE COLLECTED FROM THE FOUR LOCATIONS AND DESTROYED. CURRENTLY, NO OTHER COMMUNITY PARTNERS ARE ACTIVELY PROMOTING THIS PROGRAM.</p> <p>- PROVIDE PERINATAL COORDINATOR TO FACILITATE AND COLLABORATE WITHIN THE HOSPITAL AND WITH OUTSIDE PHYSICIAN OFFICES AND COMMUNITY AGENCIES TO ENHANCE EFFORTS TO DECREASE INFANT MORTALITY IN THE IU HEALTH EAST CENTRAL REGION.</p> <p>-IN 2019 AND 2020 THE IU HEALTH ECR PERINATAL COORDINATOR FACILITATED THE DEVELOPMENT OF 36 COLLABORATORS TO ENHANCE EFFORTS TO DECREASE INFANT MORTALITY AND IMPROVE THE HEALTH OF NEWBORNS AND WOMEN. ACCESS TO COMMUNITY RESOURCES HAS INCREASED DUE TO ECR EFFORTS THAT INCLUDE: PROMOTION OF BABY AND ME TOBACCO FREE PROGRAM; IMPLEMENTATION OF A TOBACCO TREATMENT PILOT PROGRAM IN 5 ECR PHYSICIAN OFFICE SETTINGS DESIGNED TO PROVIDE CLIENT CONSULTATIONS AND REFERRALS TO 1-800 QUIT NOW, BABY AND ME TOBACCO FREE PROGRAM, AND PHARMACOTHERAPY OPTIONS. IN 2020 IUH JAY RECEIVED AN ISDH OB NAVIGATION GRANT WHICH HAS PROVIDED FOR OB NAVIGATION FOR CLIENTS IN JAY BLACKFORD CO. INITIATED TO PROVIDE CONTINUUM OF CARE THROUGHOUT PREGNANCY. PHYSICIAN PRACTICES IN THE REGION RECEIVED SAFE SLEEP EDUCATION AND RESOURCES, AND A PARTNERSHIP WITH IU HEALTH BALL LACTATION SERVICES RESULTED IN THE DEVELOPMENT OF TELEMEDICINE LACTATION SERVICES AT IU HEALTH JAY HOSPITAL. IMPROVED OB CARE WAS ADDRESSED WITH POST-PARTUM HEMORRHAGE AND OB HYPERTENSION INITIATIVES, PLUS ACCESS TO CARE THROUGH EMERGENCY ROOM VISITS AND LABOR AND DELIVERY COLLABORATION.</p> <p>-INTERNALLY AT IU HEALTH BALL HOSPITAL, AN INTRAPROFESSIONAL MODEL OF CARE FOR NICU ROUNDS WITH DISCHARGE PLANNING WAS DEVELOPED TO DECREASE LOS & BARRIERS TO DISCHARGE; THE ECR FETAL CARE TEAM WAS INITIATED TO IMPROVE CONSULTATION AND SUPPORT PROVIDED TO PARENTS RECEIVING DIAGNOSIS OF LETHAL ANOMALY FOR THEIR BABY. VIRTUAL VIDEO TOURS WERE DEVELOPED FOR EXPECTANT PARENTS; MUSIC THERAPY WAS INITIATED IN THE NICU FOR INFANTS WITH NEONATAL ABSTINENCE SYNDROME. INTERNAL COLLABORATORS INCLUDE 17 DEPARTMENTS AT IU HEALTH BALL MEMORIAL HOSPITAL RANGING FROM MEDICAL UNITS TO ANCILLARY SERVICES SUCH AS MARKETING. IN 2020 A NEW COLLABORATION WAS INITIATED WITH IUH BALL MATERNAL FETAL HEALTH, NEONATOLOGY, PALLIATIVE CARE AND NURSING LEADERSHIP TO DEVELOP AND INITIATE ECR FETAL CARE TEAM WITH A FOCUS ON IMPROVING CONSULTATION AND SUPPORT PROVIDED TO PARENTS RECEIVING DIAGNOSIS OF LETHAL ANOMALY FOR THEIR BABY.</p> <p>-IU HEALTH JAY SUBMITTED AND RECEIVED AN ISDH GRANT WHICH SUPPORTS A NEW OB NAVIGATION PROGRAM CALLED HEALTHY BEGINNINGS. LAUNCHED IN 2020, THE HEALTHY BEGINNINGS PROGRAM IS A COMPREHENSIVE WOMEN'S HEALTH MODEL THAT FOCUSES ON ACCESS TO CARE AND IMPROVING MATERNAL/INFANT HEALTH OUTCOMES BY UTILIZING CARE COORDINATION, OUTPATIENT SERVICES, AND COMMUNITY COLLABORATION. THE GOAL OF THE PROGRAM IS TO KEEP PRENATAL AND POSTNATAL CARE LOCAL TO PREGNANT WOMEN IN THEIR OWN COMMUNITIES WITH DELIVERY OCCURRING AT IUH BALL MEMORIAL HOSPITAL.</p> <p>-RELATIONSHIPS WERE ESTABLISHED WITH THE ECR COMMUNITY OUTREACH DEPARTMENT, AND THE IU HEALTH SYSTEM TOBACCO COLLABORATIVE. EXTERNALLY, COLLABORATIONS WERE DEVELOPED WITH THE TOBACCO FREE DELAWARE COUNTY COALITION, OPEN DOOR HEALTH SERVICES, BABY AND ME TOBACCO FREE PROGRAM, INDIANA STATE DEPARTMENT OF HEALTH (ISDH), INDIANA PERINATAL QUALITY IMPROVEMENT COLLABORATION (IPQIC), AND MERIDIAN HEALTH SERVICES PROGRAMS FOR MATERNAL TREATMENT, PEDS REHAB AND PHYSICIAN PRACTICES.</p> <p>-THE IU HEALTH ECR PERINATAL COORDINATOR HAS FACILITATED THE DEVELOPMENT OF 33 COLLABORATORS TO ENHANCE EFFORTS TO DECREASE INFANT MORTALITY. ACCESS TO COMMUNITY RESOURCES HAS INCREASED DUE TO ECR EFFORTS THAT INCLUDE: PROMOTION OF BABY AND ME TOBACCO FREE PROGRAM, NEW PHYSICIAN PRACTICE SAFE SLEEP AND TOBACCO CESSATION EDUCATION, AND A NEW TELEMEDICINE LACTATION PROGRAM. IMPROVED OB CARE WAS ADDRESSED WITH POST PARTUM HEMORRHAGE AND OB HYPERTENSION INITIATIVES. INTERNALLY AT IU HEALTH BALL HOSPITAL, AN INTRAPROFESSIONAL MODEL OF CARE FOR NICU ROUNDS WITH DISCHARGE PLANNING WAS DEVELOPED TO DECREASE LOS & BARRIERS TO DISCHARGE FROM 57% TO 13% (FOCUSED ON LOS, INFANT MORTALITY). INTERNAL COLLABORATORS INCLUDE 17 DEPARTMENTS AT IU HEALTH BALL MEMORIAL HOSPITAL RANGING FROM MEDICAL UNITS TO ANCILLARY SERVICES SUCH AS MARKETING. EXTERNALLY, COLLABORATIONS WERE DEVELOPED WITH OPEN DOOR HEALTH SERVICES, BABY AND ME TOBACCO FREE PROGRAM, INDIANA STATE DEPARTMENT OF HEALTH (ISDH), INDIANA PERINATAL QUALITY IMPROVEMENT COLLABORATION (IPQIC), IU HEALTH JAY COUNTY HOSPITAL, AND MERIDIAN HEALTH SERVICES PROGRAMS</p>

Return Reference - Identifier	Explanation
	<p>FOR MATERNAL TREATMENT, PEDS REHAB AND PHYSICIAN PRACTICES.</p> <ul style="list-style-type: none"> - COLLABORATE WITH BALL STATE UNIVERSITY REGARDING HEALTH IMPROVEMENT INITIATIVES AT MUNCIE COMMUNITY SCHOOLS. - A COLLABORATION WITH BALL STATE UNIVERSITY HAS BEEN ESTABLISHED DEVELOP AND IMPLEMENT IN-SCHOOL PHYSICAL ACTIVITY AND NUTRITIONAL EDUCATION CURRICULUMS AT THE ELEMENTARY-SCHOOL LEVEL IN THE MUNCIE COMMUNITY SCHOOLS. THE PRIMARY TASKS COMPLETED IN YEAR 1 (2020) INCLUDED THE ASSEMBLY OF TEAM MEMBERS AND DEVELOPMENT OF A PHYSICAL ACTIVITY AND NUTRITION EDUCATION CURRICULUM INCLUDING ASSESSMENT PROCEDURES (AND PURCHASING OF EDUCATIONAL MATERIALS). AN INITIAL 6-WEEK PILOT PROGRAM AT SOUTHVIEW ELEMENTARY SCHOOL IN MUNCIE, DELIVERED VIA GOOGLE CLASSROOM WAS INITIATED WITH PHYSICAL ACTIVITY AND NUTRITION COMPONENTS. A TEACHER SURVEY WAS ADMINISTERED AND REPORTED 66% OF TEACHERS UTILIZED THE "BRAIN BREAK" ACTIVITY AND 75% FELT THE NUTRITION LESSONS WERE GRADE APPROPRIATE. BARRIERS WERE IDENTIFIED AND WILL INFORM OPERATIONS IN YEAR 2 (2021) OF THE PROGRAM. <p>FOOD INSECURITY AND HEALTHY EATING</p> <p>IU HEALTH BALL MEMORIAL HOSPITAL'S IMPLEMENTATION STRATEGY TO ADDRESS THE IDENTIFIED NEED OF FOOD INSECURITY AND HEALTHY EATING INCLUDES THE FOLLOWING:</p> <ul style="list-style-type: none"> - FACILITATE ORGANIZATION RECRUITMENT AND ENGAGEMENT USING THE COLLECTIVE IMPACT MODEL AROUND IMPROVED NUTRITION, INCREASED PHYSICAL ACTIVITY AND TOBACCO CESSATION. - ORGANIZE WORKGROUPS AND DEVELOP PARTNER TOOLS FOR AUDIENCE ENGAGEMENT. - ENGAGE LOCAL ORGANIZATIONS TO RECRUIT LOW-INCOME FAMILIES TO PARTICIPATE. - FORM WORK GROUPS AROUND IDENTIFIED HEALTH NEEDS FOR REGION. - COMPOSITION OF WORK GROUPS TO INCLUDE IDENTIFIED BALL STATE UNIVERSITY STAKEHOLDERS AND OTHER RELEVANT COMMUNITY PARTNERS. - DEVELOP COLLABORATION PLAN TO SUPPORT/ENHANCE/EXPAND IU HEALTH BALL MEMORIAL HOSPITAL COMMUNITY HEALTH NEEDS ASSESSMENT STRATEGIES AROUND IDENTIFIED HEALTH NEEDS. - PROVIDE OPPORTUNITIES FOR FAMILIES TO LEARN ABOUT NUTRITION VALUE OF FRESH PRODUCE, PHYSICAL ACTIVITY AND TOBACCO CESSATION. - IN 2019 A COMPREHENSIVE 3 YEAR PLAN OF ENGAGEMENT WITH THE 8TWELVE COALITION WAS DEVELOPED IN THE FORM OF A GRANT APPLICATION FOR THE IU HEALTH COMMUNITY IMPACT FUND. \$1M WAS AWARDED TO MAKE IMPROVEMENTS RELATED TO FOOD ACCESS, PHYSICAL ACTIVITY AND HOUSING IN THE AREA. ORGANIZING IS UNDERWAY TO BEGIN IMPROVEMENTS IN 2020 WITH COMPLETION IN 2022. - SUPPORT COMMUNICATION, ORGANIZATION AND FACILITATION OF LOCAL COLLABORATION TO ADVANCE NEW FOOD POLICY, FOOD WASTE REDUCTION, AND FOOD ACCESS.

Return Reference - Identifier	Explanation
<p>SCHEDULE H, PART V, SECTION B, LINE 11 - HOW HOSPITAL FACILITY IS ADDRESSING NEEDS IDENTIFIED IN CHNA</p>	<p>FACILITY NAME: IU HEALTH BALL MEMORIAL HOSPITAL (CONT.)</p> <p>DESCRIPTION: - THE EAST CENTRAL INDIANA FOOD COUNCIL IS A VOLUNTEER-RUN ORGANIZATION LED BY LOCAL ACTIVISTS INTERESTED IN ADDRESSING COMMUNITY ISSUES AROUND FOOD ACCESS AND NUTRITION. IT RECEIVES SUPPORT FROM THE IU HEALTH-DRIVEN HEALTHY COMMUNITY ALLIANCE INITIATIVE. THE GROUP HAS STRATEGICALLY GROWN FROM A DELAWARE COUNTY FOCUS TO INCLUDE PARTICIPANTS FROM BLACKFORD AND JAY COUNTIES. THE COUNCIL IS COMPOSED OF MULTIPLE COMMUNITY COLLABORATORS REPRESENTING BALL STATE UNIVERSITY, THE MUNCIE FOOD HUB, IU HEALTH, PURDUE EXTENSION, SECOND HARVEST FOOD BANK, GRACE BAPTIST CHURCH, THE SOUP KITCHEN OF MUNCIE, BLOOD-N-FIRE MINISTRIES, COMMUNITY AND FAMILY SERVICES FOOD PANTRIES IN HARTFORD CITY, MONTPELIER AND PORTLAND AND THE CHILDREN'S BUREAU; AS WELL AS LOCAL FARMERS AND FARMERS MARKET ORGANIZERS. IN 2019 THE GROUP OFFERED GUIDANCE TO AREA SCHOOLS AND FARMERS REGARDING THE PROCESS OF BRINGING LOCAL FARM PRODUCTS TO SCHOOLS, WITH THE OUTCOME OF A NEW ONLINE RESOURCE FOR ACCESSING MANDATORY FORMS AND POLICIES AND CONNECTIONS MADE BETWEEN SCHOOLS AND FARMERS. IN RESPONSE TO COVID-19, THE GROUP HELD A SPECIAL PHILANTHROPY SESSION IN 2020 WHERE FUNDERS TALKED DIRECTLY WITH FOOD SUPPORT ORGANIZATIONS DIRECTLY ABOUT THEIR NEEDS. THE RESULT WAS THAT GROUPS RECEIVED FUNDING FOR INITIATIVES SUCH AS ADDITIONAL EQUIPMENT; AND THE MUNCIE FOOD HUB PARTNERED WITH IU HEALTH TO OFFER FREE PRODUCE FOR 15 WEEKS DELIVERED TO 10 DIFFERENT LOCATIONS IN DELAWARE, BLACKFORD AND JAY COUNTIES. SITES INCLUDED FOOD PANTRIES, CHILDCARE CENTERS, COMMUNITY CENTERS AND HEALTHCARE ORGANIZATIONS WHERE VULNERABLE POPULATIONS WERE ABLE TO BE REACHED.</p> <p>- BUILD AND MAINTAIN HEALTHY COMMUNITY ALLIANCE (HCA) WEBSITE AND OTHER COMMUNICATION TOOLS TO SUPPORT PARTNER ENGAGEMENT.</p> <p>- THE HEALTHY COMMUNITY ALLIANCE OF EAST CENTRAL INDIANA (HCA) CURRENTLY ENGAGES 149 COLLABORATING ORGANIZATIONS IN 3 ECR COUNTIES- DELAWARE, BLACKFORD AND JAY. IN 2019 AND 2020, 10 NEW PARTNERS WERE ADDED TO THE NETWORK- CROSSROADS FINANCIAL CREDIT UNION, JAY COUNTY DEVELOPMENT CORPORATION, JAY COUNTY DRUG PREVENTION COALITION, JAY COMMUNITY SCHOOLS, HOME HEALTH ANGELS, UNITED WAY OF JAY COUNTY, ALEXANDRIA CARE CENTER, JOHN JAY CENTER FOR LEARNING, UNITED DAY CARE CENTER OF DELAWARE COUNTY, COMMUNITY PARTNERS CHILDREN'S BUREAU. THE HCA MAKES MULTIPLE RESOURCES AVAILABLE TO COLLABORATORS, INCLUDING FACILITATED WORKGROUP SESSIONS IN EACH COUNTY, MATERIALS SUCH AS TOBACCO CESSATION TOOLKITS AND HEALTHY LIFESTYLE TOOLKITS; AND ONLINE RESOURCES SUCH A E-NEWSLETTER, MEDIA MESSAGING AND ACCESS TO COMMUNITY HEALTH DATA FOR EACH OF THE THREE COUNTIES. THESE RESOURCES ARE PROVIDED TO ALL COLLABORATING ORGANIZATIONS FREE OF CHARGE. IN 2020 THE HCA BEGAN OFFERING WEBINAR PROGRAMMING AS A WAY TO ENGAGE PARTNERS IN ACCESSING RESOURCES AND PROGRAMMING IN ALL THREE COUNTIES. THE CDC CHANGE TOOL SURVEY PROCESS WAS CONDUCTED IN BOTH DELAWARE AND JAY COUNTIES IN 2020 BY HCA PARTNER ORGANIZATIONS WITH HCA PARTNER SUPPORT. IN BLACKFORD COUNTY, HCA EFFORTS LED TO PROGRAMMING AND CURRICULUM CHANGES AT THE BLACKFORD COMMUNITY SCHOOL SYSTEM. A 2019 SURVEY FOUND THAT 105 OF HCA PARTNER ORGANIZATIONS ARE CURRENTLY UTILIZING AT LEAST ONE OF THESE PROVIDED RESOURCES TO INFLUENCE CHANGE AMONGST THEIR AUDIENCES.</p> <p>THE HEALTHY COMMUNITY ALLIANCE IS ORGANIZED AND FACILITATED BY IU HEALTH EAST CENTRAL REGION HOSPITALS AND RECEIVES RESOURCES FROM IU HEALTH BALL MEMORIAL HOSPITAL FOR PARTNER MATERIALS AND SUPPORT.</p> <p>- OFFER IU HEALTH BUCKS TO PARTICIPANTS SO THEY MAY FULLY ENGAGE IN FARMERS' MARKET EXPERIENCE.</p> <p>-IU HEALTH OFFERS THE FAMILIES AT THE FARMERS MARKET IN MUNCIE AND HARTFORD CITY EACH YEAR. COLLABORATORS - MINNETRISTA, WHITELY COMM. COUNCIL, ROSS CENTER, MINORITY HEALTH COALITION, IVY TECH, BOYS/GIRLS CLUB, BULEY CENTER, OPEN DOOR HEALTH SERVICES, SALVATION ARMY, YWCA OF ECI, YMCA/APPLETREE, YOUTH OPPORTUNITY CENTER, HILLCROFT, SPANGLER FARMS, NORTHERN TROPICS GREENHOUSE AND IU HEALTH BALL HOSPITAL. BLACKFORD COUNTY: CHILDREN AND FAMILY SERVICES OF BLACKFORD COUNTY /WIC, GRACE UNITED METHODIST CHURCH, GROWERS AND MAKERS MARKET, COMMON GROUNDS COFFEE SHOP, BLACKFORD COUNTY PUBLIC LIBRARY, PURDUE EXTENSION, AND IU HEALTH BLACKFORD HOSPITAL.</p> <p>-IN 2020, THE PROGRAM'S IN-PERSON SESSIONS WERE ELIMINATED DUE TO COVID-19 PRECAUTIONS. 68 FAMILIES IN MUNCIE AND 29 FAMILIES IN HARTFORD CITY RECEIVED A HEALTHY EATING PACKET WITH COUPONS REDEEMABLE AT LOCAL FARMERS MARKETS AND FARM STANDS. HEAD START JOINED THE COLLABORATION AND FACILITATED CONNECTIONS WITH FAMILIES IN BLACKFORD COUNTY. 67% OF SURVEY PARTICIPANTS STATED THEY UTILIZE FRESH FRUITS/VEGETABLES AT "MOST MEALS" AFTER COMPLETING THE PROGRAM; 100% OF RESPONDENTS STATED THEY "LEARNED A LOT"; AND REPORTED THEY USED THE FARMERS MARKET "2 OR MORE TIMES." COUPON REDEMPTION RATES WERE SLIGHTLY MORE THAN 50% EACH YEAR.</p> <p>- COLLABORATE WITH BALL STATE UNIVERSITY REGARDING HEALTH IMPROVEMENT INITIATIVES AT MUNCIE COMMUNITY SCHOOLS.</p> <p>- A COLLABORATION WITH BALL STATE UNIVERSITY HAS BEEN ESTABLISHED DEVELOP AND IMPLEMENT IN-SCHOOL PHYSICAL ACTIVITY AND NUTRITIONAL EDUCATION CURRICULUMS AT THE ELEMENTARY-SCHOOL LEVEL IN THE MUNCIE COMMUNITY SCHOOLS. THE PRIMARY TASKS COMPLETED IN YEAR 1 (2020) INCLUDED THE ASSEMBLY OF TEAM MEMBERS AND DEVELOPMENT OF A PHYSICAL ACTIVITY AND NUTRITION EDUCATION CURRICULUM INCLUDING ASSESSMENT PROCEDURES (AND PURCHASING OF EDUCATIONAL MATERIALS). AN INITIAL 6-WEEK PILOT PROGRAM AT SOUTHVIEW ELEMENTARY SCHOOL IN MUNCIE, DELIVERED VIA GOOGLE CLASSROOM WAS INITIATED WITH PHYSICAL ACTIVITY AND NUTRITION COMPONENTS. A TEACHER SURVEY WAS ADMINISTERED AND REPORTED 66% OF TEACHERS UTILIZED THE "BRAIN BREAK" ACTIVITY AND 75% FELT THE NUTRITION LESSONS WERE GRADE APPROPRIATE. BARRIERS WERE IDENTIFIED AND WILL INFORM OPERATIONS IN YEAR 2 (2021) OF THE PROGRAM.</p>

Return Reference - Identifier	Explanation
	<p>OBESITY, DIABETES, AND PHYSICAL INACTIVITY</p> <p>IU HEALTH BALL MEMORIAL HOSPITAL'S IMPLEMENTATION STRATEGY TO ADDRESS THE IDENTIFIED NEED OF OBESITY, DIABETES, AND PHYSICAL INACTIVITY INCLUDE THE FOLLOWING:</p> <ul style="list-style-type: none"> - FACILITATE ORGANIZATION RECRUITMENT AND ENGAGEMENT USING THE COLLECTIVE IMPACT MODEL AROUND IMPROVED NUTRITION, INCREASED PHYSICAL ACTIVITY AND TOBACCO CESSATION. - ORGANIZE WORKGROUPS AND DEVELOP PARTNER TOOLS FOR AUDIENCE ENGAGEMENT. - ENGAGE LOCAL ORGANIZATIONS TO RECRUIT LOW-INCOME FAMILIES TO PARTICIPATE. - FORM WORK GROUPS AROUND IDENTIFIED HEALTH NEEDS FOR REGION. - COMPOSITION OF WORK GROUPS TO INCLUDE IDENTIFIED BALL STATE UNIVERSITY STAKEHOLDERS AND OTHER RELEVANT COMMUNITY PARTNERS. - DEVELOP COLLABORATION PLAN TO SUPPORT/ENHANCE/EXPAND IU HEALTH BALL MEMORIAL HOSPITAL COMMUNITY HEALTH NEEDS ASSESSMENT STRATEGIES AROUND IDENTIFIED HEALTH NEEDS. <p>- SUPPORT COMMUNICATION, ORGANIZATION AND FACILITATION OF LOCAL COLLABORATION TO ADVANCE NEW FOOD POLICY, FOOD WASTE REDUCTION, AND FOOD ACCESS.</p> <p>- THE EAST CENTRAL INDIANA FOOD COUNCIL IS A VOLUNTEER-RUN ORGANIZATION LED BY LOCAL ACTIVISTS INTERESTED IN ADDRESSING COMMUNITY ISSUES AROUND FOOD ACCESS AND NUTRITION. IT RECEIVES SUPPORT FROM THE IU HEALTH-DRIVEN HEALTHY COMMUNITY ALLIANCE INITIATIVE. THE GROUP HAS STRATEGICALLY GROWN FROM A DELAWARE COUNTY FOCUS TO INCLUDE PARTICIPANTS FROM BLACKFORD AND JAY COUNTIES. THE COUNCIL IS COMPOSED OF MULTIPLE COMMUNITY COLLABORATORS REPRESENTING BALL STATE UNIVERSITY, THE MUNCIE FOOD HUB, IU HEALTH, PURDUE EXTENSION, SECOND HARVEST FOOD BANK, GRACE BAPTIST CHURCH, THE SOUP KITCHEN OF MUNCIE, BLOOD-N-FIRE MINISTRIES, COMMUNITY AND FAMILY SERVICES FOOD PANTRIES IN HARTFORD CITY, MONTPELIER AND PORTLAND AND THE CHILDREN'S BUREAU; AS WELL AS LOCAL FARMERS AND FARMERS MARKET ORGANIZERS. IN 2019 THE GROUP OFFERED GUIDANCE TO AREA SCHOOLS AND FARMERS REGARDING THE PROCESS OF BRINGING LOCAL FARM PRODUCTS TO SCHOOLS, WITH THE OUTCOME OF A NEW ONLINE RESOURCE FOR ACCESSING MANDATORY FORMS AND POLICIES AND CONNECTIONS MADE BETWEEN SCHOOLS AND FARMERS. IN RESPONSE TO COVID-19, THE GROUP HELD A SPECIAL PHILANTHROPY SESSION IN 2020 WHERE FUNDERS TALKED DIRECTLY WITH FOOD SUPPORT ORGANIZATIONS DIRECTLY ABOUT THEIR NEEDS. THE RESULT WAS THAT GROUPS RECEIVED FUNDING FOR INITIATIVES SUCH AS ADDITIONAL EQUIPMENT; AND THE MUNCIE FOOD HUB PARTNERED WITH IU HEALTH TO OFFER FREE PRODUCE FOR 15 WEEKS DELIVERED TO 10 DIFFERENT LOCATIONS IN DELAWARE, BLACKFORD AND JAY COUNTIES. SITES INCLUDED FOOD PANTRIES, CHILDCARE CENTERS, COMMUNITY CENTERS AND HEALTHCARE ORGANIZATIONS WHERE VULNERABLE POPULATIONS WERE ABLE TO BE REACHED.</p> <ul style="list-style-type: none"> - BUILD AND MAINTAIN HEALTHY COMMUNITY ALLIANCE (HCA) WEBSITE AND OTHER COMMUNICATION TOOLS TO SUPPORT PARTNER ENGAGEMENT.

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<p>SCHEDULE H, PART V, SECTION B, LINE 11 - HOW HOSPITAL FACILITY IS ADDRESSING NEEDS IDENTIFIED IN CHNA</p>	<p>FACILITY NAME: IU HEALTH BALL MEMORIAL HOSPITAL (CONT.)</p> <p>DESCRIPTION: - THE HEALTHY COMMUNITY ALLIANCE OF EAST CENTRAL INDIANA (HCA) CURRENTLY ENGAGES 149 COLLABORATING ORGANIZATIONS IN 3 ECR COUNTIES- DELAWARE, BLACKFORD AND JAY. IN 2019 AND 2020, 10 NEW PARTNERS WERE ADDED TO THE NETWORK- CROSSROADS FINANCIAL CREDIT UNION, JAY COUNTY DEVELOPMENT CORPORATION, JAY COUNTY DRUG PREVENTION COALITION, JAY COMMUNITY SCHOOLS, HOME HEALTH ANGELS, UNITED WAY OF JAY COUNTY, ALEXANDRIA CARE CENTER, JOHN JAY CENTER FOR LEARNING, UNITED DAY CARE CENTER OF DELAWARE COUNTY, COMMUNITY PARTNERS CHILDREN'S BUREAU. THE HCA MAKES MULTIPLE RESOURCES AVAILABLE TO COLLABORATORS, INCLUDING FACILITATED WORKGROUP SESSIONS IN EACH COUNTY, MATERIALS SUCH AS TOBACCO CESSATION TOOLKITS AND HEALTHY LIFESTYLE TOOLKITS; AND ONLINE RESOURCES SUCH A E-NEWSLETTER, MEDIA MESSAGING AND ACCESS TO COMMUNITY HEALTH DATA FOR EACH OF THE THREE COUNTIES. THESE RESOURCES ARE PROVIDED TO ALL COLLABORATING ORGANIZATIONS FREE OF CHARGE. IN 2020 THE HCA BEGAN OFFERING WEBINAR PROGRAMMING AS A WAY TO ENGAGE PARTNERS IN ACCESSING RESOURCES AND PROGRAMMING IN ALL THREE COUNTIES. THE CDC CHANGE TOOL SURVEY PROCESS WAS CONDUCTED IN BOTH DELAWARE AND JAY COUNTIES IN 2020 BY HCA PARTNER ORGANIZATIONS WITH HCA PARTNER SUPPORT. IN BLACKFORD COUNTY, HCA EFFORTS LED TO PROGRAMMING AND CURRICULUM CHANGES AT THE BLACKFORD COMMUNITY SCHOOL SYSTEM. A 2019 SURVEY FOUND THAT 105 OF HCA PARTNER ORGANIZATIONS ARE CURRENTLY UTILIZING AT LEAST ONE OF THESE PROVIDED RESOURCES TO INFLUENCE CHANGE AMONGST THEIR AUDIENCES. THE HEALTHY COMMUNITY ALLIANCE IS ORGANIZED AND FACILITATED BY IU HEALTH EAST CENTRAL REGION HOSPITALS AND RECEIVES RESOURCES FROM IU HEALTH BALL MEMORIAL HOSPITAL FOR PARTNER MATERIALS AND SUPPORT.</p> <p>PROVIDE OPPORTUNITIES FOR FAMILIES TO LEARN ABOUT NUTRITION VALUE OF FRESH PRODUCE, PHYSICAL ACTIVITY AND TOBACCO CESSATION.</p> <p>- IN 2019 A COMPREHENSIVE 3-YEAR PLAN OF ENGAGEMENT WITH THE 8TWELVE COALITION WAS DEVELOPED IN THE FORM OF A GRANT APPLICATION FOR THE IU HEALTH COMMUNITY IMPACT FUND. \$1M WAS AWARDED TO MAKE IMPROVEMENTS IN THE THOMAS-AVONDALE NEIGHBORHOOD RELATED TO FOOD ACCESS, PHYSICAL ACTIVITY AND BLIGHTED HOUSING IMPROVEMENTS IN THE AREA. IN 2020 SIGNIFICANT PROGRESS WAS MADE: OLD FACTORY PARKING LOT SURFACES WERE REMOVED TO MAKE WAY FOR NEW SOCCER FIELDS AT THE ROSS COMMUNITY CENTER; A SIDEWALK INVENTORY WAS COMPLETED; PEDESTRIAN TRAFFIC COUNTERS WERE PUT IN OPERATION; AND PLANNING FOR NEW PANTRY SPACES AND AN ENCLOSED COMMUNITY GARDEN SPACE WAS STARTED. ADDITIONALLY, PLACEMAKING DEVELOPMENT SUPPORT HAS BROUGHT A NEW COFFEE SHOP AND COMMUNITY GATHERING SPACES INTO A FORMERLY BLIGHTED AREA, SETTING THE STAGE FOR ADDITIONAL DEVELOPMENT IN 2021. COMMUNITY MEMBERS NOW HAVE ACCESS TO EXPANDED SPORTS PROGRAMING AT THE ROSS COMMUNITY CENTER, EXPANDED HEALTHY FOOD PANTRY OFFERINGS, AND A NEW NEIGHBOR-OWNED AND OPERATED COFFEE SHOP IN A FOOD DESERT AREA.</p> <p>- OFFER IU HEALTH BUCKS TO PARTICIPANTS SO THEY MAY FULLY ENGAGE IN FARMERS' MARKET EXPERIENCE.</p> <p>-IU HEALTH OFFERS THE FAMILIES AT THE FARMERS MARKET IN MUNCIE AND HARTFORD CITY EACH YEAR. COLLABORATORS - MINNETRISTA, WHITELY COMM. COUNCIL, ROSS CENTER, MINORITY HEALTH COALITION, IVY TECH, BOYS/GIRLS CLUB, BULEY CENTER, OPEN DOOR HEALTH SERVICES, SALVATION ARMY, YWCA OF ECI, YMCA/APPLETREE, YOUTH OPPORTUNITY CENTER, HILLCROFT, SPANGLER FARMS, NORTHERN TROPICS GREENHOUSE AND IU HEALTH BALL HOSPITAL. BLACKFORD COUNTY: CHILDREN AND FAMILY SERVICES OF BLACKFORD COUNTY /WIC, GRACE UNITED METHODIST CHURCH, GROWERS AND MAKERS MARKET, COMMON GROUNDS COFFEE SHOP, BLACKFORD COUNTY PUBLIC LIBRARY, PURDUE EXTENSION, AND IU HEALTH BLACKFORD HOSPITAL.</p> <p>-IN 2020, THE PROGRAM'S IN-PERSON SESSIONS WERE ELIMINATED DUE TO COVID-19 PRECAUTIONS. 68 FAMILIES IN MUNCIE AND 29 FAMILIES IN HARTFORD CITY RECEIVED A HEALTHY EATING PACKET WITH COUPONS REDEEMABLE AT LOCAL FARMERS MARKETS AND FARM STANDS. HEAD START JOINED THE COLLABORATION AND FACILITATED CONNECTIONS WITH FAMILIES IN BLACKFORD COUNTY. 67% OF SURVEY PARTICIPANTS STATED THEY UTILIZE FRESH FRUITS/VEGETABLES AT "MOST MEALS" AFTER COMPLETING THE PROGRAM; 100% OF RESPONDENTS STATED THEY "LEARNED A LOT"; AND REPORTED THEY USED THE FARMERS MARKET "2 OR MORE TIMES." COUPON REDEMPTION RATES WERE SLIGHTLY MORE THAN 50% EACH YEAR.</p> <p>- COLLABORATE WITH BALL STATE UNIVERSITY REGARDING HEALTH IMPROVEMENT INITIATIVES AT MUNCIE COMMUNITY SCHOOLS.</p> <p>- A COLLABORATION WITH BALL STATE UNIVERSITY HAS BEEN ESTABLISHED DEVELOP AND IMPLEMENT IN-SCHOOL PHYSICAL ACTIVITY AND NUTRITIONAL EDUCATION CURRICULUMS AT THE ELEMENTARY-SCHOOL LEVEL IN THE MUNCIE COMMUNITY SCHOOLS. THE PRIMARY TASKS COMPLETED IN YEAR 1 (2020) INCLUDED THE ASSEMBLY OF TEAM MEMBERS AND DEVELOPMENT OF A PHYSICAL ACTIVITY AND NUTRITION EDUCATION CURRICULUM INCLUDING ASSESSMENT PROCEDURES (AND PURCHASING OF EDUCATIONAL MATERIALS). AN INITIAL 6-WEEK PILOT PROGRAM AT SOUTHVIEW ELEMENTARY SCHOOL IN MUNCIE, DELIVERED VIA GOOGLE CLASSROOM WAS INITIATED WITH PHYSICAL ACTIVITY AND NUTRITION COMPONENTS. A TEACHER SURVEY WAS ADMINISTERED AND REPORTED 66% OF TEACHERS UTILIZED THE "BRAIN BREAK" ACTIVITY AND 75% FELT THE NUTRITION LESSONS WERE GRADE APPROPRIATE. BARRIERS WERE IDENTIFIED AND WILL INFORM OPERATIONS IN YEAR 2 (2021) OF THE PROGRAM.</p> <p>SMOKING AND TOBACCO USAGE</p> <p>IU HEALTH BALL MEMORIAL HOSPITAL'S IMPLEMENTATION STRATEGY TO ADDRESS THE IDENTIFIED NEED OF SMOKING AND TOBACCO USAGE INCLUDE THE FOLLOWING:</p> <p>- FACILITATE ORGANIZATION RECRUITMENT AND ENGAGEMENT USING THE COLLECTIVE IMPACT MODEL AROUND IMPROVED NUTRITION, INCREASED PHYSICAL ACTIVITY AND TOBACCO CESSATION. - ORGANIZE WORKGROUPS AND DEVELOP PARTNER TOOLS FOR AUDIENCE ENGAGEMENT. - ENGAGE LOCAL ORGANIZATIONS TO RECRUIT LOW-INCOME FAMILIES TO PARTICIPATE. - FORM WORK GROUPS AROUND IDENTIFIED HEALTH NEEDS FOR REGION. - COMPOSITION OF WORK GROUPS TO INCLUDE IDENTIFIED BALL STATE UNIVERSITY STAKEHOLDERS AND</p>

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	<p>OTHER RELEVANT COMMUNITY PARTNERS.</p> <ul style="list-style-type: none"> - DEVELOP COLLABORATION PLAN TO SUPPORT/ENHANCE/EXPAND IU HEALTH BALL MEMORIAL HOSPITAL COMMUNITY HEALTH NEEDS ASSESSMENT STRATEGIES AROUND IDENTIFIED HEALTH NEEDS. - BUILD AND MAINTAIN HEALTHY COMMUNITY ALLIANCE (HCA) WEBSITE AND OTHER COMMUNICATION TOOLS TO SUPPORT PARTNER ENGAGEMENT. - THE HEALTHY COMMUNITY ALLIANCE OF EAST CENTRAL INDIANA (HCA) CURRENTLY ENGAGES 149 COLLABORATING ORGANIZATIONS IN 3 ECR COUNTIES- DELAWARE, BLACKFORD AND JAY. IN 2019 AND 2020, 10 NEW PARTNERS WERE ADDED TO THE NETWORK- CROSSROADS FINANCIAL CREDIT UNION, JAY COUNTY DEVELOPMENT CORPORATION, JAY COUNTY DRUG PREVENTION COALITION, JAY COMMUNITY SCHOOLS, HOME HEALTH ANGELS, UNITED WAY OF JAY COUNTY, ALEXANDRIA CARE CENTER, JOHN JAY CENTER FOR LEARNING, UNITED DAY CARE CENTER OF DELAWARE COUNTY, COMMUNITY PARTNERS CHILDREN'S BUREAU. THE HCA MAKES MULTIPLE RESOURCES AVAILABLE TO COLLABORATORS, INCLUDING FACILITATED WORKGROUP SESSIONS IN EACH COUNTY, MATERIALS SUCH AS TOBACCO CESSATION TOOLKITS AND HEALTHY LIFESTYLE TOOLKITS; AND ONLINE RESOURCES SUCH A E-NEWSLETTER, MEDIA MESSAGING AND ACCESS TO COMMUNITY HEALTH DATA FOR EACH OF THE THREE COUNTIES. THESE RESOURCES ARE PROVIDED TO ALL COLLABORATING ORGANIZATIONS FREE OF CHARGE. IN 2020 THE HCA BEGAN OFFERING WEBINAR PROGRAMMING AS A WAY TO ENGAGE PARTNERS IN ACCESSING RESOURCES AND PROGRAMMING IN ALL THREE COUNTIES. THE CDC CHANGE TOOL SURVEY PROCESS WAS CONDUCTED IN BOTH DELAWARE AND JAY COUNTIES IN 2020 BY HCA PARTNER ORGANIZATIONS WITH HCA PARTNER SUPPORT. IN BLACKFORD COUNTY, HCA EFFORTS LED TO PROGRAMMING AND CURRICULUM CHANGES AT THE BLACKFORD COMMUNITY SCHOOL SYSTEM. A 2019 SURVEY FOUND THAT 105 OF HCA PARTNER ORGANIZATIONS ARE CURRENTLY UTILIZING AT LEAST ONE OF THESE PROVIDED RESOURCES TO INFLUENCE CHANGE AMONGST THEIR AUDIENCES. <p>THE HEALTHY COMMUNITY ALLIANCE IS ORGANIZED AND FACILITATED BY IU HEALTH EAST CENTRAL REGION HOSPITALS AND RECEIVES RESOURCES FROM IU HEALTH BALL MEMORIAL HOSPITAL FOR PARTNER MATERIALS AND SUPPORT.</p>

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THE COUNCIL IS COMPOSED OF MULTIPLE COMMUNITY COLLABORATORS REPRESENTING BALL STATE UNIVERSITY, THE MUNCIE FOOD HUB, IU HEALTH, PURDUE EXTENSION, SECOND HARVEST FOOD BANK, GRACE BAPTIST CHURCH, THE SOUP KITCHEN OF MUNCIE, BLOOD-N-FIRE MINISTRIES, COMMUNITY AND FAMILY SERVICES FOOD PANTRIES IN HARTFORD CITY, MONTPELIER AND PORTLAND AND THE CHILDREN'S BUREAU; AS WELL AS LOCAL FARMERS AND FARMERS MARKET ORGANIZERS. IN 2019 THE GROUP OFFERED GUIDANCE TO AREA SCHOOLS AND FARMERS REGARDING THE PROCESS OF BRINGING LOCAL FARM PRODUCTS TO SCHOOLS, WITH THE OUTCOME OF A NEW ONLINE RESOURCE FOR ACCESSING MANDATORY FORMS AND POLICIES AND CONNECTIONS MADE BETWEEN SCHOOLS AND FARMERS. IN RESPONSE TO COVID-19, THE GROUP HELD A SPECIAL PHILANTHROPY SESSION IN 2020 WHERE FUNDERS TALKED DIRECTLY WITH FOOD SUPPORT ORGANIZATIONS DIRECTLY ABOUT THEIR NEEDS. THE RESULT WAS THAT GROUPS RECEIVED FUNDING FOR INITIATIVES SUCH AS ADDITIONAL EQUIPMENT; AND THE MUNCIE FOOD HUB PARTNERED WITH IU HEALTH TO OFFER FREE PRODUCE FOR 15 WEEKS DELIVERED TO 10 DIFFERENT LOCATIONS IN DELAWARE, BLACKFORD AND JAY COUNTIES. SITES INCLUDED FOOD PANTRIES, CHILDCARE CENTERS, COMMUNITY CENTERS AND HEALTHCARE ORGANIZATIONS WHERE VULNERABLE POPULATIONS WERE ABLE TO BE REACHED.</p> <p>- OFFER IU HEALTH BUCKS TO PARTICIPANTS SO THEY MAY FULLY ENGAGE IN FARMERS' MARKET EXPERIENCE.</p> <p>-IU HEALTH OFFERS THE FAMILIES AT THE FARMERS MARKET IN MUNCIE AND HARTFORD CITY EACH YEAR. COLLABORATORS - MINNETRISTA, WHITELY COMM. COUNCIL, ROSS CENTER, MINORITY HEALTH COALITION, IVY TECH, BOYS/GIRLS CLUB, BULEY CENTER, OPEN DOOR HEALTH SERVICES, SALVATION ARMY, YWCA OF ECI, YMCA/APPLETREE, YOUTH OPPORTUNITY CENTER, HILLCROFT, SPANGLER FARMS, NORTHERN TROPICS GREENHOUSE AND IU HEALTH BALL HOSPITAL. BLACKFORD COUNTY: CHILDREN AND FAMILY SERVICES OF BLACKFORD COUNTY /WIC, GRACE UNITED METHODIST CHURCH, GROWERS AND MAKERS MARKET, COMMON GROUNDS COFFEE SHOP, BLACKFORD COUNTY PUBLIC LIBRARY, PURDUE EXTENSION, AND IU HEALTH BLACKFORD HOSPITAL.</p> <p>-IN 2020, THE PROGRAM'S IN-PERSON SESSIONS WERE ELIMINATED DUE TO COVID-19 PRECAUTIONS. 68 FAMILIES IN MUNCIE AND 29 FAMILIES IN HARTFORD CITY RECEIVED A HEALTHY EATING PACKET WITH COUPONS REDEEMABLE AT LOCAL FARMERS MARKETS AND FARM STANDS. HEAD START JOINED THE COLLABORATION AND FACILITATED CONNECTIONS WITH FAMILIES IN BLACKFORD COUNTY. 67% OF SURVEY PARTICIPANTS STATED THEY UTILIZE FRESH FRUITS/VEGETABLES AT "MOST MEALS" AFTER COMPLETING THE PROGRAM; 100% OF RESPONDENTS STATED THEY "LEARNED A LOT"; AND REPORTED THEY USED THE FARMERS MARKET "2 OR MORE TIMES." COUPON REDEMPTION RATES WERE SLIGHTLY MORE THAN 50% EACH YEAR.</p> <p>- EDUCATE STAFF REGARDING "ASK, ADVISE, REFER" PROCESS TO REFER PATIENTS AND FAMILY MEMBERS TO THE INDIANA TOBACCO QUITLINE.</p> <p>- IN 2020, NUMBERS DECLINED IN THE FACE OF THE PANDEMIC. THE INDIANA TOBACCO QUIT LINE RECEIVED 152 REFERRALS; 103 FROM DELAWARE COUNTY, 20 FROM BLACKFORD, AND 29 FROM JAY. A PROCESS IS NOT CURRENTLY IN PLACE TO DETERMINE THE SOURCE OF REFERRALS.</p> <p>- PROVIDE PERINATAL COORDINATOR TO FACILITATE AND COLLABORATE WITHIN THE HOSPITAL AND WITH OUTSIDE PHYSICIAN OFFICES AND COMMUNITY AGENCIES TO ENHANCE EFFORTS TO DECREASE INFANT MORTALITY IN THE IU HEALTH EAST CENTRAL REGION.</p> <p>- IN 2019 AND 2020 THE IU HEALTH ECR PERINATAL COORDINATOR FACILITATED THE DEVELOPMENT OF 36 COLLABORATORS TO ENHANCE EFFORTS TO DECREASE INFANT MORTALITY AND IMPROVE THE HEALTH OF NEWBORNS AND WOMEN. ACCESS TO COMMUNITY RESOURCES HAS INCREASED DUE TO ECR EFFORTS THAT INCLUDE: PROMOTION OF BABY AND ME TOBACCO FREE PROGRAM; IMPLEMENTATION OF A TOBACCO TREATMENT PILOT PROGRAM IN 5 ECR PHYSICIAN OFFICE SETTINGS DESIGNED TO PROVIDE CLIENT CONSULTATIONS AND REFERRALS TO 1-800 QUIT NOW, BABY AND ME TOBACCO FREE PROGRAM, AND PHARMACOTHERAPY OPTIONS. IN 2020 IUH JAY RECEIVED AN ISDH OB NAVIGATION GRANT WHICH HAS PROVIDED FOR OB NAVIGATION FOR CLIENTS IN JAY BLACKFORD CO. INITIATED TO PROVIDE CONTINUUM OF CARE THROUGHOUT PREGNANCY. PHYSICIAN PRACTICES IN THE REGION RECEIVED SAFE SLEEP EDUCATION AND RESOURCES, AND A PARTNERSHIP WITH IU HEALTH BALL LACTATION SERVICES RESULTED IN THE DEVELOPMENT OF TELEMEDICINE LACTATION SERVICES AT IU HEALTH JAY HOSPITAL. IMPROVED OB CARE WAS ADDRESSED WITH POST-PARTUM HEMORRHAGE AND OB HYPERTENSION INITIATIVES, PLUS ACCESS TO CARE THROUGH EMERGENCY ROOM VISITS AND LABOR AND DELIVERY COLLABORATION.</p> <p>INTERNALLY AT IU HEALTH BALL HOSPITAL, AN INTRAPROFESSIONAL MODEL OF CARE FOR NICU ROUNDS WITH DISCHARGE PLANNING WAS DEVELOPED TO DECREASE LOS & BARRIERS TO DISCHARGE; THE ECR FETAL CARE TEAM WAS INITIATED TO IMPROVE CONSULTATION AND SUPPORT PROVIDED TO PARENTS RECEIVING DIAGNOSIS OF LETHAL ANOMALY FOR THEIR BABY. VIRTUAL VIDEO TOURS WERE DEVELOPED FOR EXPECTANT PARENTS; MUSIC THERAPY WAS INITIATED IN THE NICU FOR INFANTS WITH NEONATAL ABSTINENCE SYNDROME. INTERNAL COLLABORATORS INCLUDE 17 DEPARTMENTS AT IU HEALTH BALL MEMORIAL HOSPITAL RANGING FROM MEDICAL UNITS TO ANCILLARY SERVICES SUCH AS MARKETING. IN 2020 A NEW COLLABORATION WAS INITIATED WITH IUH BALL MATERNAL FETAL HEALTH, NEONATOLOGY, PALLIATIVE CARE AND NURSING LEADERSHIP TO DEVELOP AND INITIATE ECR FETAL CARE TEAM WITH A FOCUS ON IMPROVING CONSULTATION AND SUPPORT PROVIDED TO PARENTS RECEIVING DIAGNOSIS OF LETHAL ANOMALY FOR THEIR BABY.</p> <p>IU HEALTH JAY SUBMITTED AND RECEIVED AN ISDH GRANT WHICH SUPPORTS A NEW OB NAVIGATION PROGRAM CALLED HEALTHY BEGINNINGS. LAUNCHED IN 2020, THE HEALTHY BEGINNINGS PROGRAM IS A COMPREHENSIVE WOMEN'S HEALTH MODEL THAT FOCUSES ON ACCESS TO CARE AND IMPROVING MATERNAL/INFANT HEALTH OUTCOMES BY UTILIZING CARE COORDINATION, OUTPATIENT SERVICES, AND</p>

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	<p>COMMUNITY COLLABORATION. THE GOAL OF THE PROGRAM IS TO KEEP PRENATAL AND POSTNATAL CARE LOCAL TO PREGNANT WOMEN IN THEIR OWN COMMUNITIES WITH DELIVERY OCCURRING AT IUH BALL MEMORIAL HOSPITAL.</p> <p>RELATIONSHIPS WERE ESTABLISHED WITH THE ECR COMMUNITY OUTREACH DEPARTMENT, AND THE IU HEALTH SYSTEM TOBACCO COLLABORATIVE. EXTERNALLY, COLLABORATIONS WERE DEVELOPED WITH THE TOBACCO FREE DELAWARE COUNTY COALITION, OPEN DOOR HEALTH SERVICES, BABY AND ME TOBACCO FREE PROGRAM, INDIANA STATE DEPARTMENT OF HEALTH (ISDH), INDIANA PERINATAL QUALITY IMPROVEMENT COLLABORATION (IPQIC), AND MERIDIAN HEALTH SERVICES PROGRAMS FOR MATERNAL TREATMENT, PEDIATRIC REHABILITATION AND PHYSICIAN PRACTICES.</p> <p>COLLABORATE WITH BALL STATE UNIVERSITY REGARDING HEALTH IMPROVEMENT INITIATIVES AT MUNCIE COMMUNITY SCHOOLS.</p> <p>- A COLLABORATION WITH BALL STATE UNIVERSITY HAS BEEN ESTABLISHED DEVELOP AND IMPLEMENT IN-SCHOOL PHYSICAL ACTIVITY AND NUTRITIONAL EDUCATION CURRICULUMS AT THE ELEMENTARY-SCHOOL LEVEL IN THE MUNCIE COMMUNITY SCHOOLS. THE PRIMARY TASKS COMPLETED IN YEAR 1 (2020) INCLUDED THE ASSEMBLY OF TEAM MEMBERS AND DEVELOPMENT OF A PHYSICAL ACTIVITY AND NUTRITION EDUCATION CURRICULUM INCLUDING ASSESSMENT PROCEDURES (AND PURCHASING OF EDUCATIONAL MATERIALS). AN INITIAL 6-WEEK PILOT PROGRAM AT SOUTHVIEW ELEMENTARY SCHOOL IN MUNCIE, DELIVERED VIA GOOGLE CLASSROOM WAS INITIATED WITH PHYSICAL ACTIVITY AND NUTRITION COMPONENTS. A TEACHER SURVEY WAS ADMINISTERED AND REPORTED 66% OF TEACHERS UTILIZED THE "BRAIN BREAK" ACTIVITY AND 75% FELT THE NUTRITION LESSONS WERE GRADE APPROPRIATE. BARRIERS WERE IDENTIFIED AND WILL INFORM OPERATIONS IN YEAR 2 (2021) OF THE PROGRAM.</p>

Return Reference - Identifier	Explanation
<p>SCHEDULE H, PART V, SECTION B, LINE 11 - HOW HOSPITAL FACILITY IS ADDRESSING NEEDS IDENTIFIED IN CHNA</p>	<p>FACILITY NAME: IU HEALTH BALL MEMORIAL HOSPITAL</p> <p>DESCRIPTION: SOCIAL DETERMINANTS OF HEALTH</p> <p>IU HEALTH BALL MEMORIAL HOSPITAL'S IMPLEMENTATION STRATEGY TO ADDRESS THE IDENTIFIED NEED OF SOCIAL DETERMINANTS OF HEALTH INCLUDE THE FOLLOWING:</p> <ul style="list-style-type: none"> - OFFER COUPONS TO THOSE EXPERIENCING HOMELESSNESS AND LOW-INCOME AUDIENCES IN CONJUNCTION WITH LOCAL FOOD PANTRY PROGRAM. - INVESTIGATE POTENTIAL PARTNERSHIP LEVELS AND INVESTMENTS WITH COMMUNITY-BUILDING ACTIVITIES RELATED TO FOOD ACCESS, HOUSING, AND EMPLOYMENT FOR UNDERSERVED AUDIENCES. - FORM WORK GROUPS AROUND IDENTIFIED HEALTH NEEDS FOR REGION. - COMPOSITION OF WORK GROUPS TO INCLUDE IDENTIFIED BALL STATE UNIVERSITY STAKEHOLDERS AND OTHER RELEVANT COMMUNITY PARTNERS. - DEVELOP COLLABORATION PLAN TO SUPPORT/ENHANCE/EXPAND IU HEALTH BALL MEMORIAL HOSPITAL COMMUNITY HEALTH NEEDS ASSESSMENT STRATEGIES AROUND IDENTIFIED HEALTH NEEDS. - COLLABORATE WITH LOCAL LAUNDROMAT TO OFFER COUPON PROGRAM. <p>-IU HEALTH BALL MEMORIAL HOSPITAL COLLABORATES WITH MEMBERS OF THE HEALTHY COMMUNITY ALLIANCE OF EAST CENTRAL INDIANA TO DISTRIBUTE \$20 LAUNDRY COUPONS TO LIMITED RESOURCE AUDIENCES IN DELAWARE COUNTY. THE COUPONS ARE DISTRIBUTED BY THE "COMMUNITY BASKET," A MINISTRY OF THE JAR COMMUNITY CHURCH. BEST DESCRIBED AS A 'NON-FOOD' FOOD BANK, THE COMMUNITY BASKET'S GOAL IS TO PROVIDE MEMBERS OF OUR COMMUNITY WHO ARE IN NEED WITH FIVE HYGIENE, CLEANING AND PAPER ITEMS PER VISIT. THESE ARE ITEMS THAT ARE NOT PROVIDED THROUGH SNAP BENEFITS. IN 2019 670 IU HEALTH-FUNDED LAUNDRY COUPONS WERE DISTRIBUTED AND 492 WERE REDEEMED. INTERNAL COLLABORATORS ARE IU HEALTH BALL MEMORIAL HOSPITAL COMMUNITY OUTREACH AND IU HEALTH BALL MEMORIAL HOSPITAL MEDICAL STAFF. EXTERNAL COLLABORATORS ARE THE JAR COMMUNITY CHURCH AND THE WHITE SPOT LAUNDRY. IN 2020, 500 WERE DISTRIBUTED AND 210 WERE REDEEMED.</p> <p>- SUPPORT COMMUNICATION, ORGANIZATION AND FACILITATION OF LOCAL COLLABORATION TO ADVANCE NEW FOOD POLICY, FOOD WASTE REDUCTION, AND FOOD ACCESS.</p> <p>-THE EAST CENTRAL INDIANA FOOD COUNCIL IS A VOLUNTEER-RUN ORGANIZATION LED BY LOCAL ACTIVISTS INTERESTED IN ADDRESSING COMMUNITY ISSUES AROUND FOOD ACCESS AND NUTRITION. IT RECEIVES SUPPORT FROM THE IU HEALTH-DRIVEN HEALTHY COMMUNITY ALLIANCE INITIATIVE. THE GROUP HAS STRATEGICALLY GROWN FROM A DELAWARE COUNTY FOCUS TO INCLUDE PARTICIPANTS FROM BLACKFORD AND JAY COUNTIES. THE COUNCIL IS COMPOSED OF MULTIPLE COMMUNITY COLLABORATORS REPRESENTING BALL STATE UNIVERSITY, THE MUNCIE FOOD HUB, IU HEALTH, PURDUE EXTENSION, SECOND HARVEST FOOD BANK, GRACE BAPTIST CHURCH, THE SOUP KITCHEN OF MUNCIE, BLOOD-N-FIRE MINISTRIES, COMMUNITY AND FAMILY SERVICES FOOD PANTRIES IN HARTFORD CITY, MONTEPELIER AND PORTLAND AND THE CHILDREN'S BUREAU; AS WELL AS LOCAL FARMERS AND FARMERS MARKET ORGANIZERS. IN 2019 THE GROUP OFFERED GUIDANCE TO AREA SCHOOLS AND FARMERS REGARDING THE PROCESS OF BRINGING LOCAL FARM PRODUCTS TO SCHOOLS, WITH THE OUTCOME OF A NEW ONLINE RESOURCE FOR ACCESSING MANDATORY FORMS AND POLICIES AND CONNECTIONS MADE BETWEEN SCHOOLS AND FARMERS. IN RESPONSE TO COVID-19, THE GROUP HELD A SPECIAL PHILANTHROPY SESSION IN 2020 WHERE FUNDERS TALKED DIRECTLY WITH FOOD SUPPORT ORGANIZATIONS DIRECTLY ABOUT THEIR NEEDS. THE RESULT WAS THAT GROUPS RECEIVED FUNDING FOR INITIATIVES SUCH AS ADDITIONAL EQUIPMENT; AND THE MUNCIE FOOD HUB PARTNERED WITH IU HEALTH TO OFFER FREE PRODUCE FOR 15 WEEKS DELIVERED TO 10 DIFFERENT LOCATIONS IN DELAWARE, BLACKFORD AND JAY COUNTIES. SITES INCLUDED FOOD PANTRIES, CHILDCARE CENTERS, COMMUNITY CENTERS AND HEALTHCARE ORGANIZATIONS WHERE VULNERABLE POPULATIONS WERE ABLE TO BE REACHED.</p> <p>- COLLABORATE WITH BALL STATE UNIVERSITY REGARDING HEALTH IMPROVEMENT INITIATIVES AT MUNCIE COMMUNITY SCHOOLS.</p> <p>- A COLLABORATION WITH BALL STATE UNIVERSITY HAS BEEN ESTABLISHED DEVELOP AND IMPLEMENT IN-SCHOOL PHYSICAL ACTIVITY AND NUTRITIONAL EDUCATION CURRICULUMS AT THE ELEMENTARY-SCHOOL LEVEL IN THE MUNCIE COMMUNITY SCHOOLS. THE PRIMARY TASKS COMPLETED IN YEAR 1 (2020) INCLUDED THE ASSEMBLY OF TEAM MEMBERS AND DEVELOPMENT OF A PHYSICAL ACTIVITY AND NUTRITION EDUCATION CURRICULUM INCLUDING ASSESSMENT PROCEDURES (AND PURCHASING OF EDUCATIONAL MATERIALS). AN INITIAL 6-WEEK PILOT PROGRAM AT SOUTHVIEW ELEMENTARY SCHOOL IN MUNCIE, DELIVERED VIA GOOGLE CLASSROOM WAS INITIATED WITH PHYSICAL ACTIVITY AND NUTRITION COMPONENTS. A TEACHER SURVEY WAS ADMINISTERED AND REPORTED 66% OF TEACHERS UTILIZED THE "BRAIN BREAK" ACTIVITY AND 75% FELT THE NUTRITION LESSONS WERE GRADE APPROPRIATE. BARRIERS WERE IDENTIFIED AND WILL INFORM OPERATIONS IN YEAR 2 (2021) OF THE PROGRAM.</p> <p>IU HEALTH BALL MEMORIAL HOSPITAL WILL ADDRESS ALL COMMUNITY HEALTH NEEDS BASED ON THEIR 2018 COMMUNITY HEALTH NEEDS ASSESSMENT. THERE WERE NO IDENTIFIED NEEDS THAT WILL NOT BE ADDRESSED.</p>
<p>SCHEDULE H, PART V, SECTION B, LINE 13B - ELIGIBILITY FOR DISCOUNTED CARE</p>	<p>FACILITY NAME: IU HEALTH BALL MEMORIAL HOSPITAL</p> <p>DESCRIPTION: IN ADDITION TO FPG, IU HEALTH BALL MEMORIAL HOSPITAL MAY TAKE INTO CONSIDERATION A PATIENT'S INCOME AND/OR ABILITY TO PAY IN CALCULATION OF A FINANCIAL ASSISTANCE AWARD.</p>

Return Reference - Identifier	Explanation
<p>SCHEDULE H, PART V, SECTION B, LINE 13H - OTHER ELIGIBILITY CRITERIA FOR FINANCIAL ASSISTANCE</p>	<p>FACILITY NAME: IU HEALTH BALL MEMORIAL HOSPITAL</p> <p>DESCRIPTION: IU HEALTH BALL MEMORIAL HOSPITAL TAKES INTO CONSIDERATION SEVERAL OTHER FACTORS IN DETERMINING PATIENT ELIGIBILITY FOR FINANCIAL ASSISTANCE. THESE FACTORS INCLUDE THE FOLLOWING:</p> <p>1. ELIGIBILITY FOR FINANCIAL ASSISTANCE DUE TO FINANCIAL OR PERSONAL HARDSHIP</p> <p>IN ORDER TO BE ELIGIBLE FOR FINANCIAL ASSISTANCE DUE TO FINANCIAL OR PERSONAL HARDSHIP UNDER THIS POLICY, A PATIENT OR GUARANTOR MUST: - SUBMIT A COMPLETED FINANCIAL ASSISTANCE APPLICATION WITH ALL SUPPORTING DOCUMENTATION AND BE APPROVED IN ACCORDANCE WITH THIS POLICY; - BE AN INDIANA RESIDENT AS DEFINED IN THIS POLICY; AND - IF UNINSURED, CONSULT WITH A MEMBER OF IU HEALTH'S INDIVIDUAL SOLUTIONS DEPARTMENT TO DETERMINE IF HEALTH CARE COVERAGE MAY BE OBTAINED FROM A GOVERNMENT INSURANCE OR ASSISTANCE PRODUCT, THE HEALTH INSURANCE MARKETPLACE, OR FROM ANY OTHER SOURCE OF COVERAGE.</p> <p>FINANCIAL ASSISTANCE DUE TO FINANCIAL HARDSHIP IS ONLY AVAILABLE FOR ENCOUNTERS WHERE CARE WAS INITIATED VIA AN ELIGIBLE FACILITY'S EMERGENCY DEPARTMENT, DIRECT ADMISSION FROM A PHYSICIAN'S OFFICE, OR TRANSFER FROM ANOTHER HOSPITAL FACILITY.</p> <p>2. FINANCIAL ASSISTANCE DUE TO FINANCIAL HARDSHIP</p> <p>THE FPL INCOME THRESHOLD UNDER THIS SECTION IS AS FOLLOWS: -IF ONE OR MORE ADULTS AND ZERO DEPENDENTS ARE IN THE HOUSEHOLD, THE FPL INCOME THRESHOLD IS 200%. -IF TWO OR MORE ADULTS AND ONE OR MORE DEPENDENTS ARE IN THE HOUSEHOLD, THE FPL INCOME THRESHOLD IS 250%. -IF ONE ADULT AND ONE OR MORE DEPENDENTS ARE IN THE HOUSEHOLD, THE FPL INCOME THRESHOLD IS 300%.</p> <p>IN SOME INSTANCES, AN ADULT WILL ALSO QUALIFY AS A DEPENDENT. WHEN THIS OCCURS, IU HEALTH WILL TREAT THE ADULT AS A DEPENDENT FOR PURPOSES OF THE FPL CALCULATION.</p> <p>IU HEALTH WILL UTILIZE THE MOST RECENT FPL DATA AVAILABLE AND WILL APPLY THE FPL DATA TO A PATIENT OR GUARANTOR'S ACCOUNT BALANCE BASED UPON THE CALENDAR DATE A COMPLETED FINANCIAL ASSISTANCE APPLICATION WAS RECEIVED, NOT A PATIENT'S DATE OF SERVICE.</p> <p>AN UNINSURED PATIENT OR THEIR GUARANTOR WHOSE HOUSEHOLD INCOME IS LESS THAN OR EQUAL TO THE FPL INCOME THRESHOLD MAY BE ELIGIBLE FOR FULL FINANCIAL ASSISTANCE UP TO 100% OF GROSS CHARGES IF APPROVED.</p> <p>AN UNDERINSURED PATIENT OR THEIR GUARANTOR WHOSE HOUSEHOLD INCOME IS LESS THAN OR EQUAL TO THE FPL INCOME THRESHOLD MAY BE ELIGIBLE FOR FULL FINANCIAL ASSISTANCE UP TO 100% OF PATIENT RESPONSIBILITY IF APPROVED.</p> <p>3. FINANCIAL ASSISTANCE DUE TO PERSONAL HARDSHIP</p> <p>AN UNINSURED OR UNDERINSURED PATIENT OR THEIR GUARANTOR WHOSE HOUSEHOLD INCOME IS ABOVE THE FPL INCOME THRESHOLD MAY BE ELIGIBLE FOR FINANCIAL ASSISTANCE IF THE PATIENT'S OUTSTANDING PATIENT RESPONSIBILITY EXCEEDS 20% OF THE PATIENT'S OR THEIR GUARANTOR'S ANNUAL HOUSEHOLD INCOME. -IF APPROVED, THE PATIENT'S BALANCE WILL BE REDUCED TO 20% OF THE PATIENT OR GUARANTOR'S ANNUAL HOUSEHOLD INCOME OR THE AMOUNTS GENERALLY BILLED, WHICHEVER IS LESS. -IU HEALTH WILL WORK WITH THE PATIENT OR GUARANTOR TO IDENTIFY A REASONABLE PAYMENT PLAN ON THE REMAINDER OF THE BALANCE.</p> <p>4. ELIGIBILITY PERIOD</p> <p>IF APPROVED FOR FINANCIAL ASSISTANCE BY IU HEALTH, THE PATIENT WILL BE GUARANTEED FINANCIAL ASSISTANCE FOR TREATMENT RELATED TO THE UNDERLYING CONDITION, FOR WHICH THE PATIENT WAS ORIGINALLY SCREENED AND APPROVED, THROUGH THE REMAINDER OF THE CALENDAR YEAR.</p> <p>AS A CONDITION OF EXTENDING THE ON-GOING FINANCIAL ASSISTANCE, THE PATIENT MUST COMPLY WITH REQUESTS FROM IU HEALTH TO VERIFY THAT THE PATIENT CONTINUES TO MEET THE CONDITIONS FOR QUALIFICATION.</p> <p>5. APPEALS AND ASSISTANCE GRANTED BY THE FINANCIAL ASSISTANCE COMMITTEE</p> <p>THE FINANCIAL ASSISTANCE COMMITTEE WILL REVIEW AND MAKE DETERMINATIONS ON ALL REQUESTS FOR APPEALS RELATED TO FINANCIAL ASSISTANCE. IF A PATIENT OR GUARANTOR SEEKS TO APPEAL A FINANCIAL ASSISTANCE DETERMINATION, A WRITTEN REQUEST MUST BE SUBMITTED, ALONG WITH THE SUPPORTING DOCUMENTATION.</p> <p>THE FINANCIAL ASSISTANCE COMMITTEE WILL REVIEW REQUESTS FOR AND MAY GRANT ADDITIONAL FINANCIAL ASSISTANCE, INCLUDING BUT NOT LIMITED TO, THE FOLLOWING: -ASSISTANCE TO PATIENTS WHO ARE SEEKING TREATMENT THAT CAN ONLY BE PROVIDED IN INDIANA BY IU HEALTH OR WHO WOULD BENEFIT FROM CONTINUED MEDICAL SERVICES FROM IU HEALTH FOR CONTINUITY OF CARE; -CARE APPROVED BY THE IU HEALTH CHIEF MEDICAL OFFICER (CMO) OR THE CHIEF EXECUTIVE OFFICER (CEO) OR CMO OF AN IU HEALTH FACILITY OR REGION, INCLUDING MEDICALLY NECESSARY NON-ELECTIVE SERVICES FOR WHICH NO PAYMENT SOURCE CAN BE IDENTIFIED; -CARE PROVIDED WHEN IT IS KNOWN NO PAYMENT SOURCE EXISTS; -INTERNATIONAL HUMANITARIAN AID; AND -OTHER CARE IDENTIFIED BY THE FINANCIAL ASSISTANCE COMMITTEE THAT FULFILLS THE IU HEALTH MISSION.</p>

Return Reference - Identifier	Explanation
	<p>ALL DECISIONS OF THE FINANCIAL ASSISTANCE COMMITTEE ARE FINAL.</p> <p>6. PRESUMPTIVE ELIGIBILITY</p> <p>NO FINANCIAL ASSISTANCE APPLICATION IS REQUIRED TO RECEIVE FINANCIAL ASSISTANCE UNDER THIS PRESUMPTIVE ELIGIBILITY SECTION.</p> <p>IU HEALTH WILL DEEM PATIENTS OR THEIR GUARANTORS PRESUMPTIVELY ELIGIBLE FOR FINANCIAL ASSISTANCE IF THEY ARE FOUND TO BE ELIGIBLE FOR ONE OF THE FOLLOWING PROGRAMS AND CARE WAS INITIATED VIA AN ELIGIBLE FACILITY'S EMERGENCY DEPARTMENT, DIRECT ADMISSION FROM A PHYSICIAN'S OFFICE, OR TRANSFER FROM ANOTHER HOSPITAL FACILITY:</p> <ul style="list-style-type: none"> -MEDICAID (ANY STATE) -INDIANA CHILDREN'S SPECIAL HEALTH CARE SERVICES -HEALTHY INDIANA PLAN -PATIENTS WHO ARE AWARDED HOSPITAL PRESUMPTIVE ELIGIBILITY (HPE) -A STATE AND/OR FEDERAL PROGRAM THAT VERIFIES THE PATIENT OR GUARANTOR'S GROSS HOUSEHOLD INCOME MEETS THE FPL INCOME THRESHOLD. <p>IU HEALTH WILL CONDUCT A QUARTERLY REVIEW OF ALL ACCOUNTS PLACED WITH A COLLECTION AGENCY PARTNER FOR AT LEAST ONE HUNDRED AND TWENTY (120) DAYS AFTER THE ACCOUNT IS ELIGIBLE FOR AN ECA AS SET FORTH IN THIS POLICY. IF THE PATIENT OR GUARANTOR'S INDIVIDUAL SCORING CRITERIA DEMONSTRATES THE PATIENT HAS A LOW LIKELIHOOD AND/OR PROPENSITY TO PAY OR NO CREDIT, THE PATIENT OR GUARANTOR MAY BE DEEMED PRESUMPTIVELY ELIGIBLE FOR FINANCIAL ASSISTANCE.</p> <p>FINANCIAL ASSISTANCE MAY ADDITIONALLY BE GRANTED IN THE FOLLOWING CIRCUMSTANCES:</p> <ul style="list-style-type: none"> -IF THE PATIENT OR THEIR GUARANTOR IS FOUND TO HAVE FILED A PETITION FOR BANKRUPTCY. -IF THE PATIENT IS DECEASED AND FOUND TO HAVE NO ESTATE. -IF THE PATIENT IS DECEASED AND WAS UNDER 21 YEARS OF AGE AT THE TIME OF DEATH. <p>7. EXHAUSTION OF ALTERNATE SOURCES OF ASSISTANCE</p> <p>PATIENTS MUST EXHAUST ALL OTHER STATE AND FEDERAL ASSISTANCE PROGRAMS PRIOR TO RECEIVING FINANCIAL ASSISTANCE DUE TO FINANCIAL OR PERSONAL HARDSHIP UNDER THIS POLICY INCLUDING, BUT NOT LIMITED TO, MEDICAID.</p> <p>PATIENTS WHO MAY BE ELIGIBLE FOR COVERAGE UNDER AN APPLICABLE HEALTH INSURANCE POLICY MUST EXHAUST ALL INSURANCE BENEFITS.</p> <ul style="list-style-type: none"> -THIS INCLUDES PATIENTS COVERED UNDER THEIR OWN POLICY AND THOSE WHO MAY BE ENTITLED TO BENEFITS FROM A THIRD-PARTY POLICY. -IU HEALTH MAY REQUEST PATIENTS SHOW PROOF THAT SUCH A CLAIM WAS PROPERLY SUBMITTED TO THE APPROPRIATE INSURANCE PROVIDER BEFORE AWARDED FINANCIAL ASSISTANCE. <p>ELIGIBLE PATIENTS WHO RECEIVE MEDICAL CARE FROM AN IU HEALTH FACILITY AS A RESULT OF AN INJURY PROXIMATELY CAUSED BY A THIRD PARTY, AND LATER RECEIVE A MONETARY SETTLEMENT OR AWARD FROM SAID THIRD PARTY, MAY RECEIVE FINANCIAL ASSISTANCE FOR ANY OUTSTANDING BALANCE NOT COVERED BY THE SETTLEMENT OR AWARD.</p> <p>IN THE EVENT FINANCIAL ASSISTANCE HAS ALREADY BEEN GRANTED IN THE ABOVE CIRCUMSTANCES, IU HEALTH RESERVES THE RIGHT TO REVERSE THE FINANCIAL ASSISTANCE DETERMINATION IN AN AMOUNT EQUAL TO THE AMOUNT IU HEALTH WOULD BE ENTITLED TO RECEIVE HAD NO FINANCIAL ASSISTANCE BEEN AWARDED.</p> <p>8. PATIENT ASSETS</p> <p>THERE ARE SITUATIONS WHERE A PATIENT OR THEIR GUARANTOR MAY HAVE SIGNIFICANT INCOME OR ASSETS AVAILABLE TO PAY FOR HEALTHCARE SERVICES SUCH AS A LEGAL SETTLEMENT. THE FINANCIAL ASSISTANCE COMMITTEE MAY EVALUATE THE INCOME OR ASSETS IN DETERMINING FINANCIAL HARDSHIP.</p> <p>IU HEALTH MAY REQUIRE A LIST OF ALL PROPERTY OWNED BY THE PATIENT OR GUARANTOR AND ADJUST A FINANCIAL ASSISTANCE DETERMINATION AS A RESULT.</p>
SCHEDULE H, PART V, SECTION B, LINE 16A - FAP AVAILABLE WEBSITE	https://iuhealth.org/pay-a-bill/financial-assistance
SCHEDULE H, PART V, SECTION B, LINE 16B - FAP APPLICATION FORM WEBSITE	https://iuhealth.org/pay-a-bill/financial-assistance
SCHEDULE H, PART V, SECTION B, LINE 16C - PLAIN LANGUAGE FAP SUMMARY WEBSITE	https://iuhealth.org/pay-a-bill/financial-assistance

Return Reference - Identifier	Explanation
<p>SCHEDULE H, PART V, SECTION B, LINE 16J - OTHER WAYS HOSPITAL PUBLICIZED FINANCIAL ASSISTANCE POLICY</p>	<p>FACILITY NAME: IU HEALTH BALL MEMORIAL HOSPITAL</p> <p>DESCRIPTION: IU HEALTH BALL MEMORIAL HOSPITAL TAKES SEVERAL OTHER MEASURES TO PUBLICIZE ITS FAP WITHIN THE COMMUNITY. THESE MEASURES INCLUDE THE FOLLOWING:</p> <ol style="list-style-type: none"> 1.POST THIS POLICY, A PLAIN LANGUAGE SUMMARY OF THIS POLICY, AND THE FINANCIAL ASSISTANCE APPLICATION ON ITS WEBSITE. 2.PROVIDE PATIENTS WITH A PLAIN LANGUAGE SUMMARY OF THIS POLICY DURING REGISTRATION AND/OR DISCHARGE. 3.POST CONSPICUOUS DISPLAYS IN APPROPRIATE ACUTE CARE SETTINGS SUCH AS EMERGENCY DEPARTMENTS AND REGISTRATION AREAS DESCRIBING THE AVAILABLE ASSISTANCE AND DIRECTING ELIGIBLE PATIENTS TO THE FINANCIAL ASSISTANCE APPLICATION. 4.INCLUDE A CONSPICUOUS WRITTEN NOTICE ON ALL PATIENT POST-DISCHARGE BILLING STATEMENTS NOTIFYING THE PATIENT ABOUT THIS POLICY AND THE TELEPHONE NUMBER OF THE CUSTOMER SERVICE DEPARTMENT WHICH CAN ASSIST PATIENTS WITH QUESTIONS REGARDING THIS POLICY. 5.MAKE AVAILABLE CUSTOMER SERVICE REPRESENTATIVES VIA TELEPHONE DURING NORMAL BUSINESS HOURS. 6.MAIL COPIES OF THIS POLICY, A PLAIN LANGUAGE SUMMARY OF THIS POLICY, AND A FINANCIAL ASSISTANCE APPLICATION TO PATIENTS OR THEIR GUARANTOR FREE OF CHARGE UPON REQUEST. 7.BROADLY COMMUNICATE THIS POLICY AS A PART OF ITS GENERAL OUTREACH EFFORTS. 8.EDUCATE PATIENT-FACING TEAM MEMBERS ON THIS POLICY AND THE PROCESS FOR REFERRING PATIENTS TO THE PROGRAM.

Part V Facility Information (continued)**Section D. Other Health Care Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility**
(list in order of size, from largest to smallest)How many non-hospital health care facilities did the organization operate during the tax year? 24

Name and address	Type of Facility (describe)
1 IU HEALTH BALL MEMORIAL CANCER CENTER 2200 FOREST RIDGE RD., STE. 120 NEW CASTLE, IN 47362	DIAGNOSTIC AND OTHER OUTPATIENT
2 IU HEALTH BALL MEMORIAL BARIATRIC & MEDICAL WEIGHT LOSS 2901 W. JACKSON ST. MUNCIE, IN 47303	SPECIALTY CARE
3 IU HEALTH PAVILION COMMUNITY PHARMACY 2401 W. UNIVERSITY AVE., OMP 1635 MUNCIE, IN 47303	PHARMACY
4 IU HEALTH YORKTOWN PHARMACY 1420 S. PILGRIM BLVD. YORKTOWN, IN 47396	PHARMACY
5 IU HEALTH BLACKFORD PHARMACY 400 PILGRIM BLVD. HARTFORD CITY, IN 47348	PHARMACY
6 IUH BALL MEMORIAL CANCER CNTR AT JAY CO. 500 W. VOTAW STREET PORTLAND, IN 47371	SPECIALTY CARE
7 IU HEALTH BALL MEMORIAL INTERVENTIONAL PAIN SERVICES 5501 W. BETHEL AVE. MUNCIE, IN 47304	SPECIALTY CARE
8 BALL STATE HEALTH CENTER PHARMACY 1500 NEELY AVE. MUNCIE, IN 47306	PHARMACY
9 EAST CENTRAL RADIOLOGY 2598 W WHITE RIVER BLVD MUNCIE, IN 47303	RADIOLOGY
10 IU HEALTH BALL MEMORIAL OUTPATIENT CENTER 1420 S. PILGRM BLVD. YORKTOWN, IN 47396	DIAGNOSTIC AND OTHER OUTPATIENT

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Part V Facility Information *(continued)***Section D. Other Health Care Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility**
(list in order of size, from largest to smallest)How many non-hospital health care facilities did the organization operate during the tax year? 24

Name and address	Type of Facility (describe)
1 IU HEALTH BALL MEMORIAL OUTPATIENT CENTER 1710 SPICELAND RD. NEW CASTLE, IN 47362	DIAGNOSTIC AND OTHER OUTPATIENT
2 IU HEALTH FAMILY PHARMACY 5501 W. BETHEL AVE. MUNCIE, IN 47304	PHARMACY
3 BALL STATE STUDENT HEALTH CENTER 1500 NEELY AVE., ROOM 106A MUNCIE, IN 47306	PRIMARY CARE
4 IU HEALTH BALL MEMORIAL RADIOLOGY 2401 W. UNIVERSITY AVE. MUNCIE, IN 47303	RADIOLOGY
5 IU HEALTH BALL MEMORIAL OUTPATIENT REHABILITATION 3300 W. COMMUNITY DR. MUNCIE, IN 47304	REHABILITATION SERVICES
6 IU HEALTH BALL MEMORIAL HOSPITAL REHABILITATION 3600 W. BETHEL AVE. MUNCIE, IN 47304	REHABILITATION SERVICES
7 IU HEALTH BALL MEMORIAL CANCER CENTER 2401 W. UNIVERSITY AVE. MUNCIE, IN 47303	SPECIALTY CARE
8 IU HEALTH BALL MEMORIAL MATERNAL AND FETAL HEALTH 2401 W. UNIVERSITY AVE. MUNCIE, IN 47303	SPECIALTY CARE
9 IU HEALTH BALL MEMORIAL CARDIOVASCULAR SURGERY 2525 W. UNIVERSITY AVE., SUITE 300 MUNCIE, IN 47303	SPECIALTY CARE
10 IU HEALTH BALL MEMORIAL OTOLARYNGOLOGY 2525 W. UNIVERSITY AVE. MUNCIE, IN 47303	SPECIALTY CARE

Schedule H (Form 990) 2020

Part V Facility Information *(continued)*

Section D. Other Health Care Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility
 (list in order of size, from largest to smallest)

How many non-hospital health care facilities did the organization operate during the tax year? 24

Name and address	Type of Facility (describe)
1 IU HEALTH BALL MEMORIAL WOUND HEALING SERVICES 2901 W. JACKSON ST. MUNCIE, IN 47303	SPECIALTY CARE
2 IU HEALTH BALL MEMORIAL VOSS CENTER FOR WOMEN 5501 W. BETHEL AVE., SUITE C MUNCIE, IN 47304	SPECIALTY CARE
3 IU HEALTH BALL MEMORIAL OUTPATIENT SURGERY 2401 W. UNIVERSITY AVE. MUNCIE, IN 47303	SURGERY CENTER
4	
5	
6	
7	
8	
9	
10	

Provide the following information.

- 1 **Required descriptions.** Provide the descriptions required for Part I, lines 3c, 6a, and 7; Part II; Part III, lines 2, 3, 4, 8 and 9b.
- 2 **Needs assessment.** Describe how the organization assesses the health care needs of the communities it serves, in addition to any needs assessments reported in Part V, Section B.
- 3 **Patient education of eligibility for assistance.** Describe how the organization informs and educates patients and persons who may be billed for patient care about their eligibility for assistance under federal, state, or local government programs or under the organization's financial assistance policy.
- 4 **Community information.** Describe the community the organization serves, taking into account the geographic area and demographic constituents it serves.
- 5 **Promotion of community health.** Provide any other information important to describing how the organization's hospital facilities or other health care facilities further its exempt purpose by promoting the health of the community (e.g., open medical staff, community board, use of surplus funds, etc.).
- 6 **Affiliated health care system.** If the organization is part of an affiliated health care system, describe the respective roles of the organization and its affiliates in promoting the health of the communities served.
- 7 **State filing of community benefit report.** If applicable, identify all states with which the organization, or a related organization, files a community benefit report.

Return Reference - Identifier	Explanation
<p>SCHEDULE H, PART I, LINE 3C - CRITERIA USED FOR DETERMINING ELIGIBILITY FOR FREE OR DISCOUNTED CARE</p>	<p>IU HEALTH BALL MEMORIAL HOSPITAL USES SEVERAL FACTORS OTHER THAN FEDERAL POVERTY GUIDELINES ("FPGS") IN DETERMINING ELIGIBILITY FOR FREE CARE UNDER ITS FAP. THESE FACTORS INCLUDE THE FOLLOWING:</p> <p>1. ELIGIBILITY FOR FINANCIAL ASSISTANCE DUE TO FINANCIAL OR PERSONAL HARDSHIP</p> <p>IN ORDER TO BE ELIGIBLE FOR FINANCIAL ASSISTANCE DUE TO FINANCIAL OR PERSONAL HARDSHIP UNDER THIS POLICY, A PATIENT OR GUARANTOR MUST:</p> <ul style="list-style-type: none"> - SUBMIT A COMPLETED FINANCIAL ASSISTANCE APPLICATION WITH ALL SUPPORTING DOCUMENTATION AND BE APPROVED IN ACCORDANCE WITH THIS POLICY; - BE AN INDIANA RESIDENT AS DEFINED IN THIS POLICY; AND - IF UNINSURED, CONSULT WITH A MEMBER OF IU HEALTH'S INDIVIDUAL SOLUTIONS DEPARTMENT TO DETERMINE IF HEALTH CARE COVERAGE MAY BE OBTAINED FROM A GOVERNMENT INSURANCE OR ASSISTANCE PRODUCT, THE HEALTH INSURANCE MARKETPLACE, OR FROM ANY OTHER SOURCE OF COVERAGE. <p>FINANCIAL ASSISTANCE DUE TO FINANCIAL HARDSHIP IS ONLY AVAILABLE FOR ENCOUNTERS WHERE CARE WAS INITIATED VIA AN ELIGIBLE FACILITY'S EMERGENCY DEPARTMENT, DIRECT ADMISSION FROM A PHYSICIAN'S OFFICE, OR TRANSFER FROM ANOTHER HOSPITAL FACILITY.</p> <p>2. FINANCIAL ASSISTANCE DUE TO FINANCIAL HARDSHIP</p> <p>THE FPL INCOME THRESHOLD UNDER THIS SECTION IS AS FOLLOWS:</p> <ul style="list-style-type: none"> -IF ONE OR MORE ADULTS AND ZERO DEPENDENTS ARE IN THE HOUSEHOLD, THE FPL INCOME THRESHOLD IS 200%. -IF TWO OR MORE ADULTS AND ONE OR MORE DEPENDENTS ARE IN THE HOUSEHOLD, THE FPL INCOME THRESHOLD IS 250%. -IF ONE ADULT AND ONE OR MORE DEPENDENTS ARE IN THE HOUSEHOLD, THE FPL INCOME THRESHOLD IS 300%. <p>IN SOME INSTANCES, AN ADULT WILL ALSO QUALIFY AS A DEPENDENT. WHEN THIS OCCURS, IU HEALTH WILL TREAT THE ADULT AS A DEPENDENT FOR PURPOSES OF THE FPL CALCULATION.</p> <p>IU HEALTH WILL UTILIZE THE MOST RECENT FPL DATA AVAILABLE AND WILL APPLY THE FPL DATA TO A PATIENT OR GUARANTOR'S ACCOUNT BALANCE BASED UPON THE CALENDAR DATE A COMPLETED FINANCIAL ASSISTANCE APPLICATION WAS RECEIVED, NOT A PATIENT'S DATE OF SERVICE.</p> <p>AN UNINSURED PATIENT OR THEIR GUARANTOR WHOSE HOUSEHOLD INCOME IS LESS THAN OR EQUAL TO THE FPL INCOME THRESHOLD MAY BE ELIGIBLE FOR FULL FINANCIAL ASSISTANCE UP TO 100% OF GROSS CHARGES IF APPROVED.</p> <p>AN UNDERINSURED PATIENT OR THEIR GUARANTOR WHOSE HOUSEHOLD INCOME IS LESS THAN OR EQUAL TO THE FPL INCOME THRESHOLD MAY BE ELIGIBLE FOR FULL FINANCIAL ASSISTANCE UP TO 100% OF PATIENT RESPONSIBILITY IF APPROVED.</p> <p>3. FINANCIAL ASSISTANCE DUE TO PERSONAL HARDSHIP</p> <p>AN UNINSURED OR UNDERINSURED PATIENT OR THEIR GUARANTOR WHOSE HOUSEHOLD INCOME IS ABOVE THE FPL INCOME THRESHOLD MAY BE ELIGIBLE FOR FINANCIAL ASSISTANCE IF THE PATIENT'S OUTSTANDING PATIENT RESPONSIBILITY EXCEEDS 20% OF THE PATIENT'S OR THEIR GUARANTOR'S ANNUAL HOUSEHOLD INCOME.</p> <ul style="list-style-type: none"> -IF APPROVED, THE PATIENT'S BALANCE WILL BE REDUCED TO 20% OF THE PATIENT OR GUARANTOR'S ANNUAL HOUSEHOLD INCOME OR THE AMOUNTS GENERALLY BILLED, WHICHEVER IS LESS. -IU HEALTH WILL WORK WITH THE PATIENT OR GUARANTOR TO IDENTIFY A REASONABLE PAYMENT PLAN ON THE REMAINDER OF THE BALANCE. <p>4. ELIGIBILITY PERIOD</p> <p>IF APPROVED FOR FINANCIAL ASSISTANCE BY IU HEALTH, THE PATIENT WILL BE GUARANTEED FINANCIAL ASSISTANCE FOR TREATMENT RELATED TO THE UNDERLYING CONDITION, FOR WHICH THE PATIENT WAS ORIGINALLY SCREENED AND APPROVED, THROUGH THE REMAINDER OF THE CALENDAR YEAR.</p> <p>AS A CONDITION OF EXTENDING THE ON-GOING FINANCIAL ASSISTANCE, THE PATIENT MUST COMPLY WITH</p>

Return Reference - Identifier	Explanation
	<p>REQUESTS FROM IU HEALTH TO VERIFY THAT THE PATIENT CONTINUES TO MEET THE CONDITIONS FOR QUALIFICATION.</p> <p>5. APPEALS AND ASSISTANCE GRANTED BY THE FINANCIAL ASSISTANCE COMMITTEE</p> <p>THE FINANCIAL ASSISTANCE COMMITTEE WILL REVIEW AND MAKE DETERMINATIONS ON ALL REQUESTS FOR APPEALS RELATED TO FINANCIAL ASSISTANCE. IF A PATIENT OR GUARANTOR SEEKS TO APPEAL A FINANCIAL ASSISTANCE DETERMINATION, A WRITTEN REQUEST MUST BE SUBMITTED, ALONG WITH THE SUPPORTING DOCUMENTATION.</p> <p>THE FINANCIAL ASSISTANCE COMMITTEE WILL REVIEW REQUESTS FOR AND MAY GRANT ADDITIONAL FINANCIAL ASSISTANCE, INCLUDING BUT NOT LIMITED TO, THE FOLLOWING:</p> <ul style="list-style-type: none"> -ASSISTANCE TO PATIENTS WHO ARE SEEKING TREATMENT THAT CAN ONLY BE PROVIDED IN INDIANA BY IU HEALTH OR WHO WOULD BENEFIT FROM CONTINUED MEDICAL SERVICES FROM IU HEALTH FOR CONTINUITY OF CARE; -CARE APPROVED BY THE IU HEALTH CHIEF MEDICAL OFFICER (CMO) OR THE CHIEF EXECUTIVE OFFICER (CEO) OR CMO OF AN IU HEALTH FACILITY OR REGION, INCLUDING MEDICALLY NECESSARY NON-ELECTIVE SERVICES FOR WHICH NO PAYMENT SOURCE CAN BE IDENTIFIED; -CARE PROVIDED WHEN IT IS KNOWN NO PAYMENT SOURCE EXISTS; -INTERNATIONAL HUMANITARIAN AID; AND -OTHER CARE IDENTIFIED BY THE FINANCIAL ASSISTANCE COMMITTEE THAT FULFILLS THE IU HEALTH MISSION. <p>ALL DECISIONS OF THE FINANCIAL ASSISTANCE COMMITTEE ARE FINAL.</p> <p>6. PRESUMPTIVE ELIGIBILITY</p> <p>NO FINANCIAL ASSISTANCE APPLICATION IS REQUIRED TO RECEIVE FINANCIAL ASSISTANCE UNDER THIS PRESUMPTIVE ELIGIBILITY SECTION.</p> <p>IU HEALTH WILL DEEM PATIENTS OR THEIR GUARANTORS PRESUMPTIVELY ELIGIBLE FOR FINANCIAL ASSISTANCE IF THEY ARE FOUND TO BE ELIGIBLE FOR ONE OF THE FOLLOWING PROGRAMS AND CARE WAS INITIATED VIA AN ELIGIBLE FACILITY'S EMERGENCY DEPARTMENT, DIRECT ADMISSION FROM A PHYSICIAN'S OFFICE, OR TRANSFER FROM ANOTHER HOSPITAL FACILITY:</p> <ul style="list-style-type: none"> -MEDICAID (ANY STATE) -INDIANA CHILDREN'S SPECIAL HEALTH CARE SERVICES -HEALTHY INDIANA PLAN -PATIENTS WHO ARE AWARDED HOSPITAL PRESUMPTIVE ELIGIBILITY (HPE) -A STATE AND/OR FEDERAL PROGRAM THAT VERIFIES THE PATIENT OR GUARANTOR'S GROSS HOUSEHOLD INCOME MEETS THE FPL INCOME THRESHOLD. <p>IU HEALTH WILL CONDUCT A QUARTERLY REVIEW OF ALL ACCOUNTS PLACED WITH A COLLECTION AGENCY PARTNER FOR AT LEAST ONE HUNDRED AND TWENTY (120) DAYS AFTER THE ACCOUNT IS ELIGIBLE FOR AN ECA AS SET FORTH IN THIS POLICY. IF THE PATIENT OR GUARANTOR'S INDIVIDUAL SCORING CRITERIA DEMONSTRATES THE PATIENT HAS A LOW LIKELIHOOD AND/OR PROPENSITY TO PAY OR NO CREDIT, THE PATIENT OR GUARANTOR MAY BE DEEMED PRESUMPTIVELY ELIGIBLE FOR FINANCIAL ASSISTANCE.</p> <p>FINANCIAL ASSISTANCE MAY ADDITIONALLY BE GRANTED IN THE FOLLOWING CIRCUMSTANCES:</p> <ul style="list-style-type: none"> -IF THE PATIENT OR THEIR GUARANTOR IS FOUND TO HAVE FILED A PETITION FOR BANKRUPTCY. -IF THE PATIENT IS DECEASED AND FOUND TO HAVE NO ESTATE. -IF THE PATIENT IS DECEASED AND WAS UNDER 21 YEARS OF AGE AT THE TIME OF DEATH. <p>7. EXHAUSTION OF ALTERNATE SOURCES OF ASSISTANCE</p> <p>PATIENTS MUST EXHAUST ALL OTHER STATE AND FEDERAL ASSISTANCE PROGRAMS PRIOR TO RECEIVING FINANCIAL ASSISTANCE DUE TO FINANCIAL OR PERSONAL HARDSHIP UNDER THIS POLICY INCLUDING, BUT NOT LIMITED TO, MEDICAID.</p> <p>PATIENTS WHO MAY BE ELIGIBLE FOR COVERAGE UNDER AN APPLICABLE HEALTH INSURANCE POLICY MUST EXHAUST ALL INSURANCE BENEFITS.</p> <ul style="list-style-type: none"> -THIS INCLUDES PATIENTS COVERED UNDER THEIR OWN POLICY AND THOSE WHO MAY BE ENTITLED TO BENEFITS FROM A THIRD-PARTY POLICY. -IU HEALTH MAY REQUEST PATIENTS SHOW PROOF THAT SUCH A CLAIM WAS PROPERLY SUBMITTED TO THE APPROPRIATE INSURANCE PROVIDER BEFORE AWARDED FINANCIAL ASSISTANCE. <p>ELIGIBLE PATIENTS WHO RECEIVE MEDICAL CARE FROM AN IU HEALTH FACILITY AS A RESULT OF AN INJURY PROXIMATELY CAUSED BY A THIRD PARTY, AND LATER RECEIVE A MONETARY SETTLEMENT OR AWARD FROM SAID THIRD PARTY, MAY RECEIVE FINANCIAL ASSISTANCE FOR ANY OUTSTANDING BALANCE NOT COVERED BY THE SETTLEMENT OR AWARD.</p> <p>IN THE EVENT FINANCIAL ASSISTANCE HAS ALREADY BEEN GRANTED IN THE ABOVE CIRCUMSTANCES, IU HEALTH RESERVES THE RIGHT TO REVERSE THE FINANCIAL ASSISTANCE DETERMINATION IN AN AMOUNT EQUAL TO THE AMOUNT IU HEALTH WOULD BE ENTITLED TO RECEIVE HAD NO FINANCIAL ASSISTANCE BEEN AWARDED.</p> <p>8. PATIENT ASSETS</p> <p>THERE ARE SITUATIONS WHERE A PATIENT OR THEIR GUARANTOR MAY HAVE SIGNIFICANT INCOME OR ASSETS AVAILABLE TO PAY FOR HEALTHCARE SERVICES SUCH AS A LEGAL SETTLEMENT. THE FINANCIAL ASSISTANCE COMMITTEE MAY EVALUATE THE INCOME OR ASSETS IN DETERMINING FINANCIAL HARDSHIP.</p> <p>IU HEALTH MAY REQUIRE A LIST OF ALL PROPERTY OWNED BY THE PATIENT OR GUARANTOR AND ADJUST A FINANCIAL ASSISTANCE DETERMINATION AS A RESULT.</p>

Return Reference - Identifier	Explanation
SCHEDULE H, PART I, LINE 6A - C.B. REPORT PREPARED BY A RELATED ORG.	<p>IU HEALTH BALL MEMORIAL HOSPITAL'S COMMUNITY BENEFIT AND OTHER INVESTMENTS, ENCOMPASSING ITS TOTAL COMMUNITY INVESTMENT, ARE INCLUDED IN THE IU HEALTH COMMUNITY BENEFIT REPORT WHICH IS PREPARED ON BEHALF OF AND INCLUDES IU HEALTH AND ITS RELATED HOSPITAL ENTITIES IN THE STATE OF INDIANA ("IU HEALTH STATEWIDE SYSTEM").</p> <p>THE IU HEALTH COMMUNITY BENEFIT REPORT IS MADE AVAILABLE TO THE PUBLIC ON IU HEALTH'S WEBSITE AT HTTPS://IUHEALTH.ORG/IN-THE-COMMUNITY/COMMUNITY-BENEFIT. THE IU HEALTH COMMUNITY BENEFIT REPORT IS ALSO DISTRIBUTED TO NUMEROUS KEY ORGANIZATIONS THROUGHOUT THE STATE OF INDIANA IN ORDER TO BROADLY SHARE THE IU HEALTH STATEWIDE SYSTEM'S COMMUNITY BENEFIT EFFORTS. IT IS ALSO AVAILABLE BY REQUEST THROUGH THE INDIANA STATE DEPARTMENT OF HEALTH OR IU HEALTH.</p>
SCHEDULE H, PART I, LINE 7 - DESCRIBE SUBSIDIZED HEALTH SERVICE COSTS FROM PHYSICIAN CLINIC ON LINE 7G	IU HEALTH BALL MEMORIAL HOSPITAL DOES NOT INCLUDE ANY COSTS ASSOCIATED WITH PHYSICIAN CLINICS AS SUBSIDIZED HEALTH SERVICES.
SCHEDULE H, PART I, LINE 7 - TOTAL COMMUNITY BENEFIT EXPENSE	SCHEDULE H, PART I, LINE 7, COLUMN (F), PERCENT OF TOTAL EXPENSE, IS BASED ON COLUMN (E) NET COMMUNITY BENEFIT EXPENSE. THE PERCENT OF TOTAL EXPENSE BASED ON COLUMN (C) TOTAL COMMUNITY BENEFIT EXPENSE, WHICH DOES NOT INCLUDE DIRECT OFFSETTING REVENUE, IS 28.26%.
SCHEDULE H, PART I, LINE 7, COL (F) - BAD DEBT EXPENSE EXCLUDED FROM FINANCIAL ASSISTANCE CALCULATION	28,222,286
SCHEDULE H, PART I, LINE 7F - BAD DEBT EXPENSE	<p>THE AMOUNT OF BAD DEBT EXPENSE INCLUDED ON FORM 990, PART IX, LINE 25, COLUMN (A), BUT SUBTRACTED FOR PURPOSES OF CALCULATING THE PERCENTAGE OF TOTAL EXPENSE ON LINE 7, COLUMN (F) IS \$28,222,286.</p> <p>BAD DEBT EXPENSE IS REPORTED AT COST BASED ON THE COST-TO-CHARGE RATIO DERIVED FROM WORKSHEET 2, RATIO OF PATIENT CARE COST-TO-CHARGES.</p>
SCHEDULE H, PART II - PROMOTION OF HEALTH IN COMMUNITIES SERVED	<p>IU HEALTH BALL MEMORIAL HOSPITAL IS A SUBSIDIARY OF IU HEALTH. IU HEALTH PARTICIPATES IN A VARIETY OF COMMUNITY-BUILDING ACTIVITIES THAT ADDRESS THE SOCIAL DETERMINANTS OF HEALTH IN THE COMMUNITIES IT SERVES. IU HEALTH AND ITS RELATED HOSPITAL ENTITIES ACROSS THE STATE OF INDIANA INVEST IN ECONOMIC DEVELOPMENT EFFORTS ACROSS THE STATE, COLLABORATE WITH LIKE-MINDED ORGANIZATIONS THROUGH COALITIONS THAT ADDRESS KEY ISSUES, AND ADVOCATE FOR IMPROVEMENTS IN THE HEALTH STATUS OF VULNERABLE POPULATIONS. THIS INCLUDES MAKING CONTRIBUTIONS TO COMMUNITY-BUILDING ACTIVITIES BY PROVIDING INVESTMENTS AND RESOURCES TO LOCAL COMMUNITY INITIATIVES THAT ADDRESSED ECONOMIC DEVELOPMENT, COMMUNITY SUPPORT AND WORKFORCE DEVELOPMENT.</p> <p>IU HEALTH BALL MEMORIAL HOSPITAL PARTNERS OR COLLABORATES WITH THE FOLLOWING ORGANIZATIONS AND INITIATIVES THAT FOCUS ON SOME OF THE ROOT CAUSES OF HEALTH ISSUES, SUCH AS LACK OF EDUCATION, EMPLOYMENT AND POVERTY:</p> <ul style="list-style-type: none"> -8TWELVE COALITION -ADDICTIONS COALITION OF DELAWARE COUNTY -THE ARC OF INDIANA -BALL STATE UNIVERSITY -CAREER FAIRS AT INDIANA COLLEGES AND UNIVERSITIES -EAST CENTRAL INDIANA REGIONAL PARTNERSHIP -GREATER MUNCIE HABITAT FOR HUMANITY -HEALTHY COMMUNITY ALLIANCE OF EAST CENTRAL INDIANA -HILLCROFT SERVICES -HOSTING OF MEDICAL EXPLORER PROGRAM FOR YOUTH -IVY TECH COMMUNITY COLLEGE -MUNCIE ACTION PLAN -MUNCIE COMMUNITY SCHOOLS -MUNCIE-DELAWARE COUNTY CHAMBER OF COMMERCE -MUNCIE DRUG TASK FORCE -MUNCIE FOOD HUB PARTNERSHIP -PURDUE EXTENSION -ROSS COMMUNITY CENTER -SECOND HARVEST- FOOD BANK, POVERTY ALLEVIATION, BIG IDEA -TOBACCO FREE BLACKFORD COUNTY COALITION -TOBACCO FREE DELAWARE COUNTY COALITION -TOBACCO FREE JAY COUNTY COALITION -UNITED WAY -WHITELY NEIGHBORHOOD ASSOCIATION -YMCA MUNCIE- MITCHELL EARLY CHILDHOOD AND FAMILY CENTER -YOUTH OPPORTUNITY CENTER <p>ADDITIONALLY, THROUGH THE IU HEALTH STATEWIDE SYSTEM'S TEAM MEMBER COMMUNITY BENEFIT SERVICE PROGRAM, "IU HEALTH SERVES", TEAM MEMBERS ACROSS THE STATE MAKE A DIFFERENCE IN THE LIVES OF THOUSANDS OF HOOSIERS EVERY YEAR.</p>
SCHEDULE H, PART III, LINE 2 - METHODOLOGY USED TO ESTIMATE BAD DEBT	THE AMOUNT REPORTED ON LINE 2 AS BAD DEBT IS REPORTED AT COST, AS CALCULATED USING THE COST TO CHARGE RATIO METHODOLOGY.

Return Reference - Identifier	Explanation
<p>SCHEDULE H, PART III, LINE 3 - FAP ELIGIBLE PATIENT BAD DEBT CALCULATION METHODOLOGY</p>	<p>IU HEALTH WILL DEEM PATIENTS OR THEIR GUARANTORS PRESUMPTIVELY ELIGIBLE FOR FINANCIAL ASSISTANCE IF THEY ARE FOUND TO BE ELIGIBLE FOR ONE OF THE FOLLOWING PROGRAMS AND CARE WAS INITIATED VIA AN ELIGIBLE FACILITY'S EMERGENCY DEPARTMENT, DIRECT ADMISSION FROM A PHYSICIAN'S OFFICE, OR TRANSFER FROM ANOTHER HOSPITAL FACILITY:</p> <ol style="list-style-type: none"> 1.MEDICAID (ANY STATE) 2.INDIANA CHILDREN'S SPECIAL HEALTH CARE SERVICES 3.HEALTHY INDIANA PLAN 4.PATIENTS WHO ARE AWARDED HOSPITAL PRESUMPTIVE ELIGIBILITY (HPE) 5.A STATE AND/OR FEDERAL PROGRAM THAT VERIFIES THE PATIENT OR GUARANTOR'S GROSS HOUSEHOLD INCOME MEETS THE FPL INCOME THRESHOLD. <p>NO FINANCIAL ASSISTANCE APPLICATION IS REQUIRED TO RECEIVE FINANCIAL ASSISTANCE UNDER THIS PRESUMPTIVE ELIGIBILITY SECTION.</p> <p>IU HEALTH WILL CONDUCT A QUARTERLY REVIEW OF ALL ACCOUNTS PLACED WITH A COLLECTION AGENCY PARTNER FOR AT LEAST ONE HUNDRED AND TWENTY (120) DAYS AFTER THE ACCOUNT IS ELIGIBLE FOR AN ECA AS SET FORTH IN THIS POLICY. IF THE PATIENT OR GUARANTOR'S INDIVIDUAL SCORING CRITERIA DEMONSTRATES THE PATIENT HAS A LOW LIKELIHOOD AND/OR PROPENSITY TO PAY OR NO CREDIT, THE PATIENT OR GUARANTOR MAY BE DEEMED PRESUMPTIVELY ELIGIBLE FOR FINANCIAL ASSISTANCE.</p> <p>FINANCIAL ASSISTANCE MAY ADDITIONALLY BE GRANTED IN THE FOLLOWING CIRCUMSTANCES: A)IF THE PATIENT OR THEIR GUARANTOR IS FOUND TO HAVE FILED A PETITION FOR BANKRUPTCY. B)IF THE PATIENT IS DECEASED AND FOUND TO HAVE NO ESTATE. C)IF THE PATIENT IS DECEASED AND WAS UNDER 21 YEARS OF AGE AT THE TIME OF DEATH.</p> <p>DUE TO THIS COMPREHENSIVE METHODOLOGY, IU HEALTH DOES NOT BELIEVE ANY AMOUNT OF BAD DEBT IS ATTRIBUTABLE TO PATIENTS WHO MAY BE ELIGIBLE UNDER THE FINANCIAL ASSISTANCE POLICY AND NO PORTION OF BAD DEBT IS INCLUDED AS COMMUNITY BENEFIT.</p>
<p>SCHEDULE H, PART III, LINE 4 - FOOTNOTE IN ORGANIZATION'S FINANCIAL STATEMENTS DESCRIBING BAD DEBT</p>	<p>IU HEALTH'S CONSOLIDATED FINANCIAL STATEMENTS, FOOTNOTE 5, ADDRESSES BAD DEBT EXPENSE AS FOLLOWS:</p> <p>THE INDIANA UNIVERSITY HEALTH SYSTEM DOES NOT REQUIRE COLLATERAL OR OTHER SECURITY FROM ITS PATIENTS, SUBSTANTIALLY ALL OF WHOM ARE RESIDENTS OF THE STATE, FOR THE DELIVERY OF HEALTH CARE SERVICES. HOWEVER, CONSISTENT WITH INDUSTRY PRACTICE, THE INDIANA UNIVERSITY HEALTH SYSTEM ROUTINELY OBTAINS ASSIGNMENT OF (OR IS OTHERWISE ENTITLED TO RECEIVE) PATIENTS' BENEFITS PAYABLE UNDER THEIR HEALTH INSURANCE PROGRAMS, PLANS, OR POLICIES (E.G., MEDICARE, MEDICAID, MANAGED CARE PAYERS, AND COMMERCIAL INSURANCE POLICIES).</p> <p>THE INDIANA UNIVERSITY HEALTH SYSTEM USES A PORTFOLIO APPROACH TO ACCOUNT FOR CATEGORIES OF PATIENT CONTRACTS AS A COLLECTIVE GROUP, RATHER THAN RECOGNIZING REVENUE ON AN INDIVIDUAL CONTRACT BASIS. THE PORTFOLIOS CONSIST OF MAJOR PAYER CLASSES FOR INPATIENT REVENUE AND OUTPATIENT REVENUE. BASED ON THE HISTORICAL COLLECTION TRENDS AND OTHER ANALYSIS, THE INDIANA UNIVERSITY HEALTH SYSTEM BELIEVES THAT REVENUE RECOGNIZED BY UTILIZING THE PORTFOLIO APPROACH APPROXIMATES THE REVENUE THAT WOULD HAVE BEEN RECOGNIZED IF AN INDIVIDUAL CONTRACT APPROACH WERE USED.</p> <p>IN SUPPORT OF ITS MISSION, THE INDIANA UNIVERSITY HEALTH SYSTEM PROVIDES CARE TO UNINSURED AND UNDERINSURED PATIENTS. THE INDIANA UNIVERSITY HEALTH SYSTEM PROVIDES CHARITY CARE TO PATIENTS WHO LACK FINANCIAL RESOURCES AND ARE DEEMED TO BE MEDICALLY INDIGENT. FINANCIAL ASSISTANCE IS AVAILABLE TO QUALIFYING UNINSURED AND UNDERINSURED PATIENTS RECEIVING CARE AT AN INDIANA UNIVERSITY HEALTH SYSTEM HOSPITAL LOCATION. UNDER ITS FINANCIAL ASSISTANCE POLICY, THE INDIANA UNIVERSITY HEALTH SYSTEM PROVIDES MEDICALLY NECESSARY CARE TO UNINSURED PATIENTS. FINANCIAL ASSISTANCE UP TO THE FULL AMOUNT OF PATIENT FINANCIAL RESPONSIBILITY IS AVAILABLE FOR UNINSURED AND UNDERINSURED PATIENTS RECEIVING CARE VIA THE EMERGENCY DEPARTMENT, DIRECT ADMISSION FROM A PHYSICIAN'S OFFICE, OR TRANSFER FROM ANOTHER HOSPITAL. THE FEDERAL POVERTY LEVEL (FPL) THRESHOLDS FOR THIS TYPE OF FINANCIAL ASSISTANCE ARE BASED ON HOUSEHOLD MAKEUP. HOUSEHOLDS WITHOUT DEPENDENTS ARE ELIGIBLE FOR ASSISTANCE IF HOUSEHOLD INCOME IS LESS THAN OR EQUAL TO 200% FPL, TWO ADULTS AND AT LEAST ONE DEPENDENT ARE ELIGIBLE IF HOUSEHOLD INCOME IS LESS THAN OR EQUAL TO 250% FPL, AND HOUSEHOLDS WITH ONE ADULT AND AT LEAST ONE DEPENDENT ARE ELIGIBLE IF HOUSEHOLD INCOME IS LESS THAN OR EQUAL TO 300% FPL. INDIVIDUALS WITH MEDICAL BILLS TOTALING MORE THAN 20% OF ANNUAL HOUSEHOLD INCOME, REGARDLESS OF FPL, QUALIFY FOR CATASTROPHIC ASSISTANCE AND ARE ELIGIBLE FOR A REDUCTION IN PATIENT FINANCIAL RESPONSIBILITY TO 20% OF ANNUAL HOUSEHOLD INCOME. SINCE THE INDIANA UNIVERSITY HEALTH SYSTEM DOES NOT PURSUE COLLECTION OF THESE AMOUNTS, THE DISCOUNTED AMOUNTS ARE NOT REPORTED AS PATIENT SERVICE REVENUE. THE INDIANA UNIVERSITY HEALTH SYSTEM USES PRESUMPTIVE ELIGIBILITY SCREENING PROCEDURES FOR SOME FORMS OF FINANCIAL ASSISTANCE AND RECOGNIZES NET PATIENT SERVICE REVENUE ON SERVICES PROVIDED TO SELF-PAY PATIENTS AT THE DISCOUNTED RATE AT THE TIME SERVICES ARE RENDERED. THE ESTIMATED COST OF CHARITY CARE, USING THE CONSOLIDATED COST TO CHARGE RATIO, WAS \$90,358,000 AND \$96,693,000 IN 2020 AND 2019, RESPECTIVELY.</p>

Return Reference - Identifier	Explanation
<p>SCHEDULE H, PART III, LINE 8 - DESCRIBE EXTENT ANY SHORTFALL FROM LINE 7 TREATED AS COMMUNITY BENEFIT AND COSTING METHOD USED</p>	<p>IU HEALTH BALL MEMORIAL HOSPITAL HAS A MEDICARE SHORTFALL FOR 2020. IU HEALTH BALL MEMORIAL HOSPITAL'S MEDICARE REIMBURSEMENTS, HOWEVER, ARE LESS THAN THE COST OF PROVIDING PATIENT CARE AND SERVICES TO MEDICARE BENEFICIARIES AND DO NOT INCLUDE ANY AMOUNTS THAT RESULT FROM INEFFICIENCIES OR POOR MANAGEMENT IN 2020. IU HEALTH BALL MEMORIAL HOSPITAL ACCEPTS ALL MEDICARE PATIENTS KNOWING THAT THERE MAY BE SHORTFALLS; THEREFORE, IT HAS TAKEN THE POSITION THAT ANY SHORTFALL SHOULD BE COUNTED AS PART OF ITS COMMUNITY BENEFIT. ADDITIONALLY, IT IS IMPLIED IN INTERNAL REVENUE SERVICE REVENUE RULING 69-545 THAT TREATING MEDICARE PATIENTS IS A COMMUNITY BENEFIT. REVENUE RULING 69-545, WHICH ESTABLISHED THE COMMUNITY BENEFIT STANDARD FOR NONPROFIT HOSPITALS, STATES THAT IF A HOSPITAL SERVES PATIENTS WITH GOVERNMENTAL HEALTH BENEFITS, INCLUDING MEDICARE, THEN THIS IS AN INDICATION THAT THE HOSPITAL OPERATES TO PROMOTE THE HEALTH OF THE COMMUNITY.</p> <p>THE AMOUNT REPORTED ON SCHEDULE H, PART III, LINE 6 IS CALCULATED, IN ACCORDANCE WITH THE FORM 990 INSTRUCTIONS, USING "ALLOWABLE COSTS" FROM THE IU HEALTH BALL MEMORIAL HOSPITAL MEDICARE COST REPORT. "ALLOWABLE COSTS" FOR MEDICARE COST REPORT PURPOSES, HOWEVER, ARE NOT REFLECTIVE OF ALL COSTS ASSOCIATED WITH IU HEALTH BALL MEMORIAL HOSPITAL'S PARTICIPATION IN MEDICARE PROGRAMS. FOR EXAMPLE, THE MEDICARE COST REPORT EXCLUDES CERTAIN COSTS SUCH AS BILLED PHYSICIAN SERVICES, THE COSTS OF MEDICARE PARTS C AND D, FEE SCHEDULE REIMBURSED SERVICES, AND DURABLE MEDICAL EQUIPMENT SERVICES. INCLUSION OF ALL COSTS ASSOCIATED WITH IU HEALTH BALL MEMORIAL HOSPITAL PARTICIPATION IN MEDICARE PROGRAMS WOULD SIGNIFICANTLY INCREASE THE SHORTFALL REPORTED ON SCHEDULE H, PART III, LINE 7.</p>

Return Reference - Identifier	Explanation
<p>SCHEDULE H, PART III, LINE 9B - DID COLLECTION POLICY CONTAIN PROVISIONS ON COLLECTION PRACTICES FOR PATIENTS WHO ARE KNOWN TO QUALIFY FOR ASSISTANCE</p>	<p>IU HEALTH BALL MEMORIAL HOSPITAL'S FAP AND WRITTEN DEBT COLLECTION POLICY DESCRIBE THE COLLECTION PRACTICES APPLICABLE TO PATIENTS, INCLUDING THOSE WHO MAY QUALIFY FOR FINANCIAL ASSISTANCE.</p> <p>1. FINANCIAL ASSISTANCE APPLICATION</p> <p>FINANCIAL ASSISTANCE APPLICATIONS MUST INCLUDE THE FOLLOWING DOCUMENTATION:</p> <ul style="list-style-type: none"> -ALL SOURCES OF INCOME FOR THE LAST THREE (3) MONTHS. -MOST RECENT THREE (3) MONTHS OF PAY STUBS OR SUPPLEMENTAL SECURITY INCOME VIA SOCIAL SECURITY. -MOST RECENT THREE (3) STATEMENTS FROM CHECKING AND SAVINGS ACCOUNTS, CERTIFICATES OF DEPOSIT, STOCKS, BONDS AND MONEY MARKET ACCOUNTS. -MOST RECENT STATE AND FEDERAL INCOME TAX FORMS INCLUDING SCHEDULES C, D, E, AND F. IN THE EVENT THE PATIENT OR GUARANTOR'S INCOME DOES NOT WARRANT THE FILING OF A FEDERAL TAX STATEMENT, THE INDIVIDUAL MAY SUBMIT A NOTARIZED AFFIDAVIT ATTESTING TO THE FOREGOING. -MOST RECENT W-2 STATEMENT. -FOR PATIENTS OR MEMBERS OF THE HOUSEHOLD WHO ARE CURRENTLY UNEMPLOYED, WAGE INQUIRY FROM WORKONE. -IF APPLICABLE, DIVORCE/DISSOLUTION DECREES AND CHILD CUSTODY ORDER. <p>PATIENTS OR THEIR GUARANTORS WISHING TO APPLY FOR FINANCIAL ASSISTANCE DUE TO FINANCIAL HARDSHIP ARE ENCOURAGED TO SUBMIT AN APPLICATION WITHIN NINETY (90) DAYS OF DISCHARGE. PATIENTS OR THEIR GUARANTORS MAY SUBMIT AN APPLICATION UP TO TWO-HUNDRED AND FORTY (240) DAYS FROM THE DATE OF THEIR INITIAL POST-DISCHARGE BILLING STATEMENT FROM IU HEALTH, HOWEVER, ACCOUNTS MAY BE SUBJECT TO EXTRAORDINARY COLLECTION ACTIONS (ECA) AS SOON AS ONE-HUNDRED AND TWENTY (120) DAYS AFTER RECEIPT OF THE INITIAL POST-DISCHARGE BILLING STATEMENT.</p> <p>PATIENTS OR THEIR GUARANTORS SUBMITTING AN INCOMPLETE FINANCIAL ASSISTANCE APPLICATION WILL RECEIVE WRITTEN NOTIFICATION OF THE APPLICATION'S DEFICIENCY UPON DISCOVERY BY IU HEALTH. THE APPLICATION WILL BE PENDED FOR A PERIOD OF FORTY-FIVE (45) DAYS FROM THE DATE THE NOTIFICATION IS MAILED. IU HEALTH WILL SUSPEND ANY ECA UNTIL THE APPLICATION IS COMPLETE OR THE EXPIRATION OF THE FORTY-FIVE (45) DAY PERIOD.</p> <p>PATIENTS WITH LIMITED ENGLISH PROFICIENCY MAY REQUEST A COPY OF THIS POLICY, A FINANCIAL ASSISTANCE APPLICATION, AND A PLAIN LANGUAGE SUMMARY IN ONE OF THE BELOW LANGUAGES:</p> <ul style="list-style-type: none"> -ARABIC; -BURMESE; -BURMESE - FALAM; -BURMESE - HAKHA CHIN; -MANDARIN/CHINESE; OR -SPANISH <p>THE PATIENT, AND/OR THEIR REPRESENTATIVE, SUCH AS THE PATIENT'S PHYSICIAN, FAMILY MEMBERS, LEGAL COUNSEL, COMMUNITY OR RELIGIOUS GROUPS, SOCIAL SERVICES OR HOSPITAL PERSONNEL MAY REQUEST A FINANCIAL ASSISTANCE APPLICATION BE MAILED TO A PATIENT'S PRIMARY MAILING ADDRESS FREE OF CHARGE.</p> <p>IU HEALTH MAINTAINS THE CONFIDENTIALITY OF ALL FINANCIAL ASSISTANCE APPLICATIONS AND SUPPORTING DOCUMENTATION.</p> <p>IU HEALTH WILL DENY OR REVOKE FINANCIAL ASSISTANCE FOR ANY PATIENT OR GUARANTOR WHO FALSIFIES ANY PORTION OF A FINANCIAL ASSISTANCE APPLICATION.</p> <p>2. FINANCIAL ASSISTANCE DETERMINATIONS</p> <p>IU HEALTH WILL INFORM PATIENTS OR GUARANTORS OF THE RESULTS OF THEIR APPLICATION BY PROVIDING THE PATIENT OR GUARANTOR WITH A FINANCIAL ASSISTANCE DETERMINATION WITHIN NINETY (90) DAYS OF RECEIVING A COMPLETED APPLICATION AND ALL REQUESTED DOCUMENTATION.</p> <p>A PATIENT'S FINANCIAL ASSISTANCE APPLICATION AND FINANCIAL ASSISTANCE DETERMINATION ARE SPECIFIC TO EACH DATE(S) OF SERVICE AND APPROVED RELATED ENCOUNTERS.</p> <p>IF A PATIENT OR GUARANTOR IS GRANTED LESS THAN FULL CHARITY ASSISTANCE AND THE PATIENT OR GUARANTOR PROVIDES ADDITIONAL INFORMATION FOR RECONSIDERATION, REVENUE CYCLE SERVICES MAY AMEND A PRIOR FINANCIAL ASSISTANCE DETERMINATION.</p> <p>3. EXTRAORDINARY COLLECTION ACTIONS</p> <p>IU HEALTH MAY REFER DELINQUENT PATIENT ACCOUNTS TO A THIRD-PARTY COLLECTION AGENCY AFTER UTILIZING REASONABLE EFFORTS TO DETERMINE A PATIENT'S ELIGIBILITY FOR ASSISTANCE UNDER THIS POLICY. REASONABLE EFFORTS INCLUDE THE FOLLOWING:</p> <ul style="list-style-type: none"> -IU HEALTH WILL NOTIFY THE PATIENT OF THIS POLICY AT LEAST THIRTY (30) DAYS PRIOR TO INITIATING AN ECA. -IU HEALTH WILL NOT INITIATE AN ECA FOR AT LEAST ONE-HUNDRED AND TWENTY (120) DAYS AFTER THE PATIENT'S INITIAL POST-DISCHARGE BILLING STATEMENT. -IU HEALTH WILL REVIEW ALL FINANCIAL ASSISTANCE APPLICATIONS RECEIVED UP TO AND INCLUDING TWO-HUNDRED AND FORTY (240) DAYS AFTER THE PATIENT'S INITIAL POST-DISCHARGE BILLING STATEMENT. IU HEALTH WILL CEASE ANY ECAS IT HAS INITIATED UPON RECEIPT OF A FINANCIAL ASSISTANCE APPLICATION UNTIL A FINANCIAL ASSISTANCE DETERMINATION IS MADE UNDER THIS POLICY. -IF AN APPLICATION IS APPROVED, IU HEALTH WILL ISSUE A REVISED STATEMENT, ISSUE REFUNDS, AND MAKE REASONABLE EFFORTS TO REVERSE ECAS AS NECESSARY. <p>IU HEALTH AND ITS THIRD-PARTY COLLECTION AGENCIES MAY INITIATE AN ECA AGAINST A PATIENT OR THEIR GUARANTOR IN ACCORDANCE WITH THIS POLICY AND 26 C.F.R. § 1.501(R). ECAS MAY INCLUDE THE FOLLOWING:</p> <ul style="list-style-type: none"> -SELLING A PATIENT OR THEIR GUARANTOR'S OUTSTANDING FINANCIAL RESPONSIBILITY TO A THIRD PARTY.

Return Reference - Identifier	Explanation
	<p>-REPORTING ADVERSE INFORMATION ABOUT THE PATIENT OR THEIR GUARANTOR TO CONSUMER CREDIT REPORTING AGENCIES OR CREDIT BUREAUS. -DEFERRING OR DENYING, OR REQUIRING A PAYMENT BEFORE PROVIDING, MEDICALLY NECESSARY CARE BECAUSE OF A PATIENT OR THEIR GUARANTOR'S NONPAYMENT OF ONE OR MORE BILLS FOR PREVIOUSLY PROVIDED CARE COVERED UNDER THIS POLICY. -ACTIONS REQUIRING A LEGAL OR JUDICIAL PROCESS, INCLUDING BUT NOT LIMITED TO PLACING A LIEN ON A PATIENT'S OR THEIR GUARANTOR'S PROPERTY, FORECLOSING ON A PATIENT'S OR THEIR GUARANTOR'S REAL PROPERTY, ATTACHING OR SEIZING A PATIENT'S OR THEIR GUARANTOR'S BANK ACCOUNT OR OTHER PERSONAL PROPERTY, COMMENCING A CIVIL ACTION AGAINST A PATIENT OR THEIR GUARANTOR, CAUSING A PATIENT OR GUARANTOR'S ARREST, CAUSING A PATIENT AND/OR GUARANTOR TO BE SUBJECT TO A WRIT OF BODY ATTACHMENT, AND GARNISHING A PATIENT OR GUARANTOR'S WAGES</p> <p>WHEN IT IS NECESSARY TO ENGAGE IN SUCH ACTION, IU HEALTH AND ITS THIRD PARTY COLLECTION AGENCIES, WILL ENGAGE IN FAIR, RESPECTFUL AND TRANSPARENT COLLECTIONS ACTIVITIES.</p> <p>4. REFUNDS</p> <p>PATIENTS ELIGIBLE FOR FINANCIAL ASSISTANCE UNDER THIS POLICY WHO REMITTED PAYMENT TO IU HEALTH IN EXCESS OF THEIR PATIENT RESPONSIBILITY WILL BE ALERTED TO THE OVERPAYMENT AS PROMPTLY AFTER DISCOVERY AS IS REASONABLE GIVEN THE NATURE OF THE OVERPAYMENT.</p> <p>PATIENTS WITH AN OUTSTANDING ACCOUNT BALANCE DUE ON A SEPARATE ACCOUNT WILL HAVE THEIR REFUND APPLIED TO THE OUTSTANDING BALANCE.</p> <p>PATIENTS WITHOUT AN OUTSTANDING ACCOUNT BALANCE DESCRIBED ABOVE WILL BE ISSUED A REFUND CHECK FOR THEIR OVERPAYMENT AS SOON AS TECHNICALLY FEASIBLE.</p>
<p>SCHEDULE H, PART VI, LINE 2 - NEEDS ASSESSMENT</p>	<p>COMMUNITIES ARE MULTIFACETED AND SO ARE THEIR HEALTH NEEDS. IU HEALTH BALL MEMORIAL HOSPITAL UNDERSTANDS THAT THE HEALTH OF INDIVIDUALS AND COMMUNITIES ARE SHAPED BY VARIOUS SOCIAL AND ENVIRONMENTAL FACTORS, ALONG WITH HEALTH BEHAVIORS AND ADDITIONAL INFLUENCES.</p> <p>IU HEALTH BALL MEMORIAL HOSPITAL ASSESSES THE HEALTH CARE NEEDS OF THE COMMUNITIES IT SERVES BY CONDUCTING A COMMUNITY HEALTH NEEDS ASSESSMENT, (CHNA). FOR THE 2018 CHNA, IU HEALTH BALL MEMORIAL HOSPITAL CONDUCTED THE COMMUNITY SURVEY DATA COLLECTION IN COLLABORATION WITH INDIANA UNIVERSITY, UNIVERSITY OF EVANSVILLE AND AN INDIANA HOSPITAL COLLABORATIVE, INCLUDING COMMUNITY HEALTH NETWORK, FRANCISCAN ALLIANCE, ST. VINCENT HEALTH AND OTHER HOSPITAL PARTNERS.</p> <p>AFTER COMPLETION OF THE CHNA, IU HEALTH BALL MEMORIAL HOSPITAL REVIEWED SECONDARY DATA, FINDINGS FROM OTHER COMMUNITY HEALTH ASSESSMENTS OF AREAS SERVED BY THE HOSPITAL, INPUT OBTAINED FROM INDIVIDUALS WHO PARTICIPATED IN COMMUNITY MEETINGS, INPUT OBTAINED FROM KEY STAKEHOLDERS, AND A COMMUNITY SURVEY TO IDENTIFY AND ANALYZE THE NEEDS IDENTIFIED BY EACH SOURCE. THE TOP HEALTH NEEDS OF THE IU HEALTH BALL MEMORIAL HOSPITAL COMMUNITY ARE THOSE THAT ARE SUPPORTED BY MULTIPLE DATA SOURCES. ADDITIONALLY, THE EFFECTIVENESS OF AN INTERVENTION FOR EACH NEED AND IU HEALTH'S ABILITY TO IMPACT POSITIVE CHANGE WAS EVALUATED.</p> <p>IU HEALTH BELIEVES ITS CHNA PROCESS IS COMPREHENSIVE AND ADDITIONAL ASSESSMENTS ARE NOT REQUIRED.</p>
<p>SCHEDULE H, PART VI, LINE 3 - PATIENT EDUCATION</p>	<p>IU HEALTH BALL MEMORIAL HOSPITAL IS COMMITTED TO SERVING THE HEALTHCARE NEEDS OF ALL OF ITS PATIENTS REGARDLESS OF THEIR ABILITY TO PAY FOR SUCH SERVICES. TO ASSIST IN MEETING THOSE NEEDS, IU HEALTH BALL MEMORIAL HOSPITAL HAS ESTABLISHED A FAP TO PROVIDE FINANCIAL ASSISTANCE TO UNINSURED PATIENTS. IU HEALTH BALL MEMORIAL HOSPITAL IS COMMITTED TO ENSURING ITS PATIENTS ARE COMPLIANT WITH ALL PROVISIONS OF THE PATIENT PROTECTION & AFFORDABLE CARE ACT. TO THAT END, IU HEALTH BALL MEMORIAL HOSPITAL WILL MAKE A GOOD FAITH EFFORT TO LOCATE AND OBTAIN HEALTH INSURANCE COVERAGE FOR PATIENTS PRIOR TO CONSIDERING PATIENTS FOR COVERAGE UNDER THE FAP.</p> <p>IU HEALTH BALL MEMORIAL HOSPITAL TAKES SEVERAL MEASURES TO INFORM ITS PATIENTS OF THE FAP AND FAP-ELIGIBILITY. THESE MEASURES INCLUDE THE FOLLOWING:</p> <ol style="list-style-type: none"> 1.POST THIS POLICY, A PLAIN LANGUAGE SUMMARY OF THIS POLICY, AND THE FINANCIAL ASSISTANCE APPLICATION ON ITS WEBSITE. 2.PROVIDE PATIENTS WITH A PLAIN LANGUAGE SUMMARY OF THIS POLICY DURING REGISTRATION AND/OR DISCHARGE. 3.POST CONSPICUOUS DISPLAYS IN APPROPRIATE ACUTE CARE SETTINGS SUCH AS EMERGENCY DEPARTMENTS AND REGISTRATION AREAS DESCRIBING THE AVAILABLE ASSISTANCE AND DIRECTING ELIGIBLE PATIENTS TO THE FINANCIAL ASSISTANCE APPLICATION. 4.INCLUDE A CONSPICUOUS WRITTEN NOTICE ON ALL PATIENT POST-DISCHARGE BILLING STATEMENTS NOTIFYING THE PATIENT ABOUT THIS POLICY AND THE TELEPHONE NUMBER OF THE CUSTOMER SERVICE DEPARTMENT WHICH CAN ASSIST PATIENTS WITH QUESTIONS REGARDING THIS POLICY. 5.MAKE AVAILABLE CUSTOMER SERVICE REPRESENTATIVES VIA TELEPHONE DURING NORMAL BUSINESS HOURS. 6.MAIL COPIES OF THIS POLICY, A PLAIN LANGUAGE SUMMARY OF THIS POLICY, AND A FINANCIAL ASSISTANCE APPLICATION TO PATIENTS OR THEIR GUARANTOR FREE OF CHARGE UPON REQUEST. 7.BROADLY COMMUNICATE THIS POLICY AS A PART OF ITS GENERAL OUTREACH EFFORTS. 8.EDUCATE PATIENT-FACING TEAM MEMBERS ON THIS POLICY AND THE PROCESS FOR REFERRING PATIENTS TO THE PROGRAM.

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<p>SCHEDULE H, PART VI, LINE 4 - COMMUNITY INFORMATION</p>	<p>IU HEALTH BALL MEMORIAL HOSPITAL IS LOCATED IN DELAWARE COUNTY, INDIANA, A COUNTY LOCATED IN CENTRAL INDIANA. DELAWARE COUNTY INCLUDES ZIP CODES WITHIN THE TOWNS OF MUNCIE, EATON, GASTON, SELMA, ALBANY, DALEVILLE AND YORKTOWN.</p> <p>BASED ON THE MOST RECENT CENSUS BUREAU (2020) STATISTICS, DELAWARE COUNTY'S POPULATION IS 111,903 PERSONS WITH APPROXIMATELY 51.8% BEING FEMALE AND 48.2% MALE. THE COUNTY'S POPULATION ESTIMATES BY RACE ARE 86.6% WHITE, 2.6% HISPANIC OR LATINO, 7.2% BLACK, 1.3% ASIAN, 0.3% AMERICAN INDIAN OR ALASKA NATIVE, AND 2.4% PERSONS REPORTING TWO OR MORE RACES.</p> <p>DELAWARE COUNTY HAS RELATIVELY LOW LEVELS OF EDUCATIONAL ATTAINMENT. THE LEVEL OF EDUCATION MOST OF THE POPULATION HAS ACHIEVED IS A HIGH SCHOOL DEGREE (89.7%). AS OF 2020, 23.7% OF THE POPULATION HAD A BACHELOR'S DEGREE OR HIGHER.</p>
<p>SCHEDULE H, PART VI, LINE 5 - PROMOTION OF COMMUNITY HEALTH</p>	<p>IU HEALTH BALL MEMORIAL HOSPITAL IS A SUBSIDIARY OF INDIANA UNIVERSITY HEALTH, INC., A TAX-EXEMPT HEALTHCARE ORGANIZATION, WHOSE BOARD OF DIRECTORS IS COMPOSED OF MEMBERS, OF WHICH SUBSTANTIALLY ALL ARE INDEPENDENT COMMUNITY MEMBERS.</p> <p>IU HEALTH BALL MEMORIAL HOSPITAL SERVES AS THE BACKBONE ORGANIZATION PROVIDING RESOURCES TO OPERATE A THREE-COUNTY HEALTH COALITION FOCUSED ON OBESITY PREVENTION AND TOBACCO CESSATION AS A MEANS TO REDUCE THE IMPACT OF CHRONIC DISEASE INCLUDING CANCER AND HEART DISEASE. MORE THAN 150 ORGANIZATIONS ARE PARTNERS IN THE "HEALTHY COMMUNITY ALLIANCE OF EAST CENTRAL INDIANA" COALITION AND EACH PLEDGES TO INFLUENCE AUDIENCES TO MAKE POSITIVE CHOICES REGARDING IMPROVED NUTRITION, INCREASED PHYSICAL ACTIVITY OR TOBACCO CESSATION. COALITION PARTNERS REPORT A COLLECTIVE TOTAL AUDIENCE SIZE OF MORE THAN 50,000 PEOPLE. THE HCA MAKES MULTIPLE RESOURCES AVAILABLE TO COLLABORATORS, INCLUDING FACILITATED WORKGROUP SESSIONS IN EACH COUNTY, MATERIALS SUCH AS TOBACCO CESSATION TOOLKITS AND HEALTHY LIFESTYLE TOOLKITS; AND ONLINE RESOURCES SUCH AS AN E-NEWSLETTER, MEDIA MESSAGING AND ACCESS TO COMMUNITY HEALTH DATA FOR EACH OF THE THREE COUNTIES. THESE RESOURCES ARE PROVIDED TO ALL COLLABORATING ORGANIZATIONS FREE OF CHARGE. IN 2020 THE HCA BEGAN OFFERING WEBINAR PROGRAMMING AS A WAY TO ENGAGE PARTNERS IN ACCESSING RESOURCES AND PROGRAMMING IN ALL THREE COUNTIES.</p> <p>IN 2019, THE HOSPITAL CONVENED A GROUP OF COMMUNITY PARTNERS TO ADDRESS SOCIAL DETERMINANTS OF HEALTH IN THE THOMAS PARK/AVONDALE NEIGHBORHOOD, AN IMPOVERISHED AREA WITH HIGH OBESITY RATES, FOOD ACCESS ISSUES AND BLIGHTED HOUSING. A COMPREHENSIVE 3-YEAR PLAN OF ENGAGEMENT WITH THE 8TWELVE COALITION WAS DEVELOPED IN THE FORM OF A GRANT APPLICATION FOR THE IU HEALTH COMMUNITY IMPACT FUND. \$1M WAS AWARDED TO MAKE IMPROVEMENTS IN THE THOMAS-AVONDALE NEIGHBORHOOD RELATED TO FOOD ACCESS, PHYSICAL ACTIVITY AND BLIGHTED HOUSING IMPROVEMENTS IN THE AREA. IN 2020 SIGNIFICANT PROGRESS WAS MADE: OLD FACTORY PARKING LOT SURFACES WERE REMOVED TO MAKE WAY FOR NEW SOCCER FIELDS AT THE ROSS COMMUNITY CENTER; A SIDEWALK INVENTORY WAS COMPLETED; PEDESTRIAN TRAFFIC COUNTERS WERE PUT IN OPERATION; AND PLANNING FOR NEW PANTRY SPACES AND AN ENCLOSED COMMUNITY GARDEN SPACE WAS STARTED. ADDITIONALLY, PLACEMAKING DEVELOPMENT SUPPORT HAS BROUGHT A NEW COFFEE SHOP AND COMMUNITY GATHERING SPACES INTO A FORMERLY BLIGHTED AREA, SETTING THE STAGE FOR ADDITIONAL DEVELOPMENT IN 2021.</p> <p>THE HOSPITAL PARTICIPATES IN THE FACILITATION OF A REGIONAL FOOD COUNCIL WHICH BRINGS COLLABORATIVE PARTNERS TOGETHER AROUND IMPROVEMENTS IN FOOD POLICY, FOOD WASTE AND FOOD ACCESS, WHILE PROVIDING A FORUM FOR SMALL FOOD DISTRIBUTION OPERATIONS. IN RESPONSE TO COVID-19, THE GROUP HELD A SPECIAL PHILANTHROPY SESSION IN 2020 WHERE FUNDERS TALKED DIRECTLY WITH FOOD SUPPORT ORGANIZATIONS DIRECTLY ABOUT THEIR NEEDS. THE RESULT WAS THAT GROUPS RECEIVED FUNDING FOR INITIATIVES SUCH AS ADDITIONAL EQUIPMENT; AND THE MUNCIE FOOD HUB PARTNERED WITH IU HEALTH TO OFFER FREE PRODUCE FOR 15 WEEKS DELIVERED TO 10 DIFFERENT LOCATIONS IN DELAWARE, BLACKFORD AND JAY COUNTIES. SITES INCLUDED FOOD PANTRIES, CHILDCARE CENTERS, COMMUNITY CENTERS AND HEALTHCARE ORGANIZATIONS WHERE VULNERABLE POPULATIONS WERE ABLE TO BE REACHED.</p> <p>IU HEALTH HAS INSTALLED DRUG TAKE-BACK KIOSKS AT FOUR EAST CENTRAL INDIANA PHARMACY LOCATIONS: THE KIOSKS ARE OPEN TO THE PUBLIC AND AVAILABLE DURING BUSINESS HOURS. IN 2020, 897 POUNDS OF PRESCRIPTION MEDICATIONS WERE RECOVERED.</p> <p>AS AN ADDITIONAL OBESITY PREVENTION INITIATIVE, IU HEALTH BALL MEMORIAL HOSPITAL PARTNERS WITH MUNCIE'S MINNETRISTA FARMERS MARKET AND NEARLY TEN OTHER COMMUNITY PARTNERS TO OFFER "FAMILIES AT THE FARMERS MARKET." THIS PROGRAM CONSISTS OF WORKSHOPS THAT OFFER A WELLNESS-BASED PRESENTATION ON UTILIZING TASTY NATURAL HERBS, IDEAL HEALTHY RECIPES FOR CHILDREN, OR A DIABETES COMPONENT. GROCERY SHOPPING TIPS ARE OFTEN A PART OF THE EDUCATIONAL LECTURES, INCLUDING A BETTER UNDERSTANDING OF NUTRITIONAL LABELS AND FOOD STORAGE. PARTICIPATING FAMILIES ALSO RECEIVE FREE "IU HEALTH BUCKS" TO SHOP FOR PRODUCE IN THE FARMERS MARKET. IN 2020, THE PROGRAM'S IN-PERSON SESSIONS WERE ELIMINATED DUE TO COVID-19 PRECAUTIONS, BUT PARTICIPATING FAMILIES WERE STILL ABLE TO RECEIVE EDUCATIONAL MATERIALS AND IU HEALTH BUCKS.</p> <p>THE HOSPITAL ALSO PARTNERED WITH THE YMCA TO OFFER THE "CATCH" (COORDINATED APPROACH TO CHILD HEALTH) CURRICULUM WITHIN AN AFTER-SCHOOL PROGRAM FOR ELEMENTARY STUDENTS, WHO RECEIVED AN ADDITIONAL 15-30 MINUTES OF PHYSICAL ACTIVITY EACH DAY AND LEARNED ABOUT NUTRITIONAL FACTS.</p> <p>ADDITIONALLY, TO ASSIST WITH THE COMMUNITY ACCESSING HEALTHCARE, IU HEALTH BALL MEMORIAL HOSPITAL OFFERS COMPREHENSIVE CERVICAL CANCER SCREENINGS FREE OF CHARGE. IN 2020, SCREENER PERFORMED 12 CERVICAL EXAMS. BECAUSE THE AVERAGE ADULT SMOKING RATE IN DELAWARE COUNTY IS MORE THAN 20% AND PEAKS AT 36% IN SOME AREAS OF THE COMMUNITY SERVED, THE HOSPITAL ALSO OFFERS A LOW COST LUNG CANCER SCREENING FOR HEAVY SMOKERS INTENDED TO IDENTIFY CANCER AT AN EARLY STAGE. 309 PERSONS WERE SCREENED IN 2020.</p> <p>IN 2020, IU HEALTH EAST CENTRAL REGION HOSPITALS PARTNERED WITH OPEN DOOR HEALTH SERVICES TO OFFER MOBILE FLU SHOT CLINICS IN OCTOBER AND NOVEMBER. LIMITED RESOURCE AND MINORITY AUDIENCES WERE PRIORITIZED BY OFFERING FREE VACCINATIONS AT CHURCHES, SCHOOLS, COMMUNITY CENTERS AND FOOD DISTRIBUTION EVENTS IN DELAWARE, BLACKFORD AND JAY COUNTIES.</p>

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<p>SCHEDULE H, PART VI, LINE 6 - DESCRIPTION OF AFFILIATED GROUP</p>	<p>IU HEALTH BALL MEMORIAL HOSPITAL IS PART OF THE IU HEALTH STATEWIDE SYSTEM. THE IU HEALTH STATEWIDE SYSTEM IS INDIANA'S MOST COMPREHENSIVE HEALTHCARE SYSTEM. A UNIQUE PARTNERSHIP WITH THE INDIANA UNIVERSITY SCHOOL OF MEDICINE ("IU SCHOOL OF MEDICINE"), ONE OF THE NATION'S LEADING MEDICAL SCHOOLS, GIVES PATIENTS ACCESS TO INNOVATIVE TREATMENTS AND THERAPIES. IU HEALTH IS COMPRISED OF HOSPITALS, PHYSICIANS AND ALLIED SERVICES DEDICATED TO PROVIDING PREEMINENT CARE THROUGHOUT INDIANA AND BEYOND.</p> <p>NATIONAL RECOGNITION -EIGHT HOSPITALS DESIGNATED AS MAGNET® BY THE AMERICAN NURSES CREDENTIALING CENTER RECOGNIZING EXCELLENCE IN NURSING CARE. -U.S. NEWS & WORLD REPORT - ANNUAL RANKINGS -IU HEALTH MEDICAL CENTER IS NATIONALLY RANKED FOR THE 23RD YEAR IN A ROW. IU HEALTH MEDICAL CENTER IS NATIONALLY RANKED IN 3 ADULT SPECIALTIES AND 10 PEDIATRIC SPECIALTIES AND RATED HIGH PERFORMING IN 5 ADULT SPECIALTIES AND 6 PROCEDURES AND CONDITIONS. -IU HEALTH HAS FIVE HOSPITALS THAT ARE CONSIDERED HIGH PERFORMING IN CERTAIN PROCEDURES AND CONDITIONS: IU HEALTH BALL, IU HEALTH ARNETT, IU HEALTH NORTH, IU HEALTH WEST, AND IU HEALTH BLOOMINGTON HOSPITALS. -RILEY HOSPITAL FOR CHILDREN AT IU HEALTH IS NATIONALLY RANKED IN 10 PEDIATRIC SPECIALTIES.</p> <p>IU HEALTH STATEWIDE SYSTEM HOSPITALS IN THE SYSTEM INCLUDE THE FOLLOWING: -IU HEALTH INC. (I.E., THE IU HEALTH ACADEMIC HEALTH CENTER CONSISTS OF IU HEALTH METHODIST HOSPITAL, IU HEALTH UNIVERSITY HOSPITAL, RILEY HOSPITAL FOR CHILDREN AT IU HEALTH, AND IU HEALTH SAXONY HOSPITAL) -IU HEALTH ARNETT -IU HEALTH BALL -IU HEALTH BEDFORD HOSPITAL -IU HEALTH BLACKFORD -IU HEALTH BLOOMINGTON HOSPITAL -IU HEALTH FRANKFORT -IU HEALTH JAY -IU HEALTH NORTH HOSPITAL -IU HEALTH PAOLI HOSPITAL -IU HEALTH TIPTON HOSPITAL -IU HEALTH WEST HOSPITAL -IU HEALTH WHITE MEMORIAL HOSPITAL</p> <p>THE SYSTEM IS DIVIDED INTO FIVE REGIONS THAT SERVE COMMUNITIES IN NORTHWEST, NORTHEAST, CENTRAL, AND SOUTHERN INDIANA. IU HEALTH INC. HAS SIGNIFICANT STATEWIDE REACH AS A: 1) TEACHING HOSPITAL, 2) RESEARCH ACTIVITIES WITH THE IU SCHOOL OF MEDICINE AND OTHER NATIONAL COLLABORATIONS, 3) RILEY'S NETWORK OF LOCATIONS THROUGHOUT THE STATE DUE TO ITS PEDIATRIC EXPERTISE, AND 4) RILEY'S TRAUMA DEPARTMENT IS THE ONLY LEVEL I PEDIATRIC TRAUMA CENTER IN INDIANA.</p> <p>ALTHOUGH EACH HOSPITAL IN THE SYSTEM CONDUCTS AND ADOPTS ITS OWN CHNA AND IMPLEMENTATION STRATEGY, THE SYSTEM CONSIDERS THE SUM OF THESE PLANS PART OF A SYSTEM WIDE GOAL OF MAKING INDIANA ONE OF THE HEALTHIEST STATES IN THE NATION. THE HOSPITALS ARE GUIDED BY A SYSTEM WIDE MISSION TO IMPROVE THE HEALTH OF OUR PATIENTS AND COMMUNITY THROUGH INNOVATION, AND EXCELLENCE IN CARE, EDUCATION, RESEARCH, AND SERVICE. THE SYSTEM IS KEENLY AWARE OF THE POSITIVE IMPACT IT CAN HAVE ON IMPROVING THE HEALTH OF COMMUNITIES THROUGHOUT THE STATE OF INDIANA BY ALIGNING RESOURCES IN A SYSTEM-LEVEL AND STRATEGIC WAY.</p> <p>EDUCATION AND RESEARCH THE SYSTEM INCLUDES THE ACADEMIC HEALTH CENTER THAT WORKS IN PARTNERSHIP WITH THE IU SCHOOL OF MEDICINE TO TRAIN PHYSICIANS, BLENDING BREAKTHROUGH RESEARCH AND TREATMENTS WITH THE HIGHEST QUALITY OF PATIENT CARE. EACH YEAR, MORE THAN 1,000 RESIDENTS AND FELLOWS RECEIVE TRAINING IN IU HEALTH HOSPITALS. RESEARCH CONDUCTED BY IU SCHOOL OF MEDICINE FACULTY GIVES IU HEALTH PHYSICIANS AND PATIENTS ACCESS TO THE MOST LEADING-EDGE AND COMPREHENSIVE TREATMENT OPTIONS.</p> <p>IN 2017, IU HEALTH AND THE IU SCHOOL OF MEDICINE ANNOUNCED THAT THEY WOULD INVEST \$50 MILLION OVER SIX YEARS IN THE STRATEGIC RESEARCH INITIATIVE (SRI), A NEW RESEARCH COLLABORATION THAT HAS ENHANCED THE INSTITUTIONS' JOINT CAPABILITIES IN FUNDAMENTAL SCIENTIFIC INVESTIGATION, TRANSLATIONAL RESEARCH AND CLINICAL TRIALS. THE INITIAL FOCUS IS ON PROJECTS IN THE FIELDS OF NEUROSCIENCE, CANCER AND CARDIOVASCULAR DISEASE WITH THE GOAL TO FUND TRANSFORMATIVE PROPOSALS THAT WILL FUNDAMENTALLY CHANGE THE UNDERSTANDING OF THESE DISEASES AND LEAD TO IMPORTANT NEW THERAPIES FOR PATIENTS.</p> <p>THE THREE TARGET RESEARCH AREAS REPRESENT RESEARCH STRENGTHS AT IU SCHOOL OF MEDICINE, KEY STRATEGIC SERVICE LINES FOR IU HEALTH, AND IMPORTANT MEDICAL NEEDS IN A TIME OF AN AGING POPULATION AND RISING HEALTHCARE COSTS. ONE OF THE MOST SIGNIFICANT OUTCOMES OF THIS INITIATIVE INCLUDES THE INDIANA UNIVERSITY MELVIN AND BREN SIMON CANCER CENTER RECEIVING THE NATIONAL CANCER INSTITUTE'S (NCI)-DESIGNATED STATUS OF "COMPREHENSIVE." THIS DESIGNATION WAS ACHIEVED IN AUGUST 2019 MAKING THE CENTER THE ONLY NCI-DESIGNATED COMPREHENSIVE CANCER CENTER IN INDIANA AND ONE OF JUST 51 IN THE NATION.</p> <p>COMMUNITY HEALTH TO FURTHER PROMOTE THE HEALTH OF THE COMMUNITIES SERVED BY THE SYSTEM, THE SYSTEM-LEVEL COMMUNITY HEALTH TEAM BUILDS THE CAPABILITIES AND COMPETENCIES TO IMPACT TEAM MEMBERS, RISK LIVES, AND PATIENTS THROUGHOUT THE SYSTEM. ADDITIONALLY, THE TEAM PARTNERS WITH STATE AND LOCAL COMMUNITY-BASED ORGANIZATIONS, COMMUNITY COALITIONS, AND GOVERNMENTAL AGENCIES TO PURSUE A SYSTEM-LEVEL ADVOCACY/COLLABORATION STRATEGY THAT SEEKS TO IMPROVE THE HEALTH OF COMMUNITIES.</p> <p>ALL HOSPITALS IN THE SYSTEM IDENTIFY AND ADDRESS SIGNIFICANT HEALTH NEEDS UNIQUE TO THE COMMUNITY IT SERVES. HOWEVER, BECAUSE SOME OF THESE HEALTH NEEDS ARE COMMON IN COMMUNITIES SERVED BY MULTIPLE HOSPITALS IN THE SYSTEM, THEY WARRANT A SYSTEM LEVEL</p>

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	<p>STRATEGY. COMMUNITY HEALTH PLANS AND PROVIDES TECHNICAL ASSISTANCE FOR SYSTEM-LEVEL STRATEGIES THAT ADDRESS THESE COMMON HEALTH NEEDS INCLUDING HEALTH EQUITY, TOBACCO TREATMENT, BEHAVIORAL HEALTH ACCESS, AND SOCIAL NEEDS. EACH HOSPITAL WORKS COLLABORATIVELY WITH THE COMMUNITY HEALTH TEAM TO OPERATIONALIZE SYSTEM-LEVEL STRATEGIES THROUGH THE IMPLEMENTATION OF SPECIFIC ACTIVITIES THAT ALIGN AND ACTIVATE LOCAL RESOURCES. THIS BENEFITS THE COMMUNITY EACH HOSPITAL SERVES AND WORKS TOWARDS A STATEWIDE IMPACT (SYSTEM-LEVEL) ON HEALTH OUTCOMES.</p> <p>IU HEALTH SERVES IU HEALTH SERVES, A SYSTEM-LEVEL TEAM MEMBER VOLUNTEER PROGRAM, SEEKS TO POSITIVELY IMPACT THE HEALTH OF COMMUNITIES THE IU HEALTH STATEWIDE SYSTEM SERVES AND FOSTERS A CULTURE OF ENGAGEMENT AND SOCIAL RESPONSIBILITY. IU HEALTH INC. COORDINATES THE DIFFERENT INITIATIVES OF THE PROGRAM, INCLUDING DAYS OF SERVICE. THIS IS THE LARGEST VOLUNTEER EVENT OF THE YEAR, CONSISTING OF PROJECTS DESIGNED TO ENGAGE IU HEALTH INC. TEAM MEMBERS IN ACTIVITIES THAT ADDRESS LOCAL, IDENTIFIED COMMUNITY HEALTH PRIORITIES.</p> <p>COMMUNITY IMPACT INVESTMENT (CII) FUND THE CII FUND IS A \$100 MILLION BOARD DESIGNATED FUND TO BE MANAGED AND OVERSEEN BY THE IU HEALTH FOUNDATION TO FINANCIALLY SUPPORT HIGH IMPACT COMMUNITY INVESTING DESIGNED TO ADDRESS SOCIAL DETERMINANTS OF HEALTH IN COMMUNITIES IU HEALTH SERVES. EACH IU HEALTH HOSPITAL HAS A SIGNIFICANT IMPACT ON AND ARE DEEPLY INVESTED IN THEIR LOCAL COMMUNITIES. THROUGH THE GRANTS PROVIDED BY THIS CII FUND, IU HEALTH CAN STRATEGICALLY AND INTENTIONALLY ADDRESS THE SOCIAL, ECONOMIC AND ENVIRONMENTAL FACTORS THAT IMPACT THE HEALTH OF OUR SURROUNDING COMMUNITIES. EACH IU HEALTH HOSPITAL AND ITS TEAM MEMBERS ARE ELIGIBLE FOR THIS GRANT OPPORTUNITY.</p>
SCHEDULE H, PART VI, LINE 7 - STATE FILING OF COMMUNITY BENEFIT REPORT	IN