Nebraska’s hospitals are the cornerstone of health and wellness for individuals in the communities they serve. Hospitals also drive economic growth within these communities. The information presented in this publication highlights the impact that Nebraska’s hospitals have on their communities. By investing in local communities, Nebraska’s hospitals make the state a better place to live, work, learn and grow.

Community benefits extend beyond the scope of traditional care and are provided by hospitals in lieu of tax payments. Often, the extent of community benefit services — and associated costs — is neither publicly recognized nor understood.

It is no longer just about patients coming through the doors of the hospital. While Nebraska hospitals have consistently been leaders and partners to help build strong, healthy communities; now, hospitals are being called upon to increase their accountability and contributions to their communities.

Hospitals care for the sick and injured, regardless of their ability to pay or the net cost to the hospital. Beyond charity care, bad debt and unpaid costs of public programs (Medicare and Medicaid), Nebraska hospitals also support professional medical education, subsidize health services, medical research and more inside their walls. Beyond the brick and mortar, hospitals also provide community health improvement services, community building activities, cash and in-kind donations to local organizations.

These non-traditional community benefits — both on the hospital campus and beyond — improve individual and community health, increase access to care and enhance the quality of life in the community.

Nebraska hospitals also stimulate the state’s economy by providing essential jobs throughout the state, contributing millions of dollars to the state’s economy. They employ more than 49,000 Nebraskans, resulting in more than 50,000 additional jobs in the state created due to hospitals buying goods and services from other local businesses.

Nebraska’s hospitals are available 24/7 to meet the needs of individuals in our communities whether it be illness, injury, treatment, rehabilitation, education, wellness care, prenatal care or palliative care. Hospitals contribute significantly to the goal of improving the overall health of Nebraskans while aiding the less fortunate. This is done from a sense of mission and purpose.

The hospital and health care industry continues to face challenges and obstacles. Nebraska’s hospitals and health systems have also faced challenges and have celebrated successes. Nebraska’s hospitals consistently provide nationally recognized, award-winning excellence in quality, patient care, patient satisfaction and state-of-the-art technology.

Hospitals are well versed in adapting and doing more with less, all the while focusing on providing better quality and better patient outcomes and experiences in the pursuit of more efficient, cost-effective care — and doing it with kindness and compassion.

Nebraska’s hospitals and health systems remain committed to providing access to high-quality, affordable health care while innovatively transforming Nebraska into a center of excellence. The NHA remains committed to empowering you and other health care leaders with the knowledge, information and support that enables you to act boldly and decisively to benefit your patients, employees, communities and future generations.

We are Nebraska Hospitals.

Jeremy Nordquist
NHA President
Hospitals are Economic Engines

Hospitals are economic engines, providing stability and growth in the state. In addition to their direct economic impact on our state’s economy, the business and household needs of hospitals and their employees create a “multiplier” effect that supports thousands of additional jobs and billions in additional economic activity.

Nebraska hospitals inject billions into state and local economies. According to the 2019 AHA survey, Nebraska hospitals were directly responsible for nearly $7.4 billion in hospital expenditures and over $3.5 billion in salaries and benefits.

In addition to providing competitive salaries and benefits, hospitals contribute to the tax base of communities through payroll and other taxes. The direct impact of hospitals as employers and purchasers is only part of the story. A strong health care network, in which hospitals play a key role, adds to the attractiveness of a community as a place to locate a business, settle or retire. Hospitals are needed to expand and attract business, keep young people and families in Nebraska and ensure the future economic vitality of our state’s communities.

Nebraska’s hospitals are diverse, ranging from small, rural hospitals to large, teaching hospitals in urban areas. Every hospital in Nebraska is important to the economic vitality of the communities they serve.

Nearly all of Nebraska’s hospitals are nonprofit. In exchange for the benefits of nonprofit status, hospitals are required to fulfill a unique role in their communities, which consists of three parts:

- **Reinvesting the assets of the organization in a way that expands and improves access to health care for the community.**
- **Investing resources to educate and train health care professionals.**
- **Providing care to all regardless of their ability to pay.**

Nebraska’s hospitals serve as the safety net of the state’s health care system, providing services regardless of an individual’s ability or willingness to pay. In 2020, Nebraska’s hospitals incurred $737 million in uncompensated care through unpaid costs of charity care, Medicare and Medicaid and other public programs.

Coupled with their contributions to educating Nebraska’s future health care workforce, research and community building and health education activities, Nebraska’s hospitals shouldered nearly $1.4 billion of the state’s efforts to improve the health of all Nebraskans.

**Government-sponsored health care**

Hospitals receive reimbursement from the government that are less than the costs incurred by the hospital for providing medical care to Medicaid and Medicare patients. The shortfall is considered a community benefit because hospitals reduce the government’s financial burden by covering the shortfall.

In many instances, Medicare and Medicaid payments are based on outdated information that does not accurately reflect the changing nature of health services, such as new equipment, new technologies and the rising cost of supplies. Despite the fact that Medicare and Medicaid do not pay hospitals enough to cover the cost incurred by the hospitals caring for patients, hospitals welcome Medicare and Medicaid patients and provide the same quality care for all patients.

In 2020, Nebraska hospitals lost $594 million because of the shortfall in Medicare, Medicaid and other public program payments.

**A strong health care sector improves the quality of life and helps Nebraska attract and retain businesses and jobs. Major employers from other economic sectors will not locate nor stay in communities that lack strong health care services.**
About this Report

This report represents 70 voluntary responses from the Nebraska Hospital Association’s 92 member hospitals, which represents 76 percent of the NHA’s membership. The report represents only the results from participating Nebraska facilities — no extrapolation was made for hospitals that did not participate. The information presented within this report provides just a sampling of the broad, substantial and enduring commitment hospitals make to their communities.

To ensure report reliability and validity, standardized reporting guidelines were utilized by each member hospital. These guidelines were adapted, with permission, from the “Catholic Health Association’s Community Benefit Reporting: Guidelines and Standard Definitions for the Community Benefit Inventory for Social Accountability,” and included instructions aligning with IRS Form 990 and the accompanying Schedule H.

The data represents the aggregate results of the community benefits inventory for each reporting hospital’s fiscal year 2020 activities. Nebraska’s hospitals are committed to providing access and quality care to everyone. That is why nearly $1.4 billion was invested in 2020 to provide services for public programs, including Medicare and Medicaid, charity care, subsidized health services, health professionals’ education and research.

The NHA survey was designed to report community benefits in nine categories; benefits for low-income/public programs, community benefits services, health professions education, subsidized health services, research, cash and in-kind donations, community building activities, community benefit operations and other.

Community-building activities
Community benefit activities are designed to address the root causes of health problems such as social, economic and environmental problems that contribute to poor health. The types of programs included in this category support workforce development, training programs and occupational therapy services to provide employment and leadership skills training, job shadowing for students interested in health careers, and economic development support to help revitalize low-income areas and businesses.

Nearly $1.3 million in community-building activities was provided by Nebraska’s hospitals in 2020.

Community health improvement services
Hospitals provide services and activities designed to improve the community’s health. These services and activities extend above and beyond routine patient care, including participating in health fairs, free and reduced-cost health screenings, support groups for patients and families and education on various health topics to the community at large. This category also includes outreach efforts to improve access to care for vulnerable populations.

Nebraska hospitals contributed nearly $21.8 million toward community health improvement services in 2020.

Economy
Nebraska hospitals also led efforts to promote healthy habits such as hand washing and safe teen driving and educated Nebraskans to prevent health hazards such as poisoning and drug and alcohol use. Nebraska’s hospitals reach out to all citizens of the community, actively engaging them to be cognizant of the health-related choices they make and how to prevent injury and illness in an effort to promote a happy, healthy, active lifestyle.

Nebraska’s hospitals are a cornerstone of our state’s economy and the communities they serve. A large portion of Nebraska’s economic activity would not exist without hospitals. It is vitally important to have a financially sound health care system that efficiently provides accessible, comprehensive, high-quality health care services and promotes health and wellness for all Nebraskans.

The role Nebraska hospitals play in their communities and the state extends beyond the care provided inside the hospital. Communities also rely on hospitals to provide health and safety education, improve the health status of the communities they serve and make available free or low-cost services that will help residents address the root causes of health problems.

Hospitals also act as an economic engine in their communities by providing jobs for local residents, purchasing goods and services from area businesses and acting as a collaborative partner in economic development.
Community Benefits Defined

**Subsidized health services**

Subsidized health services are necessary health services provided for the community, despite a financial loss to the hospitals. Many hospitals operate a 24-hour emergency room, 365 days per year, which is open to all individuals regardless of ability to pay. Other examples of their subsidized services that qualify as community benefits include burn units, specialty services for women and children, trauma care, behavioral health services, palliative care, community clinics and neonatal intensive care units.

*In 2020, Nebraska hospitals experienced a financial loss of over $134 million to provide necessary health services to their communities.*

**Health professions education**

Through medical instruction, internships, residencies, fellowships and allied health education programs, our state’s hospitals are striving to ensure that high-quality care is accessible throughout Nebraska. Nebraska hospitals invested over $105 million to educate current and future health care providers and help close the provider gap in rural areas of the state.

*In 2020, Nebraska hospitals invested in the education of current and future health care providers to the tune of over $105 million.*

**Charity care**

Charity care is free or discounted health and health-related services offered to individuals who cannot afford health care because they have inadequate resources and are either uninsured or underinsured. Charity care is reported in terms of costs, not charges.

As the number of uninsured and under-insured grows, so does the need for charity care. Because of the high costs of health care and insurance, hospitals are bearing a significant portion of the financial burden imposed by this population — nearly $142.7 million in 2020.

Recognizing this increasing need, Nebraska hospitals have established financial aid policies to assist patients who cannot afford hospital care.

*In 2020, Nebraska hospitals provided care at a discount to those uninsured and under-insured amounting to nearly $142.7 million.*

**Research**

Medical research is the cornerstone of advancements in the technology and practice of medicine. Nebraska hospitals are actively engaged in research studies and clinical trials in an effort to advance medical treatments and improve outcomes for patients locally and around the world.

*In 2020, Nebraska hospitals committed $7.9 million to help contribute to research that will ultimately improve quality of care.*

**Bad debt**

Businesses generally consider bad debt as a cost of doing business. However, hospitals face a challenge at the time of admission to identify those who need care, but (for whatever reason) cannot or will not pay for it. In 2020, bad debt incurred by hospitals was over $186 million. Hospitals serve as the safety net of the health care system and must provide many services regardless of an individual’s ability or willingness to pay. In contrast, other industries can refuse to provide a service or product.

With rising numbers of uninsured, increases in health insurance premiums and greater use of plans with high deductibles and co-payments, bad debt is the fastest-growing segment of uncompensated care for hospitals. Due to the uncertainty of many variables associated with the implementation of the Patient Protection and Affordable Care Act, the majority of Nebraska’s hospitals have more than doubled their budgets for bad debt.

*Nebraska hospitals accrued over $186 million in bad debt due to unfavorable situations.*
Community Highlight

Charity Care Narrative
Fillmore County Hospital provides care to patients who meet certain criteria under its charity care policy without charge. The hospital does not pursue collection of amounts determined to qualify as charity care, they are not reported as revenue. Charges excluded from revenue under the hospital’s Charity Care policy were $35,321.00 in FY 2020. Charity care and other hospital-initiated community programs have benefited our community because it allows us to give back to patients that can still stay “home” for their healthcare needs, without having the burden of cost. Other community programs we offer enable patients to gather more knowledge about specific diseases that may affect them or someone they love.

Hope Cancer Rehab Program
In November 2018, the Fillmore County Hospital team launched a new service to assist local cancer patients with physical strength, psychological health and nutritional support in addition to financial assistance with various expenses such as gas, food, medical supplies and more. The Hope Cancer Rehab program was developed due to a growing population of cancer patients in Fillmore County and is 100% funded by donations made by employees and community members to the Fillmore County Hospital Foundation. However, the time spent developing and managing the program, as well as marketing expenses, have been entirely donated by Fillmore County Hospital. Staff members process applications from cancer patients, manage the cash flow, advertise program information and teach a rehabilitation course called “A Time to Heal” which is designed to help patients regain their physical, emotional and spiritual health after cancer treatment.

Car Seat Safety Education
FCH employs car seat certification technicians to provide car seat safety checks to all newborns being discharged. The technicians will also offer to check any other car seats in the parents’ vehicle. During these safety checks, the technicians ensure proper car seat installation and educate parents on installation, harness operation, weight limits and when to upgrade car seat sizes. Parents are encouraged to come back to the hospital at any time if they feel a car seat check is needed again for any of their children.

Prenatal & Breastfeeding Education
Prenatal and breastfeeding education classes are offered eight times per year by a Registered Nurse and Certified Breastfeeding Counselor. The goal of these courses is to help prepare expectant parents for prenatal care, labor and delivery, breastfeeding and basic care of their baby after birth.

Support Groups
FCH offers multiple support groups to community members throughout the year including a diabetic support group, women’s issues group, caregiver support group, pain management support group and “Breath of Fresh Air.” These groups offer a safe environment to discuss common topics and experiences related to diabetes, women’s health, pain management and mental health. Education can be offered by FCH staff members when it is needed and help improve the lives of our community members experiencing various health circumstances.

Good Beginnings
The Good Beginnings program is an educational outreach program to our community and surrounding areas. Services are offered for prenatal education, newborn education, car seat safety checks and assistance seeking family resources and agencies to ensure adequate housing, food, clothing and more.
Fillmore Central Public School Education

FCH provides various educational services to the Fillmore Central Public Schools throughout each year. A human resources representative assists with mock interviews for high school students to prepare them for real-world job interviews, our wellness coordinator and an LPN do general health screenings, nursing staff administer flu shots at the elementary and high school and the Director of Nursing and the Medical Staff Director teach puberty education specific to each gender.

The Cooking Cardiologist

The FCH Cardiac Rehabilitation team hosted Nebraska native “The Cooking Cardiologist”, Dr. Richard Collins, for graduates of the cardiac rehab program, current cardiac rehab patients, and the public. Dr. Collins is nationally recognized for cooking dishes with specific ingredients to promote good health including heart disease prevention, cholesterol management, and weight management. The team helped prepare, cook, and serve a heart-healthy meal to attendees!

MAKO Robot Student Demonstrations

Fillmore County Hospital had an exciting purchase and enhancement to the Touchstone Orthopaedics program in the Fall of 2019, the MAKO Robot! The purchase of the robot was to assist the surgeon with total knee replacements, making more precise and accurate measurements, thus leading to improved outcomes for patients. Because this is such a unique asset for a rural, critical access hospital, FCH decided to invite some local high school students to view Dr. Stoner demonstrate how the robot operates and promote interest in healthcare careers! The students enjoyed the demonstrations and a few lucky ones got to test it out!
Community Highlight

FCS Relay For Life

Franciscan Healthcare was a Platinum Sponsor for the Cuming County Relay For Life 2020. The Franciscan Healthcare Relay Team, with 13 members, has several fundraising events throughout the year to raise money for the American Cancer Society. Events include a Salad Luncheon, Tailgate, Soup Luncheon, Rada Cutlery Sales, Polar Picnic, Pancake Breakfast, Goodie Auction, Sloppy Joe Luncheon, Spring Picnic as well as multiple denim days, t-shirt sales and daffodil and mum plant sales. All activities are free-will donations and open to the public to raise funds and awareness for the American Cancer Society. In 2020, the Relay For Life team raised $15,120.25.

FCS Wellness Committee

The Franciscan Healthcare Wellness Committee was limited with the community events in 2020 due to COVID restrictions. However, they offered many wellness challenges and information pieces throughout the year with the help of the Health Coaches. Many of these resources are also provided to the community. The Radiology department also helped collect food pantry items in November. Hannah Guenther from the UNL Extension office has continued to be involved in our committee offering additional events and resources to our staff and the community.

Helping Others

The Rehab department took nominations from the rehab staff of patients that were having hard times or had no family around to help complete some tasks they needed done. There was one family chosen in West Point that needed assistance moving to a new home in town. On Saturday, August 29th, a group from the department helped load up their vehicles to move the family’s items from their old home into their new home. There was also one family chosen from Wisner that needed help with landscaping, raking leaves, and trimming trees. On Saturday, October 24th a group from the department went there and cleaned everything up for the family. Both families were so appreciative that we were able to help provide this service to them and alleviate the stress of how these items were going to be completed.
Local Food Pantries
In 2020, Franciscan Healthcare served 456 individuals and families by distributing donated items/food through the local food pantry. The Franciscan Healthcare Radiology department collected food pantry items during the month of November. Throughout the month several large boxes of items were donated.

Backpack Giveaway
One of Franciscan Care Services sponsored mission projects for 2019 involved employees helping employees by providing free backpack(s) to any family that was experiencing a hardship before the new school year in August. We had 21 backpack adoptions and serviced 11 families. Seventeen departments or individuals adopted a backpack to fill with school supplies. The list was provided by the family for the children.

Parkinson's Group
Here at Franciscan Healthcare, our Rehabilitation staff provide a FREE Parkinson’s Exercise Group for the community. This Exercise Group meets two days a week on Tuesdays and Thursdays between 11:00 am – 12:30 pm. With this program, we continue to serve two exercise groups to continue challenging these individuals according to their functional activity level to maximize their overall function. Our skilled therapists assist our participants with performing exercises including seated and standing strengthening exercises, as well as balance and coordination exercises to improve their overall quality of life. This group also challenges the participates with voice and cognitive activities. We also have participants certified in LSVT BIG and LSVT Loud to assist with improving the overall quality of life.

Although the Exercise group was placed on hold for a few months due to COVID, our therapists assisted each participant by providing packets that included strengthening exercises that can be performed at home, as well as exercises and activities to assist with cognition, speech and swallowing. Phone calls were also made by our therapists to follow up with each member if any questions or concerns arose.

Our Exercise group had also completed the Walk the State Challenge. Through Parkinson’s Nebraska, this two-week event allowed our participants to track how many minutes of exercise or activity they completed. At the end of this event, our participants had surpassed their goal of 455 miles, and had completed a total of 1,028 miles, placing in the top 5!
Local teamwork brings the vision of a Community Build Playground to reality

Stay-at-home moms Emily Wurl and Tauni Morris have been friends for years. “We both have small children—we just get along really well,” said Wurl. While traveling through Yellowstone in the summer of 2019, Morris sent Wurl a photo of a playground in Lander, WY. “This is a community build playground,” she wrote, “We need to build one of these in North Platte!” Wurl was immediately on board.

Wurl was familiar with creating beautiful community spaces. As a junior at UNL, she created a lawn display for homecoming week for Chi Omega. “I loved watching the families walk around and appreciate it. I love creating places people enjoy.” Both Wurl and Morris read the book “This Is Where You Belong: Finding Home Wherever You Are” by Melody Warnick. “It really made me want to be an active participant in my local community. I want everyone to feel how satisfying it is to feel like you helped build something greater than yourself,” said Wurl.

Morris and Wurl presented the idea to Megan McGown, GPHealth chief development officer, and chairperson of the North Platte Parks, Recreation and Wellness Foundation, in August of 2020, and the project started gaining momentum. Working with Playgrounds by Leathers, a playground design company that specializes in community build playgrounds, they went to work getting the project off the ground. The playground design came from local children. “We had kids draw their dream playground, and Playgrounds by Leathers took those ideas and created the blueprints, so even the design came from the community.”

Many people worked tirelessly to fundraise the cost of the playground. Local businesses and individuals were incredibly generous.

Construction on the playground began on Sept. 22, 2021. “We were working long days—from 8 a.m. to 8 p.m.,” said Wurl. Community members served in many ways: providing free child care for volunteers, meals and construction.

The Community Build Playground features a wheelchair-friendly merry-go-round, wheelchair-friendly swaying bridge and rubber floor. “It is a place where anyone can find something to play on, regardless of physical limitations,” said Wurl.
Art of Healing Room at Prairie Arts Center offers space for cancer survivors

Sandy Myer, North Platte resident, has survived cancer multiple times. “When I had cancer the first time, I was 36 years old. I was married with two small children,” said Myer. “The cancer was in my arm, and required extensive treatment to remove it. It took 15 different surgeries.”

Meyer moved into a friend’s home in Blair, NE, to be closer to treatment as the nearest treatment center, at the time, was in Omaha. “My friend invited me to go to an oil painting class,” said Myer. “I didn’t know how I could paint without the use of my hand, but I was willing to give it a try.” Myer taped the paintbrush between her fingers. “Our first project was a rooster,” reflected Myer. “I remember thinking, hey, this looks pretty good.”

Myer found a new zest for life through art. “When I was painting, I wasn’t thinking about cancer. It was just about the art, and that was very healing for me,” said Myer. She began offering classes for other cancer survivors. “I taught classes in the hospital, in the lobby of what was then Stuart Shepherd’s office,” laughed Myer. “The classes were, and still are free. Back then, I paid for all the supplies for the class out of pocket.”

When the Prairie Arts Center was under renovation, Great Plains Health was invited to sponsor a room. “It was the perfect space for the art class, and the GPGives committee was excited to support the project.” explained Megan McGown, Great Plains Health chief development officer. “We were able to contribute to the community in a meaningful way. Not only to the restoration of a historic landmark but also to provide a place for cancer survivors to gather, heal and create.”

Myer added, “Cancer is not the main topic of our classes. We may do a one-on-one, but only if the survivor wishes to. We would much rather love and laugh and concentrate on watercolor!”

Sandy and other cancer survivors meet every Tuesday from noon to 3 p.m. in the Art of Healing room at the Prairie Arts Center. “Any cancer survivors are welcome,” said Sandy. “We are here to support one another. I don’t want anyone facing a cancer diagnosis to feel like they are alone. If I can help one person to feel like they are healing through art, the way I felt all those years ago, then it is worth it.”

“When I was painting, I wasn’t thinking about cancer. It was just about the art, and that was very healing for me.”

- Sandy Myer, North Platte Resident and cancer survivor
Community Highlight

Children need a voice -- loud and clear and knowledgeable – that is committed to protecting and supporting their access to high-quality health care and a healthy community. Children’s Hospital & Medical Center is proud to be that voice.

Engaging with Community Partners

Advocacy means empowering our Center for the Child & Community and engaging with our schools, fellow community providers and non-profit partners. By working together, we can better generate and support local solutions to large-scale children’s health issues, including childhood obesity, poverty and food insecurity.

Everyone who works at Children’s understands the great privilege and responsibility of serving as an advocate for children, families and communities. Our responsibility includes sharing information to illustrate how Children’s provides health care, education and outreach services, helping to fulfill our mission, “To improve the life of every child.”

Partnering in a Pandemic

Collaborations with Schools Help Keep Students Healthy

When COVID-19 first arrived in Nebraska in March 2020, school days came to an abrupt halt. As spring turned to summer, the pandemic continued to evolve and maintained a strong presence in Nebraska. It became very clear that this “new normal” would be with us well into the fall and winter.

“When schools closed in March, I knew that school nurses and health office staff would struggle with how to manage COVID-19 within their school buildings when school resumed,” says Judy Timmons, MSN, APRN-CNS, NPD-BC, director of Clinical Education at Children’s. Timmons reached out to Westside Community Schools to discuss how Children’s could offer support when school resumed in the fall. A team was assembled to provide needed resources for schools, educators, nurses, parents and students, and new programming was implemented.

Student Symptom Checker App

When the pandemic first hit, Russell McCulloh, M.D., division chief of Pediatric Hospital Medicine at Children’s, began to think about the possibility of creating a COVID-19 symptom checker to help families better understand the novel coronavirus. As he and his team began to work on this project, Papillion-LaVista Community Schools reached out, asking for help developing an online student symptom screener tool to help families decide if their child was well enough to attend school, and things took off from there.

The Student Symptom Checker is an online symptom checker, accessible through a web browser. There is also a mobile app that parents and students can download. The tool works on the household level, allowing caregivers or students to enter symptom information and receive step-by-step guidance on whether to stay home, go to school and/or to get tested for COVID-19. The information is collected anonymously and shared with participating school districts as a summary, detailing what symptoms of acute illness students and households are experiencing and how many students are being encouraged to stay home and/or get testing.

The app is being used approximately 1,800 times each day during the school week, with around 6 percent of those sessions resulting in a stay-at-home recommendation.

“School officials often use the tool to help them guide families when they have questions,” says Dr. McCulloh. “And schools regularly report that families call in to keep their child at home and say, ‘the app told me to keep them home.’"
Community Highlight

Walk to End Alzheimer’s

Team Phelps supported those suffering from all types of dementia. Due to the current pandemic, the Alzheimer’s Association was unable to hold its annual event in Kearney. They were so appreciative to PMHC’s efforts to help them raise funds for their association.

Applefest

Phelps Memorial distributed diabetic education materials and healthy snacks to hundreds of people that attended Applefest in Orleans. Nine teammates volunteered at this event.

Mission Lifeline: Reducing Barriers and Delays

Austin Lambing, NRP, educated area first responders on the topic of strokes.

Mission Lifeline Stroke will develop a program to reduce barriers and delays in care by improving efficiencies in patient transfers. By improving stroke care and efficiencies, inpatient outcomes will improve.

Stroke is the fourth leading cause of death in Nebraska and the leading cause of disability in the US. The stroke prevalence in Nebraska was 1.4 times higher for females than males in 2016.

Breast Cancer Awareness

Mallory Pfeifer collaborated with Phelps Memorial to promote breast cancer awareness at the Holdrege High School Pink Out football game. She provided information on the importance of preventative screenings, risk factors and the resources Phelps Memorial has available. Way to go, Mallory!

Healthier Food Education

Karen Bunnell, RD, used the “GO-SLOW-WHOA” format to educate students on healthy food options at the Loomis Public School. She stressed the importance of eating healthy foods, eating lunch each day and how important milk is to the elementary students. She also educated students on how much sugar is in soda, Powerade, candy bars and cookies. Nice work, Karen!
Community Highlight

For more than 80 years, Methodist Fremont Health (MFH), an affiliate of the Methodist Health System, has cared for families in the Fremont region, living the mission of improving the lives of our communities by the way we care, educate and innovate. MFH leadership supports through the importance of working in the community with over 80 partners to address the needs identified in the 2020 CHNA (Community Health Needs Assessment). The MFH Community Health Action Team (CHAT), management and board members have approved the current plan to strategically focus on the needs identified in the CHNA, in accordance with our talents and areas of expertise. The guiding focus for all community health programs includes at least one of the following: addressing access to health care services, enhancing the health of the community, advancing medical or health care knowledge, and relieving or reducing the burden on the government.

All community benefit programs are collaborative in nature, where we partner with those organizations that are currently working in the targeted community on identified needs. Many programs and services are not easily quantifiable until the results of the next CHNA; however, each program or service is evaluated on an ongoing basis for effectiveness, and is updated with the most current educational materials and screenings, based on best practices.

As mentioned throughout this report, Methodist Fremont Health has worked with community partners through prevention activities, health promotion, social services, pastoral care, numerous volunteer efforts, and professional education, and remains a strong leader for providing a healthier community – a statement we remain proud of. In order to address the many identified needs of our communities, we remain committed to those organizations that have additional expertise.

COVID-19 Pandemic

As every community across the United States can attest to, the COVID-19 pandemic completely upended every aspect of daily life, especially in the healthcare industry. All operation from large community outreach events to in-person health professions education to support groups and financial support for other non-profit organizations came to a screeching halt and forced every healthcare professional to reprioritize their efforts in an all-hands-on-deck approach to ensure hospitals and their staff could safely and efficiently care for the sickest among us. Methodist Fremont Health was no different, as several departments and entire floors were retrofitted to accommodate a potential (and sometimes realized) surge of COVID-19 patients. Nearly all community benefit activities also came to an abrupt halt, but that did not stop us from continuing to reach out and find innovative ways to support our community partners, which coincidentally has led us to form stronger bonds with those partners.

Cancer

Methodist Fremont Health continues to provide a variety of cancer screenings throughout the community with other health agencies and organizations, focusing on: lung, breast, colorectal, and skin, among others.

MFH coordinated and scheduled a special screening event with a local Fremont employer, screening 32 women in two days.

Methodist Fremont Health also provided 28 lung screens and 46 skin cancer screenings during 2020. Many outreach activities were put on hold at the beginning of the pandemic so the number of screenings completed decreased overall from previous years.
Mental Health
Methodist Fremont Health has been instrumental in expanding mental health services in the Fremont community – a priority identified in the CHNA. MFH opened a 20-bed inpatient behavioral health unit and continues to be at capacity. In addition, MFH provides a continuum of care through the behavioral health outpatient clinic offering psychiatric evaluation and medication management; mental health assessment; and individual and family therapy for children through adulthood. Due to the pandemic, MFH also offered these services via telehealth. The behavioral health team consists of board certified psychiatrists, a psychiatric mental health nurse practitioner, a masters level social worker, licensed independent mental health practitioners, registered nurses, and support staff.

A nurse navigator is located at the MFH OB/GYN clinic and conducts a pre-screening for depression, as well as a post-partum depression screening, working collaboratively with the physicians to provide early interventions, as needed. The OBG nurse navigator served over 400 moms and provided over 160 referrals to community partners to address the social determinants of health.

Evaluating Our Impact
In order to be the best community stewards and healthcare professionals, Methodist Fremont Health continually evaluates all programs and services reported as community benefits in order to ensure that best practices are used to improve health outcomes. MFH uses a multi-discipline approach in reviewing all programs and continues to move towards using evidence-based models.

Heart Disease & Stroke
Similar to other community benefits activities, every screening offered includes a number of health education tools, and heart disease and stroke are no different. At these events, blood pressures are taken, along with a consultation with a licensed staff member, available at no cost. These consultations include education regarding healthy lifestyle choices that can reduce heart disease and chances of stroke, including but not limited to: healthy eating, food portions, cooking demonstrations and instructions and affordable meal ideas for families.

Methodist Fremont Health also provides blood pressure screening and education, Body Mass Index calculator and event information through our interactive kiosks. Over 2,100 people used the kiosks in 2020 to check his/her blood pressure. High blood pressure is one of the most important risk factors for cardiovascular disease (CVD).

Financial Assistance
In 2020, MFH was able to assist over 5,000 individuals with financial assistance, reducing or even eliminating the medical payment burden on families, allowing them to afford home ownership, educational expenses, and healthier lifestyle and food choices. Our Financial Assistance Program is offered to all patients upon admission and our providers are knowledgeable regarding how their patients can apply for this program.
## Programs and Services

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### Unpaid cost of public programs:

<table>
<thead>
<tr>
<th>Medicare</th>
<th>356,709,002</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicaid</td>
<td>236,586,067</td>
</tr>
<tr>
<td>Other public programs</td>
<td>1,015,620</td>
</tr>
</tbody>
</table>

### Community benefits services

<table>
<thead>
<tr>
<th>Community health education and outreach</th>
<th>11,449,451</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community-based clinical services</td>
<td>4,483,985</td>
</tr>
<tr>
<td>Health care support services</td>
<td>5,858,829</td>
</tr>
</tbody>
</table>

#### Health professions education

<table>
<thead>
<tr>
<th>Scholarships/funding for health professions</th>
<th>3,143,310</th>
</tr>
</thead>
<tbody>
<tr>
<td>Residencies and internships</td>
<td>55,267,217</td>
</tr>
<tr>
<td>Other</td>
<td>47,279,255</td>
</tr>
</tbody>
</table>

### Subsidized health services

<table>
<thead>
<tr>
<th>Emergency and trauma care</th>
<th>5,249,761</th>
</tr>
</thead>
<tbody>
<tr>
<td>Neonatal intensive care</td>
<td>759,843</td>
</tr>
<tr>
<td>Community clinics</td>
<td>5,683,970</td>
</tr>
<tr>
<td>Hospital outpatient services</td>
<td>55,006,007</td>
</tr>
<tr>
<td>Women's and children's services</td>
<td>333,412</td>
</tr>
<tr>
<td>Subsidized continuing care</td>
<td>923,278</td>
</tr>
<tr>
<td>Behavioral health services</td>
<td>4,514,272</td>
</tr>
<tr>
<td>Other subsidized health services</td>
<td>61,989,952</td>
</tr>
</tbody>
</table>

### Research

| $ 7,910,937 |

### Cash and in-kind donations

| $ 190,523,992 |

### Community building activities

| 1,261,137 |

<table>
<thead>
<tr>
<th>Physical improvements and housing</th>
<th>53,154</th>
</tr>
</thead>
<tbody>
<tr>
<td>Economic development</td>
<td>158,692</td>
</tr>
<tr>
<td>Community support</td>
<td>259,363</td>
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<tr>
<td>Environmental improvements</td>
<td>35,191</td>
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<tr>
<td>Leadership development/training</td>
<td>98,447</td>
</tr>
<tr>
<td>Coalition building</td>
<td>144,758</td>
</tr>
<tr>
<td>Advocacy for community issues</td>
<td>30,521</td>
</tr>
<tr>
<td>Workforce development</td>
<td>481,011</td>
</tr>
</tbody>
</table>

### Community benefit operations

| 1,878,766 |

| $ 1,385,902 |

### TOTAL COMMUNITY BENEFITS

| $ 1,201,903,766 |

### BAD DEBT

| $ 186,284,032 |

### TOTAL CONTRIBUTIONS

| $ 1,388,187,798 |
Medicare Cuts

While hospitals provided over $1.40 billion in community benefits including bad debt during 2019, it wasn’t easy. Since the inception of the Affordable Care Act (ACA) in 2010, Nebraska hospitals have experienced significant reimbursement reductions at the Federal level.

From 2022 through 2031, Nebraska hospitals will incur over $3.62 billion in cuts to Medicare payments.

<table>
<thead>
<tr>
<th>Cuts Enacted (2022 - 2031): Legislative</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACA Marketbasket Cuts</td>
<td>($2,103,706,000)</td>
</tr>
<tr>
<td>Sequestration</td>
<td>($379,215,000)</td>
</tr>
<tr>
<td>Medicare DSH Cuts</td>
<td>($190,165,000)</td>
</tr>
<tr>
<td>AIRA Coding</td>
<td>($91,144,000)</td>
</tr>
<tr>
<td>OPPS SN (PN)</td>
<td>($42,880,000)</td>
</tr>
<tr>
<td>PAMA CUS Adjustment</td>
<td>($10,256,000)</td>
</tr>
<tr>
<td>Hospice Transfer Adjustment</td>
<td>($12,080,000)</td>
</tr>
<tr>
<td>Bad Debt at 65%</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Cuts Enacted (2022 - 2031): Regulatory</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coding Cuts</td>
<td>($352,393,000)</td>
</tr>
<tr>
<td>LTCH SN Adjustment</td>
<td>($84,510,000)</td>
</tr>
<tr>
<td>OPPS Clinic SN (PO)</td>
<td>($6,831,000)</td>
</tr>
<tr>
<td>WAC Payments at 103%</td>
<td>($4,141,000)</td>
</tr>
<tr>
<td>340B Reduction</td>
<td>($120,151,000)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Quality Based Payment Reform (2022 - 2031)</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quality</td>
<td>($41,017,000)</td>
</tr>
</tbody>
</table>

From 2022 to 2031, Nebraska hospitals could face the potential for nearly $3.1 billion in additional cuts in Medicare reimbursement which are being considered by Congress and CMS.

<table>
<thead>
<tr>
<th>Cuts Under Consideration (2022 - 2031)</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rural Cuts (CAH &amp; SCH)</td>
<td>($2,654,316,200)</td>
</tr>
<tr>
<td>Outpatient Department Payment Cuts</td>
<td>($466,486,900)</td>
</tr>
<tr>
<td>IME/DGME based on National Pool</td>
<td>($249,573,702)</td>
</tr>
<tr>
<td>Post Acute Cuts</td>
<td>($36,885,200)</td>
</tr>
<tr>
<td>Bad Debt at 25%</td>
<td>($27,054,300)</td>
</tr>
<tr>
<td>Extension of 2% Sequestration (2028)</td>
<td>($39,708,200)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Total Cuts Under Consideration</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>($3,235,169,000)</td>
</tr>
<tr>
<td></td>
<td>$52,196,600</td>
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</tbody>
</table>

Total Cuts Under Consideration ($3,185,949,100)
Community Benefits Summary

The contribution of Nebraska hospitals to their communities extends far beyond their role as cornerstones of health care. They are economic engines, providing stability and growth in the state—even when the economic recession is affecting their own financial stability.
Community Benefits Provided by Nebraska Hospitals in 2020

Every year the Nebraska Hospital Association conducts a survey of its member hospitals to measure the amount of community benefits that have been provided statewide. However, what do the numbers really mean? The fact is that the impact of the community benefits that are provided by Nebraska’s hospitals goes far beyond the numbers. The true impact of these programs is personal and positively impacts the lives of individuals across the state.

Nebraska’s hospitals serve as the safety net in each of their communities and strive to improve the health and wellness of their patients.

In 2020, Nebraska hospitals contributed nearly $1.38 billion (over $186 million of that in bad debt) to support programs that benefited their communities.

These programs included providing free care to individuals that were unable to pay, absorbing the unpaid costs of public programs such as Medicare and Medicaid, offering community education and outreach, providing scholarships and residencies for health professionals, subsidizing health services that are reimbursed at amounts below the cost of providing the care, conducting research and incurring bad debt from individuals that choose not to pay their bills.

|-------------------------------|------|------|------|------|------|------|

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<tbody>
<tr>
<td>2020</td>
<td>186M</td>
<td>196M</td>
<td>192M</td>
<td>292M</td>
<td>325M</td>
<td>301M</td>
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</thead>
<tbody>
<tr>
<td>2020</td>
<td>737M</td>
<td>757M</td>
<td>749M</td>
<td>742M</td>
<td>661M</td>
<td>693M</td>
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</thead>
<tbody>
<tr>
<td>2020</td>
<td>464M</td>
<td>448M</td>
<td>280M</td>
<td>277M</td>
<td>230M</td>
<td>230M</td>
</tr>
</tbody>
</table>
COVID-19 Impact

When COVID-19 hit, our hospitals sprang into action to respond to this deadly pandemic.

**Wage and Labor Costs**
Wage and labor costs have continued to rise during the COVID-19 pandemic. Many hospitals are experiencing increased overtime costs to handle the surges that have occurred during the COVID-19 pandemic. Some hospitals have implemented bonus pay for front-line workers. Some have turned to staffing firms to address health care staffing needs to meet surge demand. Staffing firms have increased their prices due to this increase in demand for health care workers.

Between February 2020 and August 2021, average hourly rates for hospital employees have 8.5% and this increase is unlikely to subside anytime soon. Total labor costs (wage and benefits) in our hospitals have increased 15.6% since September 2019. Labor costs have not increased at this rate since 1982. Labor costs make up more than 50% of our hospitals’ total operating expenses.

**Supply Costs**
Supply chain disruptions have impacted our hospitals in the state. COVID-19 has had a widespread impact on supply procurement. Over 85% of hospitals encountered shortages of key supply items as well as significant pricing increases of those key supplies. Many hospitals had to go outside their normal purchasing process and identify new vendors to obtain supplies. The volume of PPE purchases has had a significant impact on our hospitals.

**Workforce Shortage**
The healthcare worker shortage affects both Nebraska’s physical health and economic health. Lack of care impedes the ability of communities throughout the state to attract and keep residents and the business community that employ them. This issue has only become more exacerbated during the COVID-19 pandemic.

According to the Nebraska Center for Nursing, Nebraska will experience a workforce shortage of 5,435 nurses by 2025. Seventy-three of Nebraska’s 93 counties have less than the national average ratio of RNs to patients. Sixty-six of Nebraska’s counties have been deemed medically underserved. Nine counties have no RNs and four only have one.

Currently, there are 2,600 fewer nurses when compared to pre-pandemic numbers in 2019. This represents 1.5 fewer nurses per 1,000 people in the State of Nebraska. Additionally, 1,415 RNs are very likely to leave their current employment in the next 12 months.

It is not just a nursing issue. Thirteen of Nebraska’s 93 counties have no primary care physician and 44 counties do not have any OB-GYN physicians. Seventy-eight counties have no practicing psychiatrist. Nearly one-fifth of physicians in Nebraska are more than 60 years old.

**Drug Costs**
Every year, hospitals expend financial resources to cope with drug shortages. Due to the pandemic, lower than normal drug supply due to broken drug supply chains has been met with increasing demand for certain drugs necessary to treat the surge of patients with COVID-19. A perfect storm was created in drug shortages with many vital drugs being unavailable or in short supply resulting in higher costs for hospitals.
COVID-19 Impacts on Nebraska's hospitals.

Inpatient Average Length of Stay

Outpatient Visits

Outpatient Surgery Visits

Emergency Department Visits

Inpatient Discharges

Emergency Department Admits to Hospital

Inpatient Patient Days

Inpatient Surgeries

Swing Beds

Births

Outpatient Visits

Outpatient Surgery Visits

Emergency Department Visits

Inpatient Discharges

Emergency Department Admits to Hospital

Inpatient Patient Days

Inpatient Surgeries

Swing Beds

Births

21 | nebraskahospitals.org
Participating Hospital Members

Antelope Memorial Hospital, Neligh
Beatrice Community Hospital & Health Center, Beatrice
Boone County Health Center, Albion
Box Butte General Hospital, Alliance
Boys Town National Research Hospital, Omaha
Brodstone Memorial Hospital, Superior
Brown County Hospital, Ainsworth
Bryan Medical Center, Lincoln
Butler County Health Care Center, David City
Callaway District Hospital, Callaway
Chadron Community Hospital & Health Services, Chadron
CHI Health Creighton University Medical Center - Bergan Mercy, Omaha
CHI Health Good Samaritan, Kearney
CHI Health Immanuel, Omaha
CHI Health Lakeside, Omaha
CHI Health Midlands, Papillion
CHI Health Nebraska Heart, Lincoln
CHI Health Plainview, Plainview
CHI Health Schuyler, Schuyler
CHI Health St. Elizabeth, Lincoln
CHI Health St. Francis, Grand Island
CHI Health St. Mary’s, Nebraska City
Children’s Hospital & Medical Center, Omaha
Columbus Community Hospital, Columbus
Community Hospital, McCook
Community Medical Center Inc., Falls City
Cozad Community Hospital System, Cozad
Crete Area Medical Center, Crete
Dundy County Hospital, Benkelman
Faith Regional Health Services, Norfolk
Fillmore County Hospital, Geneva
Franciscan Healthcare, West Point
Grand Island Regional Medical Center, Grand Island
Great Plains Health, North Platte
Henderson Health Care, Henderson
Howard County Medical Center, St. Paul

Jefferson Community Health & Life, Fairbury
Jennie M. Melham Memorial Medical Center, Broken Bow
Johnson County Hospital, Tecumseh
Kearney County Health Services, Minden
Lexington Regional Health Center, Lexington
Madonna Rehabilitation Hospital, Lincoln
Madonna Rehabilitation Hospital, Omaha
Mary Lanning Healthcare, Hastings
Memorial Community Health, Aurora
Memorial Community Hospital & Health System, Blair
Memorial Health Care Systems, Seward
Merrill Medical Center, Central City
Methodist Fremont Health, Fremont
Methodist Hospital, Omaha
Methodist Women’s Hospital, Omaha
Morrill County Community Hospital, Bridgeport
Nebraska Medicine - Bellevue Medical Center, Bellevue
Nebraska Medicine - Nebraska Medical Center, Omaha
Nemaha County Hospital, Auburn
Ogallala Community Hospital, Ogallala
Osmond General Hospital, Osmond
Phelps Memorial Health Center, Holdrege
Providence Medical Center, Wayne
Regional West Garden County, Oshkosh
Rock County Hospital, Bassett
Saunders Medical Center, Wahoo
Sidney Regional Medical Center, Sidney
Syracuse Area Health, Syracuse
Thayer County Health Services, Hebron
Tri Valley Health System, Cambridge
Valley County Health System, Ord
Webster County Community Hospital, Red Cloud
West Holt Medical Services, Atkinson
York General, York
Notes