



Always There *... for Patients & Community*

N.J. Hospitals Community Benefit Report 2022
(representing 2020 data)

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A hospital's commitment to its community extends far beyond medical care and jobs (although both are certainly substantial.) The blue H in your town or city symbolizes access, stability, a center for wellness and healing and a **community anchor** always there to support and protect patients and residents.

This commitment is demonstrated in numerous ways: free and discounted healthcare services to the poor, aging and uninsured; health improvement programs like immunization clinics and screenings; partnerships with schools, faith-based groups and other community institutions; education and training for the next generation of physicians and nurses. These programs **help relieve government's burden** while also fulfilling the healthcare mission of building healthy communities.

This commitment is demonstrated in historic fashion in hospitals' unprecedented response to the COVID-19 public health emergency. From rapidly building new patient units, to opening pop-up testing sites, to mounting the greatest community vaccination effort in history, hospitals' unwavering commitment to the health of New Jerseyans **helped save nearly 150,000 lives** – and counting – in the COVID-19 crisis.

The value of these extraordinary efforts is impossible to fully quantify in an accounting of "community benefit." This report reflects **\$3.4 billion** in measurable community benefit support by New Jersey hospitals in 2020, spanning areas such as free care to the poor and vulnerable to efforts to address social determinants of health. However, hospitals' efforts to protect their communities in the pandemic are beyond measure.

Highlights

New Jersey hospitals provided **\$3.4 billion in community benefits in 2020**, according to standardized community benefit reporting definitions by the Catholic Healthcare Association. That total reflects programs and services in four main areas:



Unpaid Costs of Patient Care, which includes charity care services for the uninsured, the unpaid costs of treating Medicare and Medicaid patients and the costs of other care delivered without payment.
(\$2 billion)



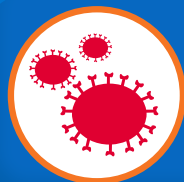
Community Health Improvement Services, which includes a range of prevention, wellness and other services such as health screenings, clinics and nutrition programs.
(\$43.2 million)



Health Professions Education, which includes continuing education to support and develop today's employees plus graduate medical education to train the next generation of healthcare professionals
(\$224.1 million)

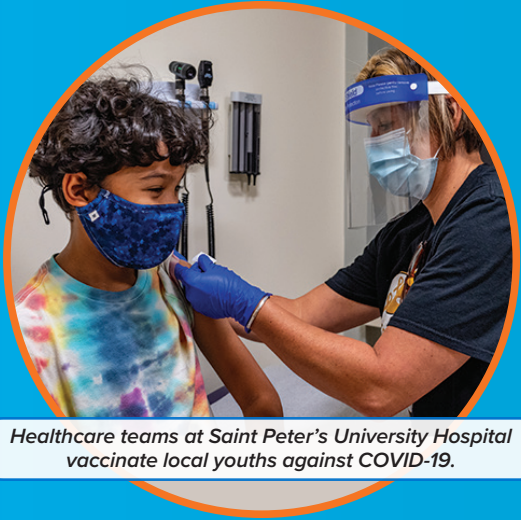


Other Community Benefit Services and Programs, which include initiatives that may not be directly related to healthcare but address a unique community need – such as investments in housing, local safety partnerships and contributions toward municipal services.
(\$1.2 billion).



The COVID-19 response occurred simultaneously with these traditional community benefit activities. The total does not reflect hospitals' contributions in expanding hospital capacity; establishing testing sites; developing new treatments; collecting data and outbreak surveillance; educating the public; and administering millions of vaccine doses at hospital locations and state mega-sites.

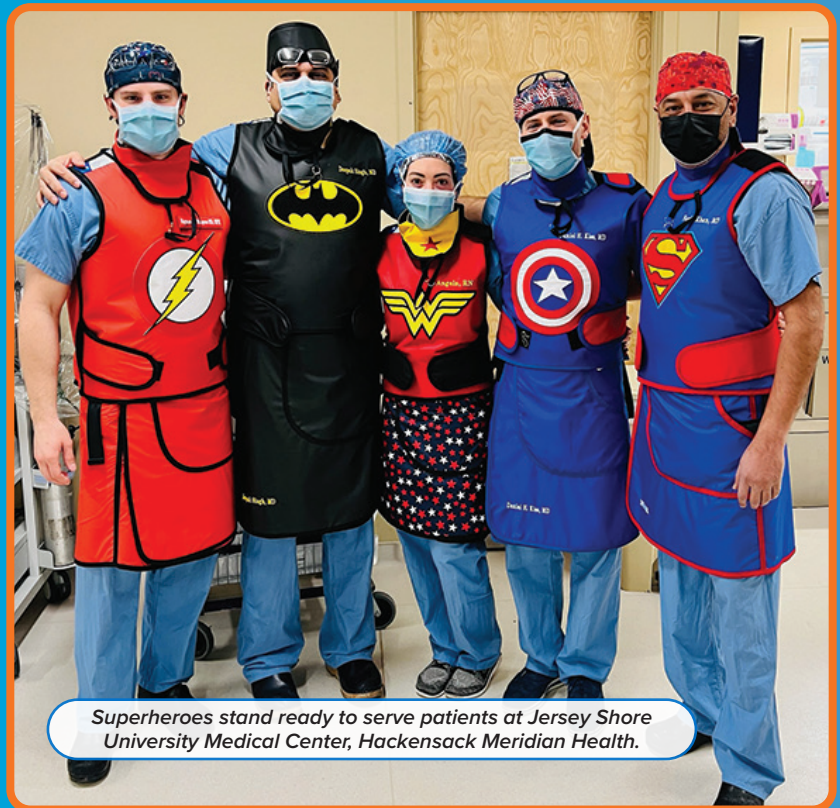
COVID-19 RESPONSE



Healthcare teams at Saint Peter's University Hospital vaccinate local youths against COVID-19.

COVID-19 arrived in New Jersey in March 2020, sparking an historic response by N.J. hospitals to protect their communities. As they cared for a record-high 8,200 hospitalized patients at the peak of the pandemic, they also joined the largest public health response in a century.

Two years into this pandemic, there have been more than 2.3 million COVID-19 infections reported in New Jersey, the majority of which did not lead to hospitalization. But thanks to hospitals and their care teams, more than 138,000 individuals hospitalized with COVID were successfully treated and discharged to their lives and loved ones. In addition, there have been approximately 19,000 deaths averted, as hospital teams refined and improved treatment protocols to bend the curve in COVID mortality.



Superheroes stand ready to serve patients at Jersey Shore University Medical Center, Hackensack Meridian Health.

SAVING LIVES...



COVID patients successfully discharged
138,000



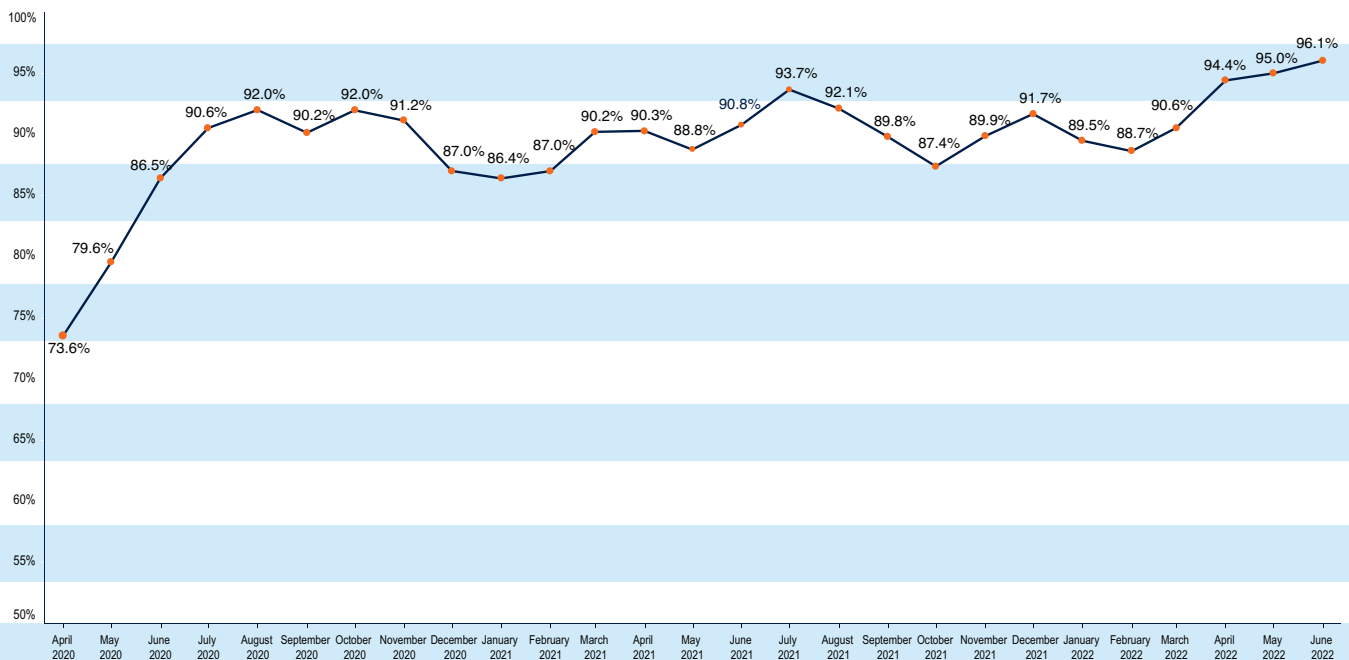
Deaths averted due to hospital innovations & continued improvements in care
19,000
(totals through July 2022)

Through the peaks & valleys of several COVID surges, the state's **150,000+** hospital employees continued their efforts on the frontlines.

The following charts show the impact of their life-saving efforts.

Increasing Survival

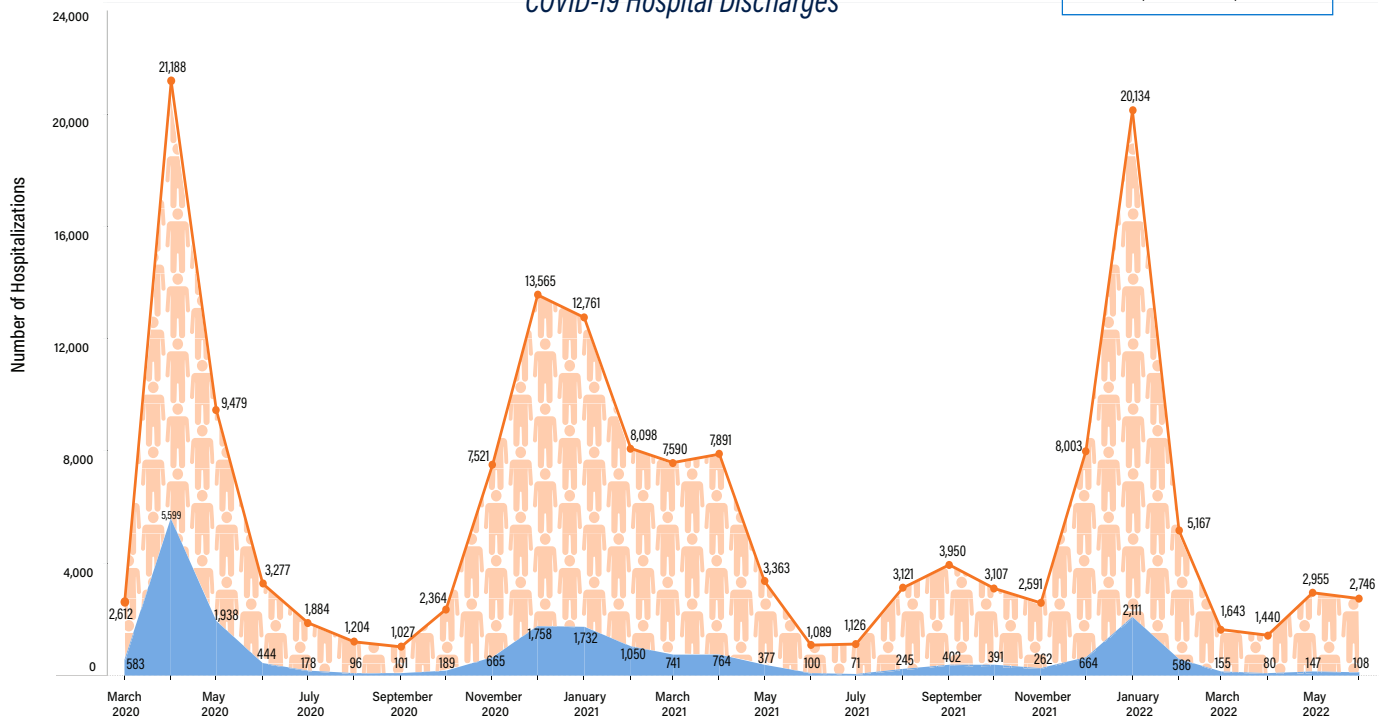
Percentage of COVID-19 Hospitalized Patients Discharged Alive



Lives Saved

COVID-19 Hospital Discharges

Measure Names
■ Hospitalized COVID-19 patients who expired
■ Total hospitalized COVID-19 patients



With blood supplies running low during the pandemic, St. Francis Medical Center hosts blood drives to replenish the inventory.

Hospitals' efforts to protect their patients, staff and communities against COVID-19 have taken many forms as the pandemic evolved.

- At COVID's peak, hospitals quickly added an additional 1,000 ICU beds, working with facility engineers to convert cafeterias, auditoriums and other available spaces. Without those added beds, New Jersey would have been 251 beds short for critically ill patients at the peak of New Jersey's outbreak in April 2020.
- Hospitals in New Jersey were out front in responding to this emerging threat for which there were no evidence-based treatment protocols. They helped write the COVID-19 playbook that did not exist. Their innovations and lessons learned helped improve care and outcomes nationwide.
- Hospital contributions are an essential part of disease surveillance in an infectious disease outbreak. As hospitals provided hundreds of COVID testing opportunities – including pop-up and drive-through events – they gathered critical information on the virus's spread. That information was augmented by hospital reporting of COVID-19 activity daily through NJHA's COVID Data Portal.

COVID-19 RESPONSE

- Hospitals were the launching point for COVID vaccination in New Jersey, working with public health officials to deliver the first vaccines to frontline healthcare workers. Since that kickoff in late 2020, hospitals have been a central part of the vaccination effort within their outpatient departments, in community locations and in the state's mega-sites. Their efforts have helped deliver nearly 15 million doses of the vaccine and have driven the percent of fully vaccinated residents to nearly 80 percent through mid-2022.
- In the pandemic's first year, hospitals also invested more than \$15 million in clinical and community health research, including efforts to better understand this virus and protect their communities.
- And as New Jersey residents encountered the full impact of COVID – from isolation to job loss to housing instability – New Jersey hospitals poured resources into their community's well-being through programs including mental health support, food access, child care and technology donations to support telehealth and at-home education.



Cooper University Health Care helps protect its community with the 10,000th COVID vaccine delivered at this local vaccination site.



Monmouth Medical Center, part of RWJBarnabas Health, supports resiliency efforts for local police officers.

HEALTHY COMMUNITIES



Salem Medical Center donates backpacks and school supplies to ensure students are equipped to learn.

Social determinants of health are the daily aspects of New Jerseyans' lives – including housing, food, education, employment, transportation and other societal issues – that influence the potential for all individuals to lead healthy lives. These programs took on even greater importance in the pandemic's first year when interruptions to employment and schools underscored the vulnerabilities facing many residents, from housing to child care to Internet connectivity.

Examples of hospitals' innovative responses to community needs during the pandemic include "food pharmacies" that filled doctors' orders for fresh food; grief counseling and mental health support for children; mask and hand-hygiene community kits; and squads of community health workers serving in neighborhoods to address pressing needs. All told, N.J. hospitals supported more than 22 million individuals with these community health improvement services valued at more than \$43 million.



Healthy foods and nutrition education are delivered by Newark Beth Israel Medical Center, RWJBarnabas Health.

ACCESS TO CARE

Hospitals are anchors of their communities where the lights are always on and the doors are always open. That 24/7 presence provides peace of mind and unparalleled access to care. New Jersey hospitals treat all patients who enter their doors, regardless of their ability to pay. It's a mandate written in the state's charity care law, as well as part of hospitals' caring mission. In addition, hospitals care for millions of patients each year through government health programs such as Medicare, Medicaid and the state's charity care program. All three of these government programs pay hospitals for that care at rates that are below the actual costs of delivering the services. Hospitals absorb those losses, approaching \$2 billion in 2020, as part of their community commitment.

In other efforts to improve healthcare access, N.J. hospitals offer enrollment assistance to help eligible residents sign up for health insurance. At health fairs and other community events, specially trained enrollment counselors help increase the number of people with healthcare coverage in New Jersey, recognizing that access to preventive services and other regular healthcare is critical to improving health.



University Hospital's outreach to the Hispanic community is just one of many efforts to reduce racial and ethnic health disparities.



First Lady Tammy Murphy joins team members at Capital Health Regional Medical Center to help individuals sign up for health insurance.

HEALTHCARE WORKFORCE



N.J. hospitals employ 34,000 nurses, including these caregivers at Bergen New Bridge Medical Center.

The pandemic has focused a spotlight on hospitals' greatest resource: the 150,000-plus employees who keep them operating round-the-clock every day of the year. Under the most difficult conditions of their careers, these caring professionals never stopped serving their patients and the broader community. But, the pandemic also underscored a longstanding shortage of healthcare workers and the need to rebuild the employee pipeline.

Hospital spending in health professions education is an investment in the future of healthcare. In 2020, N.J. hospitals provided more than \$224 million to support the ongoing development and education of the state's healthcare workforce. That total includes continuing education that allows physicians, nurses and allied health professionals to advance in their profession, keep current with changing best practices and provide quality, safe patient care. It also includes hospitals' commitment to graduate medical education, providing the next generation of physicians vibrant clinical sites to advance their classroom knowledge into real-world experience.



The AtlantiCare team turns out en masse at community events to promote a healthier Atlantic City.

ABOUT THE DATA

“Community benefit” is defined as a planned, managed, organized and measured approach by hospitals to meet community health needs. It includes collaboration with the community to benefit its residents – particularly the poor, minorities, disenfranchised and underserved groups – by improving their health status and quality of life and enhancing the overall health and well-being of local communities.

Under reporting guidance from the Internal Revenue Service and Catholic Healthcare Association, these programs generally meet at least one (or often more than one) of the following objectives:

- Improve access to healthcare services
- Enhance the health of the community
- Advance medical or healthcare knowledge
- Relieve or reduce the burden of government or other community efforts.

Standardized reporting categorizes community benefit in four main areas:

UNPAID COSTS OF PATIENT CARE

This category includes the unpaid costs of care for the following patient populations:

- **\$412.8 million** in unreimbursed charity care services
- **\$246.7 million** in unpaid care for Medicare patients
- **\$122.2 million** in unpaid care for Medicaid patients.

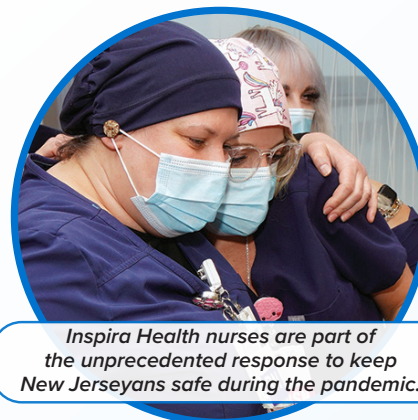
It also includes \$1.2 billion in care that hospitals provided to other patients but for which they were unable to collect payment. These shortfalls are sometimes called “bad debt.”

COMMUNITY HEALTH IMPROVEMENT

The category “community health improvement services” encompasses community programs that focus on health education, treatment and prevention. They include traditional health fairs, screening programs and immunization clinics, along with an array of innovative new approaches and partnerships that target unique community health needs. In 2020, there were 2,700 such programs that served New Jersey residents in more than 22 million individual encounters. They served all ages, from infants through senior citizens, and a number of special needs populations including persons with disabilities; racial and ethnic minorities; the uninsured; and the poor.



CentraState Medical Center joins in a salute to local veterans.



Inspira Health nurses are part of the unprecedented response to keep New Jerseyans safe during the pandemic.



At Atlantic Health, training for the healthcare workforce is a key component of community benefit.



Community Medical Center and RWJBarnabas Health celebrate 140 tons of food donations to local pantries.



Hackensack Meridian Health researchers contribute to innovations to keep New Jersey healthy.



Valley Health joins community efforts for inclusion and health equity.

HEALTH PROFESSIONS EDUCATION

This category includes educational programs for physicians, interns and residents, medical students, nurses and nursing students, pastoral care trainees and other health professionals. It includes continuing education necessary for workers to retain state license or board certification. Other items counted in this category include certain expenses related to graduate medical training, costs to operate nursing school programs, clinical staff training and contributions to underwriting faculty positions in nursing programs. These programs, totaling \$224.1 million, directly supported 9,000 current and future clinicians while also subsidizing educational sites and faculty for countless others.

OTHER COMMUNITY BENEFIT PROGRAMS

This category encompasses a variety of additional programs and services provided by hospitals not otherwise captured in the community benefit categories. For New Jersey hospitals in 2020, these “other” benefits include:

- **\$871.1 million** in subsidized health services (defined as programs that hospitals provide to respond to a community need, despite financial losses associated with the program)
- **\$273.2 million** in cash and in-kind donations made to healthcare organizations and other community groups, along with hours contributed by staff to the community or the value of donations of food, equipment and supplies
- **\$13.5 million** in research into clinical and community health issues
- **\$9.4 million** in community benefit operations, including producing a community health needs assessment for communities served
- **\$1 million** in community-building activities such as economic development support.

To see more photos of hospital community benefit in action, visit our online report at <https://www.njha.com/healthy-communities/health-in-your-community/community-benefit-report/>

COMMUNITY BENEFIT REPORT

| Unpaid Costs of Patient Care ¹ | Net Benefit/(Loss) |
|---|------------------------|
| Charity Care | \$412,826,582 |
| Unpaid Cost of Medicaid | \$122,242,148 |
| Unpaid Cost of Medicare | \$246,731,754 |
| Bad Debt at Cost | \$1,186,433,000 |
| Total Unpaid Costs of Patient Care | \$1,968,233,483 |

| Community Benefit Services and Programs ² | # of Programs/ Activities ³ | # of Persons Served ³ | Net Benefit/(Loss) |
|--|---|-------------------------------------|------------------------|
| Community Health Improvement Services | | | |
| Community Health Education | 1,867 | 20,178,824 | \$9,206,349 |
| Community-Based Clinical Services | 86 | 1,956,537 | \$4,108,966 |
| Health Care Support Services | 110 | 91,331 | \$7,785,236 |
| Social and Environmental Improvement Activities | 632 | 632 | \$0 |
| Other/Unspecified | 4 | 1,396 | \$22,061,437 |
| Total Community Health Improvement Services | 2,699 | 22,228,720 | \$43,161,988 |
| Health Professions Education | | | |
| Physicians/Medical Students | 24 | 2,539 | \$27,918,491 |
| Nurses/Nursing Students | 34 | 3,724 | \$1,957,763 |
| Other Health Professions Education | 110 | 2,759 | \$6,799,943 |
| Scholarships/Funding for Professional Education | 4 | 0 | \$14,297 |
| Other/Unspecified | 8 | 28 | \$187,442,721 |
| Total Health Professions Education | 180 | 9,050 | \$224,133,215 |
| Other Community Benefit Services | | | |
| Subsidized Health Services | 144 | 3,746,352 | \$871,110,524 |
| Research (Clinical and Community Health) | 20 | 1,440 | \$13,530,702 |
| Cash and In-Kind Contributions | 108 | 48,975 | \$273,218,313 |
| Community-Building Activities ⁴ | 182 | 159,004 | \$974,340 |
| Community Benefit Operations (e.g., CHNA) | 46 | 381 | \$9,356,846 |
| Total Other Community Benefit Services | 499 | 3,956,152 | \$1,168,190,725 |
| Total Community Benefit Services and Programs | 3,377 | 26,193,921 | \$1,435,485,928 |

| | |
|---------------------------------|------------------------|
| TOTAL COMMUNITY BENEFITS | \$3,403,719,411 |
|---------------------------------|------------------------|

NOTES: 2020 data

¹ Data reflects the unpaid costs incurred by acute care hospitals statewide in calendar year 2020. Charity care shortfall reflects CY 2017 documented costs and state fiscal year 2020 (July 2019 – June 2020) subsidy data. Unpaid cost of Medicaid and Medicare are based on Uniform Billing discharge data for CY 2020 and represent only the inpatient fee-for-service populations.

² Data represents statewide estimates extrapolated from data submitted to NJHA/HRET by 52 acute care nonprofit hospitals (90% response rate). The extrapolation procedure was based on licensed beds, calculated by dividing the number for each data element by the total number of licensed beds in the reporting hospitals and multiplying by the total number of nonprofit beds statewide.

³ # of Programs and Persons Served may be undercounted, as not all hospitals track this data.

⁴ "Community-Building Activities" include physical improvements/housing, economic development, community support, environmental improvements, leadership development/training for community members, coalition building, community health improvement advocacy, workforce development, etc.

This report is based on data provided by the following hospitals:

| | |
|--|---|
| AtlantiCare Regional Medical Center, Atlantic City Campus | Inspira Medical Center Elmer |
| AtlantiCare Regional Medical Center, Mainland Campus | Inspira Medical Center Mullica Hill |
| Cape Regional Medical Center | Inspira Medical Center Vineland |
| Capital Health Medical Center – Hopewell | Jefferson Cherry Hill Hospital |
| Capital Health Regional Medical Center | Jefferson Stratford Hospital |
| CentraState Medical Center | Jefferson Washington Twp Hospital |
| Chilton Medical Center | Jersey City Medical Center |
| Clara Maass Medical Center | Monmouth Medical Center |
| Community Medical Center | Monmouth Medical Center Southern Campus |
| Cooperman Barnabas Medical Center | Morristown Medical Center |
| Deborah Heart and Lung Center | Newark Beth Israel Medical Center |
| Englewood Hospital | Newton Medical Center |
| Hackensack Meridian Health Bayshore Medical Center | Overlook Medical Center |
| Hackensack Meridian Health Hackensack University Medical Center | Robert Wood Johnson University Hospital |
| Hackensack Meridian Health Jersey Shore University Medical Center | Robert Wood Johnson University Hospital Hamilton |
| Hackensack Meridian Health JFK University Medical Center | Robert Wood Johnson University Hospital Rahway |
| Hackensack Meridian Health Ocean University Medical Center | Robert Wood Johnson University Hospital Somerset |
| Hackensack Meridian Health Palisades Medical Center | Saint Peter’s University Hospital |
| Hackensack Meridian Health Old Bridge Medical Center | Shore Medical Center |
| Hackensack Meridian Health Raritan Bay Medical Center | St. Joseph’s University Medical Center |
| Hackensack Meridian Health Riverview Medical Center | St. Joseph’s Wayne Medical Center |
| Hackensack Meridian Health Southern Ocean Medical Center | The Valley Hospital |
| Hackettstown Medical Center | Trinitas Regional Medical Center |
| | University Hospital |
| | Virtua Marlton Hospital |
| | Virtua Mount Holly Hospital |
| | Virtua Our Lady of Lourdes Hospital |
| | Virtua Voorhees Hospital |
| | Virtua Willingboro Hospital |

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