

# Hospital Community Benefit Accountability

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*Parkview Medical Center Annual Report*

**8-21-2020**

**Submitted to: Department of Health Care Policy & Financing**



**COLORADO**  
Department of Health Care  
Policy & Financing

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## I. Overview

House Bill 19-1320 requires non-profit tax-exempt general hospitals, Denver Health Medical Center, and University of Colorado Hospital to complete a community health needs assessment every three years and an annual community benefit implementation plan every year<sup>1</sup>. Each reporting hospital is required to convene a public meeting at least once per year to seek feedback on the hospital's community benefit activities and implementation plans. These hospitals are required to submit a report to the Department of Health Care Policy & Financing (the Department) that includes but not limited to the following:

- Information on the public meeting held
- The most recent Community Health Needs Assessment
- The most recent Community Benefit Implementation Plan (This requirement will be waived for the report due September 1, 2020)
- The most recent submitted IRS form 990 including Schedule H
- A description of investments included in Schedule H
- Expenses included on form 990

More information can be found on the [Hospital Community Benefit Accountability webpage](#). Please direct any questions to [hcpf\\_hospitalcommunity@state.co.us](mailto:hcpf_hospitalcommunity@state.co.us).

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<sup>1</sup> Long Term Care and Critical Access hospitals are not required to report.

## II. Checklist

### A. Sections within this report

- Public meeting reporting section completed
- Investment and expenses reporting section completed
- URL of the page on the hospital's website where the report will be posted  
<https://online.flowpaper.com/75f30732/CBR1819/#page=1>

### B. Attachments submitted with report

- Most recent Community Health Needs Assessment
- Most recent Community Benefit Implementation Plan (Optional)
- List of individuals and organizations invited to the public meeting (Optional)
- List of public meeting attendees and organizations represented (Optional)
- Public meeting agenda (Optional)
- Summary of the public meeting discussion (Optional)
- Most recent submitted form 990 including Schedule H or equivalent

### III. Public Meeting Reporting

Provide the following information on the public meeting held during the previous twelve months:

Date: 02/27/2020

Time: 2pm

Location: Pueblo Community Health Center

Describe your outreach efforts for the public meeting being reported: (Optional)

\_\_\_\_\_

Describe the actions taken as a result of feedback from meeting participants:

Discussion on Social Determinants of Health/Community based organization occurred. Based on this Parkview Medical Center will be reviewing other community agencies to be listed in Directory for Pieces Iris. Some of the agencies that will be pursued will be Pueblo Catholic Charities, Project Angel Heart, Health Colorado (RAE Region 4). Pieces Technology Graphs such as referral type by program and effect of referral on Readmission Rate were reviewed. DOTS (Directing Others to Service) reported using telephone referrals for Health Solutions due to needed programs not being on Iris directory. Will look into adding additional programs for Health Solutions into the Iris Directory. Parkview will be pursuing, posting and hiring a Community Risk Reduction Behavioral Health Specialist that will be part of the DOTs (Directing Others to Service) program within the Pueblo Fire Department.

## IV. Investment and Expenses Reporting

Provide the following information on the expenses included on submitted form 990

Total expenses included on Line 18 of Section 1 of submitted form 990:

\$506,810,331.00

Revenue less expenses included on Line 19 of Section 1 of submitted form 990:

\$17,914,295.00

Reporting Hospitals not required to complete form 990 shall provide the above information as described on Lines 18 and 19 of form 990.

Provide a description of each investment made that was included in Parts I, II, and III of Schedule H that addressed a community Identified Health Need and include the following:

- Cost of the investment. For this reporting purpose, “investment” means the hospital’s expense net of offsetting revenue for financial assistance and means-tested government programs, other community benefits such as community health improvement services and community benefit operations, and/or community building activities. See the IRS instructions for Parts I, II, and III of Schedule H of Form 990 at [www.irs.gov/pub/irs-pdf/i990sh.pdf](http://www.irs.gov/pub/irs-pdf/i990sh.pdf).
- For each investment that addressed a Community Identified Health Need identify the following categories:
  - ✓ Free or Discounted Health Care Services
  - ✓ Programs that Address Health Behaviors or Risk
  - ✓ Programs that Address the Social Determinants of Health

There is a crosswalk available on the [Hospital Community Benefit Accountability webpage](#) under the resources section.

- For each investment that addressed a Community Identified Health Need describe available evidence that shows how the investment improves Community health outcomes

Separate each investment (expense) as a numbered list

1. \$4,064,565.00 is our investment in our Free or Discounted Health Care Services. Parkview Medical Center provides free or discounted care based on application and verification of income & resources. Providing free or discounted care allows our community to have access to much needed medical care without fear of further being driven into poverty. In Pueblo County nearly one in five residents live below the poverty line; 27% of children are being raised below the poverty line. By providing this free or discounted care allows our community to have better health outcomes.
2. \$113,555.00 is our investment in Programs that Address Health Behaviors and Risk. Parkview Medical Center provides community-based immunization clinics, we provide community health education to include health fairs on topics such as heart disease/healthy heart, nutrition/wt. management and prenatal/family planning. We provide community based health screenings to include Alzheimer's, Blood Pressure, Cholesterol testing, and stroke screening. We accomplish this through our Parkview Mobile Nurse program whose mission is to promote the health and well-being of Pueblo and all southeastern Colorado communities. These educational initiatives span the entire age spectrum. Parkview also conducts several support groups to include Cardiac/Heart, Diabetes, Ostomy, Stroke and Brain Injury. These programs have touched over 7,000 community members, provided 1,764 flu vaccines, 1804 blood pressure checks, 984 various types of screenings and we have had over 2,000 attendees attend our health education events
3. \$145,743.00 is our investment in our program that Addressess the Social Determinants of Health. Parkview Medical Center invested in Pieces Technology which is a two fold software. On the hospital side it uses Natural Language Processing to identify our patients with adverse Social Determinants of Health. The other part of the software is a community based organization referral/casemanagement system for Parkview, Pueblo County & surrounding counties organizations. Parkview has provided licenses/service agreements to several community based organizations to utilize Pieces Iris (which is the community based referral/casemanagement system). Pieces Iris helps continue patient care beyond the hospital walls, connects patients with the appropriate resources/support, creates whole-person care plans to improve outcomes and to follow vulnerable patients to

improve access to care. This program improves community health outcomes by connecting the right patient with the right community resources to provide the necessary care needed. For example, one of the community based organizations that utilizes Pieces is the Directing Others to Services program through the Pueblo Fire Department. "Effects of DOTS (Directing Others to Service) enrollment on ED visits and on Inpatient Utilization": 1. Over 58% of participants showed a decrease in ED visits after enrollment in DOTS 2. The number of ED visits per 100 days decreased by 41% from pre- to post-enrollment in DOTS 3. Participation in DOTS program reduced avoidable inpatient utilization by over 28% 4. Participation in DOTS program decreased readmissions for many patient groups for ex. low risk readmission rate pre-DOTS was 8% post DOTS was 0%, moderate risk readmission rate pre was 37% post was 9%.



## V. Report Certification

I certify that the information in this report is for Parkview Medical Center and provided according to all requirements set forth by the Department's regulations found in the Code of Colorado Regulations (CCR) at 10 CCR 2505-10, Section 8.5000.

I agree to provide additional explanation or documentation at the Department's requests within 10 business days of the request.

Kelea Nardini

Assistant Vice President Quality and Post Acute Care

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8/21/2020

X *Kelea Nardini*

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Kelea Nardini  
Assistant Vice President Quality and Post Ac...  
Signed by: Kelea Nardini

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## Appendix A - Definitions

**Community** - the community that a hospital has defined as the community that it serves pursuant to 26 CFR § 1.501(r)-(b)(3).

**Community Benefit Implementation Plan** - a plan that satisfies the requirements of an implementation strategy as described in 26 CFR § 1.501(r)-3(c).

**Community Health Center** - a federally qualified health center as defined in 42 U.S.C. sec. 1395x(aa)(4) or a rural health clinic as defined in 42 U.S.C. sec. 1395x(aa)(2).

**Community Health Needs Assessment** - a community health needs assessment that satisfies the requirements of 26 CFR § 1.501(r)-3(b).

**Community Identified Health Need** - a health need of a Community that is identified in a Community Health Needs Assessment.

**Financial assistance policy (FAP)** - a written policy that meets the requirements described in 26 CFR § 1.501(r)- 4(b)

**Free or Discounted Health Care Services** - health care services provided by the hospital to persons who meet the hospital's criteria for financial assistance and are unable to pay for all or a portion of the services, or physical or behavioral health care services funded by the hospital but provided without charge to patients by other organizations in the Community. Free or Discounted Health Care Services does not include the following:

1. Services reimbursed through the Colorado Indigent Care Program (CICP),
2. Bad debt or uncollectable amounts owed that the hospital recorded as revenue but wrote off due to a patient's failure to pay, or the cost of providing care to such patients,
3. The difference between the cost of care provided under Medicaid or other means-tested government programs or under Medicare and the revenue derived therefrom,
4. Self-pay or prompt pay discounts, or
5. Contractual adjustments with any third-party payers.

**Health System** - a larger corporation or organizational structure that owns, contains, or operates more than one hospital.

**Programs that Address Health Behaviors or Risk** - programs funded by the hospital and provided by the hospital or other Community organizations that provide education, mentorship, or other supports that help people make or maintain healthy life choices or manage chronic disease, including addiction prevention and treatment programs, suicide prevention programs and mental health treatment, programs to prevent tobacco use, disease management programs, nutrition education programs, programs that support maternal health, including screening, referral and treatment for perinatal and postpartum depression and anxiety, and healthy birth outcomes, and programs that help seniors and people with disabilities live as independently as possible in the Community.

**Programs that Address the Social Determinants of Health** - funding or in-kind programs or services that improve social, economic, and environmental conditions that impact health in the Community. Social and economic conditions that impact health include education; employment; income; family and social support; and Community safety. Environmental conditions that impact health include air and water quality, housing, and transit. Programs that Address the Social Determinants of Health include but are not limited to the following:

1. Job training programs,
2. Support for early childhood and elementary, middle, junior-high, and high school education,
2. Programs that increase access to nutritious food and safe housing,
3. Medical Legal Partnerships, and
4. Community-building activities that could be included in Part II of Schedule H of the Form 990.

### **Reporting Hospital**

1. A hospital licensed as a general hospital pursuant to Part 1 of Article 3 of Title 25 of the Colorado Revised Statutes and exempt from Federal taxation pursuant to Section 501(c)(3) of the Federal Internal Revenue code, but not including a general hospital that is federally certified or undergoing federal certification as a long-term care hospital pursuant to 42 CFR § 412.23(e) or that is federally

certified or undergoing federal certification as a critical access hospital pursuant to 42 CFR § 485 Subpart F,

2. A hospital established pursuant to § 25-29-103 C.R.S., or
3. A hospital established pursuant to § 23-21-503 C.R.S.

**Safety Net Clinic** - a Community clinic licensed or certified by the Department of Public Health and Environment pursuant to Section § 25-1.5-103 (1)(a)(I) or (1)(a)(II), C.R.S.