

**SCHEDULE H
(Form 990)**

Hospitals

OMB No. 1545-0047

2021

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, INC.	Employer identification number 35 1955872
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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	✓	
1b 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)		47,446	82,618,600		82,618,600	1.78
b Medicaid (from Worksheet 3, column a)		140,262	1,285,289,851	784,038,848	501,251,003	10.80
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	187,708	1,367,908,451	784,038,848	583,869,603	12.58
Other Benefits						
e Community health improvement services and community benefit operations (from Worksheet 4)	22	78,738	20,374,140	1,325,288	19,048,852	0.41
f Health professions education (from Worksheet 5)	3	5,909	122,217,800	17,700,349	104,517,451	2.25
g Subsidized health services (from Worksheet 6)	1	12,958	19,016,446	13,793,711	5,222,735	0.11
h Research (from Worksheet 7)	1		17,000,000		17,000,000	0.37
i Cash and in-kind contributions for community benefit (from Worksheet 8)	6	53,273	427,903,554		427,903,554	9.22
j Total. Other Benefits	33	150,878	606,511,940	32,819,348	573,692,592	12.37
k Total. Add lines 7d and 7j	33	338,586	1,974,420,391	816,858,196	1,157,562,195	24.95

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat. No. 50192T

Schedule H (Form 990) 2021

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					0	0.00
3 Community support	1	0	11,000,000	0	11,000,000	0.24
4 Environmental improvements					0	0.00
5 Leadership development and training for community members					0	0.00
6 Coalition building	1	0	3,282	0	3,282	0.00
7 Community health improvement advocacy					0	0.00
8 Workforce development	1	770	16,111	0	16,111	0.00
9 Other					0	0.00
10 Total	3	770	11,019,393	0	11,019,393	0.24

Part III Bad Debt, Medicare, & Collection Practices

Section A. Bad Debt Expense

- 1 Did the organization report bad debt expense in accordance with Healthcare Financial Management Association Statement No. 15? **1** Yes No
- 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** 25,050,407
- 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** 373,927,946
- 6 Enter Medicare allowable costs of care relating to payments on line 5 **6** 433,903,768
- 7 Subtract line 6 from line 5. This is the surplus (or shortfall) **7** (59,975,822)
- 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:
 Cost accounting system Cost to charge ratio Other

Section C. Collection Practices

- 9a Did the organization have a written debt collection policy during the tax year? **9a** Yes No
- b 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** Yes No

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 BELTWAY SURGERY CENTERS, LLC	AMBULATORY SURGERY CENTER	25.62		74.38
2 SENATE STREET SURGERY CENTER, LLC	AMBULATORY SURGERY CENTER	26.21		73.79
3 INDIANA ENDOSCOPY CENTERS, LLC	AMBULATORY SURGERY CENTER	26.01		73.99
4 ROC SURGERY, LLC	AMBULATORY SURGERY CENTER	29.70		70.30
5 BALL OUTPATIENT SURGERY CENTER, LLC	AMBULATORY SURGERY CENTER	28.18		71.82
6				
7				
8				
9				
10				
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 INDIANA UNIVERSITY HEALTH
1701 N. SENATE BLVD., INDIANAPOLIS, IN 46202
HTTPS://IUHEALTH.ORG/ STATE LICENSE NO. : 22-005051-1

Table with 10 columns: 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. Row 1 contains checkmarks and text: SEE PART V, SECTION C FOR ADDITIONAL INFORMATION.

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 INDIANA UNIVERSITY HEALTH

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: <u>20 21</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: <u>20 22</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 INDIANA UNIVERSITY HEALTH

		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 INDIANA UNIVERSITY HEALTH

	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: <ul style="list-style-type: none"> 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? <p>If "Yes," check all actions in which the hospital facility or a third party engaged:</p> <ul style="list-style-type: none"> 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): <ul style="list-style-type: none"> 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? <p>If "No," indicate why:</p> <ul style="list-style-type: none"> 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 INDIANA UNIVERSITY HEALTH

		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
SCHEDULE H, PART V, SECTION B, LINE 3E - THE SIGNIFICANT HEALTH NEEDS OF THE COMMUNITY	IU HEALTH'S 2021 COMMUNITY HEALTH NEEDS ASSESSMENT (CHNA) REPORTS INCLUDE PRIORITIZED DESCRIPTIONS OF SIGNIFICANT HEALTH NEEDS IN THE COMMUNITY. THE CHNA REPORTS IDENTIFIED THE FOLLOWING NEEDS TO BE ADDRESSED: - ACCESS TO HEALTH CARE SERVICES - CHRONIC DISEASE AND CHRONIC DISEASE MANAGEMENT - DRUG AND SUBSTANCE ABUSE - FOOD INSECURITY AND HEALTHY EATING - HEALTH EDUCATION AND NAVIGATION - MATERNAL AND INFANT HEALTH AND CHILD WELL-BEING - MENTAL HEALTH - OBESITY, DIABETES AND PHYSICAL INACTIVITY - SMOKING, TOBACCO USE AND EXPOSURE TO SECONDHAND SMOKE - SOCIAL DETERMINANTS OF HEALTH - AGING POPULATION AND NEEDS OF SENIORS

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 METHODIST HOSPITAL, IU HEALTH UNIVERSITY HOSPITAL, AND RILEY HOSPITAL FOR CHILDREN</p> <p>DESCRIPTION: IU HEALTH OPERATES FOUR HOSPITAL LOCATIONS THAT ARE LICENSED AS A SINGLE HOSPITAL BY THE INDIANA STATE DEPARTMENT OF HEALTH. THESE HOSPITAL LOCATIONS ARE AS FOLLOWS:</p> <p>-IU HEALTH METHODIST HOSPITAL -IU HEALTH UNIVERSITY HOSPITAL -RILEY HOSPITAL FOR CHILDREN AT IU HEALTH -IU HEALTH SAXONY HOSPITAL</p> <p>IU HEALTH METHODIST HOSPITAL, IU HEALTH UNIVERSITY HOSPITAL, AND RILEY HOSPITAL FOR CHILDREN ARE LOCATED IN INDIANAPOLIS, MARION COUNTY, INDIANA AND ARE REFERRED TO AS THE IU HEALTH ACADEMIC HEALTH CENTER. IU HEALTH SAXONY HOSPITAL IS LOCATED IN FISHERS, HAMILTON COUNTY, INDIANA. ALTHOUGH LICENSED AS A SINGLE HOSPITAL, EACH OF THESE FACILITIES SERVE DIFFERENT, ALTHOUGH SOMETIMES OVERLAPPING, PORTIONS OF THE COMMUNITY WHICH PRESENT THEIR OWN UNIQUE HEALTH NEEDS. IN ORDER TO TAKE INTO ACCOUNT ALL OF THESE UNIQUE HEALTH NEEDS, IU HEALTH CONDUCTED SEPARATE COMMUNITY HEALTH NEEDS ASSESSMENTS ("CHNAS") FOR EACH OF ITS FOUR HOSPITAL LOCATIONS.</p> <p>IN CONDUCTING EACH OF ITS MOST RECENT CHNAS, IU HEALTH TOOK INTO ACCOUNT INPUT FROM PERSONS WHO REPRESENT THE BROAD INTERESTS OF THE COMMUNITIES IT SERVES BY HOSTING FOUR COMMUNITY FOCUS GROUPS AND CONDUCTING INTERVIEWS. THESE FOCUS GROUPS ENGAGED PUBLIC HEALTH OFFICIALS AND COMMUNITY-BASED ORGANIZATIONS THAT PROVIDE SERVICES AND/OR REFLECT COMMUNITY MEMBERS WHO ARE MEDICALLY UNDERSERVED, LOW-INCOME, OR OF A MINORITY SUBPOPULATION TO DISCUSS THE HEALTH NEEDS OF THE SERVICE AREA AND WHAT ROLE IU HEALTH COULD PLAY IN ADDRESSING THE IDENTIFIED NEEDS.</p> <p>IU HEALTH ACADEMIC HEALTH CENTER THE DEFINED COMMUNITY PER THE MOST RECENT CHNA IS MARION COUNTY, WHERE THE HOSPITAL RESIDES.</p> <p>MARION COUNTY - COMMUNITY MEETINGS AND INTERVIEWS</p> <p>IN COLLABORATION WITH OTHER LOCAL HEALTH SYSTEMS - ASCENSION ST. VINCENT (INDIANAPOLIS) AND COMMUNITY HEALTH NETWORK - FOUR VIRTUAL, COMMUNITY MEETINGS WERE HELD MAY 25-27, 2021, TO RECEIVE INPUT FROM STAKEHOLDERS REGARDING THE HEALTH NEEDS IN MARION COUNTY. IN TOTAL, THE MEETINGS WERE ATTENDED BY 53 COMMUNITY ORGANIZATIONS THAT PROVIDE SERVICES AND/OR REFLECT COMMUNITY RESIDENTS WHO ARE UNDER OR UNINSURED; WITH UNDOCUMENTED STATUS; OLDER; LIMITED ENGLISH PROFICIENT; LOW-INCOME; USE OR INJECT DRUGS; EXPERIENCE HOMELESSNESS; BLACK, INDIGENOUS, AND PEOPLE OF COLOR; LGBTQ; AND POPULATIONS IMPACTED GREATLY BY NON-MEDICAL BARRIERS OF HEALTH SUCH AS POVERTY, FOOD ACCESS AND AFFORDABLE HOUSING.</p> <p>*ALLEN CHAPEL AME CHURCH *ANTHEM MEDICAID *BROADWAY UNITED METHODIST CHURCH *CITY-COUNTY COUNCIL STAFF *CITY OF INDIANAPOLIS, DIVISION OF COMMUNITY NUTRITION AND FOOD POLICY *COALITION FOR OUR IMMIGRANT NEIGHBORS *CONCERNED CLERGY OF INDIANAPOLIS *CONNECTIONS IN HEALTH, INDIANA CLINICAL AND TRANSLATIONAL SCIENCES INSTITUTE (CTSI), INDIANA UNIVERSITY SCHOOL OF MEDICINE *COVERING KIDS & FAMILIES OF INDIANA *CROSSROADS AME CHURCH/COMMON GROUNDS INSTITUTE *FIRST BAPTIST CHURCH NORTH INDIANAPOLIS *GENNESARET FREE CLINIC *GLEANERS FOOD BANK OF INDIANA *HABITAT FOR HUMANITY OF GREATER INDIANAPOLIS *HEALTH BY DESIGN *HORIZON HOUSE *IMMIGRANT WELCOME CENTER * INDIANA LEGAL SERVICES *INDIANA NATIVE AMERICAN INDIAN AFFAIRS COMMISSION *INDIANA PUBLIC HEALTH ASSOCIATION *INDIANA DEPARTMENT OF HEALTH *INDIANA UNIVERSITY RICHARD M. FAIRBANKS SCHOOL OF PUBLIC HEALTH *INDIANAPOLIS CITY COUNCIL *INDIANAPOLIS NEIGHBORHOOD HOUSING PARTNERSHIP *INDIANAPOLIS URBAN LEAGUE *INDY GO *INDY HUNGER NETWORK *JUMP IN FOR HEALTHY KIDS *MARIAN UNIVERSITY/COLLEGE OF OSTEOPATHIC MEDICINE *MARION COUNTY PUBLIC HEALTH DEPARTMENT *MANAGED HEALTH SERVICES (MHS) NEIGHBORHOOD CHRISTIAN LEGAL CLINIC *NINE13SPORTS *NURSE FAMILY PARTNERSHIP OF GOODWILL OF CENTRAL AND SOUTHERN INDIANA *PATHWAY TO RECOVERY *PLAYWORKS *RAPHAEL HEALTH CENTER, INC. *RICHARD M. FAIRBANKS FOUNDATION *THE JULIAN CENTER *UNITED STATES CONGRESS, REPRESENTATIVE ANDRE CARSON (STAFF) *UNIVERSITY OF INDIANAPOLIS *YMCA OF GREATER INDIANAPOLIS/TOP 10 COALITION</p>

Return Reference - Identifier	Explanation
	<p>SECONDARY DATA AND A PRELIMINARY LIST OF COMMUNITY HEALTH NEED PRIORITIES WERE PRESENTED AT THE MEETINGS. EACH GROUP WAS THEN ASKED QUESTIONS ABOUT THE PRELIMINARY LIST, INCLUDING THEIR REACTIONS, ADDITIONS TO THE PROPOSED NEEDS, THOUGHTS REGARDING THE CAUSES OF THE NEEDS, IMPACTS OF THE COVID-19 PANDEMIC AND OTHERS.</p> <p>AFTER THIS DISCUSSION, PARTICIPANTS WERE GIVEN THE OPPORTUNITY TO MAKE ADDITIONAL COMMENTS BEFORE BEING ASKED TO VOTE ON WHAT THEY BELIEVED WERE THE MOST SIGNIFICANT NEEDS IN THE COUNTY. PARTICIPANTS WERE ASKED TO CHOOSE THREE TO FIVE SIGNIFICANT HEALTH NEEDS VIA AN ONLINE POLL DURING AND AFTER THE MEETING.</p> <p>PRELIMINARY NEEDS IDENTIFIED INCLUDE A WIDE-ARRAY OF TOPICS, INCLUDING THE COVID-19 PANDEMIC, FOOD INSECURITY, MATERNAL AND CHILD HEALTH, RACIAL AND ETHNIC DISPARITIES, MENTAL HEALTH AND ACCESS TO MENTAL HEALTH PROVIDERS, OBESITY AND PHYSICAL INACTIVITY, POVERTY, EDUCATIONAL ACHIEVEMENT, HOUSING, CRIME AND COMMUNITY SAFETY, PUBLIC HEALTH FUNDING AND OTHERS.</p> <p>IN ADDITION TO THESE TOPICS, PARTICIPANTS FOCUSED DISCUSSION AROUND SUBSTANCE ABUSE AND TREATMENT, TRANSPORTATION BARRIERS, CULTURALLY APPROPRIATE CARE AND SERVICES (INCLUDING LANGUAGE BARRIERS), AFFORDABILITY OF HEALTHY FOOD, SMOKING AND TOBACCO USE, ACCESS TO AND COST OF PRIMARY CARE, HEALTH INSURANCE, PREVENTIVE HEALTH SERVICES, LACK OF PROVIDERS WITHIN HIGH-NEED AREAS, CHILDCARE, CHRONIC CONDITIONS (INCLUDING DIABETES AND HYPERTENSION), NAVIGATING EXISTING RESOURCES, DENTAL HEALTH NEEDS, CHILD HEALTH, JOB OPPORTUNITIES AND TRAININGS, TECHNOLOGY BARRIERS AND DIGITAL-DIVIDE, POST INCARCERATION RESOURCES AND SOCIAL CONNECTEDNESS.</p> <p>FOR THOSE UNABLE TO ATTEND COMMUNITY MEETINGS, A SEPARATE SURVEY WAS DISTRIBUTED TO RECEIVE THEIR INPUT ON THE MOST SIGNIFICANT NEEDS. THESE FINDINGS WERE COMBINED WITH THOSE OF THE COMMUNITY MEETING PARTICIPANTS.</p> <p>FROM THIS PROCESS, PARTICIPANTS IDENTIFIED THE FOLLOWING NEEDS AS MOST SIGNIFICANT FOR MARION COUNTY:</p> <ul style="list-style-type: none"> *RACIAL AND ETHNIC HEALTH DISPARITIES *OBESITY CONTINUES TO BE AN ISSUE, AS WELL AS DIABETES, WITH RATES INCREASING FOR ADULTS. *INFANT AND MATERNAL MORTALITY ARE SIGNIFICANT ISSUES, WITH SOCIAL DETERMINANTS OF HEALTH IMPACTING ACCESS TO PRENATAL CARE AND OTHER NEEDED SERVICES. *HIV (HUMAN IMMUNODEFICIENCY VIRUS) IS STILL A CONCERN, WITH SOME HOPE THAT THE DISEASE CAN BE ERADICATED WITHIN THE NEXT DECADE THROUGH MODERN MEDICINE AND PREVENTION STRATEGIES SUCH AS PREP (PRE-EXPOSURE PROPHYLAXIS). *TOBACCO AND VAPING ARE ISSUES, WITH A LOW CIGARETTE TAX IN INDIANA HELPING PERPETUATE ITS USE. ENVIRONMENTAL HEALTH - INCLUDING OLD HOUSING AND AIR POLLUTION - IS LEADING TO POOR HEALTH, INCLUDING LEAD POISONING, ARSENIC POISONING AND PEDIATRIC ASTHMA. THE NEED FOR SAFE AND STABLE HOUSING IS SIGNIFICANT. *HEALTH LITERACY IS A NEED, PARTICULARLY AFFECTING HISPANIC (OR LATINO) POPULATIONS DUE TO LANGUAGE BARRIERS. EDUCATION DISPARITIES AROUND HEALTH ARE ALSO LEADING TO GENERA*ACCESS TO MENTAL AND BEHAVIORAL HEALTH SERVICES *FOOD INSECURITY AND ACCESS TO AFFORDABLE, HEALTHY FOOD *ACCESS TO SAFE AND AFFORDABLE HOUSING *MENTAL HEALTH *POVERTY AND ASSOCIATED COMMUNITY NEED <p>A SURVEY WAS ALSO ISSUED TO INTERNAL PROVIDERS AT IU HEALTH METHODIST HOSPITAL, ASKING THEM TO IDENTIFY PRIORITY NEEDS AMONG THE PATIENTS THEY SERVE. AMONG 12 RESPONSES, THE FOLLOWING ISSUES WERE IDENTIFIED AS THE MOST SIGNIFICANT:</p> <ul style="list-style-type: none"> *FOOD INSECURITY AND NUTRITION *HEALTH DISPARITIES, PARTICULARLY FOR RACIAL AND ETHNIC MINORITY POPULATIONS *MENTAL HEALTH *POVERTY AND INCOME INEQUALITY <p>THE SURVEY ALSO ASKED ABOUT THE IMPACTS OF THE COVID-19 PANDEMIC. ISSUES MOST OFTEN SELECTED AS SIGNIFICANT IMPACTS INCLUDE:</p> <ul style="list-style-type: none"> *SOCIAL ISOLATION AND LONELINESS *HEALTH DISPARITIES *DIGITAL DIVIDE (LACK OF INTERNET OR DEVICE ACCESS) *ECONOMIC DISPARITIES *HOUSING (INABILITY TO STAY SHELTERED OR PAY RENT/MORTGAGE)

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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 METHODIST HOSPITAL, IU HEALTH UNIVERSITY HOSPITAL, AND RILEY HOSPITAL FOR CHILDREN(CONTINUED)</p> <p>DESCRIPTION: TWO ADDITIONAL INTERVIEWS WERE CONDUCTED IN MAY 2021 WITH REPRESENTATIVES OF THE COUNTY PUBLIC HEALTH DEPARTMENT AND MINORITY HEALTH ORGANIZATION TO OBTAIN SUBJECT-MATTER EXPERTISE INTO THE HEALTH NEEDS IN MARION COUNTY. THE FOLLOWING ISSUES WERE DISCUSSED AS SIGNIFICANT: *POVERTY IS A SIGNIFICANT ISSUE AND IMPACTS ALMOST ALL AREAS OF WELLBEING, INCLUDING HOUSING, ACCESSING HEALTH SERVICES, NUTRITION, STRESS AND MENTAL HEALTH, CHRONIC DISEASE, TRANSPORTATION AND OTHERS. THE NEED FOR A LIVING WAGE FOR ALL RESIDENTS IS SIGNIFICANT. *HEALTH DISPARITIES ARE SIGNIFICANT, INCLUDING LARGE DISPARITIES IN SOCIAL DETERMINANTS OF HEALTH FOR RACIAL AND ETHNIC MINORITY POPULATIONS. *HEALTH INSURANCE IS A SIGNIFICANT BARRIER TO OPTIMAL HEALTH, WITH RESTRICTIONS IN COVERAGE LEADING TO A LACK OF PREVENTIVE HEALTH. *MENTAL HEALTH IS A SIGNIFICANT ISSUE, WITH DEPRESSION AND ANXIETY BOTH WIDESPREAD. SELF-MEDICATION THROUGH SUBSTANCE ABUSE IS COMMON. *OBESITY CONTINUES TO BE AN ISSUE, AS WELL AS DIABETES, WITH RATES INCREASING FOR ADULTS. *INFANT AND MATERNAL MORTALITY ARE SIGNIFICANT ISSUES, WITH SOCIAL DETERMINANTS OF HEALTH IMPACTING ACCESS TO PRENATAL CARE AND OTHER NEEDED SERVICES. *HIV (HUMAN IMMUNODEFICIENCY VIRUS) IS STILL A CONCERN, WITH SOME HOPE THAT THE DISEASE CAN BE ERADICATED WITHIN THE NEXT DECADE THROUGH MODERN MEDICINE AND PREVENTION STRATEGIES SUCH AS PREP (PRE-EXPOSURE PROPHYLAXIS). *TOBACCO AND VAPING ARE ISSUES, WITH A LOW CIGARETTE TAX IN INDIANA HELPING PERPETUATE ITS USE. ENVIRONMENTAL HEALTH - INCLUDING OLD HOUSING AND AIR POLLUTION - IS LEADING TO POOR HEALTH, INCLUDING LEAD POISONING, ARSENIC POISONING AND PEDIATRIC ASTHMA. THE NEED FOR SAFE AND STABLE HOUSING IS SIGNIFICANT. *HEALTH LITERACY IS A NEED, PARTICULARLY AFFECTING HISPANIC (OR LATINO) POPULATIONS DUE TO LANGUAGE BARRIERS. EDUCATION DISPARITIES AROUND HEALTH ARE ALSO LEADING TO GENERATIONAL PERSISTENCE OF HEALTH DISPARITIES FOR RACIAL AND ETHNIC MINORITY POPULATIONS. *FOOD INSECURITY IS SIGNIANT, AND FOOD PANTRIES MAY HAVE IRREGULAR HOURS AND FACE HUGE DEMAND. *EDUCATION NEEDS BETTER FUNDING, INCLUDING ADEQUATE TEACHER COMPENSATION. *MORE COMMUNITY COLLABORATION IS NEEDED WITH HEALTH SYSTEMS AND SOCIAL SERVICE PROVIDERS TO IDENTIFY COMMUNITY IMPROVEMENT AND PLANNED INTERVENTIONS.</p> <p>IN REGARD TO THE COVID-19 PANDEMIC, A WIDE ARRAY OF IMPACTS WAS NOTED, INCLUDING: TESTING WAS A LARGE CHALLENGE AT THE BEGINNING OF THE COVID-19 PANDEMIC, DUE TO INADEQUATE FEDERAL RESOURCES AND OTHER LIMITS. *THE COVID-19 PANDEMIC HIGHLIGHTED THE IMPACT OF SOCIAL DETERMINANTS OF HEALTH, AS PEOPLE EXPERIENCING HOMELESSNESS FACED HUGE CONCERNS DUE TO THE INABILITY TO SOCIALLY DISTANCE IN SHELTERS AND ACCESS CARE. HOTELS WERE TURNED INTO ISOLATION AREAS FOR PATIENTS WITH COVID-19. RACIAL AND ETHNIC DISPARITIES IN TESTING, TREATMENT AND OUTCOMES WERE HIGHLIGHTED BY THE COVID-19 PANDEMIC. ELDERLY BLACK RESIDENTS WERE PARTICULARLY AFFECTED. *CARE WAS DELAYED FOR A LOT OF INDIVIDUALS DUE TO FEAR OF GOING TO A PROVIDER AND BEING EXPOSED TO THE VIRUS, LEADING TO UNMET NEEDS AND EMERGENCY SITUATIONS. *COMMUNITY COLLABORATION AMONG PROVIDERS LED TO A BETTER RESPONSE, INCLUDING HEALTH SYSTEMS OFFERING TESTING AND OTHER AID TO PUBLIC HEALTH ORGANIZATIONS. MORE COLLABORATION AND COORDINATION WILL BE NEEDED IN THE FUTURE. *VACCINATION DISPARITIES ARE EVIDENT, WITH BLACK POPULATIONS DISPROPORTIONATELY UNABLE TO ACCESS THE VACCINE IF DESIRED. *THE NEED FOR BETTER HEALTH INFORMATION SHARING (INCLUDING THE IDENTIFICATION OF HEALTH DISPARITIES) BETWEEN ORGANIZATIONS.</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 SAXONY HOSPITAL</p> <p>DESCRIPTION: THE DEFINED COMMUNITY PER THE MOST RECENT CHNA IS MARION, HAMILTON, HANCOCK AND MADISON COUNTIES. THE HOSPITAL RESIDES IN HAMILTON COUNTY.</p> <p>MARION COUNTY - COMMUNITY MEETINGS AND INTERVIEWS (SEE ABOVE INFORMATION)</p> <p>HAMILTON COUNTY - COMMUNITY MEETINGS AND INTERVIEWS</p> <p>IN COLLABORATION WITH OTHER LOCAL HEALTH SYSTEMS - ASCENSION ST. VINCENT, COMMUNITY HEALTH NETWORK AND RIVERVIEW HEALTH - TWO COMMUNITY MEETINGS WERE HELD ON MAY 20 (MORNING AND AFTERNOON), 2021, TO RECEIVE INPUT FROM STAKEHOLDERS REGARDING THE HEALTH NEEDS IN HAMILTON COUNTY. THE MEETINGS WERE ATTENDED BY 82 COMMUNITY ORGANIZATIONS THAT PROVIDE SERVICES AND/OR REFLECT COMMUNITY RESIDENTS WHO ARE UNDER OR UNINSURED; WITH UNDOCUMENTED STATUS; OLDER; LIMITED ENGLISH PROFICIENT; LOW-INCOME; USE OR INJECT DRUGS; EXPERIENCE HOMELESSNESS; BLACK, INDIGENOUS, AND PEOPLE OF COLOR; LGBTQ; AND POPULATIONS IMPACTED GREATLY BY NON-MEDICAL BARRIERS OF HEALTH SUCH AS POVERTY, FOOD ACCESS AND AFFORDABLE HOUSING.</p> <p>*ALLEN CHAPEL AME CHURCH *ANTHEM MEDICAID *ASCENSION ST. VINCENT *ASPIRE INDIANA HEALTH *BREATHE EASY HAMILTON COUNTY *BROADWAY UNITED METHODIST CHURCH *CARMEL CLAY SCHOOLS *CENTRAL INDIANA COUNCIL ON AGING (CICOA) *CITY-COUNTY COUNCIL STAFF CITY OF INDIANAPOLIS *CITY OF INDIANAPOLIS, DIVISION OF COMMUNITY NUTRITION AND FOOD POLICY *CITY OF NOBLESVILLE *COALITION FOR OUR IMMIGRANT NEIGHBORS *COMMUNITY HEALTH NETWORK *CONCERNED CLERGY OF INDIANAPOLIS *CONNECTIONS IN HEALTH, INDIANA CLINICAL AND TRANSLATIONAL SCIENCES INSTITUTE (CTSI), INDIANA UNIVERSITY SCHOOL OF MEDICINE *COVERING KIDS & FAMILIES OF INDIANA *CROSSROADS AME CHURCH/COMMON GROUNDS INSTITUTE *FIRST BAPTIST CHURCH NORTH INDIANAPOLIS *FISHERS HEALTH DEPARTMENT *GENNESARET FREE CLINIC *GLEANERS FOOD BANK OF INDIANA *GOOD SAMARITAN NETWORK OF HAMILTON COUNTY *HABITAT FOR HUMANITY OF GREATER INDIANAPOLIS *HAMILTON COUNTY COMMUNITY FOUNDATION *HAMILTON COUNTY COUNCIL ON ALCOHOL AND OTHER DRUGS *HAMILTON COUNTY GOVERNMENT *HAMILTON COUNTY HARVEST FOOD BANK *HAMILTON COUNTY HEAD START *HAMILTON COUNTY HEALTH DEPARTMENT *HAMILTON COUNTY MEALS ON WHEELS *HANCOCK COUNTY HEALTH DEPARTMENT *HANCOCK REGIONAL HOSPITAL HAND, INC. *HEALTH BY DESIGN *HEART AND SOUL FREE CLINIC *HOPE FAMILY CARE CENTER *HORIZON HOUSE *IMMIGRANT WELCOME CENTER *INDIANA LEGAL SERVICES *INDIANA NATIVE AMERICAN INDIAN AFFAIRS COMMISSION *INDIANA PUBLIC HEALTH ASSOCIATION *INDIANA DEPARTMENT OF HEALTH *INDIANA UNIVERSITY RICHARD M. FAIRBANKS SCHOOL OF PUBLIC HEALTH *INDIANAPOLIS CITY COUNCIL INDIANAPOLIS NEIGHBORHOOD HOUSING PARTNERSHIP *INDIANAPOLIS URBAN LEAGUE *INDY GO *INDY HUNGER NETWORK *IU HEALTH *IU HEALTH INDY SUBURBAN REGION *IU HEALTH METHODIST HOSPITAL *IU HEALTH NORTH HOSPITAL *IU HEALTH SAXONY HOSPITAL *IU HEALTH UNIVERSITY HOSPITAL *JUMP IN FOR HEALTHY KIDS *MADISON COUNTY HEALTH DEPARTMENT *MARIAN UNIVERSITY/COLLEGE OF OSTEOPATHIC MEDICINE *MARION COUNTY PUBLIC HEALTH DEPARTMENT *MANAGED HEALTH SERVICES (MHS) *NEIGHBORHOOD CHRISTIAN LEGAL CLINIC *NINE13SPORTS *NOBLESVILLE CHAMBER OF COMMERCE *NOBLESVILLE SCHOOLS *NOBLESVILLE TOWN COUNCIL *NURSE FAMILY PARTNERSHIP OF GOODWILL OF CENTRAL AND SOUTHERN INDIANA *PATHWAY TO RECOVERY *PLAYWORKS PREVAIL, INC. *PRIME LIFE ENRICHMENT PURDUE EXTENSION</p>

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	<p>*RAPHAEL HEALTH CENTER, INC. *RICHARD M. FAIRBANKS FOUNDATION *RIVERVIEW HEALTH *SHEPHERD'S CENTER OF HAMILTON COUNTY *SHERIDAN COMMUNITY SCHOOLS *ST. ELIZABETH SETON PARISH *THE JULIAN CENTER *THE VILLAGES HEALTH FAMILIES *TRINITY FREE CLINIC *UNITED STATES CONGRESS, REPRESENTATIVE ANDRE CARSON (STAFF) *UNIVERSITY OF INDIANAPOLIS *YMCA OF GREATER INDIANAPOLIS/TOP 10 COALITION</p> <p>SECONDARY DATA AND A PRELIMINARY LIST OF COMMUNITY HEALTH NEED PRIORITIES WAS PRESENTED AT BOTH MEETINGS. EACH GROUP WAS THEN ASKED QUESTIONS ABOUT THE PRELIMINARY LIST, INCLUDING THEIR REACTIONS, ADDITIONS TO THE PROPOSED NEEDS, THOUGHTS REGARDING THE CAUSES OF THE NEEDS, IMPACTS OF THE COVID-19 PANDEMIC AND OTHERS.</p> <p>AFTER THIS DISCUSSION, PARTICIPANTS WERE GIVEN THE OPPORTUNITY TO MAKE ADDITIONAL COMMENTS BEFORE BEING ASKED TO VOTE ON WHAT THEY BELIEVED WERE THE MOST SIGNIFICANT NEEDS IN THE COUNTY. PARTICIPANTS WERE ASKED TO CHOOSE THREE TO FIVE SIGNIFICANT HEALTH NEEDS VIA AN ONLINE POLL DURING AND AFTER THE MEETING.</p> <p>PRELIMINARY NEEDS IDENTIFIED INCLUDE SEVERAL TOPICS, INCLUDING THE COVID-19 PANDEMIC, ALCOHOL ABUSE, IMMUNIZATION RATES, ELDERLY NEEDS, SMOKING AND TOBACCO USE, ACCESS TO MENTAL HEALTH SERVICES AND STATEWIDE ISSUES, SUCH AS HEALTH DISPARITIES AND OBESITY.</p> <p>IN ADDITION TO THESE TOPICS, PARTICIPANTS FOCUSED DISCUSSION ON SUBSTANCE ABUSE AND OVERDOSES, MENTAL HEALTH CONCERNS, ACCESS TO CARE DISPARITIES FOR VARIOUS SEGMENTS OF THE POPULATION, AGING IN PLACE RESOURCES, TRANSPORTATION, LIMITED CLINICAL HOURS OF PROVIDERS, LIMITED MENTAL HEALTH PROVIDERS, A CONTINUUM OF CARE BETWEEN VARIOUS HEALTH SERVICES AND FOOD INSECURITY.</p> <p>FROM THIS PROCESS, PARTICIPANTS IDENTIFIED THE FOLLOWING NEEDS AS MOST SIGNIFICANT FOR HAMILTON COUNTY: *ACCESS TO AND SUPPLY OF MENTAL HEALTH PROVIDERS, PARTICULARLY FOR LOW-INCOME POPULATIONS NEEDS OF A GROWING SENIOR POPULATION, INCLUDING AGING IN PLACE AND COGNITIVE CARE *MENTAL HEALTH *ALCOHOL USE AND EXCESSIVE DRINKING *ACCESS TO CARE DISPARITIES, PARTICULARLY FOR LOW-INCOME POPULATIONS</p> <p>A SURVEY WAS ALSO ISSUED TO INTERNAL PROVIDERS AT IU HEALTH THAT SERVE HAMILTON COUNTY, ASKING THEM TO IDENTIFY PRIORITY NEEDS AMONG THE PATIENTS THEY SERVE. THE FOLLOWING ISSUES WERE IDENTIFIED AS THE MOST SIGNIFICANT: *HEALTHCARE AND SERVICES FOR ELDERLY RESIDENTS *MENTAL HEALTH *SUBSTANCE ABUSE *ACCESS TO HEALTHCARE SERVICES *OBESITY ACCESS TO BEHAVIORAL HEALTH SERVICES, INCLUDING MENTAL HEALTH AND SUBSTANCE ABUSE</p> <p>THE SURVEY ALSO ASKED ABOUT THE IMPACTS OF THE COVID-19 PANDEMIC. ISSUES MOST OFTEN SELECTED AS SIGNIFICANT IMPACTS INCLUDE: *LOSS OF HEALTH INSURANCE *SOCIAL ISOLATION AND LONELINESS *HEALTH DISPARITIES</p> <p>TWO ADDITIONAL INTERVIEWS WERE CONDUCTED WITH REPRESENTATIVES OF LOCAL PUBLIC HEALTH DEPARTMENTS TO OBTAIN SUBJECT-MATTER EXPERTISE INTO THE HEALTH NEEDS IN HAMILTON COUNTY. THE FOLLOWING ISSUES WERE DISCUSSED AS SIGNIFICANT: *ACCESS TO BEHAVIORAL HEALTH SERVICES - BOTH MENTAL HEALTH AND SUBSTANCE ABUSE - IS A SIGNIFICANT NEED, WITH FEW PROVIDERS IN THE AREA AND PRIMARY CARE PHYSICIANS NOT OFTEN INTEGRATING BEHAVIORAL HEALTH CHECKS INTO CARE (A LARGE INCREASE IN POPULATION HAS LED TO AN UNDERSUPPLY OF PROVIDERS) *MENTAL HEALTH CONCERNS ARE WIDESPREAD, INCLUDING AN INCREASE IN CHILD MENTAL HEALTH NEEDS (YOUTH STRUGGLE WITH HIGH EXPECTATIONS AND STRESS IN SCHOOL) *SUBSTANCE ABUSE AND OVERDOSES ARE SIGNIFICANT CONCERNS, WITH OPIOID USAGE BEING WIDESPREAD (ALCOHOL ABUSE IS ALSO COMMON) *TRANSPORTATION IS A BARRIER IN THE COMMUNITY, WITH LIMITED PUBLIC OPTIONS AND ROUTES *INSURANCE BARRIERS ARE SIGNIFICANT, WITH UNINSURED POPULATIONS HAVING FEW OPTIONS AND PROVIDERS NOT ACCEPTING CERTAIN PLANS, SUCH AS MEDICAID (WHILE FREE AND LOW-COST CLINICS EXIST, THEY CANNOT KEEP UP WITH DEMAND) *FOOD INSECURITY AND ACCESS TO HEALTHY FOOD IS CHALLENGING FOR SOME GROUPS, EXACERBATED BY POVERTY AND TRANSPORTATION (LOW-INCOME HOUSING IS ALSO LIMITED) *THE WORKING POOR OFTEN ARE VULNERABLE AS THEY DO NOT QUALIFY FOR MANY PROGRAMS BUT STILL LIVE PAYCHECK TO PAYCHECK (WHILE HAMILTON COUNTY COMPARES WELL FOR POVERTY, THE NEEDS OF LOW-INCOME POPULATIONS ARE OFTEN OVERLOOKED DUE TO THIS, CREATING POCKETS OF NEED) * PREVENTION IS NOT A PRIORITY FOR MOST, AND MORE PROGRAMS AND ACCESS TO PREVENTIVE HEALTH ARE NEEDED *SEXUALLY TRANSMITTED INFECTIONS ARE AN ISSUE, PARTICULARLY CHLAMYDIA *CULTURAL DIFFERENCES LED TO UNMET NEEDS FOR SEVERAL IMMIGRANT COMMUNITIES INCLUDING LANGUAGE BARRIERS *LGBTQ+ POPULATIONS ARE ALSO UNDERSERVED, OFTEN FEELING UNCOMFORTABLE GOING TO AVAILABLE PROVIDERS *PUBLIC HEALTH FUNDING IS LIMITED, AND SERVICE LEVELS ARE IMPACTED DUE TO FINANCIAL CONSTRAINTS</p>

Return Reference - Identifier	Explanation
	*TIME IS A BIG BARRIER TO OPTIMAL HEALTH, AS PARENTS ARE OFTEN TOO BUSY WITH WORK AND CHILDREN TO PURSUE HEALTHY LIVING MEASURES *MORE COLLABORATION IS NEEDED BETWEEN HEALTH SYSTEMS, HEALTH DEPARTMENTS, PROVIDERS AND SOCIAL SERVICE ORGANIZATIONS

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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 SAXONY HOSPITAL (CONTINUED)</p> <p>DESCRIPTION: IN REGARD TO THE COVID-19 PANDEMIC, A WIDE ARRAY OF IMPACTS WAS NOTED, INCLUDING: *A LACK OF RESOURCES AT LOCAL HEALTH DEPARTMENTS - BOTH FUNDING AND STAFF - LED TO DIFFICULTIES THROUGHOUT THE PANDEMIC, AND MANY OTHER SERVICES WERE FOREGONE TO FOCUS ON THE PANDEMIC (A NEED FOR A MORE ROBUST PUBLIC HEALTH INFRASTRUCTURE IS HIGHLIGHTED) *THE POLITICIZATION OF PUBLIC HEALTH WAS WIDESPREAD, AND MANY GUIDELINES AND MEASURES WERE MET WITH CRITICISM *MENTAL HEALTH ISSUES WORSENERD DUE TO ISOLATION, WITH CHILDREN AT PARTICULAR RISK *STI RATES ROSE SUBSTANTIALLY *THE PANDEMIC HIGHLIGHTED THE NEED FOR ACCURATE HEALTH INFORMATION, AND PROVIDERS NEED TO FOCUS ON MAINTAINING COMMUNICATION AFTER COVID-19</p> <p>HANCOCK COUNTY - INTERVIEW</p> <p>AN INTERVIEW WAS CONDUCTED WITH REPRESENTATIVES OF A LOCAL PUBLIC HEALTH DEPARTMENT TO OBTAIN SUBJECT-MATTER EXPERTISE INTO THE HEALTH NEEDS IN HANCOCK COUNTY. PARTICIPANTS WERE ASKED TO COMMENT ON A LIST OF UNFAVORABLE HEALTH INDICATORS, ADD OTHER NEEDS TO SIGNIFICANT INDICATORS AND DISCUSS BARRIERS AND RESOURCES. THE FOLLOWING ISSUES WERE DISCUSSED AS SIGNIFICANT: *PARTICIPANTS WERE NOT SURPRISED ABOUT THE UNFAVORABLE SECONDARY DATA INDICATORS, INCLUDING DRUNK-DRIVING DEATHS, TRANSPORTATION, STIS, LACK OF SOCIAL ASSOCIATIONS, OBESITY AND ACCESS TO MENTAL HEALTH PROVIDERS (IN PARTICULAR, A LACK OF MENTAL HEALTH PROVIDERS HAS BEEN A CONSISTENT ISSUE) *WHILE THERE ARE AREAS TO EXERCISE, THE BUILT ENVIRONMENT MAKES THEM DIFFICULT TO ACCESS, INCLUDING A LACK OF SIDEWALKS AND A HIGH NUMBER OF CYCLING ACCIDENTS *COST OF HEALTHCARE IS A SIGNIFICANT ISSUE, AS WELL AS THE COST TO ACCESS EXERCISE OPPORTUNITIES *MENTAL HEALTH, OBESITY AND PHYSICAL INACTIVITY, SUBSTANCE ABUSE, STIS AND COST OF HEALTHCARE SERVICES WERE IDENTIFIED AS PRIORITY AREAS *A LACK OF KNOWLEDGE OF AVAILABLE RESOURCES IS A BARRIER, AS WELL AS INTRINSIC MOTIVATION TO IMPROVE ONE'S HEALTH (NAVIGATION RESOURCES ARE NEEDED) *TRANSPORTATION IS A SIGNIFICANT BARRIER IN THE COMMUNITY, WITH LIMITED ACCESS TO PUBLIC OPTIONS AND MOST TRAVELING OUTSIDE THE COUNTY FOR WORK *MENTAL HEALTH STIGMA, WHILE IMPROVING, IS STILL A BARRIER *HEALTH EDUCATION, PARTICULARLY FOR YOUTH, IS A SIGNIFICANT NEED AND COULD IMPROVE MANY HEALTH ISSUES, SUCH AS OBESITY, MENTAL HEALTH, SUBSTANCE ABUSE AND CHRONIC DISEASE</p> <p>MADISON COUNTY - COMMUNITY MEETING AND INTERVIEWS IN COLLABORATION WITH LOCAL HEALTH SYSTEMS - ASCENSION ST. VINCENT AND COMMUNITY HEALTH NETWORK - A COMMUNITY MEETING WAS HELD IN JUNE 10, 2021, TO RECEIVE INPUT FROM STAKEHOLDERS REGARDING THE HEALTH NEEDS IN MADISON COUNTY. SECONDARY DATA AND A PRELIMINARY LIST OF COMMUNITY HEALTH NEED PRIORITIES WAS PRESENTED AT THE MEETING. EACH GROUP WAS THEN ASKED QUESTIONS ABOUT THE PRELIMINARY LIST, INCLUDING THEIR REACTIONS, ADDITIONS TO THE PROPOSED NEEDS, THOUGHTS REGARDING THE CAUSES OF THE NEEDS, IMPACTS OF THE COVID-19 PANDEMIC AND OTHERS.</p> <p>AFTER THIS DISCUSSION, PARTICIPANTS WERE GIVEN THE OPPORTUNITY TO MAKE ADDITIONAL COMMENTS BEFORE BEING ASKED TO VOTE ON WHAT THEY BELIEVED WERE THE MOST SIGNIFICANT NEEDS IN THE COUNTY. PARTICIPANTS WERE ASKED TO CHOOSE THREE TO FIVE SIGNIFICANT HEALTH NEEDS VIA AN ONLINE POLL DURING AND AFTER THE MEETING.</p> <p>PRELIMINARY NEEDS IDENTIFIED INCLUDE COVID-19, FOOD INSECURITY, MATERNAL AND CHILD HEALTH, MENTAL HEALTH AND SUICIDE, ELDERLY NEEDS, OBESITY AND PHYSICAL INACTIVITY, TOBACCO USE, POVERTY, EDUCATIONAL OPPORTUNITIES, HOUSING, RACIAL AND ETHNIC HEALTH DISPARITIES STATEWIDE, AIR POLLUTION AND SUBSTANCE ABUSE.</p> <p>IN ADDITION TO THESE TOPICS, PARTICIPANTS FOCUSED DISCUSSION ON ACCESS TO AFFORDABLE HEALTHY FOODS AND NUTRITION KNOWLEDGE, ACCESS TO BEHAVIORAL HEALTH PROVIDERS (INCLUDING MENTAL HEALTH AND SUBSTANCE ABUSE), VAPING, HOMELESSNESS, CHILD ABUSE AND TRAUMA, TRANSPORTATION, WALKABILITY, CHILDCARE, CHRONIC DISEASE AND HEALTH EDUCATION NEEDS. FROM THIS PROCESS, PARTICIPANTS IDENTIFIED THE FOLLOWING NEEDS AS MOST SIGNIFICANT FOR MADISON COUNTY: MENTAL HEALTH AND SUICIDE ACCESS TO HEALTHY FOOD, NUTRITION AND KNOWLEDGE OF HEALTHY EATING PRACTICES SUBSTANCE ABUSE TRANSPORTATION AND WALKABILITY POVERTY RACIAL AND ETHNIC HEALTH DISPARITIES</p> <p>AN ADDITIONAL INTERVIEW WAS CONDUCTED WITH A REPRESENTATIVE OF A LOCAL PUBLIC HEALTH DEPARTMENT TO OBTAIN SUBJECT-MATTER EXPERTISE INTO THE HEALTH NEEDS IN MADISON COUNTY. THE FOLLOWING ISSUES WERE DISCUSSED AS SIGNIFICANT: *OBESITY IS A SIGNIFICANT ISSUE, WITH FOOD INSECURITY AND A LACK OF GROCERY STORES CONTRIBUTING *SMOKING IS STILL AN ISSUE, LARGELY TIED INTO MADISON COUNTY'S CULTURE AND IDENTITY AS AN OLDER, FACTORY AREA *LOW BIRTHWEIGHT IS A SIGNIFICANT ISSUE (WHILE A PROBLEM FOR ALL MOTHERS, CLEAR RACIAL DISPARITIES EXIST FOR BLACK INFANTS AND RELATEDLY, PRENATAL CARE IS AN ISSUE) *MORE HEALTH EDUCATION IS NEEDED, PARTICULARLY FOR YOUTH *PROVIDERS AND SOCIAL SERVICE ORGANIZATIONS NEED BETTER COLLABORATION AND EFFORTS TO GO INTO THE COMMUNITY RATHER THAN EXPECT RESIDENTS TO COME TO THEM (COORDINATION IS OFTEN LACKING) *TRANSPORTATION IS A SIGNIFICANT BARRIER, WITH FEW PUBLIC TRANSPORTATION OPTIONS OUTSIDE OF ANDERSON *HEALTH INEQUITIES AND DISPARITIES ARE PREVALENT, PARTICULARLY FOR BLACK AND HISPANIC (OR LATINO) RESIDENTS (CULTURAL AND LANGUAGE BARRIERS ARE PRESENT FOR HISPANIC POPULATIONS) *ACCESS TO MENTAL HEALTH CARE IS DIFFICULT DESPITE AN ADEQUATE NUMBER OF PROVIDERS DUE TO OTHER BARRIERS AND A LACK OF CONTINUUM OF CARE *NAVIGATION OF RESOURCES IS DIFFICULT, WITH RESIDENTS OFTEN UNSURE OF WHERE TO GO TO MEET</p>

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	<p>NEEDS</p> <p>IN REGARD TO THE COVID-19 PANDEMIC, SEVERAL IMPACTS WERE NOTED, INCLUDING:</p> <ul style="list-style-type: none"> *DISPARITIES IN VACCINE COVERAGE AND UPTAKE ARE CLEAR, PARTICULARLY AMONG BLACK RESIDENTS *ALL SERVICES FROM THE HEALTH DEPARTMENT NEEDED TO FOCUS ON THE PANDEMIC, MEANING A TEMPORARY HALT OF OTHERS WAS NECESSARY *SOME BUSINESS CLOSURES AND ISSUES WITH UNEMPLOYMENT RESULTED *MORE FOCUS IS NEEDED ON PUBLIC INFORMATION DISSEMINATION AS MANY LOOK TO THE LOCAL HEALTH DEPARTMENTS FOR GUIDANCE (DEPARTMENTS NEED TO MAKE SURE THEY ARE SEEN IN THE COMMUNITY AND MAINTAIN COMMUNICATION WITH ALL PARTNERS)
<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 METHODIST HOSPITAL AND IU HEALTH UNIVERSITY HOSPITAL</p> <p>DESCRIPTION: IN CONJUNCTION WITH THE CHNA, IU HEALTH INC.'S BOARD ADOPTED AN IMPLEMENTATION STRATEGY IN APRIL 2022 RELATED TO THE 2021 CHNA. IU HEALTH INC. 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 INC. INCLUDES IU HEALTH METHODIST HOSPITAL, IU HEALTH UNIVERSITY HOSPITAL, RILEY HOSPITAL FOR CHILDREN AT IU HEALTH, AND IU HEALTH SAXONY HOSPITAL. THE FIRST THREE HOSPITALS MAKE UP THE ACADEMIC HEALTH CENTER (AHC).</p> <p>IU HEALTH METHODIST HOSPITAL AND IU HEALTH UNIVERSITY HOSPITAL WILL ADDRESS THE FOLLOWING COMMUNITY HEALTH NEEDS BETWEEN 2022 AND 2024:</p> <ol style="list-style-type: none"> 1. ACCESS TO HEALTHCARE SERVICES 2. BEHAVIORAL HEALTH 3. CHRONIC DISEASE AND CHRONIC DISEASE MANAGEMENT 4. SMOKING, TOBACCO USE AND EXPOSURE TO SECONDHAND SMOKE 5. SOCIAL DETERMINANTS OF HEALTH <p>IU HEALTH METHODIST HOSPITAL AND IU HEALTH UNIVERSITY HOSPITAL ARE UNABLE TO ADDRESS ALL OF THE SIGNIFICANT COMMUNITY HEALTH NEEDS IDENTIFIED IN THE LOCAL COMMUNITY. THIS IS NOT MEANT TO MINIMIZE THE IMPORTANCE OF ANY HEALTH NEED OR THE INTEGRITY OF THE CHNA PROCESS.</p> <p>IU HEALTH METHODIST HOSPITAL AND IU HEALTH UNIVERSITY HOSPITAL ARE MISSION AND VALUES DRIVEN HOSPITALS; THEREFORE, ADDRESSING COMMUNITY HEALTH NEEDS THAT ALIGN WITH THE HOSPITALS' MISSION WILL HAVE THE GREATEST OPPORTUNITY TO ACTIVATE AND LEVERAGE HOSPITAL RESOURCES AS WELL AS MAXIMIZE CURRENT STRATEGIC COLLABORATIONS WITH COMMUNITY-BASED PARTNERS.</p> <p>IU HEALTH METHODIST HOSPITAL AND IU HEALTH UNIVERSITY HOSPITAL ARE UNABLE TO ADDRESS THE FOLLOWING COMMUNITY HEALTH NEEDS IDENTIFIED IN THE 2021 COMMUNITY HEALTH NEEDS ASSESSMENT.</p> <ol style="list-style-type: none"> 1.HEALTH EDUCATION AND NAVIGATION 2.MATERNAL AND INFANT HEALTH AND CHILD WELL-BEING <p>HOWEVER, DURING 2021 IU HEALTH METHODIST HOSPITAL AND IU HEALTH UNIVERSITY HOSPITAL CONTINUED TO ADDRESS THE NEEDS IDENTIFIED IN THE 2018 CHNA, THROUGH THE IMPLEMENTATION STRATEGY ADOPTED IN APRIL 2019 RELATED TO THE 2018 CHNA.</p> <p>IU HEALTH METHODIST HOSPITAL AND IU HEALTH UNIVERSITY HOSPITAL WILL ADDRESS THE FOLLOWING COMMUNITY HEALTH NEEDS BETWEEN 2019 AND 2021:</p> <ol style="list-style-type: none"> 1. ACCESS TO HEALTHCARE SERVICES 2. DRUG AND SUBSTANCE ABUSE (INCLUDING OPIOIDS)* 3. HEALTHCARE AND SOCIAL SERVICES FOR SENIORS 4. MENTAL HEALTH* 5. OBESITY AND DIABETES 6. SMOKING, TOBACCO USE AND EXPOSURE TO SECONDHAND SMOKE 7. SOCIAL DETERMINANTS OF HEALTH 8. OTHER STATEWIDE CONCERNS: <ol style="list-style-type: none"> A. PUBLIC HEALTH FUNDING B. AIR POLLUTION <p>* IU HEALTH USES THE TERM BEHAVIORAL HEALTH TO REFER TO MENTAL HEALTH AND DRUG AND SUBSTANCE ABUSE (INCLUDING OPIOIDS).</p> <p>ACCESS TO HEALTHCARE SERVICES; SMOKING, TOBACCO USE AND EXPOSURE TO SECONDHAND SMOKE IU HEALTH METHODIST AND UNIVERSITY HOSPITALS' IMPLEMENTATION STRATEGY TO ADDRESS THE IDENTIFIED NEED OF ACCESS TO HEALTHCARE AND SMOKING, TOBACCO USE AND EXPOSURE TO SECONDHAND SMOKE INCLUDES THE FOLLOWING:</p> <p>PROVIDE HEALTH SCREENINGS IN THE COMMUNITY.</p> <p>DUE TO THE CORONAVIRUS PANDEMIC, MANY IN PERSON, COMMUNITY ACTIVITIES WERE CANCELED DUE TO SOCIAL DISTANCING AND COMMUNITY GATHERING RESTRICTIONS. THIS IMPACTED IU HEALTH INC.'S ABILITY TO OFFER HEALTH SCREENINGS IN 2021. DURING THIS TIME, OTHER COMMUNITY NEEDS WERE IDENTIFIED INCLUDING INCREASING THE AVAILABILITY OF COVID-19 VACCINES IN THE COMMUNITY. DURING 2021, THE COMMUNITY OUTREACH AND ENGAGEMENT TEAM COORDINATED 42 COMMUNITY VACCINE CLINICS WITH VARIOUS COMMUNITY-BASED PARTNERS TO REACH RACIAL AND ETHNIC, LIMITED ENGLISH PROFICIENT, AND OTHER INDIVIDUALS WHO WERE HIGH RISK FOR COVID-19. OVER 1,800 DOSES OF VACCINE WERE GIVEN TO COMMUNITY MEMBERS IN MARION COUNTY.</p> <p>BEHAVIORAL HEALTH</p> <p>IU HEALTH METHODIST AND UNIVERSITY HOSPITALS' IMPLEMENTATION STRATEGY TO ADDRESS THE IDENTIFIED NEED OF BEHAVIORAL HEALTH INCLUDES THE FOLLOWING:</p> <p>IMPLEMENT SUBSTANCE ABUSE PROGRAMMING.</p> <p>THE IU HEALTH METHODIST HOSPITAL ADDICTION TREATMENT & CHRONIC PAIN RECOVERY CENTER PROVIDES AN INTENSIVE OUTPATIENT PROGRAM. THE PROVIDER TEAM INCLUDES PHYSICIANS, NURSE PRACTITIONERS, REGISTERED NURSES, THERAPISTS, RECOVERY COACHES, PHYSICAL THERAPISTS AND YOGA INSTRUCTORS AND ART THERAPISTS. SERVICES INCLUDE GROUP PSYCHOTHERAPY, 12-STEP PROGRAM EDUCATION, AND CONNECTION TO THE RECOVERY COMMUNITY, DETOX SERVICES,</p>

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	<p>MEDICATION-ASSISTED TREATMENT, RECOVERY COACHING, CASE MANAGEMENT, INDIVIDUAL THERAPY, FAMILY THERAPY, RELAPSE PREVENTION SKILLS, MOTIVATIONAL INTERVIEWING, MINDFULNESS/MEDITATION, EXERCISE THERAPY/YOGA, ART THERAPY, SPIRITUALITY SESSIONS AND AFTERCARE. TO HELP LESSEN THE SPREAD OF COVID-19 AND FOR THE SAFETY OF PATIENTS, VIRTUAL CARE WAS AVAILABLE TO PATIENTS.</p> <p>WORK WITH COMMUNITY ORGANIZATIONS TO DETERMINE ROLES IN PROGRAMMING.</p> <p>IN 2021, THE COMMUNITY BENEFIT GRANT PROGRAM AWARDED FUNDING TO COMMUNITY-BASED ORGANIZATIONS INCLUDING REACH FOR YOUTH, VOLUNTEERS OF AMERICA OHIO & INDIANA (FRESH START RECOVERY), OVERDOSE LIFELINE, AND CENTRAL INDIANA COMMUNITY FOUNDATION: SUMMER YOUTH PROGRAM FUND TO PROVIDE A VARIETY OF SERVICES INCLUDING SUPPORT GROUPS, INDIVIDUAL AND FAMILY COUNSELING, AND RESIDENTIAL ADDICTIONS TREATMENT. MANY OF THESE ORGANIZATIONS PROVIDE SERVICES TO INDIVIDUALS WHO ARE UNDER/UNINSURED.</p> <p>OBESITY AND DIABETES</p> <p>IU HEALTH METHODIST AND UNIVERSITY HOSPITALS' IMPLEMENTATION STRATEGY TO ADDRESS THE IDENTIFIED NEED OF OBESITY AND DIABETES INCLUDES THE FOLLOWING:</p> <p>HEALTHY COOKING CLASSES IN THE COMMUNITY.</p> <p>DUE TO THE STAFFING CONSTRAINTS AND HOSPITAL CLINICAL NEEDS IN 2021 DUE TO COVID-19, THE IU HEALTH DIETICIANS WERE UNABLE TO DO THESE ACTIVITIES IN THE COMMUNITY. IN 2021, THE COMMUNITY BENEFIT GRANT PROGRAM PROVIDED FUNDING TO THE MARION COUNTY PUBLIC HEALTH DEPARTMENT TO SUPPORT THE FRESH BUCKS PROGRAM. THE PROGRAM ENABLES HOUSEHOLDS WHO UTILIZE THE USDA SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP) TO AFFORD HEALTHIER FOODS BY PROVIDING A \$1 FOR \$1 MATCH TO PURCHASE FRESH, LOCAL PRODUCE AT FARMERS MARKETS, FARM STANDS AND THROUGH A NEW MOBILE MARKET. AS OF NOVEMBER 2021, THERE WERE 748 PARTICIPANTS WITH FRESH BUCKS DISTRIBUTION AT \$37,592 (REDEMPTION RATE OF 87.5%).</p> <p>SOCIAL DETERMINANTS OF HEALTH</p> <p>IU HEALTH METHODIST AND UNIVERSITY HOSPITALS' IMPLEMENTATION STRATEGY TO ADDRESS THE IDENTIFIED NEED OF SOCIAL DETERMINANTS OF HEALTH INCLUDES THE FOLLOWING:</p> <p>EXPAND THE MEDICAL-LEGAL PARTNERSHIP (MLP).</p> <p>IN 2021, THE MLP COMPLETED 20 INTAKE INTERVIEWS. NINETEEN OF THOSE CASES WERE SELECTED/ELIGIBLE FOR SERVICES. AT THE END OF THE YEAR, THIS PROGRAM CLOSED 29 CASES. ALL CASES WERE PROVIDED LEGAL SERVICES. IN THE LAST QUARTER OF 2021, 172 HOURS WERE COLLECTIVELY ATTRIBUTABLE TO THE METHODIST & UNIVERSITY MLP.</p> <p>HELP INDIVIDUALS AND FAMILIES IN NEED OF SUPPORT CONNECT TO RESOURCES AVAILABLE IN THE INDIANAPOLIS COMMUNITY.</p> <p>IU HEALTH INC. CONTINUES TO SUPPORT AUNT BERTHA, AN ONLINE PLATFORM FOR FINDING AND CONNECTING TO SOCIAL SERVICES ACROSS INDIANA AND THE UNITED STATES. ALL PROGRAMS THAT APPEAR ON THE AUNT BERTHA SITE ARE OFFERED FOR FREE OR AT A REDUCED COST AND WILL HELP ADDRESS PATIENTS' SOCIAL DETERMINANTS OF HEALTH NEEDS. IN 2021, THERE WERE 15,427 SESSIONS, 12,832 SEARCHES, AND 108 REFERRALS ON THE IU HEALTH AUNT BERTHA PLATFORM (I.E., BOTH THE COMMUNITY AND STAFF SITE). ALSO IN 2021, THE COMMUNITY BENEFIT GRANT PROGRAM AWARDED FUNDING TO THE INDY HUNGER NETWORK TO SUPPORT COMMUNITY COMPASS, MULTIPLATFORM TECHNOLOGY THAT CONNECTS MARION COUNTY RESIDENTS TO INFORMATION ABOUT AVAILABLE FOOD ASSISTANCE, INCLUDING BOTH SCREENING QUESTIONS FOR FEDERAL NUTRITION PROGRAMS AND LOCATION INFORMATION FOR CHARITABLE FOOD ASSISTANCE, WIC CLINICS, AND SNAP AND WIC RETAIL LOCATIONS. ADDITIONALLY, FUNDING WAS AWARDED TO GLEANERS FOOD BANK TO ENHANCE THE PANTRY INNOVATION IN 21 COUNTIES (EPIC) FUND, ESTABLISHED TO REVOLUTIONIZE THE NETWORK OF PANTRIES BY IMPROVING THEIR ABILITY TO RECEIVE AND DISTRIBUTE NUTRITIOUS FOOD.</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 METHODIST HOSPITAL AND IU HEALTH UNIVERSITY HOSPITAL (CONTINUED)</p> <p>DESCRIPTION: WORK WITH COMMUNITY ORGANIZATIONS TO DETERMINE ROLES IN PROGRAMMING TO PROVIDE HOUSING RESOURCES TO LOW-INCOME COMMUNITY MEMBERS.</p> <p>IN 2021, THE COMMUNITY BENEFIT GRANT PROGRAM AWARDED FUNDING TO COMMUNITY-BASED ORGANIZATIONS INCLUDING HABITAT FOR HUMANITY, FAMILY PROMISE OF GREATER INDIANAPOLIS, AND TRINITY HAVEN TO HELP FAMILIES WITH CHILDREN EXPERIENCING HOMELESSNESS; BUILD HOUSING FOR FAMILIES WHO ARE LOW-INCOME; AND TO SUPPORT LGBTQ YOUTH EXPERIENCING HOUSING INSTABILITY.</p> <p>COMMUNITY HEALTH NEEDS NOT BEING ADDRESSED</p> <p>IU HEALTH METHODIST HOSPITAL IS UNABLE TO ADDRESS THOSE COMMUNITY HEALTH NEEDS THAT DO NOT RELATE DIRECTLY TO THE HOSPITAL'S MISSION TO DELIVER HEALTHCARE. THESE ARE NEEDS THAT OTHER GOVERNMENTAL AGENCIES AND/OR COMMUNITY ORGANIZATIONS HAVE THE MOST APPROPRIATE EXPERTISE AND RESOURCES TO ADDRESS.</p> <p>IU HEALTH METHODIST HOSPITAL IS UNABLE TO ADDRESS THE FOLLOWING COMMUNITY HEALTH NEEDS IDENTIFIED IN THE 2018 COMMUNITY HEALTH NEEDS ASSESSMENT:</p> <p>HEALTHCARE AND SOCIAL SERVICES FOR SENIORS</p> <p>AGING IN PLACE IS VERY IMPORTANT FOR OLDER ADULTS, AND IU HEALTH RECOGNIZES THE IMPORTANCE. THERE ARE SEVERAL COMMUNITY COLLABORATIONS THAT ARE WORKING TO BETTER THE LIVES OF SENIORS IN THE INDIANAPOLIS COMMUNITY: CENTRAL INDIANA COUNCIL ON AGING (CICOA) IN INDIANAPOLIS IS FOCUSED ON THE INDIANAPOLIS COMMUNITY. FURTHERMORE, AGENCIES THAT FOCUS ON THE STATE OF INDIANA ARE: SOUTHWESTERN INDIANA REGIONAL COUNCIL ON AGING (SWIRCA); DIVISION OF AGING IN INDIANAPOLIS; AND LIFESTREAM SERVICES, INC.</p> <p>FUNDING FOR PUBLIC HEALTH</p> <p>IU HEALTH HAS A PARTNERSHIP WITH THE INDIANA PUBLIC HEALTH ASSOCIATION. THIS ORGANIZATION WORKS TO ADVANCE PUBLIC HEALTH SERVICES AND EDUCATION IN THE STATE OF INDIANA. IU HEALTH'S GOVERNMENT AFFAIRS LOOKS FOR OPPORTUNITIES TO ADVOCATE FOR PUBLIC HEALTH FUNDING AT THE FEDERAL, STATE AND LOCAL LEVEL.</p> <p>AIR POLLUTION</p> <p>THE HOSPITAL IS UNABLE TO DIRECTLY IMPACT POLICY AND IMPLEMENT STRATEGIES THAT ADDRESS AIR POLLUTION. HOWEVER, OTHER STATE AND LOCAL GOVERNMENTAL AGENCIES AND COMMUNITY ORGANIZATIONS (E.G. THE HOOSIER ENVIRONMENTAL COUNCIL) HAVE THE MOST APPROPRIATE EXPERTISE WITH WHICH TO ADDRESS THIS ISSUE.</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: RILEY HOSPITAL FOR CHILDREN AT INDIANA UNIVERSITY HEALTH</p> <p>DESCRIPTION: IN CONJUNCTION WITH THE CHNA, IU HEALTH INC.'S BOARD ADOPTED AN IMPLEMENTATION STRATEGY IN APRIL 2022 RELATED TO THE 2021 CHNA. IU HEALTH INC. 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 INC. INCLUDES IU HEALTH METHODIST HOSPITAL, IU HEALTH UNIVERSITY HOSPITAL, RILEY HOSPITAL FOR CHILDREN AT IU HEALTH (RILEY), AND IU HEALTH SAXONY HOSPITAL. THE FIRST THREE HOSPITALS MAKE UP THE ACADEMIC HEALTH CENTER (AHC).</p> <p>RILEY HOSPITAL FOR CHILDREN AT INDIANA UNIVERSITY HEALTH (RILEY) WILL ADDRESS THE FOLLOWING COMMUNITY HEALTH NEEDS BETWEEN 2022 AND 2024:</p> <ol style="list-style-type: none"> 1. ACCESS TO HEALTHCARE SERVICES 2. BEHAVIORAL HEALTH 3. CHRONIC DISEASE AND CHRONIC DISEASE MANAGEMENT 4. MATERNAL AND INFANT HEALTH AND CHILD WELL-BEING 5. SMOKING, TOBACCO USE AND EXPOSURE TO SECONDHAND SMOKE 6. SOCIAL DETERMINANTS OF HEALTH <p>RILEY HOSPITAL FOR CHILDREN AT IU HEALTH IS UNABLE TO ADDRESS ALL OF THE SIGNIFICANT COMMUNITY HEALTH NEEDS IDENTIFIED IN THE LOCAL COMMUNITY. THIS IS NOT MEANT TO MINIMIZE THE IMPORTANCE OF ANY HEALTH NEED OR THE INTEGRITY OF THE CHNA PROCESS. RILEY HOSPITAL FOR CHILDREN AT IU HEALTH IS A MISSION AND VALUES DRIVEN HOSPITAL; THEREFORE, ADDRESSING COMMUNITY HEALTH NEEDS THAT ALIGN WITH THE HOSPITAL'S MISSION WILL HAVE THE GREATEST OPPORTUNITY TO ACTIVATE AND LEVERAGE HOSPITAL RESOURCES AS WELL AS MAXIMIZE CURRENT STRATEGIC COLLABORATIONS WITH COMMUNITY-BASED PARTNERS.</p> <p>RILEY HOSPITAL FOR CHILDREN AT IU HEALTH IS UNABLE TO ADDRESS THE FOLLOWING COMMUNITY HEALTH NEEDS IDENTIFIED IN THE 2021 COMMUNITY HEALTH NEEDS ASSESSMENT.</p> <ol style="list-style-type: none"> 1. HEALTH EDUCATION AND NAVIGATION <p>HOWEVER, DURING 2021 RILEY HOSPITAL FOR CHILDREN AT IU HEALTH CONTINUED TO ADDRESS THE NEEDS IDENTIFIED IN THE 2018 CHNA, THROUGH THE IMPLEMENTATION STRATEGY ADOPTED IN APRIL 2019 RELATED TO THE 2018 CHNA.</p> <p>RILEY HOSPITAL FOR CHILDREN AT INDIANA UNIVERSITY HEALTH WILL ADDRESS THE FOLLOWING COMMUNITY HEALTH NEEDS BETWEEN 2019 AND 2021:</p> <ol style="list-style-type: none"> 1. MATERNAL AND INFANT HEALTH 2. MENTAL HEALTH* 3. OBESITY AND ACCESS TO HEALTHY FOOD 4. POVERTY AND OTHER SOCIAL DETERMINANTS OF HEALTH 5. SMOKING, TOBACCO USE AND EXPOSURE TO SECONDHAND SMOKE 6. VIOLENCE AND INJURIES 7. OTHER STATEWIDE CONCERNS: <ol style="list-style-type: none"> A. PUBLIC HEALTH FUNDING B. AIR POLLUTION <p>*IU HEALTH USES THE TERM BEHAVIORAL HEALTH TO REFER TO MENTAL HEALTH.</p> <p>THE IMPLEMENTATION STRATEGY TO ADDRESS THE IDENTIFIED NEEDS NOTED ABOVE INCLUDES THE FOLLOWING:</p> <p>MATERNAL AND INFANT HEALTH</p> <p>RILEY HOSPITAL FOR CHILDREN'S IMPLEMENTATION STRATEGY TO ADDRESS THE IDENTIFIED NEED OF MATERNAL AND INFANT HEALTH INCLUDES THE FOLLOWING:</p> <p>CONTINUE TO COLLABORATE WITH THE MARION COUNTY PUBLIC HEALTH DEPARTMENT IN CONDUCTING THE FETAL INFANT MORTALITY REVIEW (FIMR).</p> <p>THE FIMR IS AN ONGOING PROGRAM THAT OCCURS ON AN AS-NEEDED BASIS. THIS REVIEW OCCURS IN PARTNERSHIP WITH THE MARION COUNTY PUBLIC HEALTH DEPARTMENT AND THE INDIANA DEPARTMENT OF HEALTH. RILEY STAFF VOLUNTEER THEIR TIME AND EXPERTISE TO THE FIMR. THE COALITION MADE RECOMMENDATIONS FOR SYSTEMS CHANGES AND HAS COORDINATED COMMUNITY EVENTS FOR EDUCATION AND OUTREACH WITH THE COMMUNITY AND SUPPORTED MATERNAL AND CHILD HEALTH LEADERS ACTIVELY ENGAGING WITH THEIR COMMUNITIES ON MATERNAL AND INFANT EDUCATION.</p> <p>PROVIDE CONTINUING EDUCATION TO PRIMARY CARE PROVIDERS IN INDIANA REGARDING SAFE SLEEP AND AVAILABLE RESOURCES.</p> <p>IN 2021, SAFE SLEEP 'CLASSES' WERE DISCONTINUED IN THE COMMUNITY. COVID-19 DRASTICALLY LIMITED RILEY'S ABILITY TO SERVE THE COMMUNITY, DUE TO THE HOSPITAL'S VISITOR RESTRICTIONS. ADDITIONALLY, THE TRAUMA DEPARTMENT WAS RE-EVALUATING INJURY PRIORITIES FOR PREVENTION WITH A FOCUS ON VIOLENT INJURIES AS WELL AS PEDESTRIAN INJURIES.</p> <p>PROVIDE LACTATION TRAINING, CHILDCARE EDUCATION AND WELL-BABY CHECKS FOR NEW MOTHERS IN THE COMMUNITY.</p> <p>FOR 2021, CONSULTATIONS COULD NOT BE DONE IN PERSON WHICH LIMITED THE NUMBER OF CONSULTATIONS COMPLETED.</p> <p>NOTE: RILEY DID LAUNCH THE RILEY CHILDREN'S HEALTH MATERNITY TOWER TO CENTRALIZE INPATIENT</p>

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	<p>CHILDBIRTH AND NEWBORN CARE AMONG THE THREE DOWNTOWN INDIANAPOLIS IU HEALTH HOSPITALS. RILEY NOW HOUSES THE LARGEST NUMBER OF NEONATAL INTENSIVE CARE UNIT BEDS IN INDIANA.</p> <p>OBESITY AND ACCESS TO HEALTHY FOOD</p> <p>RILEY HOSPITAL FOR CHILDREN'S IMPLEMENTATION STRATEGY TO ADDRESS THE IDENTIFIED NEED OF OBESITY AND ACCESS TO HEALTHY FOOD INCLUDES THE FOLLOWING:</p> <p>HEALTHY COOKING CLASSES IN THE COMMUNITY.</p> <p>DUE TO THE STAFFING CONSTRAINTS AND HOSPITAL CLINICAL NEEDS IN 2021 DUE TO COVID-19, THE IU HEALTH DIETICIANS WERE UNABLE TO BE PRESENT IN THE COMMUNITY DOING THESE ACTIVITIES.</p> <p>IMPLEMENT THE 5-2-1-0 PROGRAM IN COLLABORATION WITH LOCAL ORGANIZATIONS.</p> <p>RILEY PROVIDED A GRANT TO JUMP IN FOR HEALTHY KIDS (JUMP IN) IN 2021. THE ORGANIZATION DEVELOPED A 3-YEAR APPROACH TO ENGAGING THE COMMUNITY IN UNDERSTANDING AND ACTING ON 5-2-1-0. THEY ARE PARTNERING WITH RADIO ONE AND THE SPONSORSHIP PACKAGE WILL FOCUS ON MARION COUNTY. JUMP IN DID EXTENSIVE WORK IN 2021 FOCUSED ON PROVIDING COMPREHENSIVE TRAINING TO CHILDCARE CENTERS AND INTEGRATING HEALTHY BEST PRACTICES INTO INDIANA'S EARLY CHILDCARE EDUCATION PROVIDER CULTURE AND SYSTEMS.</p> <p>RILEY DID LAUNCH A ONSITE FOOD PANTRY.</p> <p>SINCE MARCH 2021, 385 PATIENT FAMILIES AND 140 TEAM MEMBERS FROM 75 DIFFERENT INDIANA ZIP CODES WERE SERVED. THIS STRATEGY DID NOT APPEAR IN THE 2019 IMPLEMENTATION STRATEGY BUT WAS UNDERTAKEN IN 2021 AS IT MEETS SIGNIFICANT COMMUNITY HEALTH NEEDS IN RELATION TO FOOD INSECURITY AND ACCESS TO HEALTHY FOOD.</p> <p>ALSO IN 2021, THE COMMUNITY BENEFIT GRANT PROGRAM AWARDED FUNDING TO THE YMCA OF GREATER INDIANAPOLIS TO SUPPORT THE TOP 10 COALITION'S LAUNCH OF THE "RETHINK YOUR DRINK" CAMPAIGN TO ENCOURAGE INDIVIDUALS AND FAMILIES TO CHOOSE DRINKS WITHOUT ADDED SUGAR. THIS STRATEGY DID NOT APPEAR IN THE APRIL 2019 IMPLEMENTATION STRATEGY BUT WAS UNDERTAKEN IN 2021 AS IT MEETS SIGNIFICANT COMMUNITY HEALTH NEEDS IN RELATION TO OBESITY AND ACCESS TO HEALTHY FOODS.</p> <p>SMOKING, TOBACCO USE AND EXPOSURE TO SECONDHAND SMOKE; BEHAVIORAL HEALTH</p> <p>RILEY HOSPITAL FOR CHILDREN'S IMPLEMENTATION STRATEGY TO ADDRESS THE IDENTIFIED NEED OF SMOKING, TOBACCO USE AND EXPOSURE TO SECONDHAND SMOKE AND BEHAVIORAL HEALTH INCLUDES THE FOLLOWING:</p> <p>PATIENTS, FAMILY MEMBERS AND CAREGIVERS OF RILEY PATIENTS WILL BE SCREENED FOR USE OF TOBACCO PRODUCTS, INCLUDING VAPING. THOSE WHO SCREEN POSITIVE WILL BE COUNSELED REGARDING MEDICAL RISKS TO SELF AND/OR PATIENT AND ASKED IF THEY WANT TO QUIT, OR AT LEAST ABSTAIN WHILE THEIR CHILD IS IN THE HOSPITAL. IF THEY AGREE, THEY WILL RECEIVE COUNSELING FROM A CORE GROUP OF STAFF, ALSO TRAINED AS CERTIFIED TOBACCO TREATMENT SPECIALISTS.</p> <p>THIS PROGRAM WAS NOT IMPLEMENTED IN 2021 DUE TO COVID-19. THE IU HEALTH COMMUNITY HEALTH DIVISION HAS BEEN PLANNING A LARGER INITIATIVE TO SCREEN AND REFER PATIENTS AND FAMILIES FOR ASSISTANCE THAT WILL LAUNCH IN 2022.</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: RILEY HOSPITAL FOR CHILDREN AT INDIANA UNIVERSITY HEALTH (CONTINUED)</p> <p>DESCRIPTION: POVERTY AND OTHER SOCIAL DETERMINANTS OF HEALTH RILEY HOSPITAL FOR CHILDREN'S IMPLEMENTATION STRATEGY TO ADDRESS THE IDENTIFIED NEED OF POVERTY AND OTHER SOCIAL DETERMINANTS OF HEALTH INCLUDES THE FOLLOWING:</p> <p>EXPAND THE MEDICAL-LEGAL PARTNERSHIP (MLP) THE RILEY MLP FINISHED ITS SECOND FULL YEAR HELPING PATIENTS AND FAMILIES WITH THEIR LEGAL NEEDS. THE PROJECT CONTINUED TO ACCEPT REFERRALS AND ENGAGE IN OFF-SITE INVESTIGATIONS AND CASE-HANDLING THIS QUARTER. THE CHALLENGES OF THE COVID-19 PANDEMIC CONTINUE TO AFFECT THE RIGHTS OF CLIENTS IN THE INDIANAPOLIS REGION AND ACROSS THE STATE, ESPECIALLY FOR CHILDREN FACING HEALTH-HARMING LEGAL NEEDS. THIS PROJECT SHOWS THE POTENTIAL OF LEGAL INTERVENTIONS LEADING TO IMPROVED HEALTH AND WELLNESS OUTCOMES FOR THE CHILDREN AND FAMILIES SERVED BY RILEY.</p> <p>VIOLENCE AND INJURIES RILEY HOSPITAL FOR CHILDREN'S IMPLEMENTATION STRATEGY TO ADDRESS THE IDENTIFIED NEED OF VIOLENCE AND INJURIES INCLUDES THE FOLLOWING:</p> <p>PROVIDE FREE SAFE SITTER CLASSES TO GROUPS OF LOW-INCOME YOUTH. RILEY WAS UNABLE TO HOLD CLASSES IN THE COMMUNITY DUE TO COVID-19. THE TRAUMA DEPARTMENT WAS RE-EVALUATING INJURY PRIORITIES FOR PREVENTION WITH A FOCUS ON VIOLENT INJURIES AS WELL AS PEDESTRIAN INJURIES.</p> <p>COMMUNITY HEALTH NEEDS NOT BEING ADDRESSED RILEY AT IU HEALTH IS UNABLE TO ADDRESS THOSE COMMUNITY HEALTH NEEDS THAT DO NOT RELATE DIRECTLY TO THE HOSPITAL'S MISSION TO DELIVER HEALTHCARE. THESE ARE NEEDS THAT OTHER GOVERNMENTAL AGENCIES AND/OR COMMUNITY ORGANIZATIONS HAVE THE MOST APPROPRIATE EXPERTISE AND RESOURCES TO ADDRESS.</p> <p>RILEY AT IU HEALTH IS UNABLE TO ADDRESS THE FOLLOWING COMMUNITY HEALTH NEEDS IDENTIFIED IN THE COMMUNITY HEALTH NEEDS ASSESSMENT:</p> <p>FUNDING FOR PUBLIC HEALTH IU HEALTH HAS A PARTNERSHIP WITH THE INDIANA PUBLIC HEALTH ASSOCIATION. THIS ORGANIZATION WORKS TO ADVANCE PUBLIC HEALTH SERVICES AND EDUCATION IN THE STATE OF INDIANA. IU HEALTH'S GOVERNMENT AFFAIRS OFFICE LOOKS FOR OPPORTUNITIES TO ADVOCATE FOR PUBLIC HEALTH FUNDING AT THE FEDERAL, STATE AND LOCAL LEVEL.</p> <p>AIR POLLUTION THE HOSPITAL IS UNABLE TO DIRECTLY IMPACT POLICY AND IMPLEMENT STRATEGIES THAT ADDRESS AIR POLLUTION. HOWEVER, OTHER STATE AND LOCAL GOVERNMENTAL AGENCIES AND COMMUNITY ORGANIZATIONS (E.G. THE HOOSIER ENVIRONMENTAL COUNCIL) HAVE THE MOST APPROPRIATE EXPERTISE WITH WHICH TO ADDRESS THIS ISSUE.</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 SAXONY HOSPITAL</p> <p>DESCRIPTION: IN CONJUNCTION WITH THE CHNA, IU HEALTH INC.'S BOARD ADOPTED AN IMPLEMENTATION STRATEGY IN APRIL 2022 RELATED TO THE 2021 CHNA. IU HEALTH INC. 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 INC. INCLUDES IU HEALTH METHODIST HOSPITAL, IU HEALTH UNIVERSITY HOSPITAL, RILEY HOSPITAL FOR CHILDREN AT IU HEALTH, AND IU HEALTH SAXONY HOSPITAL. THE FIRST THREE HOSPITALS MAKE UP THE ACADEMIC HEALTH CENTER (AHC).</p> <p>IU HEALTH SAXONY HOSPITAL WILL ADDRESS THE FOLLOWING COMMUNITY HEALTH NEEDS BETWEEN 2022 AND 2024:</p> <ol style="list-style-type: none"> 1. ACCESS TO HEALTHCARE SERVICES 2. AGING POPULATION AND NEEDS OF SENIORS 3. BEHAVIORAL HEALTH 4. CHRONIC DISEASE AND CHRONIC DISEASE MANAGEMENT 5. SMOKING, TOBACCO USE AND EXPOSURE TO SECONDHAND SMOKE 6. SOCIAL DETERMINANTS OF HEALTH <p>IU HEALTH SAXONY HOSPITAL IS UNABLE TO ADDRESS ALL OF THE SIGNIFICANT COMMUNITY HEALTH NEEDS IDENTIFIED IN THE LOCAL COMMUNITY. THIS IS NOT MEANT TO MINIMIZE THE IMPORTANCE OF ANY HEALTH NEED OR THE INTEGRITY OF THE CHNA PROCESS.</p> <p>IU HEALTH SAXONY HOSPITAL IS A MISSION AND VALUES DRIVEN HOSPITAL; THEREFORE, ADDRESSING COMMUNITY HEALTH NEEDS THAT ALIGN WITH THE HOSPITAL'S MISSION WILL HAVE THE GREATEST OPPORTUNITY TO ACTIVATE AND LEVERAGE HOSPITAL RESOURCES AS WELL AS MAXIMIZE CURRENT STRATEGIC COLLABORATIONS WITH COMMUNITY-BASED PARTNERS.</p> <p>IU HEALTH SAXONY HOSPITAL IS UNABLE TO ADDRESS THE FOLLOWING COMMUNITY HEALTH NEEDS IDENTIFIED IN THE 2021 COMMUNITY HEALTH NEEDS ASSESSMENT.</p> <ol style="list-style-type: none"> 1.HEALTH EDUCATION AND NAVIGATION 2.MATERNAL AND INFANT HEALTH AND CHILD WELL-BEING <p>HOWEVER, DURING 2021 IU HEALTH SAXONY HOSPITAL CONTINUED TO ADDRESS THE NEEDS IDENTIFIED IN THE 2018 CHNA, THROUGH THE IMPLEMENTATION STRATEGY ADOPTED IN APRIL 2019 RELATED TO THE 2018 CHNA.</p> <ol style="list-style-type: none"> 1. ACCESS TO HEALTHCARE SERVICES 2. DRUG AND SUBSTANCE ABUSE (INCLUDING OPIOIDS AND ALCOHOL)* 3. FOOD INSECURITY 4. HEALTHCARE AND SOCIAL SERVICES FOR SENIORS 5. MENTAL HEALTH* 6. OBESITY AND DIABETES 7. SOCIAL DETERMINANTS OF HEALTH <p>*IU HEALTH USES THE TERM BEHAVIORAL HEALTH TO REFER TO MENTAL HEALTH AND DRUG AND SUBSTANCE ABUSE (INCLUDING OPIOIDS).</p> <p>ACCESS TO HEALTHCARE SERVICES IU HEALTH SAXONY HOSPITAL'S IMPLEMENTATION STRATEGY TO ADDRESS THE IDENTIFIED NEED OF ACCESS TO HEALTHCARE SERVICES INCLUDES THE FOLLOWING:</p> <p>TRINITY FREE CLINIC HEALTH SERVICES FOR THE UNINSURED AND UNDERINSURED OF HAMILTON COUNTY.</p> <p>IN 2021, IU HEALTH SAXONY PROVIDED FUNDING TO SUPPORT THE OPERATIONS OF TRINITY FREE CLINIC'S FREE PRE- AND TYPE II DIABETES CARE CLINIC AND TO PURCHASE GLUCOSE TESTING AND MONITORING EQUIPMENT, A1C MACHINES, LOGBOOKS AND OTHER MEDICAL SUPPLIES. IN 2021, IU HEALTH TEAM MEMBERS AND PHYSICIANS STAFFED THE CLINIC FOR OVER 40 HOURS.</p> <p>HEART & SOUL HEALTH CLINIC OPERATIONS.</p> <p>IN 2021, IU HEALTH SAXONY, IN CONJUNCTION WITH IU HEALTH NORTH, SUPPORTED THE EXPANSION OF HEART & SOUL CLINIC'S LANGUAGE SERVICES PROGRAM, WHICH HELPED OVER 200 NON-ENGLISH SPEAKING PATIENTS RECEIVE INFORMED MEDICAL CARE.</p> <p>REGISTRATION ASSISTANCE FOR HEALTH INSURANCE.</p> <p>DURING THE FIRST HALF OF 2021, THE IU HEALTH SAXONY HOSPITAL INDIVIDUAL SOLUTIONS COORDINATORS ASSISTED OVER 20 INDIVIDUALS IN HEALTH INSURANCE ENROLLMENT.</p> <p>COMMUNITY COVID-19 AND FLU VACCINE CLINICS.</p> <p>IU HEALTH SAXONY HOSPITAL PARTNERED WITH INTERNAL STAFF AND COMMUNITY ORGANIZATIONS TO OFFER TEN FREE COVID-19 AND FLU VACCINE CLINICS TO IN-NEED COMMUNITIES. IN 2021, 582 COVID-19 VACCINES AND 377 FLU VACCINES WERE ADMINISTERED. NOTE: THIS STRATEGY DID NOT APPEAR IN THE APRIL 2019 IMPLEMENTATION STRATEGY BUT WAS UNDERTAKEN IN 2021 AS IT MEETS SIGNIFICANT COMMUNITY HEALTH NEEDS IN RELATION TO ACCESS TO HEALTHCARE SERVICES.</p> <p>BEHAVIORAL HEALTH (INCLUDES DRUG & SUBSTANCE ABUSE AND MENTAL HEALTH) IU HEALTH SAXONY HOSPITAL'S IMPLEMENTATION STRATEGY TO ADDRESS THE IDENTIFIED NEED OF BEHAVIORAL HEALTH INCLUDES THE FOLLOWING:</p> <p>PARTNERSHIP FOR A HEALTHY HAMILTON COUNTY (PHHC).</p>

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	<p>IN 2021, PHHC UNDERWENT A NAME CHANGE AND IS NOW REFERRED TO AS A HEALTHIER HAMILTON COUNTY: SYSTEMS OF CARE (SOC). IU HEALTH SAXONY PROVIDED FUNDING FOR A HEALTHIER HAMILTON COUNTY: SOC TO SUPPORT THE OPERATIONS AND FOUNDATION OF THEIR NEW PEER-TO-PEER SAFE CRISIS DE-ESCALATION SPACE PROJECT, CONNECTING HAMILTON COUNTY AND TACKLING STIGMA (CHATS).</p> <p>PEER RECOVERY PROGRAM.</p> <p>DURING THE FIRST HALF OF 2021, OVER 20 PATIENTS WERE REFERRED FROM THE IU HEALTH SAXONY HOSPITAL EMERGENCY DEPARTMENT TO THE BEHAVIORAL HEALTH PEER RECOVERY PROGRAM AND 86 PERCENT OF PATIENT FOLLOW-UPS WERE SUCCESSFUL.</p> <p>IU HEALTH EMERGENCY DEPARTMENT (ED) TELEPSYCH PROGRAM.</p> <p>THE TELEPSYCH PROGRAM STAFF CONTINUED TO ASSIST PATIENTS PRESENTING IN THE ED WITH BEHAVIORAL HEALTH CONDITIONS AND IU HEALTH SAXONY HOSPITAL NURSES, SOCIAL WORKERS AND PROVIDERS WERE TRAINED TO INITIATE THE TELEMEDICINE VISITS.</p> <p>INDIANA CENTER FOR PREVENTION OF YOUTH ABUSE & SUICIDE (ICPYAS) SUPPORT.</p> <p>IN 2021, IU HEALTH SAXONY HOSPITAL PROVIDED FUNDING TO ICPYAS TO EXPAND THEIR EVIDENCE-BASED YOUTH ABUSE AND SUICIDE PREVENTION AND AWARENESS CURRICULUM FOR CHILDREN AND ADULTS IN HAMILTON COUNTY. IN 2021, IU HEALTH TEAM MEMBERS WITH CHILD-FACING ROLES WERE ENCOURAGED TO PARTICIPATE IN STEWARDS OF CHILDREN TRAININGS TO INCREASE AWARENESS SURROUNDING CHILD SEXUAL ABUSE. FOUR TEAM MEMBERS COMPLETED THE PROGRAM.</p> <p>BREATHE EASY HAMILTON COUNTY.</p> <p>IU HEALTH SAXONY HOSPITAL SUPPORTED BREATHE EASY HAMILTON COUNTY BY PROVIDING LETTERS OF RECOMMENDATION FOR THE ORGANIZATION'S TOBACCO CESSATION AND PREVENTION PROJECTS. PHYSICIAN LIAISONS ALSO PLACED TOBACCO QUITLINE MATERIALS IN IU HEALTH PHYSICIAN PRACTICES TO ENCOURAGE REFERRALS.</p> <p>ASPIRE INDIANA PROGRAM AND OPERATIONAL SUPPORT.</p> <p>IN 2021, IU HEALTH SAXONY HOSPITAL PROVIDED FUNDING TO ASPIRE INDIANA HEALTH TO SUPPORT THEIR EMPLOYMENT ASSISTANCE PROGRAM THAT PROVIDES JOB TRAININGS, CERTIFICATIONS AND LICENSURES TO LOW-INCOME AND HOMELESS INDIVIDUALS IN HAMILTON COUNTY. APPROXIMATELY 40 COMMUNITY MEMBERS RECEIVED EMPLOYMENT ASSISTANCE AS A RESULT OF THE FUNDING.</p> <p>CHERISH CHILD ADVOCACY CENTER SUPPORT.</p> <p>IN 2021, IU HEALTH SAXONY HOSPITAL PROVIDED FUNDING TO THE CHERISH CHILD ADVOCACY CENTER TO ASSIST WITH COVID-19 RELIEF EFFORTS THAT ENSURED CLIENTS COULD SEEK SAFE, IN-PERSON ABUSE INTERVENTION AND PREVENTION SERVICES. NOTE: THIS STRATEGY DID NOT APPEAR IN THE APRIL 2019 IMPLEMENTATION STRATEGY BUT WAS UNDERTAKEN IN 2021 AS IT MEETS SIGNIFICANT COMMUNITY HEALTH NEEDS IN RELATION TO BEHAVIORAL HEALTH.</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 SAXONY HOSPITAL (CONTINUED)</p> <p>DESCRIPTION: FOOD INSECURITY</p> <p>IU HEALTH SAXONY HOSPITAL'S IMPLEMENTATION STRATEGY TO ADDRESS THE IDENTIFIED NEED OF FOOD INSECURITY INCLUDES THE FOLLOWING:</p> <p>LOCAL FARMERS' MARKETS</p> <p>IN 2021, IU HEALTH SAXONY HOSPITAL PROVIDED FUNDING FOR THE FISHERS FARMERS MARKET AND THE SAXONY MARKET.</p> <p>GOOD SAMARITAN NETWORK (GSN) OF HAMILTON COUNTY SUPPORT.</p> <p>IN 2021, IU HEALTH SAXONY HOSPITAL PROVIDED FUNDING FOR GSN'S HOLIDAY ASSISTANCE PROGRAM, WHICH PROVIDED GENERAL SUSTENANCE AND FOOD FOR LOW-INCOME INDIVIDUALS AND FAMILIES. NOTE: THIS STRATEGY DID NOT APPEAR IN THE APRIL 2019 IMPLEMENTATION STRATEGY BUT WAS UNDERTAKEN IN 2021 AS IT MEETS SIGNIFICANT COMMUNITY HEALTH NEEDS IN RELATION TO FOOD INSECURITY.</p> <p>FRESH BUCKS PROGRAM.</p> <p>IN 2021, IU HEALTH SAXONY HOSPITAL BEGAN A PILOT PROGRAM, IN PARTNERSHIP WITH THE FISHERS FARMERS MARKET, TO OFFER A DOUBLE-UP FOOD INCENTIVE PROGRAM FOR SUPPLEMENTAL NUTRITION ASSISTANCE RECIPIENTS TO PURCHASE HEALTHY FOODS AT THE MARKET, FREE OF COST. NOTE: THIS STRATEGY DID NOT APPEAR IN THE APRIL 2019 IMPLEMENTATION STRATEGY BUT WAS UNDERTAKEN IN 2021 AS IT MEETS SIGNIFICANT COMMUNITY HEALTH NEEDS IN RELATION TO FOOD INSECURITY.</p> <p>HEALTHCARE AND SOCIAL SERVICES FOR SENIORS</p> <p>IU HEALTH SAXONY HOSPITAL'S IMPLEMENTATION STRATEGY TO ADDRESS THE IDENTIFIED NEED OF HEALTHCARE AND SOCIAL SERVICES FOR SENIORS INCLUDES THE FOLLOWING:</p> <p>EDUCATIONAL HEALTH PROGRAMMING FOR SENIORS.</p> <p>IN 2021, THREE GERIATRIC HEALTH SEMINARS WERE LED BY IU HEALTH SAXONY HOSPITAL STAFF ON THE TOPICS OF HEALTHY NUTRITION, FALL PREVENTION AND DEMENTIA. APPROXIMATELY 50 SENIORS ATTENDED EACH SEMINAR AND OVER 90 PERCENT OF ATTENDEES REPORTED AN INCREASE IN KNOWLEDGE BASED ON PRESENTATION SURVEYS.</p> <p>HEALTH SCREENINGS FOR SENIORS.</p> <p>IN ORDER TO MAINTAIN THE SAFETY OF STAFF AND COMMUNITY MEMBERS, SENIOR HEALTH SCREENINGS WERE NOT PROVIDED IN 2021. IN PLACE OF HEALTH SCREENINGS, IU HEALTH SAXONY OFFERED FREE COVID-19 AND FLU VACCINE CLINICS FOR SENIORS.</p> <p>REACHING RESOURCES PROGRAM THROUGH SHEPHERD'S CENTER OF HAMILTON COUNTY.</p> <p>IU HEALTH SAXONY HOSPITAL DID NOT SUPPORT THE REACHING RESOURCES PROGRAM IN 2021. IN PLACE OF SUPPORT FOR REACHING RESOURCES, IU HEALTH SAXONY HOSPITAL PROVIDED FUNDING FOR A PILOT PROGRAM, IN PARTNERSHIP WITH THE SHEPHERD'S CENTER, TO INCREASE ACCESS TO GERIATRIC BEHAVIORAL HEALTH COUNSELING.</p> <p>HOME-BASED BEHAVIORAL HEALTH SERVICES FOR SENIORS.</p> <p>IN 2021, IU HEALTH SAXONY HOSPITAL PARTNERED WITH THE SHEPHERD'S CENTER OF HAMILTON COUNTY AND THE IU HEALTH CONNECTED CARE TEAM TO LAUNCH A MENTAL HEALTH COUNSELING PROGRAM FOR SENIORS TO RECEIVE VIRTUAL, OUTPATIENT AND HOME-BASED THERAPY. DURING THE PILOT YEAR, 160 COUNSELING SESSIONS WERE ADMINISTERED.</p> <p>OBESITY AND DIABETES</p> <p>IU HEALTH SAXONY HOSPITAL'S IMPLEMENTATION STRATEGY TO ADDRESS THE IDENTIFIED NEED OF OBESITY AND DIABETES INCLUDES THE FOLLOWING:</p> <p>FRESH & FIT PROGRAM.</p> <p>IN ORDER TO MAINTAIN THE SAFETY OF STAFF AND COMMUNITY MEMBERS DURING THE COVID-19 PANDEMIC, IU HEALTH SAXONY HOSPITAL DID NOT HOST THE FRESH & FIT PROGRAM IN 2021. THE PROGRAM WILL RESUME VIRTUALLY IN 2022.</p> <p>IU HEALTH DAYS OF SERVICE.</p> <p>DURING THE 2021 DAYS OF SERVICE, OVER 115 IU HEALTH NORTH AND SAXONY HOSPITAL TEAM MEMBERS PARTICIPATED IN SOCIALLY DISTANCED AND REMOTE PROJECTS FOR NEARLY 200 HOURS THROUGHOUT THE MONTH OF SEPTEMBER. TEAM MEMBERS COMPLETED PHYSICALLY ACTIVE PROJECTS AT LOCAL PARKS TO MAKE UPDATES, ADDITIONS AND IMPROVEMENTS TO BENEFIT THE PARKS AND, ULTIMATELY, LEAD TO AN INCREASE IN PHYSICAL ACTIVITY AMONG COMMUNITY MEMBERS.</p> <p>MUDSOCK YOUTH ATHLETICS SUPPORT.</p> <p>IN 2021, IU HEALTH SAXONY HOSPITAL PROVIDED FUNDING TO MUDSOCK YOUTH ATHLETICS TO EXPAND THEIR PLAYER-IN-NEED SCHOLARSHIP PROGRAM, WHICH HELPS LOW-INCOME FAMILIES ENROLL THEIR CHILDREN IN RECREATIONAL SPORTS AT A FREE OR REDUCED COST. OVER 90 SPORTS SCHOLARSHIPS WERE GRANTED AS A RESULT OF THE FUNDING. IU HEALTH SAXONY ALSO PROVIDED FUNDING TO PURCHASE SPORTS EQUIPMENT TO PLACE IN FREE EQUIPMENT LOCKERS TO PROMOTE PHYSICAL ACTIVITY AMONG CHILDREN AND FAMILIES. NOTE: THIS STRATEGY DID NOT APPEAR IN THE APRIL 2019</p>

Return Reference - Identifier	Explanation
	<p>IMPLEMENTATION STRATEGY BUT WAS UNDERTAKEN IN 2021 AS IT MEETS SIGNIFICANT COMMUNITY HEALTH NEEDS IN RELATION TO OBESITY AND DIABETES.</p> <p>SOCIAL DETERMINANTS OF HEALTH</p> <p>IU HEALTH SAXONY HOSPITAL'S IMPLEMENTATION STRATEGY TO ADDRESS THE IDENTIFIED NEED OF SOCIAL DETERMINANTS OF HEALTH INCLUDES THE FOLLOWING:</p> <p>PREVAIL, INC. SUPPORT.</p> <p>IN 2021, IU HEALTH SAXONY HOSPITAL PROVIDED FUNDING TO PREVAIL INC.'S SAFE HOUSING SOLUTIONS PLAN, WHICH ENSURES THAT INDIVIDUALS AND FAMILIES WHO EXPERIENCE ABUSE, CRIME, TRAUMA OR VIOLENCE CAN MAINTAIN OR ATTAIN HOUSING AND CAN ACCESS IMMEDIATE FUNDS TO AVOID HOMELESSNESS. NOTE: THIS STRATEGY DID NOT APPEAR IN THE APRIL 2019 IMPLEMENTATION STRATEGY BUT WAS UNDERTAKEN IN 2021 AS IT MEETS SIGNIFICANT COMMUNITY HEALTH NEEDS IN RELATION TO SOCIAL DETERMINANTS OF HEALTH.</p> <p>IU HEALTH SAXONY HOSPITAL ADDRESSED ALL THE COMMUNITY HEALTH NEEDS BASED ON THEIR 2018 CHNA. THERE WERE NO IDENTIFIED NEEDS THAT WERE NOT ADDRESSED.</p>
<p>SCHEDULE H, PART V, SECTION B, LINE 13B - ELIGIBILITY FOR FREE OR DISCOUNTED CARE</p>	<p>FACILITY NAME: INDIANA UNIVERSITY HEALTH</p> <p>DESCRIPTION: IN ADDITION TO FPG, IU HEALTH MAY TAKE INTO CONSIDERATION A PATIENT'S INCOME AND/OR ABILITY TO PAY IN THE 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: INDIANA UNIVERSITY HEALTH</p> <p>DESCRIPTION: IU HEALTH 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>
<p>SCHEDULE H, PART V, SECTION B, LINE 16A - FAP AVAILABLE WEBSITE</p>	<p>HTTPS://IUHEALTH.ORG/PAY-A-BILL/FINANCIAL-ASSISTANCE</p>
<p>SCHEDULE H, PART V, SECTION B, LINE 16B - FAP APPLICATION FORM WEBSITE</p>	<p>HTTPS://IUHEALTH.ORG/PAY-A-BILL/FINANCIAL-ASSISTANCE</p>
<p>SCHEDULE H, PART V, SECTION B, LINE 16C - PLAIN LANGUAGE FAP SUMMARY WEBSITE</p>	<p>HTTPS://IUHEALTH.ORG/PAY-A-BILL/FINANCIAL-ASSISTANCE</p>

Return Reference - Identifier	Explanation
<p>SCHEDULE H, PART V, SECTION B, LINE 16J - OTHER WAYS HOSPITAL PUBLICIZED FINANCIAL ASSISTANCE POLICY</p>	<p>FACILITY NAME: INDIANA UNIVERSITY HEALTH</p> <p>DESCRIPTION: IU HEALTH TAKES SEVERAL OTHER MEASURES TO BROADLY 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? 178

Name and address	Type of Facility (describe)
1 INDIANA HAND TO SHLDR BELTWAY SRGRY CTR 8501 HARCOURT RD. INDIANAPOLIS, IN 46260	AMBULATORY SURGERY
2 IU HEALTH EAST WASHINGTON SURGERY CENTER 9660 E. WASHINGTON ST., STE. 200 INDIANAPOLIS, IN 46229	AMBULATORY SURGERY
3 IU HEALTH MERIDIAN SOUTH SURGERY CENTER 8820 S. MERIDIAN ST. INDIANAPOLIS, IN 46217	AMBULATORY SURGERY
4 IU HEALTH MULTI-SPECIALITY SURGERY CTR 10601 N. MERIDIAN ST., SUITE 250 INDIANAPOLIS, IN 46290	AMBULATORY SURGERY
5 IU HEALTH SPRING MILL SURGERY CENTER 10300 N. ILLINOIS ST. SUITES 1300 & 2400 INDIANAPOLIS, IN 46290	AMBULATORY SURGERY
6 IU HEALTH BELTWAY SURGERY CENTER 151 PENNSYLVANIA PKWY. CARMEL, IN 46280	AMBULATORY SURGERY
7 IU HEALTH SPRING MILL SURGERY CENTER 10300 N. ILLINOIS ST., STE. 1300 & 2400 CARMEL, IN 46290	AMBULATORY SURGERY
8 IU HEALTH HOME CARE 950 N. MERIDIAN ST., STE. 700 INDIANAPOLIS, IN 46204	HOME HEALTH
9 IU HEALTH EXPRESSIONS HOME MEDICAL EQUIP 11725 N. ILLINOIS ST., SUITE 485 CARMEL, IN 46032	HOME HEALTH
10 IU HEALTH EXPRESSIONS HOME MEDICAL EQUIP 1701 N. SENATE BLVD. INDIANAPOLIS, IN 46202	HOME HEALTH

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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? 178

Name and address	Type of Facility (describe)
1 IU HEALTH BALL MEM OUTPATIENT SURG. CTR 2401 W. UNIVERSITY AVE. MUNCIE, IN 47303	AMBULATORY SURGERY
2 IU HEALTH MORGAN 2209 JOHN R. WOODEN DR. MARTINSVILLE, IN 46151	DIAGNOSTIC & OTHER OUTPATIENT
3 IU HEALTH EAGLE HIGHLANDS SURGERY CENTER 6850 PARKDALE PL. INDIANAPOLIS, IN 46254	AMBULATORY SURGERY
4 BELTWAY SURGERY CENTER SPRING MILL 200 W. 103RD ST., STE. 2400 INDIANAPOLIS, IN 46290	AMBULATORY SURGERY
5 SENATE STREET SURGERY CENTER 1801 N. SENATE BLVD. INDIANAPOLIS, IN 46202	AMBULATORY SURGERY
6 IU HEALTH UNIVERSITY RETAIL PHARMACY 550 N. UNIVERSITY BLVD. INDIANAPOLIS, IN 46202	PHARMACY
7 IU HEALTH SAXONY SURGERY CENTER 13100 E. 136TH ST. FISHERS, IN 46037	AMBULATORY SURGERY
8 INDIANA ENDOSCOPY CENTERS 10967 ALLISONVILLE RD., STE. 100 FISHERS, IN 46038	AMBULATORY SURGERY
9 INDIANA ENDOSCOPY CENTERS 1115 N. RONALD REAGAN PKWY., STE. 347 AVON, IN 46123	AMBULATORY SURGERY
10 INDIANA ENDOSCOPY CENTERS 1801 N. SENATE BLVD., STE. 710 INDIANAPOLIS, IN 46202	AMBULATORY SURGERY

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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? 178

Name and address	Type of Facility (describe)
1 IU HEALTH CICC - NORTH 10212 LANTERN RD. FISHERS, IN 46038	SPECIALTY CARE
2 IUH BLOOMINGTON HOSPITAL MAIN CAMPUS LAB 601 W. 2ND ST., 1ST FL. BLOOMINGTON, IN 47403	LAB
3 IU HEALTH BALL MEMORIAL HOSPITAL LAB 2401 UNIVERSITY AVE. MUNCIE, IN 47303	LAB
4 IU HEALTH CICC - EAST 6845 RAMA DR. INDIANAPOLIS, IN 46219	SPECIALTY CARE
5 IU HEALTH METHODIST RETAIL PHARMACY 1801 N. SENATE BLVD., STE. 105 INDIANAPOLIS, IN 46202	PHARMACY
6 IU HEALTH ARNETT HOSPITAL LAB 5165 MCCARTY LN. LAFAYETTE, IN 47905	LAB
7 IU HEALTH WEST HOSPITAL LAB 1111 RONALD REAGAN PKWY., SUITE A1110 AVON, IN 46123	LAB
8 GLEN LEHMAN ENDOSCOPY SUITE 550 N. UNIVERSITY BLVD., STE. 4100 INDIANAPOLIS, IN 46202	AMBULATORY SURGERY
9 IU HEALTH NORTH HOSPITAL LAB 11700 N. MERIDIAN ST. CARMEL, IN 46032	LAB
10 IU HEALTH SLEEP DISORDERS CENTER 714 N. SENATE AVE., STE. 110 INDIANAPOLIS, IN 46202	SPECIALTY CARE

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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? 178

Name and address	Type of Facility (describe)
1 IU HEALTH HOSPICE 950 N. MERIDIAN ST., STE. 700 INDIANAPOLIS, IN 46204	HOSPICE
2 IU HEALTH METHODIST MEDICAL PLAZA SOUTH 8830 S. MERIDIAN ST. INDIANAPOLIS, IN 46217	DIAGNOSTIC & OTHER OUTPATIENT
3 IU HEALTH SLEEP APNEA EDUCATION CENTER 6004 W. KILGORE AVE. MUNCIE, IN 47304	SPECIALTY CARE
4 IU HEALTH SLEEP DISORDERS CENTER 6004 W. KILGORE AVE. MUNCIE, IN 47304	SPECIALTY CARE
5 IU HEALTH BALL MEMORIAL HOSPICE 2401 W. UNIVERSITY AVE. MUNCIE, IN 47303	HOSPICE
6 IU HEALTH METHODIST MEDICAL PLAZA NORTH 151 PENNSYLVANIA PKWY. INDIANAPOLIS, IN 46280	DIAGNOSTIC & OTHER OUTPATIENT
7 IU HEALTH RILEY RETAIL PHARMACY 705 RILEY HOSPITAL DR., ROC 1201 INDIANAPOLIS, IN 46202	PHARMACY
8 RILEY OUTPATIENT SURGERY CENTER 575 RILEY HOSPITAL DR. INDIANAPOLIS, IN 46202	AMBULATORY SURGERY
9 IU HEALTH SLEEP DISORDERS CENTER 1504 CLINIC DR. BEDFORD, IN 47421	SPECIALTY CARE
10 IU HEALTH SAXONY HOSPITAL LAB 13000 E. 136TH ST. FISHERS, IN 46037	LAB

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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? 178

Name and address	Type of Facility (describe)
1 IU HEALTH NORTH RETAIL PHARMACY 11700 N. MERIDIAN ST., STE. B106 CARMEL, IN 46032	PHARMACY
2 IU HEALTH WHITE MEMORIAL HOSPITAL LAB 720 S. 6TH ST. MONTICELLO, IN 47960	LAB
3 IU HEALTH BALL MEMORIAL HOME CARE 2401 W. UNIVERSITY AVE. MUNCIE, IN 47303	HOME HEALTH
4 IU HEALTH SLEEP DISORDERS CENTER 1411 W. COUNTY LINE RD., STE. C GREENWOOD, IN 46142	SPECIALTY CARE
5 IU HEALTH WEST RETAIL PHARMACY 1111 N. RONALD REAGAN PKWY., M105 AVON, IN 46123	PHARMACY
6 IU HEALTH PAOLI HOSPITAL LAB 642 W. HOSPITAL RD. PAOLI, IN 47454	LAB
7 IU HEALTH BLOOMINGTON HOME CARE 333 E. MILLER DR. BLOOMINGTON, IN 47401	HOME HEALTH
8 IU HEALTH ARNETT HOME CARE 3900 MCCARTY LN., STE. 103 LAFAYETTE, IN 47905	HOME HEALTH
9 IU HEALTH SAXONY RETAIL PHARMACY 13100 E. 136TH ST., STE. 1000 FISHERS, IN 46037	PHARMACY
10 IU HEALTH BLACKFORD HOSPITAL LAB 410 PILGRIM BLVD. HARTFORD CITY, IN 47348	LAB

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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? 178

Name and address	Type of Facility (describe)
1 IU HEALTH TIPTON HOSPITAL LAB 1000 S. MAIN ST. TIPTON, IN 46072	LAB
2 IU HEALTH RADIOLOGY 9650 E. WASHINGTON ST. INDIANAPOLIS, IN 46229	RADIOLOGY
3 IU HEALTH LIFECARE 1633 N. CAPITAL AVE., STE. 300 INDIANAPOLIS, IN 46202	DIAGNOSTIC & OTHER OUTPATIENT
4 IU HEALTH PHYSICAL THERAPY & REHAB 6866 W. STONEGATE DR., SUITE 106 ZIONSVILLE, IN 46077	REHABILITATION SERVICES
5 IU HEALTH PHYSICAL THERAPY & REHAB 404 E. WASHINGTON ST., STE. B INDIANAPOLIS, IN 46204	REHABILITATION SERVICES
6 IUH ADDICTION TREATMENT & RECOVERY CNTR 727 W. 2ND ST. BLOOMINGTON, IN 47403	BEHAVIORAL HEALTH
7 IUH ADDICTION TREATMENT & RECOVERY CNTR 2209 JOHN R. WOODEN DR. MARTINSVILLE, IN 46151	BEHAVIORAL HEALTH
8 IUH ADDICTION TREATMENT & RECOVERY CNTR 1758 W 100 S PORTLAND, IN 47371	BEHAVIORAL HEALTH
9 IUH ADDICTION TREATMENT & RECOVERY CNTR 210 N. TILLOTSON AVE. MUNCIE, IN 47304	BEHAVIORAL HEALTH
10 IU HEALTH OLCOTT CENTER 619 W. 1ST ST. BLOOMINGTON, IN 47403	DIAGNOSTIC & 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? 178

Name and address	Type of Facility (describe)
1 IU HEALTH METHODIST MEDICAL PLAZA 6850 PARKDALE PL. INDIANAPOLIS, IN 46254	DIAGNOSTIC & OTHER OUTPATIENT
2 ADULT AMBULATORY CARE CENTER 550 N. UNIVERSITY BLVD., STE. 3500 INDIANAPOLIS, IN 46202	DIAGNOSTIC & OTHER OUTPATIENT
3 METHODIST MEDICAL PLAZA GEORGETOWN 4880 W. CENTURY PLAZA RD. INDIANAPOLIS, IN 46254	DIAGNOSTIC & OTHER OUTPATIENT
4 IU HEALTH METHODIST MEDICAL TOWER 1633 N. CAPITAL AVE. INDIANAPOLIS, IN 46202	DIAGNOSTIC & OTHER OUTPATIENT
5 IU HEALTH BLOOMINGTON HOSPITAL HOSPICE 619 W. 1ST ST. BLOOMINGTON, IN 47403	HOSPICE
6 IU HEALTH BLOOMINGTON HOSPICE HOUSE 2810 S. DEBORAH DR. BLOOMINGTON, IN 47403	HOSPICE
7 IU HEALTH ARNETT HOSPICE 3900 MCCARTY LN., STE. 104 LAFAYETTE, IN 47905	HOSPICE
8 IU HEALTH ARNETT SOUTHSIDE LAB 1 WALTER SCHOLER DR. LAFAYETTE, IN 47909	LAB
9 IU HEALTH METHODIST MEDICAL TOWER LAB 1633 N. CAPITOL AVE. INDIANAPOLIS, IN 46202	LAB
10 IU HEALTH SPRINGMILL MEDICAL CLINIC LAB 10300 N. ILLINOIS ST., STE. 1400 CARMEL, IN 46290	LAB

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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? 178

Name and address	Type of Facility (describe)
1 IUH JOE & SHELLY SCHWARZ CANCER CTR LAB 11700 N. MERIDIAN ST. CARMEL, IN 46032	LAB
2 IU HEALTH FRANKFORT LAB 1300 S. JACKSON ST. FRANKFORT, IN 46041	LAB
3 IUH METHODIST MED PLAZA BROWNSBURG LAB 1375 N. GREEN ST., STE. 200 BROWNSBURG, IN 46112	LAB
4 IU HEALTH BALL MEMORIAL PHYSICIANS LAB 1420 S. PILGRIM BLVD. YORKTOWN, IN 47396	LAB
5 IUH METHODIST MEDICAL PLAZA NORTH LAB 151 PENNSYLVANIA PKWY. CARMEL, IN 46280	LAB
6 IUH METHODIST PROFESSIONAL CENTER LAB 1801 N. SENATE BLVD. INDIANAPOLIS, IN 46202	LAB
7 IU HEALTH MORGAN LAB 2209 JOHN R. WOODEN DR. MARTINSVILLE, IN 46151	LAB
8 IU HEALTH ARNETT WESTSIDE LAB 253 SAGAMORE PKWY. W. WEST LAFAYETTE, IN 47906	LAB
9 IU HEALTH ARNETT FERRY ST. LAB 2600 FERRY ST. LAFAYETTE, IN 47904	LAB
10 IU HEALTH ARNETT GREENBUSH LAB 2600 GREENBUSH ST. LAFAYETTE, IN 47904	LAB

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(list in order of size, from largest to smallest)How many non-hospital health care facilities did the organization operate during the tax year? 178

Name and address	Type of Facility (describe)
1 IU HEALTH BEDFORD HOSPITAL LAB 2900 W. 16TH ST. BEDFORD, IN 47421	LAB
2 IU HEALTH SIP BEDFORD LAB 2900 W. 16TH ST. BEDFORD, IN 47421	LAB
3 IU HEALTH PATHOLOGY LAB 350 W. 11TH ST. INDIANAPOLIS, IN 46202	LAB
4 IU HEALTH ARNETT CANCER CARE LAB 420 N. 26TH ST. LAFAYETTE, IN 47904	LAB
5 IU HEALTH GEORGETOWN MEDICAL PLAZA LAB 4880 CENTURY PLAZA RD., STE. 125 INDIANAPOLIS, IN 46254	LAB
6 ARLINGTON DIAGNOSTIC CENTER LAB 4935 W. ARLINGTON RD. BLOOMINGTON, IN 47404	LAB
7 IU HEALTH JAY HOSPITAL OUTPATIENT LAB 500 W. VOTAW ST. PORTLAND, IN 47371	LAB
8 UNIV HOSP AMBULATORY OUTPATIENT CNTR LAB 550 N. UNIVERSITY BLVD., RM. 1005 INDIANAPOLIS, IN 46202	LAB
9 IU HEALTH LANDMARK OUTPATIENT LAB 550. LANDMARK AVE. BLOOMINGTON, IN 47403	LAB
10 IU HEALTH BETHEL LAB 5501 W. BETHEL AVE., SUITE C MUNCIE, IN 46304	LAB

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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? 178

Name and address	Type of Facility (describe)
1 IUH METHODIST MED PLAZA EAGLE HIGHLANDS 6850 PARKDALE PL. INDIANAPOLIS, IN 46254	LAB
2 IU HEALTH MOORESVILLE LAB 820 SAMUEL MOORE PKWY. MOORESVILLE, IN 46158	LAB
3 IUH METHODIST MEDICAL PLAZA SOUTH LAB 8820 S. MERIDIAN ST. INDIANAPOLIS, IN 46217	LAB
4 IUH METHODIST MEDICAL PLAZA EAST LAB 9650 E. WASHINGTON ST. INDIANAPOLIS, IN 46229	LAB
5 IU HEALTH ADVANCED THERAPIES PHARMACY 355 W. 16TH ST., STE. 1600 GH 1074 INDIANAPOLIS, IN 46202	PHARMACY
6 CONNECTED CARE-IU HEALTH SAXONY HOSPITAL 13000 E. 136TH ST., SUITE 3400 FISHERS, IN 46037	PRIMARY CARE
7 IU HEALTH MORGAN WALK-IN 2209 JOHN R. WOODEN DR. MARTINSVILLE, IN 46151	PRIMARY CARE
8 IU HEALTH RADIOLOGY 13000 E. 136TH ST. FISHERS, IN 46037	RADIOLOGY
9 IU HEALTH CANCER RADIATION CENTER 9149 STATE RD. 37 BEDFORD, IN 47421	RADIOLOGY
10 IU HEALTH RADIOLOGY 820 SAMUEL MOORE PKWY. MOORESVILLE, IN 46158	RADIOLOGY

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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? 178

Name and address	Type of Facility (describe)
1 IU HEALTH RADIOLOGY 362 W. 15TH ST. INDIANAPOLIS, IN 46202	RADIOLOGY
2 IU HEALTH MORGAN RADIOLOGY 2209 JOHN R. WOODEN DR. MARTINSVILLE, IN 46151	RADIOLOGY
3 IU HEALTH RADIOLOGY 550 N. UNIVERSITY BLVD., UN 0663 INDIANAPOLIS, IN 46202	RADIOLOGY
4 IU HEALTH RADIOLOGY 893 S. DELAWARE ST., DC 2111 INDIANAPOLIS, IN 46285	RADIOLOGY
5 IU HEALTH RADIOLOGY 404 E. WASHINGTON ST., STE. B INDIANAPOLIS, IN 46204	RADIOLOGY
6 IU HEALTH RADIOLOGY 1801 N. SENATE BLVD., RM. A 1157A INDIANAPOLIS, IN 46202	RADIOLOGY
7 IU HEALTH RADIOLOGY 714 N. SENATE AVE., STE. 100 INDIANAPOLIS, IN 46202	RADIOLOGY
8 IU HEALTH RADIOLOGY 151 PENNSYLVANIA PKWY, SUITE 160 INDIANAPOLIS, IN 46280	RADIOLOGY
9 IU HEALTH RADIOLOGY 2598 W. WHITE RIVER BLVD. MUNCIE, IN 47303	RADIOLOGY
10 IU HEALTH RADIOLOGY 1111 N. RONALD REAGAN PKWY. AVON, IN 46123	RADIOLOGY

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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? 178

Name and address	Type of Facility (describe)
1 IU HEALTH RADIOLOGY 1000 S. MAIN ST. TIPTON, IN 46072	RADIOLOGY
2 IU HEALTH RADIOLOGY 1375 N. GREEN ST., STE. 200 BROWNSBURG, IN 46112	RADIOLOGY
3 IU HEALTH RADIOLOGY 11700 N. MERIDIAN ST., STE. 160 CARMEL, IN 46032	RADIOLOGY
4 IUH ADULT SPEECH-LANGUAGE PATHOLOGY 550 N. UNIVERSITY BLVD. INDIANAPOLIS, IN 46202	REHABILITATION SERVICES
5 IUH ADULT PHYSICAL THERAPY & REHAB SRVCS 13000 E. 136TH ST., SUITE 2100 FISHERS, IN 46037	REHABILITATION SERVICES
6 IUH REHAB & SPORTS MEDICINE CENTER EAST 328 S. WOODCREST DR. BLOOMINGTON, IN 47401	REHABILITATION SERVICES
7 IU HEALTH OCCUPATIONAL SERVICES 3443 W. 3RD ST. BLOOMINGTON, IN 47404	REHABILITATION SERVICES
8 IUH REHAB & SPORTS MEDICINE CENTER WEST 2650 COTA DR. BLOOMINGTON, IN 47403	REHABILITATION SERVICES
9 IU HEALTH PHYSICAL THERAPY & REHAB 4935 W. ARLINGTON RD. BLOOMINGTON, IN 47404	REHABILITATION SERVICES
10 IU HEALTH PHYSICAL THERAPY & REHAB 1801 N. SENATE BLVD., STE. 240 INDIANAPOLIS, IN 46202	REHABILITATION SERVICES

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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? 178

Name and address	Type of Facility (describe)
1 IUH OCCUP THRPY SVCS AT METHODIST HOSP. 1801 N. SENATE BLVD., STE. 530 INDIANAPOLIS, IN 46202	REHABILITATION SERVICES
2 NEUROREHABILITATION AND ROBOTICS 355 W. 16TH ST., STE. 1078 INDIANAPOLIS, IN 46202	REHABILITATION SERVICES
3 IU HEALTH OCCUPATIONAL SERVICES 2900 W. 16TH ST. BEDFORD, IN 47421	REHABILITATION SERVICES
4 IU HEALTH MORGAN REHABILITATION 2209 JOHN R. WOODEN DR. MARTINSVILLE, IN 46151	REHABILITATION SERVICES
5 IU HEALTH PHYSICAL THERAPY & REHAB 550 N. UNIVERSITY BLVD., RM. 4175 INDIANAPOLIS, IN 46202	REHABILITATION SERVICES
6 IUH ADULT PHYSICAL THERAPY & REHAB SVCS 1801 N. SENA BLVD., STE. 535 INDIANAPOLIS, IN 46202	REHABILITATION SERVICES
7 IUH PT, OCCUPATIONAL THRPY& SPEECH THRPY 1300 S. JACKSON ST. FRANKFORT, IN 46141	REHABILITATION SERVICES
8 IU HEALTH PHYSICAL THERAPY & REHAB 2401 W. UNIVERSITY AVE. MUNCIE, IN 47303	REHABILITATION SERVICES
9 IU HEALTH PHYSICAL THERAPY & REHAB 1010 S. MAIN ST., SUITE 110 TIPTON, IN 46072	REHABILITATION SERVICES
10 IU HEALTH PHYSICAL THERAPY & REHAB 9670 E. WASHINGTON ST., STE. 115 INDIANAPOLIS, IN 46229	REHABILITATION SERVICES

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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? 178

Name and address	Type of Facility (describe)
1 IU HEALTH PHYSICAL THERAPY & REHAB 2476 E. 116TH ST., G-100 CARMEL, IN 46032	REHABILITATION SERVICES
2 IU HEALTH PHYSICAL THERAPY & REHAB 410 PILGRIM BLVD. HARTFORD CITY, IN 47348	REHABILITATION SERVICES
3 IUH PEDIATRIC PHYSICAL THERAPY & REHAB 6820 PARKDALE PL., STE. 109 INDIANAPOLIS, IN 46254	REHABILITATION SERVICES
4 IU HEALTH PHYSICAL THERAPY & REHAB 14645 HAZEL DELL RD. NOBLESVILLE, IN 46062	REHABILITATION SERVICES
5 IU HEALTH HIP & KNEE CENTER 13000 E. 136TH ST., SUITE 2000 FISHERS, IN 46037	SPECIALTY CARE
6 IU HEALTH ADVANCED HEART & LUNG CARE 1801 N. SENATE BLVD. STE. 2000 INDIANAPOLIS, IN 46202	SPECIALTY CARE
7 IU HEALTH SLEEP APNEA EDUCATION CENTER 601 W. 2ND ST., RM. C1037 BLOOMINGTON, IN 47403	SPECIALTY CARE
8 IU HEALTH SLEEP DISORDERS CENTER 601 W. 2ND ST., RM 24-5 BLOOMINGTON, IN 47403	SPECIALTY CARE
9 IU HEALTH CARDIOVASCULAR SURGERY 707 W. 2ND ST. BLOOMINGTON, IN 47403	SPECIALTY CARE
10 IU HEALTH ADVANCED PAIN CENTER 888 AUTO MALL RD. BLOOMINGTON, IN 47401	SPECIALTY CARE

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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? 178

Name and address	Type of Facility (describe)
1 IU HEALTH ORTHOPEDICS & SPORTS MEDICINE 2605 E. CREEK'S EDGE DR. BLOOMINGTON, IN 47401	SPECIALTY CARE
2 IU HEALTH CICC - METHODIST 1701 N. SENATE BLVD., C6 INDIANAPOLIS, IN 46202	SPECIALTY CARE
3 IU HEALTH CICC - SOUTH 8820 S. MERIDIAN ST., SUITE 230 INDIANAPOLIS, IN 46217	SPECIALTY CARE
4 IUH UNIV HOSP INTRVNTNAL& ADV PAIN THRPY 550 N. UNIVERSITY BLVD., STE. 2007 INDIANAPOLIS, IN 46202	SPECIALTY CARE
5 IU HEALTH PRECISION GENOMICS PROGRAM 1030 W. MICHIGAN ST., STE. 3307 INDIANAPOLIS, IN 46202	SPECIALTY CARE
6 IU HEALTH MELVIN & BREN SIMON CANCER CTR 1030 W. MICHIGAN ST. INDIANAPOLIS, IN 46202	SPECIALTY CARE
7 IU HEALTH NEUROSCIENCE CENTER 362 W. 15TH ST. INDIANAPOLIS, IN 46202	SPECIALTY CARE
8 IU HEALTH SLEEP APNEA EDUCATION CENTER 1411 W. COUNTY LINE RD., STE. C GREENWOOD, IN 46142	SPECIALTY CARE
9 IU HEALTH SLEEP DISORDERS CENTER 714 N. SENATE AVE., STE. 110 INDIANAPOLIS, IN 46202	SPECIALTY CARE
10 IU HEALTH SLEEP APNEA EDUCATION CENTER 714 N. SENATE AVE., STE. 110 INDIANAPOLIS, IN 46202	SPECIALTY CARE

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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? 178

Name and address	Type of Facility (describe)
1 IU HEALTH SLEEP DISORDERS CENTER 13100 E. 136TH ST., STE. 3200 FISHERS, IN 46037	SPECIALTY CARE
2 IU HEALTH SLEEP DISORDERS CENTER 3900 MCCARTY LN., STE. 101 LAFAYETTE, IN 47905	SPECIALTY CARE
3 IU HEALTH ARNETT SLEEP APNEA EDUC. CTR. 3900 MCCARTY LN., STE. 102 LAFAYETTE, IN 46202	SPECIALTY CARE
4 MIDWEST EYE INSTITUTE 555 COUNTY LINE RD., STE. 102-103 GREENWOOD, IN 46143	SPECIALTY CARE
5 IU HEALTH SLEEP APNEA EDUCATION CENTER 13100 E. 136TH ST., STE. 3200B FISHERS, IN 46037	SPECIALTY CARE
6 IU HEALTH SLEEP DISORDERS CENTER 2209 JOHN R. WOODEN DR. MARTINSVILLE, IN 46151	SPECIALTY CARE
7 IU HEALTH SLEEP DISORDERS CENTER 720 S. 6TH ST. MONTICELLO, IN 47960	SPECIALTY CARE
8 IU HEALTH SLEEP DISORDERS CENTER 1300 S. JACKSON ST. FRANKFORT, IN 46041	SPECIALTY CARE
9 IU HEALTH SLEEP DISORDERS CENTER 500 W. VOTAW ST. PORTLAND, IN 47371	SPECIALTY CARE
10 IU HEALTH SLEEP DISORDERS CENTER 642 W. HOSPITAL RD. TIPTON, IN 47454	SPECIALTY CARE

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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? 178

Name and address	Type of Facility (describe)
1 IU HEALTH SLEEP DISORDERS CENTER 1000 S. MAIN ST. AVON, IN 46072	SPECIALTY CARE
2 IU HEALTH SLEEP DISORDERS CENTER 1115 N. RONALD REAGAN PKWY., STE. 305 AVON, IN 46123	SPECIALTY CARE
3 IU HEALTH SLEEP APNEA EDUCATION CENTER 1115 N. RONALD REAGAN PKWY., STE. 317 CARMEL, IN 46123	SPECIALTY CARE
4 IU HEALTH VOICE CENTER 1185 W. CARMEL DR., D-1A CARMEL, IN 46032	SPECIALTY CARE
5 IU HEALTH SLEEP DISORDERS CENTER 11700 N. MERIDIAN ST. CARMEL, IN 46032	SPECIALTY CARE
6 IU HEALTH SLEEP APNEA EDUCATION CENTER 11725 N. ILLINOIS ST., SUITE 485 CARMEL, IN 46032	SPECIALTY CARE
7 IU HEALTH EXECUTIVE HEALTH 11590 N. MERIDIAN ST., SUITE 410 CARMEL, IN 46032	SPECIALTY CARE
8 IU HEALTH SLEEP DISORDERS CENTER 11590 N. MERIDIAN ST., SUITE 300 CARMEL, IN 46032	SPECIALTY CARE
9 IU HEALTH URGENT CARE - BLOOMINGTON 326 S. WOODCREST DR. BLOOMINGTON, IN 47401	URGENT CARE
10 IU HEALTH URGENT CARE - GREENWOOD 996 S. SR 135, SUITE P GREENWOOD, IN 46143	URGENT CARE

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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? 178

Name and address	Type of Facility (describe)
1 IU HEALTH URGENT CARE - AVON 10853 E. US HWY 36 AVON, IN 46123	URGENT CARE
2 IU HEALTH URGENT CARE - BROAD RIPPLE 1036 BROAD RIPPLE AVE. INDIANAPOLIS, IN 46220	URGENT CARE
3 IU HEALTH URGENT CARE - DOWNTOWN INDPLS. 222 W. WASHINGTON ST. INDIANAPOLIS, IN 46204	URGENT CARE
4 IU HEALTH URGENT CARE - BROWNSBURG 90 E. GARNER RD., STE. A BROWNSBURG, IN 46112	URGENT CARE
5 IU HEALTH URGENT CARE - NOBLESVILLE 14645 HAZEL DELL ROAD, SUITE 120 NOBLESVILLE, IN 46062	URGENT CARE
6 IU HEALTH URGENT CARE - LAFAYETTE 1 WALTER SCHOLER DR. LAFAYETTE, IN 47909	URGENT CARE
7 IU HEALTH URGENT CARE - FORT WAYNE NORTH 9821 LIMA RD., STE. 103 FORT WAYNE, IN 46818	URGENT CARE
8 IU HEALTH URGENT CARE - WEST LAFAYETTE 253 SAGAMORE PKWY. W. WEST LAFAYETTE, IN 47906	URGENT CARE
9 IU HEALTH URGENT CARE FORT WAYNE - HOPE DRIVE 7411 HOPE DRIVE, SUITE A FORT WAYNE, IN 46815	URGENT CARE
10	

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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 USES SEVERAL FACTORS OTHER THAN FEDERAL POVERTY GUIDELINES ("FPG") 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: - 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</p>

Return Reference - Identifier	Explanation
	<p>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 7 - DESCRIBE SUBSIDIZED HEALTH SERVICE COSTS FROM PHYSICIAN CLINIC ON LINE 7G	IU HEALTH, INC. INCLUDES COSTS ASSOCIATED WITH PHYSICIAN CLINICS AS SUBSIDIZED HEALTH SERVICES BUT IS NOT ABLE TO SEGREGATE THE COSTS ASSOCIATED WITH PHYSICIAN CLINICS.
SCHEDULE H, PART I, LINE 7C - 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 EXCLUDES DIRECT OFFSETTING REVENUE, IS 42.56%.
SCHEDULE H, PART I, LINE 7, COL (F) - BAD DEBT EXPENSE EXCLUDED FROM FINANCIAL ASSISTANCE CALCULATION	70,066,452
SCHEDULE H, PART I, LINE 7F - PERCENT OF TOTAL EXPENSE	<p>THE AMOUNT OF BAD DEBT EXPENSE SUBTRACTED FOR PURPOSES OF CALCULATING THE PERCENTAGE OF TOTAL EXPENSE ON LINE 7, COLUMN (F) IS \$70,066,452. THIS AMOUNT INCLUDES THE BAD DEBT EXPENSE REPORTED ON FORM 990, PART IX, LINE 25, COLUMN (A), AND IU HEALTH'S PORTION OF THE BAD DEBT ATTRIBUTABLE TO THE JOINT VENTURES REPORTED ON SCHEDULE H, PART IV.</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 INC. SUPPORTS AND/OR PARTICIPATES IN A VARIETY OF COMMUNITY-BUILDING ACTIVITIES THAT ADDRESS THE NON-MEDICAL, ROOT CAUSES OF HEALTH PROBLEMS IN THE COMMUNITIES IT SERVES. IU HEALTH INC. AND ITS RELATED HOSPITAL ENTITIES ACROSS THE STATE OF INDIANA ("IU HEALTH STATEWIDE SYSTEM") INVESTMENTS INCLUDE ECONOMIC DEVELOPMENT EFFORTS ACROSS THE STATE, WORKFORCE DEVELOPMENT OPPORTUNITIES, COLLABORATE WITH LIKE-MINDED ORGANIZATIONS THROUGH COALITIONS THAT ADDRESS KEY ISSUES, AND ADVOCATE FOR IMPROVEMENTS IN THE HEALTH STATUS OF VULNERABLE POPULATIONS. SOME ACTIVITIES MEET THE DEFINITION OF COMMUNITY BENEFIT AND HAVE BEEN REPORTED AS SUCH.</p> <p>IU HEALTH INC. SUPPORTED SEVERAL DIFFERENT TYPES OF COMMUNITY BUILDING ACTIVITIES TO PROMOTE THE HEALTH OF THE COMMUNITY. THESE ACTIVITIES INCLUDE:</p> <p>ECONOMIC DEVELOPMENT</p> <p>DUE TO THE RELATIONSHIP BETWEEN HEALTH, SAFETY AND ECONOMIC GROWTH, IU HEALTH INC. HAS LONG SEEN THE VALUE IN SUPPORTING SUSTAINABLE ECONOMIC GROWTH AND QUALITY OF PLACE IN INDIANAPOLIS AND THE SURROUNDING METROPOLITAN AREA. IU HEALTH INC. PROVIDED IN-KIND AND FINANCIAL SUPPORT TO THE INDIANAPOLIS CHAMBER OF COMMERCE'S ACCELERATE INDY FOR ALL, THE ECONOMIC DEVELOPMENT STRATEGY. THE PILLARS OF THE STRATEGY INCLUDE EDUCATED AND TALENTED WORKERS; INNOVATIVE AND ENTERPRISING BUSINESS; ATTRACTIVE AND CONNECTED PLACES; AND A VIBRANT AND INVITING IMAGE.</p> <p>COMMUNITY SUPPORT</p> <p>IU HEALTH INC. PROVIDED FINANCIAL SUPPORT TO THE CENTER FOR LEADERSHIP DEVELOPMENT (CLD) TO ALLOW THE ORGANIZATION TO EXTEND ITS REACH TO MORE BLACK YOUTH ACROSS CENTRAL INDIANA. CLD CONNECTS WITH SCHOOLS, COMMUNITIES, BUSINESSES AND INDUSTRIES, HIGHER EDUCATION, AND FUNDERS TO OFFER MULTIPLE QUALITY DEVELOPMENT PROGRAMS FOR MIDDLE AND HIGH SCHOOL STUDENTS AND THEIR PARENTS THAT PROVIDE MEANINGFUL PREPARATION FOR A HIGHER LEVEL OF ACADEMIC AND CAREER ACHIEVEMENT. SOCIAL DETERMINANTS OF HEALTH SUCH AS POVERTY AND ACCESS TO QUALITY EDUCATIONAL OPPORTUNITIES IMPACT HEALTH AND WELL-BEING. SUPPORTING PROGRAMS AND INITIATIVES IN THE COMMUNITY SUCH AS CLD PROVIDES OPPORTUNITIES FOR HIGHER EDUCATION AND FUTURE ECONOMIC STABILITY TO COMMUNITY MEMBERS WHICH CAN POSITIVELY IMPACT HEALTH, QUALITY OF LIFE AND HEALTH EQUITY.</p> <p>WORKFORCE DEVELOPMENT</p> <p>SEEKING OPPORTUNITIES TO COLLABORATE WITH EDUCATIONAL INSTITUTES TO PROMOTE THE HEALTH SCIENCES PROFESSIONS, IU HEALTH INC. HAS SEVERAL DEPARTMENTS THAT DID COMMUNITY EDUCATION AND OUTREACH TO ENCOURAGE STUDENTS TO EXPLORE AND CONSIDER HEALTHCARE CAREERS. AS THE HEALTHCARE INDUSTRY FACES WORKFORCE SHORTAGES, THIS PRESENTS AN OPPORTUNITY TO INSPIRE STUDENTS, ESPECIALLY RACIAL AND ETHNIC MINORITY STUDENTS, TO GO TO COLLEGE OR SEEK OTHER POST-SECONDARY EDUCATION ALTERNATIVES.</p> <p>IU HEALTH INC. PROVIDED FINANCIAL SUPPORT TO IVY TECH COMMUNITY COLLEGE TO EXPAND EXISTING CAPACITY FOR NURSING ENROLLMENT AND EDUCATION TO INCREASE NURSING GRADUATES. THIS ACTIVITY SEEKS TO ADDRESS ONGOING NURSING SHORTAGES THROUGHOUT THE STATE THAT NOT ONLY IMPACT IU HEALTH INC., BUT OTHER HOSPITALS AND HEALTHCARE SYSTEMS TOO. THE FUNDS ARE TO BE USED ON FACILITIES AND STAFF RECRUITMENT; EQUIPMENT; STUDENT SUPPORT; AND FACULTY COMPENSATION.</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 \$133,584,000 AND \$90,358,000 IN 2021 AND 2020, 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>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 MEDICARE COST REPORT. "ALLOWABLE COSTS" FOR MEDICARE COST REPORT PURPOSES, HOWEVER, ARE NOT REFLECTIVE OF ALL COSTS ASSOCIATED WITH IU HEALTH'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'S PARTICIPATION IN MEDICARE PROGRAMS WOULD SIGNIFICANTLY INCREASE THE MEDICARE SHORTFALL REPORTED ON SCHEDULE H, PART III, LINE 7.</p> <p>IU HEALTH'S MEDICARE SHORTFALL IS ATTRIBUTABLE TO REIMBURSEMENTS THAT ARE LESS THAN THE COST OF PROVIDING PATIENT CARE AND SERVICES TO MEDICARE BENEFICIARIES AND DOES NOT INCLUDE ANY AMOUNTS THAT RESULT FROM INEFFICIENCIES OR POOR MANAGEMENT. IU HEALTH 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>

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<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'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. -REPORTING ADVERSE INFORMATION ABOUT THE PATIENT OR THEIR GUARANTOR TO CONSUMER CREDIT

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	<p>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 V, SECTION A - LINE 1 - NAME, ADDRESS, AND WEBSITE</p>	<p>IU HEALTH OPERATES SEVERAL HOSPITAL LOCATIONS UNDER A SINGLE HOSPITAL LICENSE ISSUED BY THE INDIANA STATE DEPARTMENT OF HEALTH. THE NAMES, ADDRESSES, AND PRIMARY WEBSITE ADDRESSES FOR EACH OF THESE LOCATIONS ARE AS FOLLOWS:</p> <p>IU HEALTH METHODIST HOSPITAL 1701 N. SENATE BLVD. INDIANAPOLIS, IN 46202 HTTPS://IUHEALTH.ORG/FIND-LOCATIONS/IU-HEALTH-METHODIST-HOSPITAL</p> <p>IU HEALTH UNIVERSITY HOSPITAL 550 UNIVERSITY BLVD. INDIANAPOLIS, IN 46202 HTTPS://IUHEALTH.ORG/FIND-LOCATIONS/IU-HEALTH-UNIVERSITY-HOSPITAL</p> <p>RILEY HOSPITAL FOR CHILDREN AT IU HEALTH 705 RILEY HOSPITAL DR. INDIANAPOLIS, IN 46202 HTTPS://WWW.RILEYCHILDRENS.ORG/</p> <p>IU HEALTH METHODIST HOSPITAL, IU HEALTH UNIVERSITY HOSPITAL, AND RILEY HOSPITAL FOR CHILDREN AT IU HEALTH ARE COLLECTIVELY REFERRED TO AS THE IU HEALTH ACADEMIC HEALTH CENTER.</p> <p>IU HEALTH SAXONY HOSPITAL 13000 E. 136TH ST. FISHERS, IN 46037 HTTPS://IUHEALTH.ORG/FIND-LOCATIONS/IU-HEALTH-SAXONY-HOSPITAL</p>

Return Reference - Identifier	Explanation
<p>SCHEDULE H, PART VI, LINE 2 - NEEDS ASSESSMENT</p>	<p>IU HEALTH OPERATES FOUR HOSPITAL LOCATIONS THAT ARE LICENSED AS A SINGLE HOSPITAL BY THE INDIANA STATE DEPARTMENT OF HEALTH. THESE HOSPITAL LOCATIONS ARE AS FOLLOWS:</p> <ul style="list-style-type: none"> -IU HEALTH METHODIST HOSPITAL -IU HEALTH UNIVERSITY HOSPITAL -RILEY HOSPITAL FOR CHILDREN AT IU HEALTH -IU HEALTH SAXONY HOSPITAL <p>IU HEALTH METHODIST HOSPITAL, IU HEALTH UNIVERSITY HOSPITAL, AND RILEY HOSPITAL FOR CHILDREN ARE LOCATED IN INDIANAPOLIS, MARION COUNTY, INDIANA AND ARE REFERRED TO AS THE IU HEALTH ACADEMIC HEALTH CENTER. IU HEALTH SAXONY HOSPITAL IS LOCATED IN FISHERS, HAMILTON COUNTY, INDIANA. ALTHOUGH LICENSED AS A SINGLE HOSPITAL, EACH OF THESE FACILITIES SERVE DIFFERENT, ALTHOUGH SOMETIMES OVERLAPPING, PORTIONS OF THE COMMUNITY WHICH PRESENT THEIR OWN UNIQUE HEALTH NEEDS. IN ORDER TO TAKE INTO ACCOUNT ALL OF THESE UNIQUE HEALTH NEEDS, IU HEALTH CONDUCTED SEPARATE COMMUNITY HEALTH NEEDS ASSESSMENTS ("CHNAS") FOR EACH OF ITS FOUR HOSPITAL LOCATIONS.</p> <p>IN CONDUCTING EACH OF ITS MOST RECENT CHNAS, IU HEALTH TOOK INTO ACCOUNT INPUT FROM PERSONS WHO REPRESENT THE BROAD INTERESTS OF THE COMMUNITIES IT SERVES BY HOSTING FOUR COMMUNITY FOCUS GROUPS AND CONDUCTING INTERVIEWS. THESE FOCUS GROUPS ENGAGED PUBLIC HEALTH OFFICIALS AND COMMUNITY-BASED ORGANIZATIONS THAT PROVIDE SERVICES AND/OR REFLECT COMMUNITY MEMBERS WHO ARE MEDICALLY UNDERSERVED, LOW-INCOME, OR OF A MINORITY SUBPOPULATION TO DISCUSS THE HEALTH NEEDS OF THE SERVICE AREA AND WHAT ROLE IU HEALTH COULD PLAY IN ADDRESSING THE IDENTIFIED NEEDS.</p> <p>SECONDARY DATA AND A PRELIMINARY LIST OF COMMUNITY HEALTH NEED PRIORITIES WERE PRESENTED AT THE MEETINGS. EACH GROUP WAS THEN ASKED QUESTIONS ABOUT THE PRELIMINARY LIST, INCLUDING THEIR REACTIONS, ADDITIONS TO THE PROPOSED NEEDS, THOUGHTS REGARDING THE CAUSES OF THE NEEDS, IMPACTS OF THE COVID-19 PANDEMIC AND OTHERS.</p> <p>AFTER THIS DISCUSSION, PARTICIPANTS WERE GIVEN THE OPPORTUNITY TO MAKE ADDITIONAL COMMENTS BEFORE BEING ASKED TO VOTE ON WHAT THEY BELIEVED WERE THE MOST SIGNIFICANT NEEDS IN THE COUNTY. PARTICIPANTS WERE ASKED TO CHOOSE THREE TO FIVE SIGNIFICANT HEALTH NEEDS VIA AN ONLINE POLL DURING AND AFTER THE MEETING.</p> <p>FOR THOSE UNABLE TO ATTEND COMMUNITY MEETINGS, A SEPARATE SURVEY WAS DISTRIBUTED TO RECEIVE THEIR INPUT ON THE MOST SIGNIFICANT NEEDS. THESE FINDINGS WERE COMBINED WITH THOSE OF THE COMMUNITY MEETING PARTICIPANTS.</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 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.

Return Reference - Identifier	Explanation
<p>SCHEDULE H, PART VI, LINE 4 - COMMUNITY INFORMATION</p>	<p>IU HEALTH SERVES A LARGE GEOGRAPHIC AREA IN CENTRAL INDIANA. IN COMPLETING CHNAS FOR ITS IU HEALTH ACADEMIC HEALTH CENTER AND IU HEALTH SAXONY HOSPITAL LOCATIONS, IU HEALTH DEFINED "COMMUNITY" AS THE COUNTY OF RESIDENCE FOR EACH HOSPITAL LOCATION. EACH INDIVIDUAL HOSPITAL LOCATION SERVES A UNIQUE SUBSECTION OF THE COMMUNITY FOR WHICH DETAILS ARE INCLUDED BELOW:</p> <p>IU HEALTH ACADEMIC HEALTH CENTER</p> <p>THE COMMUNITY FOR IU HEALTH ACADEMIC HEALTH CENTER'S PRIMARY SERVICE AREA IS DEFINED AS MARION COUNTY, THE COMMUNITY WHERE IU HEALTH ACADEMIC HEALTH CENTER IS LOCATED. THE SECONDARY SERVICE AREA IS COMPRISED OF ALL OTHER COUNTIES WITHIN THE STATE OF INDIANA.</p> <p>MARION COUNTY INCLUDES ZIP CODES WITHIN THE TOWNS OF BEECH GROVE, INDIANAPOLIS, LAWRENCE, SOUTHPORT, AND SPEEDWAY, PLUS PORTIONS OF PLAINFIELD, WHICH EXTENDS INTO HENDRICKS COUNTY. BASED ON THE CENSUS BUREAU DATA ESTIMATES FOR 2021, THE MOST RECENT DATA AVAILABLE, MARION COUNTY'S POPULATION WAS 971,102 AND 51.8% WERE FEMALE. THE COUNTY'S POPULATION ESTIMATES BY RACE ARE 54.1% WHITE NON-HISPANIC, 29.1% BLACK NON-HISPANIC, 10.9% HISPANIC OR LATINO, 3.8% ASIAN, 0.4% AMERICAN INDIAN OR ALASKA NATIVE, AND 3.0% PERSONS REPORTING TWO OR MORE RACES. A VERY SMALL PERCENTAGE OF THE POPULATION IS ETHNIC GROUPS OTHER THAN THOSE LISTED ABOVE.</p> <p>IU HEALTH SAXONY HOSPITAL</p> <p>THE COMMUNITY FOR IU HEALTH SAXONY HOSPITAL'S PRIMARY SERVICE AREA IS DEFINED AS HAMILTON COUNTY, THE COUNTY WHERE IU HEALTH SAXONY HOSPITAL IS LOCATED, PLUS MARION, MADISON, AND HANCOCK COUNTIES. APPROXIMATELY 67% OF INPATIENT DISCHARGES ORIGINATE FROM THE PRIMARY SERVICE AREA.</p> <p>HAMILTON COUNTY INCLUDES ZIP CODES WITHIN THE TOWNS OF ARCADIA, ATLANTA, CARMEL, CICERO, FISHERS, NOBLESVILLE, SHERIDAN, AND WESTFIELD. BASED ON CENSUS BUREAU ESTIMATES FOR 2021, THE MOST RECENT DATA AVAILABLE, HAMILTON COUNTY'S POPULATION WAS 356,650. JUST OVER HALF (51.2%) WERE FEMALE AND 48.8% WERE MALE. THE COUNTY'S POPULATION ESTIMATES BY RACE ARE 82.8% WHITE NON-HISPANIC, 4.5% BLACK, 4.3% HISPANIC OR LATINO, 6.5% ASIAN, 0.2% AMERICAN INDIAN OR ALASKA NATIVE, AND 2.1% TWO OR MORE RACES. A VERY SMALL PERCENTAGE OF THE POPULATION IS ETHNIC GROUPS OTHER THAN THOSE LISTED ABOVE.</p>

Return Reference - Identifier	Explanation
<p>SCHEDULE H, PART VI, LINE 5 - PROMOTION OF COMMUNITY HEALTH</p>	<p>A MAJORITY OF IU HEALTH'S BOARD OF DIRECTORS IS COMPRISED OF INDEPENDENT COMMUNITY MEMBERS WHO RESIDE IN IU HEALTH'S PRIMARY SERVICE AREAS.</p> <p>IU HEALTH EXTENDS MEDICAL PRIVILEGES TO ALL PHYSICIANS WHO MEET THE CREDENTIALING QUALIFICATIONS NECESSARY FOR APPOINTMENT TO ITS MEDICAL STAFF. IU HEALTH DOES NOT DENY APPOINTMENT ON THE BASIS OF GENDER, RACE, CREED, OR NATIONAL ORIGIN.</p> <p>IU HEALTH, IN CONJUNCTION WITH THE IU SCHOOL OF MEDICINE, TRAINS THE NEXT GENERATION OF PHYSICIANS IN AN EXCEPTIONAL ENVIRONMENT, BLENDING BREAKTHROUGH RESEARCH AND TREATMENTS WITH THE HIGHEST QUALITY OF PATIENT CARE.</p> <p>IU HEALTH'S FIVE-YEAR STRATEGY WAS UPDATED DURING 2019. IU HEALTH'S VISION IS TO MAKE INDIANA ONE OF THE HEALTHIEST STATES IN THE NATION BY PROVIDING THE BEST CARE, DESIGNED FOR OUR PATIENTS, AND THE FIVE YEAR STRATEGY WAS DESIGNED TO HELP IU HEALTH REALIZE THIS VISION.</p> <p>THE ELEMENTS OF IU HEALTH'S STRATEGY</p> <p>COMMUNITY HEALTH:</p> <p>AS THE LARGEST HEALTH SYSTEM IN THE STATE, AND IN PARTNERSHIP WITH THE STATE'S LARGEST MEDICAL SCHOOL - INDIANA UNIVERSITY SCHOOL OF MEDICINE - IU HEALTH HAS A SPECIAL OBLIGATION TO BE PART OF THE SOLUTION TO INDIANA'S SERIOUS HEALTH ISSUES. FOR COMMUNITY HEALTH, IU HEALTH'S FOCUS IS ON TACKLING FOUR OF THE MOST PRESSING HEALTH ISSUES IMPACTING INDIANA COMMUNITIES: HIGH RATES OF SMOKING, OBESITY, INFANT AND MATERNAL MORTALITY, AND POOR MENTAL HEALTH.</p> <p>SOME EFFORTS IN THIS AREA INCLUDE:</p> <ul style="list-style-type: none"> - EXPANDING ACCESS TO BEHAVIORAL HEALTH SERVICES ACROSS THE IU HEALTH SYSTEM - THE CREATION OF A \$100M COMMUNITY IMPACT INVESTMENT FUND TO SUPPORT PROJECTS THAT ADDRESS SERIOUS HEALTH ISSUES. <p>POPULATION HEALTH:</p> <p>THIS IS THE CARE IU HEALTH PROVIDES PATIENTS FOR WHOM IU HEALTH HAS ACCEPTED SOME FINANCIAL RISK. FOR THESE PATIENTS, IU HEALTH IS REIMBURSED ON HOW WELL IU HEALTH IMPROVES PATIENT OUTCOMES AND MANAGE THE COST OF THEIR CARE, INSTEAD OF ON HOW MANY SERVICES IU HEALTH PROVIDES.</p> <p>FOR EXAMPLE, IU HEALTH MANAGES MORE THAN 60,000 MEDICARE PATIENTS IN ITS NEXT GENERATION ACCOUNTABLE CARE ORGANIZATION. FOR TWO YEARS NOW, IU HEALTH HAS REDUCED THE COSTS OF CARE FOR THOSE PATIENTS, WHILE ALSO IMPROVING A RANGE OF QUALITY METRICS. THIS HAS RESULTED IN BETTER CARE OUTCOMES, AS WELL AS SAVINGS FOR IU HEALTH AND THE MEDICARE ADVANTAGE PROGRAM.</p> <p>DESTINATION HEALTH:</p> <p>IU HEALTH TAKES CARE OF PATIENTS WITH THE MOST COMPLEX ILLNESSES AND TAKES ON THE TOUGHEST CASES THAT OTHER SYSTEMS ACROSS THE STATE DO NOT HAVE THE EXPERTISE OR THE RESOURCES TO HANDLE.</p> <p>IMPACT:</p> <p>THIS IS A NEW COMPONENT OF IU HEALTH'S STRATEGY AND REFLECTS EFFORTS TO EXPAND THE IMPACT IU HEALTH HAS ON PATIENTS AND COMMUNITIES ACROSS INDIANA.</p> <p>THIS INCLUDES PROVIDING EXCEPTIONAL CARE TO MORE PEOPLE AT IU HEALTH FACILITIES. IU HEALTH ALSO WANTS TO CREATE PARTNERSHIPS THAT WILL ENABLE IU HEALTH TO EXTEND SERVICES TO MORE PEOPLE ACROSS INDIANA. FOR EXAMPLE, A STRONG PARTNERSHIP WAS FORMED WITH UNION HOSPITAL IN TERRE HAUTE, WHICH USES IU HEALTH'S CERNER ELECTRONIC MEDICAL RECORD SYSTEM, INCLUDING CARE GUIDELINES AND ORDER SETS, TO BRING IU HEALTH CALIBER CARE TO UNION HOSPITAL PATIENTS.</p> <p>DIVERSITY AND INCLUSION:</p> <p>THE MISSION OF IU HEALTH'S OFFICE FOR DIVERSITY AND INCLUSION IS TO DRIVE A CULTURE OF ACCEPTANCE, INCLUSION, MUTUAL TRUST AND RESPECT IN ORDER TO BETTER SUPPORT THE PATIENTS AND COMMUNITIES THAT IU HEALTH SERVES. THE OFFICE FOCUSES ON INTERPERSONAL, INSTITUTIONAL AND SOCIETAL ACTION TO TRANSFORM INTERNAL AND EXTERNAL COMMUNITIES INTO A PLACE WHERE ALL WILL THRIVE AND GROW.</p>

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<p>SCHEDULE H, PART VI, LINE 6 - DESCRIPTION OF AFFILIATED GROUP</p>	<p>INDIANA UNIVERSITY HEALTH INC. IS PART OF INDIANA UNIVERSITY HEALTH ("IU HEALTH" OR "THE HEALTHCARE SYSTEM"), WHICH 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. THE HEALTHCARE SYSTEM IS COMPRISED OF HOSPITALS, PHYSICIANS AND ALLIED SERVICES DEDICATED TO PROVIDING PREEMINENT CARE THROUGHOUT INDIANA AND BEYOND.</p> <p>IU HEALTH'S AFFILIATE HOSPITALS ARE DIVIDED INTO FIVE REGIONS THAT SERVE COMMUNITIES IN NORTHWEST, NORTHEAST, CENTRAL AND SOUTHERN INDIANA. THE 16 HOSPITALS IN THE HEALTHCARE SYSTEM INCLUDE 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 HOSPITAL; 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; AND IU HEALTH WHITE MEMORIAL HOSPITAL.</p> <p>EACH AFFILIATE HOSPITAL IN THE HEALTHCARE SYSTEM CONDUCTS AND ADOPTS ITS OWN COMMUNITY HEALTH NEEDS ASSESSMENT (CHNA) AND IMPLEMENTATION STRATEGY. IU HEALTH CONSIDERS THE SUM OF THESE CHNAS AND THE IMPLEMENTATION STRATEGIES PART OF A SYSTEM WIDE GOAL OF MAKING INDIANA ONE OF THE HEALTHIEST STATES IN THE NATION. THE AFFILIATE HOSPITALS ARE GUIDED BY A SYSTEM WIDE MISSION TO IMPROVE THE HEALTH OF IU HEALTH PATIENTS AND COMMUNITY THROUGH INNOVATION, AND EXCELLENCE IN CARE, EDUCATION, RESEARCH, AND SERVICE. THE HEALTHCARE 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>THE HEALTHCARE SYSTEM INCLUDES AN ACADEMIC HEALTH CENTER (I.E., IU HEALTH INC.), A REGIONAL ACADEMIC HEALTH CENTER (I.E., IU HEALTH BLOOMINGTON HOSPITAL) AND SEVERAL AFFILIATE HOSPITALS THAT WORK IN PARTNERSHIP WITH THE IU SCHOOL OF MEDICINE TO TRAIN PHYSICIANS, BLENDING BREAKTHROUGH RESEARCH AND TREATMENTS WITH THE HIGHEST QUALITY OF PATIENT CARE THROUGHOUT IU HEALTH. EACH YEAR, MORE THAN 1,000 RESIDENTS AND FELLOWS RECEIVE TRAINING IN AFFILIATE 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>TO FURTHER PROMOTE THE HEALTH OF THE COMMUNITIES SERVED BY IU HEALTH, THE SYSTEM-LEVEL COMMUNITY HEALTH DIVISION TEAM PARTNERS WITH STATE AND LOCAL COMMUNITY-BASED ORGANIZATIONS, COMMUNITY COALITIONS AND GOVERNMENTAL AGENCIES TO FOCUS ON CLINICAL CARE, COMMUNITY INVESTMENT AND ADVOCACY STRATEGY THAT SEEKS TO IMPROVE THE HEALTH OF COMMUNITIES. ALL AFFILIATE HOSPITALS IN THE HEALTHCARE SYSTEM IDENTIFIES AND ADDRESSES SIGNIFICANT HEALTH NEEDS UNIQUE TO THE COMMUNITY THEY SERVE. SOME OF THESE HEALTH NEEDS ARE COMMON IN COMMUNITIES SERVED BY MULTIPLE AFFILIATE HOSPITALS IN THE HEALTHCARE SYSTEM AND ALIGN WITH SYSTEM PRIORITY AREAS, WARRANTING A SYSTEM LEVEL STRATEGY. THE COMMUNITY HEALTH DIVISION PLANS AND PROVIDES TECHNICAL ASSISTANCE FOR SYSTEM-LEVEL STRATEGIES THAT ADDRESS THESE COMMON HEALTH NEEDS INCLUDING HEALTH INEQUITIES, TOBACCO, BEHAVIORAL HEALTH ACCESS, INFANT AND MATERNAL HEALTH AND SOCIAL NEEDS. EACH AFFILIATE HOSPITAL WORKS COLLABORATIVELY WITH THE COMMUNITY HEALTH DIVISION TEAM TO OPERATIONALIZE SYSTEM-LEVEL STRATEGIES THROUGH THE IMPLEMENTATION OF SPECIFIC ACTIVITIES THAT ALIGN AND ACTIVATE LOCAL RESOURCES TOO. THIS BENEFITS THE COMMUNITY EACH AFFILIATE HOSPITAL SERVES AND WORKS TOWARDS A STATEWIDE IMPACT (SYSTEM-LEVEL) ON HEALTH OUTCOMES.</p> <p>AS PART OF THE COMMUNITY HEALTH DIVISION, IU HEALTH SERVES, A SYSTEM-LEVEL TEAM MEMBER VOLUNTEER PROGRAM, SEEKS TO POSITIVELY IMPACT THE HEALTH OF COMMUNITIES IU HEALTH AFFILIATE HOSPITALS SERVE AND FOSTER 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>THE COMMUNITY IMPACT AND INVESTMENT (CII) FUND IS A \$100 MILLION BOARD DESIGNATED FUND THAT IS MANAGED 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 AFFILIATE HOSPITAL HAS A SIGNIFICANT IMPACT ON AND IS 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 THEIR SURROUNDING COMMUNITIES. EACH IU HEALTH AFFILIATE HOSPITAL AND ITS TEAM MEMBERS ARE ELIGIBLE TO PURSUE THIS GRANT OPPORTUNITY WITH A COMMUNITY ORGANIZATION OR AGENCY.</p>
<p>SCHEDULE H, PART VI, LINE 7 - STATE FILING OF COMMUNITY BENEFIT REPORT</p>	<p>IN</p>