

SUMMARY OF COMMUNITY BENEFITS PROVIDED BY: DeTar Healthcare System 1st Quarter 2014

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Background

DeTar Healthcare System provides healthcare services to residents of Victoria and surrounding counties, including inpatient and outpatient services in Victoria, health-centered educational opportunities, and a variety of community services. DeTar Healthcare System has two hospitals in Victoria, Texas. One is a general acute care facility, and the other is predominantly Women's and Children's focused, but it also has a psychiatric inpatient program for geriatric patients. We serve eight counties in South Texas. In the first quarter we began collaborating with the local FQHC for our chronic disease program. These shared patients are seen within the FQHC and are not charged for our services. The Pre-natal clinic has expanded to several counties in past quarters and we have begun working more intensively with local community organizations, such as WIC or pregnancy crisis centers, in an effort to improve delivery outcomes. Our IOP has flourished and we have seen an increase in enrollment.

Community Services Provided by DeTar Healthcare System

DeTar Healthcare System provides a significant amount of uncompensated care to residents of Victoria and surrounding counties. In the first quarter of 2014 uncompensated care consisted of \$2,890,473 in charity write-offs, \$5,574,312 in self-pay write-offs, and \$11,689,893 in bad debts. The hospital also had Medicaid revenue of \$34,875,880.

DeTar Healthcare System recognizes the need to provide emergency services to all, including low-income and needy patients. We provide these regardless of patient ability to pay. We are a higher level of care than many surrounding hospitals, so we also provide care to low-income and needy patients who are transferred in from other facilities. As a result 29% of the 10,089 visits to our emergency departments in the first quarter of 2014 were charity, self-pay, or Medicaid patients. The breakdown of these visits includes:

| Dera Navarro Emergency Department (Lever m/ 1) QTX 2014 | | |
|---------------------------------------------------------|--------------------|--|
| Financial Class | Number of patients | |
| Self-Pay | 1,718 | |
| Medicaid | 1,212 | |
| Combined Visit Total | 2,930 | |
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DeTar Navarro Emergency Department (Level III) 1st QTR 2014

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|-----------------------------|--------------------|----------|--|--|---|
| Financial Class | Number of patients | | | | |
| Self-Pay | 749 | | | | |
| Medicaid | 1,998 | | | | |
| Combined Visit Total | 2,747 | | | | |
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DeTar North Women's and Children's Emergency Department (Level IV)

DeTar is a community leader in obstetrics with emphasis on early prenatal care. We recognize that the state infant mortality rate exceeds 5% each year and DeTar is focused on reducing this rate. DeTar has supported Victoria Community Mother Child clinic which is designed for prenatal care for anyone. There is no waiting time for Medicaid eligibility and ability to pay is not a factor. Other maternity clinics are being opened in third quarter in other counties as part of the DSRIP program. Fifty-seven percent of our OB related admissions in the first quarter were self-pay or Medicaid patients. The breakdown for the first quarter 2014 includes:

Obstetrics - Deliveries

| Financial Class | Number of patients | |
|-----------------|--------------------|--|
| Self-Pay | 7 | |
| Medicaid | 178 | |
| Other | 139 | |
| Total | 324 | |

DeTar has a hospitalist program that provides inpatient treatment to patients who often have no primary care provider, very often because they lack financial resources to pay for care. These patients come through the Emergency Department or they are referred from surrounding towns because they need a higher level of care than a smaller hospital can provide. To expedite transfers and avoid treatment delays, DeTar established a one-call transfer line that eliminates any potential barriers for the transferring hospital. The hospitalists provide inpatient care as needed to all payer sources and also assure each patient has a follow-up appointment. This requires significant effort because the majority of practices in this area exclude self-pay and/or Medicaid patients. The hospitalists also have social services arrange for outpatient prescriptions on discharge if the patient cannot afford these. By having a follow-up appointment close to discharge and medications filled, the likelihood of preventable readmissions is decreased. As a DSRIP effort we have opened a chronic care clinic in Victoria and Lavaca Counties and will open clinics in Goliad, Jackson, and Refugio counties in 2014. In addition, we call our inpatients within a few days of discharge to assure they understood their discharge instructions, had prescriptions filled, and know the date and time of their appointment. For the first quarter of 2014, 49% of the Hospitalists patients (inpatients and observation patients) were either self-pay indigent or Medicaid insured.

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Hospitalists

| Financial Class | Number of patients |
|-------------------------|--------------------|
| Self-Pay (Observations) | 39 |
| Medicaid (Observations) | 28 |
| Self-Pay (Inpatients) | 76 |
| Medicaid (Inpatients) | 77 |
| Total | 220 |

In addition to providing care at the hospital regardless of ability to pay, DeTar Healthcare System provides many community health services. Some of these initiatives in fourth quarter 2013 included:

- Monthly diabetes management education at a "Lunch Bunch" seminar
- Support groups provided for:
 - o Persons who have had bariatric surgery in Victoria and Jackson County
 - o Diabetes support group
 - Insulin pump support group
 - o Stroke support group
- Publish nutritional advice column weekly in The Victoria Advocate newspaper.
- Provide CPR instruction for community at large and upon request.
- Regularly scheduled Lamaze classes for the community
- Provide DeTar leaders to serve on Board of Directors/Advisory Boards for
 - o Victoria Economic Development
 - o Performing Arts Center
 - The Victoria College health programs (LVN, RN, PT, MLT)
 - South Texas Board of Nursing Excellence
 - Texas Organization of Nurse Executives
 - Wharton Junior College Advisory Board for Radiologic Technology
 - Hospice of South Texas
 - Victoria Chamber of Commerce
 - o The University of Houston Victoria Presidents Advisory Board
 - o Gulf Bend Mental Health Center Advisory Board
 - o Texas Workforce Advisory Board
 - o VISD Health and Science Programs
 - o United Way Allocation Board
 - Victoria Educational Foundation
- Provide quarterly education programs to community groups on stroke prevention, recognition of signs and symptoms, and interventions
- Provide quarterly education programs to communities on heart care, recognition of early heart attack symptoms, and interventions
- Work with Victoria Fire Department Critical Care Partnership
- Golden Crescent Hurricane and Disaster conference planning committee
- Sponsor monthly Lunch and Learns for Senior Circle program; Health focused meetings
- Present monthly Healthy Woman education programs

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- Work with EMS in Victoria and surrounding communities to continually improve emergency care. Tools include case review, performance improvement, and STEMI performance/process improvements.
- Provided education to approximately 75-volunteers on safety while in the hospital and steps toward high reliability organization.
- Through our chronic care clinic, IOP, and maternity clinics as outlined in DSRIP plans provided access of care regardless of payment ability. Goal is to reduce readmissions, teach patients to care for their chronic diseases, and encourage early prenatal care, follow-up care, and reduce low birth weight deliveries. The IOP helps support those with behavioral disorders and prevent their inappropriate use of emergency departments and/or jail incarcerations.
- DeTar also supported our community of elementary, mid-level, and high school students who participate in 4-H. We participate in the Livestock show and purchase animals that they have raised to encourage ongoing responsibility and interest in this endeavor.

Expenditures

In order to continually meet the needs of our community DeTar Healthcare System provides resources that will maintain the highest possible care to our citizens. During this quarter we have:

| Information Systems | Began implementing CPOE within the hospital Fully implemented AMR in outreach clinics |
|------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Construction | DeTar continued the process of expanding its Emergency Department on the Navarro campus DeTar began the process of constructing a new Family Medicine Residency clinic. This new clinic will meet all the ACGME requirements and implement new ideas in regard to patient flow |
| Equipment | Began the process of adding an additional Davinci Robot to out Surgical Services. |
| Awards | • Received Joint Commission Top Performer on Key Quality Measures for the second consecutive year. |

Physician

Recruitment In the 4th quarter of 2013, DeTar began the recruitment of the following:

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- One psychiatrist
- One CV Surgeon
- Second Faculty member for the Family Medicine Residency Program

Community

DeTar hosts a community advisory group of approximately 12 members of Victoria and surrounding counties who advise us on the health needs that need to be met. They are integral in the planning of health care and participate in our strategic planning every year.

DeTar Healthcare System works closely with EMS and participates in clinical case review. As a Level III Trauma Center we continually seek opportunities to improve care.

DeTar hosted approximately 30-high school students involved with AHEC to help them determine a future career in medicine. They are given the opportunity to see and experience the various medical opportunities available to them as career choices. This encourages ongoing replacement of health care workers as they leave this area or retire from medical positions.