

PARTNERS HEALTHCARE COMMUNITY BENEFITS OVERVIEW

Community Benefit Mission

Since its inception ten years ago in 1994, Partners Healthcare¹ has continued, and expanded, the long tradition of community commitment that is at the heart of each of its institutions. Focusing on their specific communities and populations, each entity's community commitments are consistent with the system's community benefit mission, adopted by the Partners Board of Trustees in January 1995:

Partners is committed to working with community residents and organizations to make measurable, sustainable improvements in the health status of underserved populations.

Partners not only has a commitment to long term organizational and financial investment in programs, but also to a deep engagement with communities to listen, learn, and engage in continuously improving collaborations.

While maintaining their unique identities, the hospitals and health centers of Partners HealthCare share a systemwide vision dedicated to improving the health of underserved populations and working with communities to address priority needs. This commitment has three distinct components:

- Provide access to quality care regardless of patients' ability to pay, insurance status, or other potential barriers to care

¹ Founded by Brigham and Women's Hospital and Massachusetts General Hospital, Partners HealthCare comprises:

- Brigham and Women's Hospital (BWH)
- Faulkner Hospital
- Massachusetts General Hospital (MGH)
- North Shore Medical Center (NSMC), including Salem Hospital, North Shore Children's Hospital, Union Hospital (Lynn) and Shaughnessy-Kaplan Rehabilitation Hospital
- Newton-Wellesley Hospital
- McLean Hospital
- Partners Continuing Care including Spaulding Rehabilitation Hospital Network, Partners Home Care, and the Rehabilitation Hospital of the Cape and Islands (RHCI)
- MGH Institute of Health Professions
- Associated physician groups and the community-based doctors and hospitals of Partners Community HealthCare (PCHI)

Partners is developing an integrated health care delivery system throughout the region that offers patients a continuum of coordinated high-quality care. Each of the Partners entities, with its associated physician groups, files a community benefit report according to guidelines promulgated by the Massachusetts the Office of the Attorney General. This overview provides summary information on systemwide community benefit initiatives.

- Collaborate with underserved communities to make measurable, sustainable improvements in health status, focusing on issues the communities identify as priorities
- Support community health centers in their efforts to provide community-focused, cost-effective, highly accessible care

Ten Years of Commitment to the Community

As Partners nears its ten-year anniversary, the community benefit mission of its hospitals and doctors has resulted in the following:

A Commitment to Caring for Uninsured and Medicaid Patients

Partners HealthCare has maintained its commitment to providing care for the uninsured and for children and adults on Medicaid. During the past ten years, Partners hospitals have provided nearly \$700 million in uncompensated care. In addition, care for patients on Medicaid was provided at a total ten-year loss of nearly \$500 million, because, throughout this period, Medicaid reimbursement did not cover hospital costs. In FY2003, only 57 percent of costs were covered by Medicaid reimbursement for the 85,000 children and adults on Medicaid cared for at Partners hospitals and health centers.

In FY2003, Partners HealthCare provided care for almost 28,000 uninsured patients. In that year, MGH and BWH were the top two private providers of care to the uninsured in the state of Massachusetts. Since last year, Partners hospitals and doctors have experienced a \$33.1 million increase (after reimbursements from the uncompensated care pool) in the cost of caring for patients covered by the uncompensated care pool with total FY2003 net costs at \$99.8 million.

Of the \$33.1 million, MGH and BWH represent \$23.6 million of the increase. Of that amount:

- Nearly half is due to increases in patient volume and utilization.
- Another third is related to state government reductions that shift costs to hospitals as cuts to MassHealth and eligibility restrictions moved Medicaid patients into the free care pool.
- The rest is related to individuals who lost their private (non-Medicaid) insurance in the past year, in part due to employment losses and the economy.

The remaining \$9.5 million of the increase is primarily at North Shore Medical Center (Union and Salem Hospitals) and was mainly caused by of increases in the number of free care patients.

A Commitment to Community Hospitals

Union Hospital in Lynn, Faulkner Hospital in Jamaica Plain, and Newton-Wellesley Hospital were facing severe financial challenges prior to joining Partners HealthCare. Today, all three hospitals are financially stable, and have been able to significantly expand services to the community, including new facilities, increased psychiatry and mental health services, improved outpatient services, interpreters, services for victims of domestic violence, school educational and health partnerships, and enhanced access to state of the art specialty care for their patients.

In an especially important example, North Shore Medical Center (NSMC) is now in the sixth year of a comprehensive effort in collaboration with the Lynn Health Task Force and the Lynn Community Health Center, to improve services available for low income residents of the city of Lynn. This commitment began when Union Hospital became part of NSMC in 1997.

In another important example, Newton-Wellesley Hospital's current financial stability made it possible to provide urgent care services in the community of Waltham, upon the closing of its community hospital.

A Commitment to Community Health Centers

In 1994, a total of five community health centers (CHCs) were licensed by Partners hospitals. Today, a total of 21 community health centers are licensed or affiliated with Partners HealthCare, and some 200,000 CHC patients each year have access to Partners hospitals.

Community health centers licensed and operated by Partners hospitals are:

- BWH Brookside Community Health Center
- BWH Southern Jamaica Plain Health Center
- MGH Back Bay HealthCare Center
- MGH Charlestown HealthCare Center
- MGH Chelsea HealthCare Center
- North End Community Health Center
- MGH Revere HealthCare Center

Community health centers affiliated with Partners are:

- Codman Square Health Center
- Dorchester House Multi-Service Center
- East Boston Neighborhood Health Center
- Geiger-Gibson Community Health Center
- Harbor Family Health Center (formerly Mary Ellen McCormack Health Center)
- Lynn Community Health Center
- Martha Eliot Health Center
- Mattapan Community Health Center

- Neponset Health Center
- Salem and Peabody Family Health Centers
- South Boston Community Health Center
- South End Community Health Center
- Upham’s Corner Health Center
- Whittier Street Health Center

The goal of Partners work with community health centers is to develop and maintain community-based partnerships to positively impact access to care, public health, and clinical prevention needs in urban neighborhoods.

The affiliated community health centers may be independent or licensed through another hospital, but they all work with Partners and its hospitals to achieve a number of key public health and operational goals. Partners supports the affiliations in a variety of ways, including on site clinical services, provision of direct operating support and capital grants, technical assistance, and program development.

By supplementing health center patient service revenue and grant revenue, the unrestricted financial support provided by Partners HealthCare helps health centers serve patients effectively and efficiently, and improves access to care. Whether providing funding for public health and outreach programs or improving systems so that providers can spend more of their time seeing patients, Partners is one of several private organizations, along with the city of Boston, and state and federal governments, that helps to provide the infrastructure that health centers require to be able to carry out their mission. Partners works closely with the Massachusetts League of Community Health Centers in providing this support.

Currently, a number of collaborative efforts are underway to improve health care delivery at the community level. For example:

- **Improving Access.** At the Martha Eliot Health Center, Partners supports increased case management services, including a bilingual nurse who helps diabetic patients manage their disease. Partners also provides support for a Spanish-speaking patient liaison, a case manager, and a nurse practitioner for routine care, enabling more physicians to be available for more complex care needs.
- **Building Capacity through Professional Development.** The Partners Management Training program is a pilot program with four affiliated community health centers. Working closely with health center human resources directors, Partners provides professional development courses to health center employees. Courses taught at the health centers have included: Coaching Your Employees to Grow, Time Management, Corrective Action, and Civil Treatment. These classes provide an inexpensive, easy way for CHC staff to access staff development training that may otherwise be unavailable to them. Since the program started in FY2002, 164 health center employees have attended these professional development courses.

- **Collaborative Clinical Improvement.** Partners is working with a group of affiliated and licensed health centers to identify best practices in tracking and following up on abnormal mammograms. The Abnormal Mammogram Tracking Initiative (AMTI) will identify best practice components and make recommendations on how to improve the health centers' follow-up and tracking systems.
- **Clinical Trials.** Partners has been working to bring clinical trials focusing on chronic diseases to community health center populations. The Upham's Corner Health Center is the first site to participate in this pilot. Partners Research and Education Program (PREP) has provided staff training and other technical assistance associated with the start-up to the health center.
- **Public Health Programs.** Funding from Partners helps to fund a wide range of health center public health initiatives to improve care and make lasting improvements in the health status of health center patients and community residents. For example, at the Upham's Corner Health Center, Partners provides support for four distinct public health programs.

During the past ten years, Partners HealthCare has invested more than \$175 million in community health centers' infrastructure, programming and operations, and has helped a dozen health centers relocate, re-build, or modernize.

A Commitment to Cancer Prevention and Care for Low Income Women

Through partnerships with community health centers, state and city government, Dana-Farber Cancer Institute, and the Avon Foundation, Partners HealthCare has helped enable several thousand low income, uninsured, and non-English speaking women to have easy access to routine annual cancer screening, coordinated treatment, follow-up care and support services. From annual Pap tests and mammography, to patient navigators who help women coordinate follow-up tests -- and treatment -- for cancer, to Spanish speaking support groups for cancer survivors, Partners HealthCare has a comprehensive effort in place to improve access and help prevent disparities in cancer care for low income women in underserved communities.

Since the program's inception in 1998, several thousand uninsured women have received free mammography and cervical cancer screening. For many of these women, the program provided their first Pap test or mammogram. Last year, 1,450 women were screened through the Partners program.

A Commitment to Women and Children Affected by Domestic Violence

Studies show that as many as 25 percent of women who come to hospital emergency rooms are there for reasons related to domestic violence. Three Partners hospitals, BWH, MGH, and NSMC, provide comprehensive services for victims of domestic violence. In addition to meeting the medical needs of survivors, hospital and health center-based domestic violence advocates help women obtain emergency shelter, protection through

law enforcement and the courts, and develop safety plans for themselves and their children. Advocates have assisted nearly 4,000 adult survivors and provided training for nearly 5,000 physicians, nurses, other caregivers, and staff to enable them to recognize and respond to victims. MGH research shows that women served through its domestic violence program, HAVEN, have fewer emergency room visits and more primary care. Partners advocates also intervene and provide mental health services to children who have witnessed or been victimized by violence at home or on the street. In Chelsea, mental health clinicians accompany police officers to domestic violence calls, and work with children at the scene.

A Commitment to Reduce Infant Mortality and Improve the Health of Low Income Women

Brigham and Women's Hospital is the state's largest birthing hospital, and it plays a unique role in developing and implementing innovative women's health programs. Women's health is viewed as more than a service of primary, obstetric, and specialty care for women's reproductive health and other medical problems, but as a way to ensure healthy families and thus healthy communities. Women from low income neighborhoods who are also disadvantaged by their educational status, language, employment, economic status, immigrant status, or race, face significant barriers to maintaining their health and that of their families. Promoting programs that improve the health of women through health, social support, educational opportunities, and employment fosters healthier families and healthier communities.

In the high-need communities of Jamaica Plain, Roxbury, and Mattapan, health care professionals funded by Partners HealthCare work to prevent infant deaths and improve the health of poor women by addressing the social and medical needs of pregnant women and their children. Caregivers ensure that pregnant women have access to regular prenatal care, proper nutrition, interpreter services, and culturally sensitive care. They help women apply for Medicaid and housing assistance, as well as mental health and other social services, including protection from domestic abusers.

In Revere, first time parents have routine, frequent contact with health care professionals who help encourage healthy development in children up to age five. In Chelsea, a home visiting nurse helps mothers and babies at risk to stay healthy.

A Commitment to the Health of Adolescents

With three school-based health centers in Chelsea, Revere, and Jamaica Plain, as well as programs to prevent substance abuse, reduce violence, and provide employment opportunities for teenagers, Partners is committed to improving the health of adolescents. In South Boston, Partners supports the South Boston Community Health Center and other community agencies, which are collaborating to tackle the problem of substance abuse among adolescents.

One example of an in-depth, long term effort in adolescent health is Revere CARES, a coalition involving the MGH Revere HealthCare Center, schools, law enforcement, human service organizations, business, and the faith community. The coalition works to reduce alcohol and substance abuse among youth. Founded in 1997, Revere CARES has succeeded in mobilizing the community to send clear and consistent messages to young people about the risks of alcohol and substance abuse, expanding prevention programs, and developing positive alternative activities for teens. The coalition has helped to create more after-school activities, a youth group, a summer jobs program, a community awareness campaign, and a summer kayaking program on Revere Beach. Revere CARES has also established a Strengthening Families Program with a local mental health provider, designed to help young people ages ten to 14 and their parents communicate better and work to reduce family-related risk factors associated with problem behaviors among youth.

In addition, while many health care providers have retreated from providing intensive inpatient mental health services for children, Partners has opened new residential beds for adolescents at McLean Hospital, and expanded inpatient services for children and adolescents at North Shore Medical Center.

A Commitment to Economic Opportunity

Educational partnerships with public schools in Boston and other communities have succeeded in enhancing science education and providing part-time jobs for middle school students. The Partners in Discovery program pairs doctors, nurses, researchers, and other health care professionals with students in five Boston middle schools, building upon a continuing, successful science mentoring partnership between MGH and the Timilty Middle School in Roxbury which began in 1989. Partners in Discovery is expected to serve 2,000 students in the upcoming year.

In 2003, Partners and community organizations were awarded a three-year, \$1 million grant to increase education and skills training for 500 new and incumbent health care workers, and to develop new and innovative ways to help low income Boston residents advance to skilled professional jobs in nursing, radiology technology, and other allied health fields where there are severe shortages of skilled workers. Partners applied for the grant from the Boston Workforce Development Initiative, a funding partnership comprised of local and national foundations, city and state government, and led by the Boston Foundation and the city of Boston. The funded program is a collaboration of Partners hospitals and community organization, including the MGH, BWH, Spaulding Rehabilitation Hospital, MGH Institute of Health Professions, Jewish Vocational Service, WorkSource Partners, Whittier Street Health Center, Project HOPE/Transition to Work, the Urban League of Eastern Massachusetts, Bunker Hill Community College, Mass Bay Community College, Roxbury Community College, and the Massachusetts Board of Higher Education.

A Commitment to Global Health

In September 2001, BWH created the Division of Social Medicine and Health Inequalities (DSMHI) to address health disparities through training, education, research, and service. Headed and co-founded by Paul Farmer, MD, PhD, a world-renowned authority on infectious diseases, the Division trains doctors and other health care professionals who work both locally and globally. The Division has achieved significant success with research and clinical innovations in the fields of HIV and tuberculosis. That work has been used to develop clinical guidelines and treatment manuals to guide the work of the World Health Organization, and other organizations committed to global health equity.

A Commitment to High Quality Health Care for All

At the vanguard of health care practice is telemedicine, where technology eliminates the geographical boundaries to quality health care. Partners is a leader in this technological and health care delivery revolution, and, now in its eighth year of development, has demonstrated that telemedicine is a viable and cost-effective solution to solving the quality chasm and creating a health care system for the 21st century.

Closer to home, Partners Telemedicine is working with MGH doctors volunteering their services at the Boston Health Care for the Homeless Program (BHCHP). At the Barbara McInnis House, a pilot telemedicine application is planned in the field of dermatology. The program will provide prompt access to high quality specialty care, and lay the groundwork for expanded clinical and educational services between Partners clinicians and BHCHP.

Measuring the Commitment

One way to measure the commitment of Partners hospitals to the community is by the amount spent on health care services and programs. There are several methods for calculating the contribution an institution makes, from the neighborhood level to the broader societal level. The state Attorney General's office provides guidelines for calculating community benefit spending. According to these guidelines, Partners hospitals contributed more than \$150 million in FY2003. This amount represents nearly six percent of total patient care-related expenses.

Components of Partners FY2003 Community Commitment (in \$ Millions)

Compiled According to the Attorney General Guidelines

Community Benefit Programs		
Direct Expenses		
	Program Expenses	8.8
	Health Center Subsidies (Net of Uncompensated Care)	37.8
	Grants for Community Health Centers	1.4
Associated Expenses		N/A
DoN Expenses		1.6
Employee Volunteerism		N/A
Other Leveraged Resources		
	Grants Obtained	4.7
	Doctors Free Care	11.5
Net Charity Care (Shortfall plus Assessment)		85.7
Corporate Sponsorships		N/A
Total per AG Guidelines		151.5

Note: Where N/A is reported, it should be noted that although amounts are not available for reporting, Partners hospitals, health centers, and physicians provide substantial contributions.

Another approach to measuring community benefit spending is to consider additional components of spending or revenue loss, such as:

- Losses on care provided to Medicaid patients, measured as the difference between the cost of care and the amount Medicaid pays for that care
- Physician-provided bad debt for non-emergency care, and physician losses on Medicaid reimbursements
- Patient bad debt for non-emergency care
- Payments made to communities through linkage, in lieu of tax, and tax payments
- Unpaid costs of graduate medical education

Components of Partners FY2003 Community Commitment
(in \$ Millions)
Compiled According to a Broader Definition

Community Benefit Programs			
Direct Expenses			
		Program Expenses	8.8
	Health Center Subsidies (net of UC and Medicaid Loss)		28.9
		Grants for Community Health Centers	1.4
	Associated Expenses		N/A
	DoN Expenses		1.6
	Employee Volunteerism		N/A
	Other Leveraged Resources		
		Grants Obtained	4.7
		Doctors Free Care	11.5
Net Uncompensated Care – Hospitals			88.3
(Shortfall plus assessment net of Insurer Contributions)			
Bad Debt (at Cost)			
		Hospitals	20.6
		Doctors	20.7
Medicaid Loss (at Cost)			
		Hospitals	98.4
		Doctors	16.2
Unreimbursed Expenses for Graduate Medical Education			90.7
Linkage/In Lieu/Tax Payments			5.4
Total Broader Definition			397.2

Note: Where N/A is reported, it should be noted that although amounts are not available for reporting, Partners hospitals, health centers, and physicians provide substantial contributions.

Using this approach, spending by Partners hospitals was nearly \$400 million in FY2003, more than 14 percent of total patient care-related expenses by the hospitals in that year.

Contact Information

For questions about this report, or for more information about Partners HealthCare community benefit activities, please contact:

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