

**SCHEDULE H
(Form 990)**

Hospitals

OMB No. 1545-0047

2012

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 20.
▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization **GREENWICH HOSPITAL** Employer identification number **06-0646659**

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	<input checked="" type="checkbox"/>	
b If "Yes," was it a written policy?	<input checked="" type="checkbox"/>	
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</i> care? 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 checked="" type="checkbox"/> 200% <input type="checkbox"/> Other _____ %	<input checked="" type="checkbox"/>	
b Did the organization use FPG as a factor in determining eligibility for providing <i>discounted</i> care? 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 checked="" type="checkbox"/> 400% <input type="checkbox"/> Other _____ %	<input checked="" type="checkbox"/>	
c If the organization used factors other than FPG in determining eligibility, describe in Part VI the income based criteria 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"?	<input checked="" type="checkbox"/>	
5a Did the organization budget amounts for free or discounted care provided under its financial assistance policy during the tax year?	<input checked="" type="checkbox"/>	
b If "Yes," did the organization's financial assistance expenses exceed the budgeted amount?		<input checked="" type="checkbox"/>
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?	<input checked="" type="checkbox"/>	
b If "Yes," did the organization make it available to the public?	<input checked="" type="checkbox"/>	

Complete the following table using the worksheets provided in the Schedule H instructions. Do not submit these worksheets with the Schedule H.

7 Financial Assistance and Certain Other Community Benefits at Cost						
Financial Assistance and Means-Tested Government Programs	(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
a Financial Assistance at cost (from Worksheet 1)	0	3,978	17,955,656.	2,786,656.	15,169,000.	4.82%
b Medicaid (from Worksheet 3, column a)	0	22,841	20,486,000.	10,919,000.	9,567,000.	3.04%
c Costs of other means-tested government programs (from Worksheet 3, column b)	0	0	0.	0.		
d Total Financial Assistance and Means-Tested Government Programs		26,819	38,441,656.	13,705,656.	24,736,000.	7.86%
Other Benefits						
e Community health improvement services and community benefit operations (from Worksheet 4)	17	21,249	810,259.	0.	810,259.	.26%
f Health professions education (from Worksheet 5)	3	85	4,514,472.	1,448,378.	3,066,094.	.97%
g Subsidized health services (from Worksheet 6)	3	10,484	7,388,329.	5,176,553.	2,211,776.	.70%
h Research (from Worksheet 7)	1	0	468,440.	0.	468,440.	.15%
i Cash and in-kind contributions for community benefit (from Worksheet 8)	6	2,869	284,546.	0.	284,546.	.09%
j Total. Other Benefits	30	34,687	13,466,046.	6,624,931.	6,841,115.	2.17%
k Total. Add lines 7d and 7j	30	61,506	51,907,702.	20,330,587.	31,577,115.	10.03%

Part V Facility Information

Section A. Hospital Facilities

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

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

Name, address, and primary website address

1 GREENWICH HOSPITAL
5 PERRYRIDGE ROAD
GREENWICH, CT 06830
WWW.GREENHOSP.ORG

Table with 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 'X' marks in the first seven columns.

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 facility reporting group GREENWICH HOSPITAL

For single facility filers only: line number of hospital facility (from Schedule H, Part V, Section A) 1

	Yes	No
Community Health Needs Assessment (Lines 1 through 8c are optional for tax years beginning on or before March 23, 2012)		
1 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 9	X	
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 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"/> Information gaps that limit the hospital facility's ability to assess the community's health needs		
j <input type="checkbox"/> Other (describe in Part VI)		
2 Indicate the tax year the hospital facility last conducted a CHNA: 20 <u>12</u>		
3 In conducting its most recent CHNA, did the hospital facility take into account input from representatives of the community served by the hospital facility, including those with special knowledge of or expertise in public health? If "Yes," describe in Part VI how the hospital facility took into account input from persons who represent the community, and identify the persons the hospital facility consulted	X	
4 Was the hospital facility's CHNA conducted with one or more other hospital facilities? If "Yes," list the other hospital facilities in Part VI		X
5 Did the hospital facility make its CHNA report widely available to the public?	X	
If "Yes," indicate how the CHNA report was made widely available (check all that apply):		
a <input checked="" type="checkbox"/> Hospital facility's website		
b <input checked="" type="checkbox"/> Available upon request from the hospital facility		
c <input type="checkbox"/> Other (describe in Part VI)		
6 If the hospital facility addressed needs identified in its most recently conducted CHNA, indicate how (check all that apply to date):		
a <input checked="" type="checkbox"/> Adoption of an implementation strategy that addresses each of the community health needs identified through the CHNA		
b <input checked="" type="checkbox"/> Execution of the implementation strategy		
c <input type="checkbox"/> Participation in the development of a community-wide plan		
d <input type="checkbox"/> Participation in the execution of a community-wide plan		
e <input checked="" type="checkbox"/> Inclusion of a community benefit section in operational plans		
f <input checked="" type="checkbox"/> Adoption of a budget for provision of services that address the needs identified in the CHNA		
g <input checked="" type="checkbox"/> Prioritization of health needs in its community		
h <input checked="" type="checkbox"/> Prioritization of services that the hospital facility will undertake to meet health needs in its community		
i <input type="checkbox"/> Other (describe in Part VI)		
7 Did the hospital facility address all of the needs identified in its most recently conducted CHNA? If "No," explain in Part VI which needs it has not addressed and the reasons why it has not addressed such needs		X
8a 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)?		X
8b If "Yes" to line 8a, did the organization file Form 4720 to report the section 4959 excise tax?		
c If "Yes" to line 8b, 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) GREENWICH HOSPITAL

Financial Assistance Policy		Yes	No
Did the hospital facility have in place during the tax year a written financial assistance policy that:			
9	Explained eligibility criteria for financial assistance, and whether such assistance includes free or discounted care?	X	
10	Used federal poverty guidelines (FPG) to determine eligibility for providing <i>free</i> care?	X	
	If "Yes," indicate the FPG family income limit for eligibility for free care: <u>250</u> %		
	If "No," explain in Part VI the criteria the hospital facility used.		
11	Used FPG to determine eligibility for providing <i>discounted</i> care?	X	
	If "Yes," indicate the FPG family income limit for eligibility for discounted care: <u>400</u> %		
	If "No," explain in Part VI the criteria the hospital facility used.		
12	Explained the basis for calculating amounts charged to patients?	X	
	If "Yes," indicate the factors used in determining such amounts (check all that apply):		
a	<input checked="" type="checkbox"/> Income level		
b	<input type="checkbox"/> Asset level		
c	<input type="checkbox"/> Medical indigency		
d	<input checked="" type="checkbox"/> Insurance status		
e	<input type="checkbox"/> Uninsured discount		
f	<input type="checkbox"/> Medicaid/Medicare		
g	<input type="checkbox"/> State regulation		
h	<input type="checkbox"/> Other (describe in Part VI)		
13	Explained the method for applying for financial assistance?	X	
14	Included measures to publicize the policy within the community served by the hospital facility?	X	
	If "Yes," indicate how the hospital facility publicized the policy (check all that apply):		
a	<input checked="" type="checkbox"/> The policy was posted on the hospital facility's website		
b	<input checked="" type="checkbox"/> The policy was attached to billing invoices		
c	<input checked="" type="checkbox"/> The policy was posted in the hospital facility's emergency rooms or waiting rooms		
d	<input checked="" type="checkbox"/> The policy was posted in the hospital facility's admissions offices		
e	<input type="checkbox"/> The policy was provided, in writing, to patients on admission to the hospital facility		
f	<input checked="" type="checkbox"/> The policy was available on request		
g	<input checked="" type="checkbox"/> Other (describe in Part VI)		

Billing and Collections		Yes	No
15	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 actions the hospital facility may take upon non-payment?	X	
16	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 patient's eligibility under the facility's FAP:		
a	<input type="checkbox"/> Reporting to credit agency		
b	<input type="checkbox"/> Lawsuits		
c	<input type="checkbox"/> Liens on residences		
d	<input type="checkbox"/> Body attachments		
e	<input type="checkbox"/> Other similar actions (describe in Part VI)		
17	Did the hospital facility or an authorized third party perform any of the following actions during the tax year before making reasonable efforts to determine the patient's eligibility under the facility's FAP?		X
	If "Yes," check all actions in which the hospital facility or a third party engaged:		
a	<input type="checkbox"/> Reporting to credit agency		
b	<input type="checkbox"/> Lawsuits		
c	<input type="checkbox"/> Liens on residences		
d	<input type="checkbox"/> Body attachments		
e	<input type="checkbox"/> Other similar actions (describe in Part VI)		

Part V Facility Information (continued) **GREENWICH HOSPITAL**

- 18** Indicate which efforts the hospital facility made before initiating any of the actions listed in line 17 (check all that apply):
- a Notified individuals of the financial assistance policy on admission
 - b Notified individuals of the financial assistance policy prior to discharge
 - c Notified individuals of the financial assistance policy in communications with the patients regarding the patients' bills
 - d Documented its determination of whether patients were eligible for financial assistance under the hospital facility's financial assistance policy
 - e Other (describe in Part VI)

Policy Relating to Emergency Medical Care

19 Did the hospital facility have in place during the tax year a written policy relating to emergency medical care that requires 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?

	Yes	No
19	<input checked="" type="checkbox"/>	

If "No," indicate why:

- a The hospital facility did not provide care for any emergency medical conditions
- b The hospital facility's policy was not in writing
- c The hospital facility limited who was eligible to receive care for emergency medical conditions (describe in Part VI)
- d Other (describe in Part VI)

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

20 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 The hospital facility used its lowest negotiated commercial insurance rate when calculating the maximum amounts that can be charged
- b The hospital facility used the average of its three lowest negotiated commercial insurance rates when calculating the maximum amounts that can be charged
- c The hospital facility used the Medicare rates when calculating the maximum amounts that can be charged
- d Other (describe in Part VI)

21 During the tax year, did the hospital facility charge any of its FAP-eligible individuals, 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?

If "Yes," explain in Part VI.

21		<input checked="" type="checkbox"/>
22		<input checked="" type="checkbox"/>

22 During the tax year, did the hospital facility charge any FAP-eligible individuals an amount equal to the gross charge for any service provided to that individual?

If "Yes," explain in Part VI.

Part V Facility Information *(continued)***Section C. 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? 15

Name and address	Type of Facility (describe)
1 GREENWICH HOSPITAL DIAGNOSTIC CENT. 2015 WEST MAIN ST STAMFORD, CT 06902	DI / LAB
2 BOYD CENTER FOR MEDICAL ONCOLOGY 15 VALLEY DRIVE GREENWICH, CT 06831	CANCER CENTER
5 GREENWICH HOSPITAL OCCUPAT. HEALTH 75 HOLLY HILL LANE GREENWICH, CT 06830	OCC. HEALTH / WOMENS HEALTH / LAB
6 GREENWICH HOSPITAL LAB 49 LAKE AVE; 2ND FLOOR GREENWICH, CT 06830	LAB
8 GREENWICH HOSPITAL LAB 90 MORGAN STREET; 3RD FLOOR, SUITE 30 STAMFORD, CT 06905	LAB
9 GREENWICH HOSPITAL LAB 106 NOROTON AVENUE DARIEN, CT 06820	LAB
10 GREENWICH HOSPITAL LAB 159 WEST PUTNAM AVE; 2ND FLOOR GREENWICH, CT 06830	LAB
11 GREENWICH HOSPITAL LAB 4 DEERFIELD DRIVE; 2ND FLOOR GREENWICH, CT 06830	LAB
12 GREENWICH HOSPITAL LAB 40 CROSS ST; 3RD FLOOR, SUITE 350 NORWALK, CT 06851	LAB
13 GREENWICH HOSPITAL LAB 148 EAST AVE; SUITE 1F NORWALK, CT 06851	LAB

Schedule H (Form 990) 2012

Part VI Supplemental Information

Complete this part to provide the following information.

- 1 Required descriptions.** Provide the descriptions required for Part I, lines 3c, 6a, and 7; Part II; Part III, lines 4, 8, and 9b; Part V, Section A; and Part V, Section B, lines 1j, 3, 4, 5c, 6i, 7, 10, 11, 12h, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22.
- 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.
- 8 Facility reporting group(s).** If applicable, for each hospital facility in a facility reporting group provide the descriptions required for Part V, Section B, lines 1j, 3, 4, 5c, 6i, 7, 10, 11, 12h, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22.

PART I, LINE 7: THE HOSPITAL USES A COST ACCOUNTING SYSTEM, TSI, TO CALCULATE THE AMOUNTS PRESENTED IN PART I, LINE 7. THE COST ACCOUNTING SYSTEM ADDRESSES ALL PATIENT SEGMENTS.

PART II: GREENWICH HOSPITAL IS ONE OF THE TOP FIVE EMPLOYERS IN GREENWICH WITH 1,754 EMPLOYEES IN 2013. THE HOSPITAL PROVIDES IN-KIND AND FINANCIAL SUPPORT FOR SEVERAL ECONOMIC INITIATIVES THROUGHOUT FAIRFIELD AND WESTCHESTER COUNTIES. MEMBERS OF THE HOSPITAL'S LEADERSHIP AND MANAGEMENT STAFF ALSO SUPPORT ECONOMIC AND COMMUNITY DEVELOPMENT BY SERVING ON THE BOARDS OF THE GREENWICH CHAMBER OF COMMERCE AND THE PORT CHESTER-RYE BROOK-RYE TOWN CHAMBER OF COMMERCE. THROUGH THESE ORGANIZATIONS, GREENWICH HOSPITAL ADVOCATES FOR AND FACILITATES INCREASED ECONOMIC DEVELOPMENT FOR THE AREA.

GREENWICH HOSPITAL ALONG WITH MANY OTHER HOSPITALS ACROSS THE COUNTRY UTILIZES THE COMMUNITY BENEFITS INVENTORY FOR SOCIAL ACCOUNTABILITY DATABASE DEVELOPED BY LYON SOFTWARE TO CATALOG ITS COMMUNITY BENEFIT AND COMMUNITY BUILDING ACTIVITIES AND THE GUIDELINES DEVELOPED BY THE CATHOLIC HOSPITAL ASSOCIATION (CHA) IN ORDER TO CATALOG THESE BENEFITS. THESE TWO

Part VI Supplemental Information

ORGANIZATIONS HAVE WORKED TOGETHER FOR OVER TWENTY YEARS TO PROVIDE SUPPORT TO NON-FOR-PROFIT HOSPITALS TO DEVELOP AND SUSTAIN EFFECTIVE COMMUNITY BENEFIT PROGRAMS.

THE MOST RECENT VERSION OF THE CHA GUIDE FOR PLANNING AND REPORTING COMMUNITY BENEFIT DEFINES COMMUNITY BUILDING ACTIVITIES AS PROGRAMS THAT ADDRESS THE ROOT CAUSES OF HEALTH PROBLEMS, SUCH AS POVERTY, HOMELESSNESS AND ENVIRONMENTAL PROBLEMS. THESE ACTIVITIES ARE CATEGORIZED INTO EIGHT DISTINCT AREAS INCLUDING PHYSICAL IMPROVEMENT AND HOUSING, ECONOMIC DEVELOPMENT, COMMUNITY SUPPORT, ENVIRONMENTAL IMPROVEMENTS, LEADERSHIP DEVELOPMENT AND TRAINING FOR COMMUNITY MEMBERS, COALITION BUILDING, ADVOCACY FOR COMMUNITY HEALTH IMPROVEMENTS, AND WORKFORCE DEVELOPMENT. GREENWICH HOSPITAL'S VISION IS TO BE THE PREMIER REGIONAL HEALTH CARE PROVIDER, AND AS SUCH, THE HOSPITAL IS INCREASINGLY AWARE OF HOW SOCIAL DETERMINANTS IMPACT THE HEALTH OF INDIVIDUALS AND COMMUNITIES. A PERSON'S HEALTH AND CHANCES OF BECOMING SICK AND DYING EARLY ARE GREATLY INFLUENCED BY POWERFUL SOCIAL FACTORS SUCH AS EDUCATION, INCOME, NUTRITION, HOUSING AND NEIGHBORHOODS. DURING FISCAL YEAR 2013, GREENWICH HOSPITAL PROVIDED NEARLY \$279,000 IN FINANCIAL AND IN-KIND DONATIONS. THE HOSPITAL CONSIDERS THESE INVESTMENTS PART OF ITS OVERALL COMMITMENT OF BUILDING STRONGER NEIGHBORHOODS. EXAMPLES BELOW FOCUS ON THE AREAS OF REVITALIZING OUR NEIGHBORHOODS AND CREATING EDUCATIONAL OPPORTUNITIES.

REVITALIZING OUR NEIGHBORHOODS

ONE OF SEVERAL COMMUNITY INITIATIVES UNDERTAKEN BY GREENWICH HOSPITAL TO ENHANCE ACCESS TO HEALTHY, AFFORDABLE FOOD IS COMMUNITY GARDENS, FORMERLY GOD'S GREEN MARKET. THIS PROGRAM IS ADMINISTERED IN COLLABORATION WITH THE COUNCIL OF COMMUNITY SERVICES, PORT CHESTER SCHOOLS AND AREA CHURCHES TO PROVIDE FRESH VEGETABLES TO PARTICIPANTS IN PORT CHESTER'S FOUR FOOD PANTRIES, SEVEN SOUP KITCHENS AND NUTRITION CENTERS. THE COUNCIL OF

Part VI Supplemental Information

COMMUNITY SERVICES ORGANIZES VOLUNTEERS TO PLANT AND HARVEST THE CROPS.

OVER THE PAST SIX YEARS, THE PROGRAM HAS PROVIDED THOUSANDS OF LOW-INCOME

PORT CHESTER FAMILIES WITH FRESH VEGETABLES AND SPONSORS HEALTH

EDUCATIONAL PROGRAMS THAT PROMOTE HEALTHIER EATING. THE HOSPITAL PROVIDES

BOTH FINANCIAL AND IN-KIND SUPPORT FOR THE INITIATIVE INCLUDING DIETITIANS

AND NURSES WHO HAVE PROVIDED NUTRITION EDUCATION AND HEALTHY RECIPES IN

BOTH ENGLISH AND SPANISH.

TO SUPPORT DRIVING SAFETY, GREENWICH HOSPITAL AND THE AARP CO-SPONSORED AN

EDUCATIONAL DRIVING PROGRAM FOR OLDER ADULTS WITH APPROXIMATELY 414

WESTCHESTER AND FAIRFIELD COUNTY ADULTS ATTENDING THE PROGRAM. THE

EDUCATIONAL DRIVING PROGRAM PROMOTES SAFETY AND IS INTENDED TO REDUCE

ACCIDENT RATES AMONG DRIVERS AGE 55 AND OLDER.

GREENWICH HOSPITAL WAS ALSO THE RECIPIENT OF A DONATION OF FUNDS TO

DEVELOP A COMMUNITY FLOWER GARDEN ON ITS PROPERTY TO BE OPEN TO THE

PUBLIC. VARIOUS COMMUNITY CEREMONIES AND CELEBRATIONS ARE CONDUCTED IN

THE GARDEN INCLUDING CANCER SURVIVOR PROGRAMS AND THE TREE OF LIGHT

PROGRAM. EACH WINTER, GREENWICH HOSPITAL PROVIDES A WARM CENTER FOR THE

COMMUNITY IN ITS NOBLE CONFERENCE CENTER. THIS WARM CENTER IS AVAILABLE

TO THOSE IN NEED DUE TO POWER OUTAGES, SNOW STORMS AND FREEZING

TEMPERATURES. INCLUDED IN THE WARM CENTER ARE COTS, HOT BEVERAGES, HAND

WARMERS AND MAGAZINES.

CREATING EDUCATIONAL OPPORTUNITIES

HIGHER EDUCATIONAL ATTAINMENT IS ASSOCIATED WITH BETTER HEALTH STATUS AND

LONGER LIFE. FOR EXAMPLE, ADULTS AGED 25-50 YEARS WHO HAVE A COLLEGE

DEGREE WILL ON AVERAGE LIVE FIVE YEARS LONGER THAN THOSE WITH LESS THAN A

HIGH SCHOOL EDUCATION. TO ENCOURAGE THE PURSUIT OF HIGHER EDUCATION,

GREENWICH HOSPITAL SPONSORED SEVERAL PROGRAMS TO INTRODUCE MIDDLE AND HIGH

SCHOOL STUDENTS TO POTENTIAL HEALTH CARE CAREERS.

Part VI Supplemental Information

GREENWICH HOSPITAL, THROUGH A JOINT EFFORT WITH HIGH SCHOOLS IN PORT CHESTER AND GREENWICH, PROVIDED AN EDUCATIONAL PROGRAM INTRODUCING STUDENTS TO HEALTH CARE CAREER OPPORTUNITIES. A TOTAL OF 18 STUDENTS PARTICIPATED IN THE PROGRAM, WHICH IS AIMED AT EDUCATING AND INSPIRING STUDENTS TO PURSUE FULFILLING HEALTH CARE CAREERS. THE AFTER-SCHOOL PROGRAM WAS HELD OVER FOUR WEEKS AND INCLUDED A TOUR OF GREENWICH HOSPITAL AND ITS JOHN AND ANDREA FRANK SYN:APSE SIMULATION CENTER. THE SIMULATION CENTER OFFERS HANDS-ON TRAINING USING A HIGH-FIDELITY MANNEQUIN THAT CAN SPEAK AND RESPOND PHYSIOLOGICALLY TO MEDICATIONS AND TREATMENT.

AS PART OF SUMMER EDUCATION PROGRAMS, 14 SUMMER INTERN STUDENTS FROM THE OPEN DOOR FAMILY MEDICAL CENTER IN PORT CHESTER, NY SPENT THE DAY AT THE HOSPITAL LEARNING ABOUT VARIOUS HEALTH CARE CAREERS.

GREENWICH HOSPITAL ALSO PROVIDED MIDDLE AND HIGH SCHOOL STUDENTS THE OPPORTUNITY TO GET AN IN-DEPTH LOOK INTO VARIOUS HEALTH CARE CAREERS THROUGH AN AFTER-SCHOOL PROGRAM SPONSORED IN PARTNERSHIP WITH THE BOY SCOUTS OF AMERICA'S GREENWICH CHAPTER. WHILE TOURING THE HOSPITAL, PARTICIPANTS LEARNED ABOUT A VARIETY OF HOSPITAL SETTINGS AND SPOKE WITH PROFESSIONALS IN THE MEDICAL FIELD. EDUCATIONAL PROGRAMS FOCUSED ON HEALTH, NUTRITION, FIRST AID, SAFETY, SMOKING PREVENTION AND PROPER HYGIENE. THE HOSPITAL ALSO OFFERS A MINI-MED SEMINAR FOR BOTH ADULTS AND YOUTH IN THE COMMUNITY.

PART III, LINE 4: THE HOSPITAL'S COMMITMENT TO COMMUNITY SERVICE IS EVIDENCED BY SERVICES PROVIDED TO THE POOR AND BENEFITS PROVIDED TO THE BROADER COMMUNITY. SERVICES PROVIDED TO THE POOR INCLUDE SERVICES PROVIDED TO PERSONS WHO CANNOT AFFORD HEALTHCARE BECAUSE OF INADEQUATE RESOURCES AND/OR WHO ARE UNINSURED OR UNDERINSURED.

THE HOSPITAL MAKES AVAILABLE FREE CARE PROGRAMS FOR QUALIFYING PATIENTS.

Part VI Supplemental Information

IN ACCORDANCE WITH THE ESTABLISHED POLICIES OF THE HOSPITAL, DURING THE REGISTRATION, BILLING AND COLLECTION PROCESS A PATIENT'S ELIGIBILITY FOR FREE CARE FUNDS IS DETERMINED. FOR PATIENTS WHO WERE DETERMINED BY THE HOSPITAL TO HAVE THE ABILITY TO PAY BUT DID NOT, THE UNCOLLECTED AMOUNTS ARE BAD DEBT EXPENSE. FOR PATIENTS WHO DO NOT AVAIL THEMSELVES OF ANY FREE CARE PROGRAM AND WHOSE ABILITY TO PAY CANNOT BE DETERMINED BY THE HOSPITAL, CARE GIVEN BUT NOT PAID FOR, IS CLASSIFIED AS CHARITY CARE. TOGETHER, CHARITY CARE AND BAD DEBT EXPENSE REPRESENT UNCOMPENSATED CARE. THE ESTIMATED COST OF TOTAL UNCOMPENSATED CARE IS APPROXIMATELY \$11.2 MILLION AND \$13.2 MILLION FOR THE YEARS ENDED SEPTEMBER 30, 2013 AND 2012, RESPECTIVELY. THE ESTIMATED COST OF UNCOMPENSATED CARE IS DETERMINED BY THE HOSPITAL'S COST ACCOUNTING SYSTEM. THIS ANALYSIS CALCULATES THE ACTUAL PERCENTAGE OF ACCOUNTS WRITTEN OFF OR DESIGNATED AS BAD DEBT VS. CHARITY CARE WHILE TAKING INTO ACCOUNT THE TOTAL COSTS INCURRED BY THE HOSPITAL FOR EACH ACCOUNT ANALYZED. THE ESTIMATED COST OF CHARITY CARE PROVIDED WAS \$5.8 MILLION AND \$8.1 MILLION FOR THE YEARS ENDED SEPTEMBER 30, 2013 AND 2012, RESPECTIVELY. THE ESTIMATED COST OF CHARITY CARE IS DETERMINED BY THE HOSPITAL'S COST ACCOUNTING SYSTEM. FOR THE YEARS ENDED SEPTEMBER 30, 2013 AND 2012, BAD DEBT EXPENSE, AT CHARGES, WAS \$14.7 MILLION AND \$14.0 MILLION, RESPECTIVELY. FOR THE YEARS ENDED SEPTEMBER 30, 2013 AND 2012, BAD DEBT EXPENSE, AT COST, WAS \$5.4 MILLION AND \$5.2 MILLION, RESPECTIVELY. THE BAD DEBT EXPENSE IS MULTIPLIED BY THE RATIO OF COST TO CHARGES FOR PURPOSES OF INCLUSION IN THE TOTAL UNCOMPENSATED CARE AMOUNT IDENTIFIED ABOVE. THE CONNECTICUT DISPROPORTIONATE SHARE HOSPITAL PROGRAM (CDSHP) WAS ESTABLISHED TO PROVIDE FUNDS TO HOSPITALS FOR THE PROVISION OF UNCOMPENSATED CARE AND IS FUNDED, IN PART, BY AN ASSESSMENT ON HOSPITAL

Part VI Supplemental Information

NET PATIENT SERVICE REVENUE. DURING THE YEARS ENDED SEPTEMBER 30, 2013 AND 2012, THE HOSPITAL RECEIVED \$2.8 MILLION AND \$4.6 MILLION, RESPECTIVELY, IN CDSHP DISTRIBUTIONS, OF WHICH APPROXIMATELY \$1.4 MILLION AND \$2.8 MILLION WAS RELATED TO CHARITY CARE. THE HOSPITAL MADE PAYMENTS INTO THE CDSHP OF \$12.1 MILLION FOR THE YEARS ENDED SEPTEMBER 30, 2013 AND 2012, RESPECTIVELY, FOR THE ASSESSMENT.

ADDITIONALLY, THE HOSPITAL PROVIDES BENEFITS FOR THE BROADER COMMUNITY WHICH INCLUDES SERVICES PROVIDED TO OTHER NEEDY POPULATIONS THAT MAY NOT QUALIFY AS POOR BUT NEED SPECIAL SERVICES AND SUPPORT. BENEFITS INCLUDE THE COST OF HEALTH PROMOTION AND EDUCATION OF THE GENERAL COMMUNITY, INTERNS AND RESIDENTS, HEALTH SCREENINGS, AND MEDICAL RESEARCH. THE BENEFITS ARE PROVIDED THROUGH THE COMMUNITY HEALTH CENTERS, SOME OF WHICH SERVICE NON-ENGLISH SPEAKING RESIDENTS, DISABLED CHILDREN, AND VARIOUS COMMUNITY SUPPORT GROUPS.

IN ADDITION TO THE QUANTIFIABLE SERVICES DEFINED ABOVE, THE HOSPITAL PROVIDES ADDITIONAL BENEFITS TO THE COMMUNITY THROUGH ITS ADVOCACY OF COMMUNITY SERVICE BY EMPLOYEES. THE HOSPITAL'S EMPLOYEES SERVE NUMEROUS ORGANIZATIONS THROUGH BOARD REPRESENTATION, MEMBERSHIP IN ASSOCIATIONS AND OTHER RELATED ACTIVITIES. THE HOSPITAL ALSO SOLICITS THE ASSISTANCE OF OTHER HEALTHCARE PROFESSIONALS TO PROVIDE THEIR SERVICES AT NO CHARGE THROUGH PARTICIPATION IN VARIOUS COMMUNITY SEMINARS AND TRAINING PROGRAMS.

PART III, SCHEDULE B, LINE 2 - COSTING METHODOLOGY:

IN ACCORDANCE WITH THE ESTABLISHED POLICIES OF THE HOSPITAL, DURING THE REGISTRATION, BILLING AND COLLECTION PROCESS A PATIENT'S ELIGIBILITY FOR FREE CARE FUNDS IS DETERMINED. FOR PATIENTS WHO WERE DETERMINED BY THE HOSPITAL TO HAVE THE ABILITY TO PAY BUT DID NOT, THE UNCOLLECTED AMOUNTS ARE BAD DEBT EXPENSE. THE HOSPITAL'S COST ACCOUNTING SYSTEM UTILIZES

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PATIENT-SPECIFIC DATA TO ACCUMULATE AND DERIVE COSTS RELATED TO THESE BAD DEBT ACCOUNTS.

PART III, LINE 8: THE ENTIRE MEDICARE LOSS PRESENTED SHOULD BE TREATED AS A COMMUNITY BENEFIT FOR THE FOLLOWING REASONS: THE IRS COMMUNITY BENEFIT STANDARD INCLUDES THE PROVISION OF CARE TO MEDICARE BENEFICIARIES, IRS REVENUE RULING 69-545 INDICATES THAT HOSPITALS OPERATE FOR THE PROMOTION OF HEALTH IN THE COMMUNITY WHEN IT PROVIDES CARE TO PATIENTS WITH GOVERNMENTAL HEALTH BENEFITS, THE ORGANIZATION PROVIDES CARE TO MEDICARE PATIENTS REGARDLESS OF MEDICARE SHORTFALLS (REDUCING THE BURDEN ON THE GOVERNMENT), AND MANY OF THE MEDICARE PARTICIPANTS WOULD HAVE QUALIFIED FOR THE CHARITY CARE OR OTHER MEANS TESTED PROGRAMS ABSENT BEING ENROLLED IN THE MEDICARE PROGRAM. THE MEDICARE SHORTFALL REPORTED IS DETERMINED BY THE HOSPITAL'S COST ACCOUNTING SYSTEM, TSI.

PART III, LINE 9B: IF AT ANY POINT IN THE DEBT COLLECTION PROCESS, THE HOSPITAL, INCLUDING ANY EMPLOYEE OR AGENT OF THE HOSPITAL, OR A COLLECTION AGENT ACTING ON BEHALF OF THE HOSPITAL, RECEIVES INFORMATION THAT A PATIENT IS ELIGIBLE FOR HOSPITAL BED FUNDS, FREE OR REDUCED PRICE HOSPITAL SERVICES, OR ANY OTHER PROGRAM WHICH WOULD RESULT IN THE ELIMINATION OF LIABILITY FOR THE DEBT OR REDUCTION IN THE AMOUNT OF SUCH LIABILITY, THE HOSPITAL OR COLLECTION AGENT WILL PROMPTLY DISCONTINUE COLLECTION EFFORTS AND, IF A COLLECTION AGENT, REFERS THE ACCOUNT BACK TO THE HOSPITAL FOR DETERMINATION OF ELIGIBILITY. THE COLLECTION EFFORT WILL NOT RESUME UNTIL SUCH DETERMINATION IS MADE.

GREENWICH HOSPITAL:

PART V, SECTION B, LINE 3: COMMUNITY ENGAGEMENT AND FEEDBACK WERE AN

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INTEGRAL PART OF THE CHNA PROCESS. GREENWICH HOSPITAL SOUGHT INPUT FROM PERSONS WHO REPRESENT THE BROAD INTERESTS OF THE COMMUNITY SERVED BY THE HOSPITAL THROUGH FOCUS GROUPS WITH COMMUNITY MEMBERS, KEY INFORMANT INTERVIEWS WITH COMMUNITY STAKEHOLDERS, AND INCLUSION OF COMMUNITY PARTNERS IN THE PRIORITIZATION AND IMPLEMENTATION PLANNING PROCESS. PUBLIC HEALTH AND HEALTH CARE PROFESSIONALS SHARED KNOWLEDGE AND EXPERTISE ABOUT HEALTH ISSUES, WHILE LEADERS AND REPRESENTATIVES OF NON-PROFIT AND COMMUNITY-BASED ORGANIZATIONS PROVIDED INSIGHT ON THE COMMUNITY SERVED BY GREENWICH HOSPITAL, INCLUDING MEDICALLY UNDERSERVED, LOW INCOME, AND MINORITY POPULATIONS.

GREENWICH HOSPITAL:

PART V, SECTION B, LINE 7: BASED ON THE FEEDBACK FROM COMMUNITY PARTNERS INCLUDING HEALTH CARE PROVIDERS, PUBLIC HEALTH EXPERTS, HEALTH AND HUMAN SERVICE AGENCIES, AND OTHER COMMUNITY REPRESENTATIVES, GREENWICH HOSPITAL PLANS TO FOCUS COMMUNITY HEALTH IMPROVEMENT EFFORTS ON THE FOLLOWING HEALTH PRIORITIES OVER THE NEXT THREE-YEAR CYCLE: ACCESS TO CARE, CANCER, MENTAL HEALTH AND PROMOTING HEALTHY LIFESTYLES. AREAS IDENTIFIED AS PART OF THE COMMUNITY HEALTH NEEDS ASSESSMENT NOT BEING ADDRESSED AS A RESULT OF A PRIORITIZATION PROCESS INCLUDE DENTAL CARE, DIABETES, HEART DISEASE, RESPIRATORY DISEASE AND STROKE.

GREENWICH HOSPITAL RECOGNIZES THAT PARTNERSHIPS WITH COMMUNITY AGENCIES HAVE THE BROADEST REACH TO IMPROVE COMMUNITY HEALTH ISSUES. AS SUCH, THE HOSPITAL IS PROVIDING FACILITATION SUPPORT FOR THE IMPLEMENTATION OF THE COMMUNITY-WIDE HEALTH IMPROVEMENT PLAN THAT WILL FOCUS ON ALL FOUR AREAS IDENTIFIED IN THE COMMUNITY HEALTH NEEDS ASSESSMENT.

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GREENWICH HOSPITAL:

PART V, SECTION B, LINE 14G:

THE FINANCIAL ASSISTANCE PROGRAM, WHICH SUMMARIZES THE FINANCIAL ASSISTANCE POLICY, WAS POSTED ON THE HOSPITAL FACILITY'S WEBSITE. THE FINANCIAL ASSISTANCE POLICY WILL BE POSTED ON THE WEBSITE UPON FILING THE FISCAL YEAR 2013 TAX FILING.

GREENWICH HOSPITAL:

PART V, SECTION B, LINE 20D: PRIOR TO BECOMING FAP-ELIGIBLE, ALL INDIVIDUALS ARE CHARGED STANDARD GROSS CHARGES. AFTER AN INDIVIDUAL IS DEEMED TO BE FAP-ELIGIBLE, ANY DISCOUNTS OR FREE CARE ASSISTANCE DISCOUNTS ARE APPLIED IN ACCORDANCE WITH THE FAP PROGRAM THE INDIVIDUAL QUALIFIES FOR. THE DISCOUNTS ARE ADJUSTED OFF THE PATIENT'S ACCOUNT WHICH IS ALSO REFLECTED IN THE INDIVIDUAL'S BILLING.

PART VI, LINE 2: COMMUNITY NEEDS ARE ROUTINELY REVIEWED AND ADDRESSED AS PART OF THE OPERATIONS AND SERVICE LINE TEAMS AT GREENWICH HOSPITAL. THESE MULTI-DISCIPLINARY GROUPS PROVIDE ANALYSIS AND INSIGHT INTO PATIENT UTILIZATION TRENDS ACROSS THE DELIVERY OF CARE AND ARE REVIEWED IN TANDEM WITH CARE MANAGEMENT AND PATIENT SATISFACTION RESULTS AND OTHER COMMUNITY FEEDBACK. COUPLED WITH THE RECENTLY COMPLETED COMMUNITY NEEDS ASSESSMENT, THIS INFORMATION ASSISTS WITH THE DEVELOPMENT OF NEW INITIATIVES, PARTNERSHIPS, PROGRAMS AND SERVICES TO BENEFIT OUR COMMUNITY.

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PART VI, LINE 3: PATIENTS WILL OBTAIN INFORMATION ON ELIGIBILITY FOR GOVERNMENT OR HOSPITAL PROGRAMS FROM INFORMATION DISTRIBUTED BY THE HOSPITAL. PATIENTS WILL BE ALERTED TO THE FINANCIAL ASSISTANCE PROGRAMS IN A NUMBER OF WAYS, INCLUDING NOTICES IN ENGLISH AND SPANISH POSTED IN APPROPRIATE LOCATIONS IN THE HOSPITAL, A SUMMARY OF FREE CARE AVAILABILITY AND INFORMATION ON HOW TO APPLY FOR FREE CARE (REFERRED TO AS THE "HOSPITAL'S NOTICE OF AVAILABILITY OF FUNDS"), INFORMATION DISTRIBUTED VIA MAIL AND / OR IN THE HOSPITAL'S ADMISSION PACKAGE, AND INFORMATION ON THE HOSPITAL'S WEB SITE. INFORMATION WILL ALSO BE PROVIDED WHEN DIRECT INQUIRIES ARE MADE TO GH. THERE IS ALSO ACCESS TO A TRANSLATION TELEPHONE. THE HOSPITAL WILL PROVIDE NOTICE AND INFORMATION IN A MANNER THAT (A) COMPLIES WITH THE REQUIREMENTS OF LAW, INCLUDING CONNECTICUT LAW CONCERNING HOSPITAL FUNDS, AND (B) IS DESIGNED TO MAKE INFORMATION EASILY AVAILABLE AND ACCESSIBLE TO ALL PATIENTS.

ALL PATIENTS WILL HAVE ACCESS TO INFORMATION REGARDING ESTIMATED CHARGES FOR PARTICULAR SERVICES OR ACTUAL CHARGES FOR HOSPITAL SERVICES THAT HAVE BEEN PROVIDED.

PART VI, LINE 4: GREENWICH HOSPITAL IS A 206-BED (INCLUDING BASSINETS) REGIONAL HOSPITAL, SERVING FAIRFIELD COUNTY, CONNECTICUT AND WESTCHESTER COUNTY, NEW YORK. IT IS A MAJOR ACADEMIC AFFILIATE OF THE YALE SCHOOL OF MEDICINE AND A MEMBER OF THE YALE NEW HAVEN HEALTH SYSTEM. SINCE OPENING IN 1903, GREENWICH HOSPITAL HAS EVOLVED INTO A PROGRESSIVE MEDICAL CENTER AND TEACHING INSTITUTION WITH AN INTERNAL MEDICINE RESIDENCY PROGRAM.

THE LOCAL GEOGRAPHIC AREA SERVED BY GREENWICH HOSPITAL INCLUDES THE CONNECTICUT TOWNS OF GREENWICH, DARIEN, NEW CANAAN AND STAMFORD AS WELL AS THE NEW YORK TOWNS OF PORT CHESTER, RYE, HARRISON, LARCHMONT AND

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MAMARONECK. APPROXIMATELY 29% OF HOUSEHOLDS HAVE INCOMES LESS THAN \$50,000, 42% OF HOUSEHOLDS HAVE INCOMES BETWEEN \$50,000 AND \$150,000 AND THE REMAINING 29% OF HOUSEHOLDS HAVE INCOMES GREATER THAN \$150,000. THE SECONDARY GEOGRAPHIC COVERAGE AREA OF THE HOSPITAL ENCOMPASSES A WIDE RANGE OF TOWNS INCLUDING NORWALK, WESTON, WESTPORT AND WILTON IN CONNECTICUT AND ARMONK, BEDFORD, HARTSDALE, KATONAH, MOUNT KISCO, MOUNT VERNON, NEW ROCHELLE, POUND RIDGE, PURCHASE, SCARSDALE, SOUTH SALEM, WEST HARRISON, AND WHITE PLAINS IN NEW YORK.

SEVERAL NON-PROFIT HOSPITALS ARE LOCATED IN THE AREA INCLUDING STAMFORD HOSPITAL AND NORWALK HOSPITAL IN CONNECTICUT IN ADDITION TO WHITE PLAINS HOSPITAL, WESTCHESTER MEDICAL CENTER, MONTEFIORE MOUNT VERNON AND MONTEFIORE NEW ROCHELLE IN NEW YORK.

GREENWICH HOSPITAL REPRESENTS ALL MEDICAL SPECIALTIES AND OFFERS A WIDE RANGE OF MEDICAL, SURGICAL, DIAGNOSTIC AND WELLNESS PROGRAMS. IN FISCAL YEAR 2013, THERE WERE 41,691 VISITS TO THE HOSPITAL'S EMERGENCY DEPARTMENT OF WHICH 6,421 BECAME INPATIENTS AND 35,283 WERE OUTPATIENTS. IN THAT SAME FISCAL YEAR, THE HOSPITAL'S INPATIENT VOLUME CONSISTED OF A DIVERSE PAYER MIX WITH 6 PERCENT MEDICAID PATIENTS, 50 PERCENT MEDICARE PATIENTS, 41 PERCENT MANAGED CARE AND COMMERCIAL PATIENTS AND 3 PERCENT SELF PAY OR OTHER PATIENTS.

PART VI, LINE 5: GREENWICH HOSPITAL, FOUNDED IN 1903, IS A 206-BED COMMUNITY TEACHING HOSPITAL THAT HAS EVOLVED INTO A PROGRESSIVE REGIONAL HEALTHCARE CENTER, AVERAGING MORE THAN 12,000 INPATIENT DISCHARGES AND NEARLY 300,000 OUTPATIENT ENCOUNTERS LAST YEAR. THE HOSPITAL OFFERS A WIDE RANGE OF MEDICAL, SURGICAL, DIAGNOSTIC, INTEGRATIVE MEDICINE AND WELLNESS PROGRAMS. SPECIALIZED SERVICES INCLUDE THE BENDHEIM CANCER AND BREAST CENTERS, ENDOSCOPY CENTER, LEONA M. AND HARRY B. HELMSLEY AMBULATORY

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MEDICAL CENTER, THE RICHARD R. PIVIROTTI CENTER FOR HEALTHY LIVING, AND THE GREENWICH HOSPITAL DIAGNOSTIC CENTER IN STAMFORD.

AS A COMMUNITY HEALTH CARE SERVICES PROVIDER, GREENWICH HOSPITAL REMAINS ATTENTIVE TO HEALTH AND WELL-BEING THROUGH EDUCATION, OUTREACH AND OTHER INNOVATIVE SERVICES. DURING FISCAL YEAR 2013, GREENWICH HOSPITAL MANAGED \$31.6 MILLION IN FINANCIAL AND IN-KIND CONTRIBUTIONS THROUGH FIVE WIDE-RANGING PROGRAMS - GUARANTEEING ACCESS TO CARE; PROMOTING HEALTH AND WELLNESS; ADVANCING CAREERS IN HEALTH CARE; RESEARCH; AND CREATING HEALTHIER COMMUNITIES. A SIXTH CATEGORY, BUILDING STRONGER NEIGHBORHOODS, WAS DISCUSSED PREVIOUSLY IN PART II.

GUARANTEEING ACCESS TO CARE

GREENWICH HOSPITAL RECOGNIZES THAT SOME PATIENTS MAY BE UNINSURED, NOT HAVE ADEQUATE HEALTH INSURANCE OR OTHERWISE LACK THE RESOURCES TO PAY FOR HEALTH CARE. IN FISCAL YEAR 2013, THE TOTAL COMMUNITY BENEFIT ASSOCIATED WITH GUARANTEEING ACCESS TO CARE WAS \$26.7 MILLION. HONORING ITS MISSION AND COMMITMENT TO THE COMMUNITY, THE HOSPITAL PARTICIPATES IN GOVERNMENT-SPONSORED PROGRAMS SUCH AS MEDICARE, MEDICAID, HUSKY, CHAMPUS AND TRICARE. DURING FISCAL YEAR 2013, GREENWICH HOSPITAL PROVIDED SERVICES FOR 22,841 MEDICAID BENEFICIARIES AT A TOTAL EXPENSE OF \$9.6 MILLION (AT COST). ADDITIONALLY, THE HOSPITAL ASSISTED OVER 1,030 CONNECTICUT AND NEW YORK PATIENTS WITH MEDICAID APPLICATIONS AND MEDICAID ELIGIBILITY QUESTIONS DURING FISCAL YEAR 2013.

GREENWICH HOSPITAL ALSO OFFERS A SLIDING SCALE OF DISCOUNTED FEES AND FREE CARE FOR ELIGIBLE PATIENTS. DURING FISCAL YEAR 2013, THE HOSPITAL DELIVERED SUCH FINANCIAL ASSISTANCE SERVICES FOR AT A TOTAL EXPENSE OF \$15.2 MILLION (AT COST). ALSO DURING FISCAL YEAR 2013, HOSPITAL STAFF DISTRIBUTED NEARLY 1,400 APPLICATIONS FOR HOSPITAL FREE BED FUNDS. THE FUNDS WERE DONATED TO GREENWICH HOSPITAL BY INDIVIDUALS OR TRUSTS TO BE

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USED FOR FINANCIAL ASSISTANCE TO PATIENTS WHOM PAYMENT FOR THEIR HOSPITAL SERVICES WOULD BE A FINANCIAL HARDSHIP.

GREENWICH HOSPITAL ALSO GUARANTEES ACCESS TO CARE BY PROVIDING CLINICAL PROGRAMS DESPITE A FINANCIAL LOSS SO SIGNIFICANT THAT NEGATIVE MARGINS REMAIN AFTER REMOVING THE EFFECTS OF FREE CARE, BAD DEBT AND UNDER-REIMBURSED MEDICAID. SUBSIDIZED HEALTH SERVICES INCLUDE THE OUTPATIENT CENTER® MEDICAL (INCLUDING DIABETES) AND BEHAVIORAL HEALTH CLINICS AND PEDIATRIC OUTPATIENT CENTER. EACH YEAR, MORE THAN 5,000 ADULTS AND CHILDREN VISIT THE OUTPATIENT CENTER AND PEDIATRIC OUTPATIENT CENTER FOR DIAGNOSIS, TREATMENT AND PREVENTIVE CARE.

GREENWICH HOSPITAL WAS ONCE AGAIN THE BENEFICIARY OF A GRANT FROM THE BREAST CANCER ALLIANCE TO PROVIDE FUNDING FOR FREE SCREENING AND DIAGNOSTIC MAMMOGRAM SERVICES FOR WOMEN WHO ARE UNINSURED OR UNDERINSURED. IN CALENDAR YEAR 2013, 253 UNINSURED WOMEN RECEIVED FREE SCREENING MAMMOGRAMS. AMONG THE WOMEN NEEDING FURTHER TESTING, 24 HAD FREE UNILATERAL DIAGNOSTIC MAMMOGRAMS, FOUR HAD FREE BILATERAL DIAGNOSTIC MAMMOGRAMS AND 29 RECEIVED FREE ULTRASOUND EXAMINATIONS. IN ADDITION, 178 NEWLY DIAGNOSED BREAST CANCER PATIENTS RECEIVED EDUCATION RESOURCE NOTEBOOKS WITH INFORMATION ABOUT LOCAL SUPPORT AND CANCER RESOURCES THAT CAN PROVIDE ASSISTANCE.

PROMOTING HEALTH AND WELLNESS

DURING FISCAL YEAR 2013, GREENWICH HOSPITAL PROVIDED \$810,260 IN COMMUNITY HEALTH IMPROVEMENT SERVICES, INCLUDING HEALTH EDUCATION PROGRAM, SUPPORT GROUPS AND HEALTH FAIRS. EXAMPLES OF THESE IMPORTANT SERVICES AND PROGRAMS ARE PROVIDED BELOW.

THE HOSPITAL LED THE COMMUNITY HEALTH IMPROVEMENT PARTNERSHIP, WHICH MEETS MONTHLY TO IDENTIFY COMMUNITY NEEDS AND IMPLEMENT HEALTH PROGRAMS AND RESOURCES. THE PARTNERSHIP ORGANIZED A HEALTH AND WELLNESS FAIR TITLED

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THE TEDDY BEAR REPAIR CLINIC, WHICH WAS HELD AT THE NEW LEBANON SCHOOL IN COLLABORATION WITH COMMUNITY PARTNERS, INCLUDING THE UNITED WAY, GREENWICH EMERGENCY MEDICAL SERVICE, GREENWICH POLICE DEPARTMENT, GREENWICH DEPARTMENT OF HEALTH, THE GREENWICH ALLIANCE, FAMILY CENTER, CHILD GUIDANCE AND THE HOUSING AUTHORITY OF THE TOWN OF GREENWICH. THE TEDDY BEAR REPAIR CLINIC PROVIDED FREE HEALTH SCREENINGS AND INFORMATION ABOUT AVAILABLE COMMUNITY RESOURCES TO MORE THAN 300 PARENTS AND THEIR CHILDREN.

TO PROMOTE AWARENESS ABOUT MENTAL HEALTH AND REDUCE THE STIGMA OF MENTAL ILLNESS, THE COMMUNITY HEALTH IMPROVEMENT PARTNERSHIP SPONSORED NATIONALLY RECOGNIZED SPEAKER JORDAN BURNHAM TO SPEAK AT TWO AREA SCHOOLS. MR. BURNHAM SHARED HIS EXPERIENCES AND CONDUCTED SUICIDE PREVENTION AND AWARENESS SEMINARS TO 350 STUDENTS. IN ADDITION, THE HOSPITAL OFFERED SEVERAL BEHAVIORAL HEALTH PROGRAMS THROUGHOUT THE YEAR ON A VARIETY OF TOPICS.

AS THE HOSPITAL'S OUTREACH DEPARTMENT, COMMUNITY HEALTH AT GREENWICH HOSPITAL AND COMMUNITY HEALTH OF FAIRCHESTER ARE DEDICATED TO IMPROVING THE HEALTH STATUS OF COMMUNITIES IN CONNECTICUT AND NEW YORK. BOTH ENTITIES MAINTAIN A STRONG COMMUNITY PRESENCE THROUGH THEIR NUMEROUS PARTNERSHIPS WITH THE YALE NEW HAVEN HEALTH SYSTEM, LOCAL AND REGIONAL COMMUNITY ORGANIZATIONS, SCHOOLS, GOVERNMENT AGENCIES, CORPORATIONS AND OTHER GREENWICH HOSPITAL DEPARTMENTS.

COMMUNITY HEALTH @ GREENWICH HOSPITAL AND COMMUNITY HEALTH OF FAIRCHESTER SUPPORT THE HOSPITAL'S MISSION TO PROVIDE A FULL CONTINUUM OF CARE BY OFFERING INNOVATIVE HEALTH SCREENINGS, SPEAKERS, SUPPORT GROUPS, SCHOOL PROGRAMS, HEALTH EDUCATION AND WELLNESS PROGRAMS DESIGNED TO PROMOTE

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HEALTH AND INCREASE ACCESS TO HEALTHCARE SERVICES.

OVER THE PAST YEAR, GREENWICH HOSPITAL PARTICIPATED IN MORE THAN 38 HEALTH FAIRS REACHING AN ESTIMATED 10,000 PEOPLE AT VARIOUS COMMUNITY SITES WITH THE GOAL OF INCREASING PEOPLE'S KNOWLEDGE AND HEALTH LITERACY. THE FAIRS WERE HELD AT PARKS, SCHOOLS, MULTI-HOUSING DEVELOPMENTS, HOUSES OF WORSHIP, YOUTH AND SENIOR CENTERS IN WESTCHESTER AND FAIRFIELD COUNTIES. PARTICIPANTS RECEIVED HEALTH SCREENINGS, INFORMATION AND EDUCATION ABOUT EXERCISE, HEALTHY HABITS AND BEHAVIORS, HAND WASHING AND HYGIENE, IMMUNIZATION, SUN SAFETY, CHOLESTEROL, STROKE, WEIGHT MANAGEMENT, NUTRITION, BREAST SELF-EXAMS, SMOKING CESSATION AND MORE. GREENWICH HOSPITAL STAFF OFFERED FREE BLOOD PRESSURE AND METABOLIC SCREENINGS ALONG WITH HEALTH EDUCATION AND COUNSELING ON HEALTHY LIVING. IN ADDITION, GREENWICH HOSPITAL PROVIDED MORE THAN 150 INDIVIDUALS WITH INFORMATION FROM VENDORS SPECIALIZING IN DIABETIC CARE AND CONDUCTED FREE DIABETES-RELATED HEALTH SCREENINGS AS PART OF A DIABETES HEALTH FAIR.

THE GREENWICH DEPARTMENT OF HEALTH, THE GREENWICH COMMISSION ON AGING AND GREENWICH HOSPITAL SPONSORED AN ANNUAL SENIOR HEALTH FAIR, WHICH OFFERED FREE HEALTH EDUCATION, SCREENINGS AND RESOURCE REFERRALS TO MORE THAN 500 OLDER ADULTS. IN ADDITION, 31 FREE CHOLESTEROL SCREENINGS WERE CONDUCTED AT THE EVENT. COMMUNITY HEALTH OF FAIRCHESTER PARTICIPATED IN THE WESTCHESTER COUNTY SALUTE TO SENIORS PROGRAM IN WHITE PLAINS, WHICH DREW MORE THAN 500 AREA RESIDENTS.

GREENWICH HOSPITAL, THROUGH THE NURSE IS IN PROGRAM, PROVIDED FREE BLOOD PRESSURE SCREENINGS AND HEALTH COUNSELING TO 4,542 PEOPLE AT LOCAL LIBRARIES, YMCAS AND SENIOR CENTERS IN CONNECTICUT AND NEW YORK. AN

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ADDITIONAL 2,054 FREE BLOOD PRESSURE SCREENINGS WERE CONDUCTED AT OTHER COMMUNITY SITES. THE HOSPITAL'S PARISH NURSE PROGRAM, A PARTNERSHIP WITH THE FIRST CONGREGATIONAL CHURCH OF GREENWICH, PROVIDES MORE THAN 2,000 CHURCH MEMBERS WITH HEALTH EDUCATION PROGRAMS, SUPPORT GROUPS, FLU SHOTS AND SCREENINGS ALL CONDUCTED OR COORDINATED BY A REGISTERED NURSE.

DURING FISCAL YEAR 2013, A TOTAL OF 91 MEN PARTICIPATED IN FREE PROSTATE CANCER SCREENINGS THAT INCLUDED A PSA (PROSTATE-SPECIFIC ANTIGEN) TEST, CONSULTATION AND EXAMINATION WITH AN UROLOGIST. THE UNIQUE EDUCATION AND SCREENING EVENT WAS SPONSORED BY GREENWICH HOSPITAL ALONG WITH WFAN RADIO SPORTS PERSONALITY ED RANDALL'S "FANS FOR THE CURE" PROGRAM.

THE HOSPITAL'S 15TH ANNUAL TEDDY BEAR CLINIC DREW 1,700 COMMUNITY MEMBERS FOR A DAY OF INTERACTIVE EDUCATION ON HEALTH AND WELLNESS. THE CLINIC EXPOSES CHILDREN AND THEIR FAMILIES TO HEALTHCARE PROFESSIONALS, MEDICAL PROCEDURES AND HOSPITAL DEPARTMENTS IN A FAMILY-FRIENDLY, RELAXED SETTING.

PART VI, LINE 5:

COMMUNITY HEALTH @ GREENWICH HOSPITAL WAS A MAJOR SPONSOR OF GREENWICH'S RELAY FOR LIFE, AN AMERICAN CANCER SOCIETY EVENT THAT BRINGS CANCER SURVIVORS TOGETHER TO CELEBRATE LIFE. THE EVENT RAISED APPROXIMATELY \$200,000 FOR THE AMERICAN CANCER SOCIETY. COMMUNITY HEALTH @ GREENWICH HOSPITAL PARTNERED WITH GREENWICH SCHOOLS, THE GREENWICH DEPARTMENT OF HEALTH, THE AMERICAN CANCER SOCIETY, GILDA'S CLUB AND THE BREAST CANCER ALLIANCE TO SPONSOR VARIOUS CANCER-AWARENESS EVENTS THAT PROVIDED EDUCATION ABOUT CANCER, AND THE IMPORTANCE OF EXAMS FOR EARLY DETECTION AND TREATMENT THERAPIES. THESE EVENTS INCLUDED GREENWICH THINKS PINK AND HANDS ACROSS THE AVENUE, WHICH DREW 550 WALKERS. GREENWICH HOSPITAL ALSO PARTICIPATED IN MAKING STRIDES AGAINST BREAST CANCER AND THE WESTPORT

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CANCER WALK AT SHERWOOD ISLAND.

SHED YOUR MEDS, AN ANNUAL PUBLIC SAFETY EVENT WHICH ENCOURAGES RESIDENTS TO GET RID OF UNWANTED OR EXPIRED MEDICATIONS, IS SPONSORED BY GREENWICH HOSPITAL, THE TOWN OF GREENWICH, THE GREENWICH POLICE DEPARTMENT, CONNECTICUT DEPARTMENT OF CONSUMER PROTECTION, THE SILVER SHIELD OF GREENWICH, GREENWICH YOUTH SERVICES COUNCIL, COMMUNITY AND POLICE PARTNERSHIP AND THE COMMUNITY HEALTH IMPROVEMENT PARTNERSHIP.

AS PART OF ITS OUTREACH MISSION, COMMUNITY HEALTH AT GREENWICH HOSPITAL OPERATES A SPEAKER'S BUREAU TO PROMOTE HEALTH EDUCATION AND AWARENESS IN THE COMMUNITY. IN 2013, GREENWICH HOSPITAL PHYSICIANS, NURSES, DIETICIANS, PHYSICAL THERAPISTS, SOCIAL WORKERS AND PHARMACISTS CONDUCTED FREE LECTURES AT LIBRARIES, SENIOR CENTERS, SCHOOLS, CORPORATIONS AND COMMUNITY SERVICES SUCH AS ROTARY CLUBS, 40/40 CLUB, YWCA AND YMCA IN THE CONNECTICUT AND WESTCHESTER COMMUNITIES. TOPICS INCLUDED DIABETES, STROKE, HEART ATTACK PREVENTION, BREAST, SKIN AND COLON CANCER AWARENESS, CHOLESTEROL REDUCTION, HEALTHY LIFESTYLES AND HABITS, HYGIENE, HEART HEALTH, IMMUNIZATION, NUTRITION, OSTEOPOROSIS, KNOWING YOUR NUMBERS, PARKINSON'S DISEASE, PROSTATE HEALTH, ROBOTIC SURGERY, SMOKING PREVENTION/CESSATION AND WEIGHT MANAGEMENT.

SUPPLEMENTAL INFORMATION

IN ADDITION TO THE ACTIVITIES DESCRIBED, GREENWICH HOSPITAL ALSO CONTRIBUTES TO THE COMMUNITY IN WAYS THAT ARE NOT QUANTIFIED AS PART OF THIS REPORT AND SERVES AS AN IMPORTANT COMMUNITY RESOURCE. THIS INCLUDES HAVING A COMMUNITY BOARD WITH MANY OF THE BOARD MEMBERS RESIDING OR

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WORKING IN THE TOWN OF GREENWICH AND OTHER MUNICIPALITIES SERVED BY THE HOSPITAL. THE HOSPITAL ALSO EXTENDS MEDICAL STAFF PRIVILEGES TO ALL QUALIFIED PHYSICIANS IN ITS COMMUNITY. IN FY 2013, 25 NEW PHYSICIANS JOINED THE MEDICAL STAFF, WHICH NOW TOTALS 545 MEMBERS.

UNDER THE LEADERSHIP OF ITS BOARD OF TRUSTEES AND THE SENIOR ADMINISTRATION, GREENWICH HOSPITAL ACHIEVED STRONG PERFORMANCE IN 2013. THE HOSPITAL ADDED VALUE TO ITS PATIENTS, PARTNERS AND COMMUNITY THROUGH IMPROVED PATIENT CARE, MANAGED COSTS AND ENHANCED REVENUE. HIGHLIGHTS OF THE YEAR AT GREENWICH HOSPITAL INCLUDED:

YALE-NEW HAVEN'S SMILOW CANCER HOSPITAL OPENED A NEW CAMPUS AT GREENWICH HOSPITAL THAT ALLOWS YALE CANCER CENTER SPECIALISTS TO WORK COLLABORATIVELY WITH LEADING ONCOLOGISTS AND SPECIALISTS FROM GREENWICH IN THE HOSPITAL'S ADVANCED AND NEWLY RENOVATED FACILITIES. YALE CANCER CENTER ALSO HAS NUMEROUS CLINICAL TRIALS AVAILABLE, MANY OF WHICH ARE NOW BEING OFFERED TO GREENWICH PATIENTS.

GREENWICH HOSPITAL OPENED A PEDIATRIC SPECIALTY CENTER SERVING THE NEEDS OF PEDIATRIC PATIENTS IN THE GREENWICH HOSPITAL SERVICE AREA. GENERAL PEDIATRIC CARE IS PROVIDED FIVE DAYS A WEEK. IN ADDITION, SPECIALISTS FROM YALE-NEW HAVEN CHILDREN'S HOSPITAL PROVIDE PEDIATRIC SPECIALTY CARE INCLUDING ENDOCRINOLOGY, PULMONOLOGY, GASTROENTEROLOGY AND ORTHOPAEDIC SPECIALTY SURGERY CONSULTATION SERVICES.

GREENWICH HOSPITAL CREATED AND IMPLEMENTED AN INNOVATIVE VIDEO SURVEILLANCE PROGRAM TO MONITOR PATIENTS AT HIGH RISK OF FALLING. IN THE ONE-YEAR PERIOD FROM JUNE 2012 TO JUNE 2013, GREENWICH HOSPITAL HAD OVER 1,600 PATIENTS IN THE PROGRAM, WITH ONLY ONE FALL, AND PREVENTED MORE THAN

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25,000 FALL OPPORTUNITIES. THE PROGRAM HAS RECEIVED NATIONAL ATTENTION.

COMMUNITY MEMBERS UTILIZE GREENWICH HOSPITAL AS A VEHICLE TO CONNECT AND CONTRIBUTE TO INDIVIDUALS AND THE OVERALL COMMUNITY THROUGH PHILANTHROPY AND VOLUNTEERING. IN FY 2013, 692 ADULT AND JUNIOR VOLUNTEERS DEDICATED A TOTAL OF 59,055 SERVICE HOURS TO THE HOSPITAL. VOLUNTEERS WERE PLACED IN MANY PATIENTS AND NON-PATIENT AREAS INCLUDING THE ED, PATIENT TRANSPORT/ESCORT, ONCOLOGY, SURGERY, PAIN MANAGEMENT, MATERNITY, NICU, HUMAN RESOURCES AND INFORMATION SERVICES.

PART VI, LINE 6: THE YALE NEW HAVEN HEALTH SYSTEM'S FUNDAMENTAL MISSION IS TO ENSURE THAT THE DELIVERY NETWORKS ASSOCIATED WITH THE SYSTEM PROMOTE THE HEALTH OF THE COMMUNITIES THEY SERVE AND ENSURE THAT ALL PATIENTS HAVE ACCESS TO APPROPRIATE HEALTHCARE SERVICES. THE YALE NEW HAVEN HEALTH SYSTEM REQUIRES ITS HOSPITALS TO INCORPORATE PLANS TO PROMOTE HEALTHY COMMUNITIES WITHIN THE HOSPITAL'S EXISTING BUSINESS PLANS FOR WHICH THEY ARE HELD ACCOUNTABLE. IN ADDITION, REGULAR REPORTING ON COMMUNITY BENEFITS IS REQUIRED ON A QUARTERLY BASIS.

PART VI, LINE 7, LIST OF STATES RECEIVING COMMUNITY BENEFIT REPORT:

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