

**SCHEDULE H
(Form 990)**

Hospitals

OMB No. 1545-0047

2013

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.**
▶ **Information about Schedule H (Form 990) and its instructions is at www.irs.gov/form990.**

Open to Public Inspection

Name of the organization **St. Vincent's Medical Center** Employer identification number **06-0646886**

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	X	
b If "Yes," was it a written policy? 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.	X	
<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:	X	
<input type="checkbox"/> 100% <input type="checkbox"/> 150% <input checked="" type="checkbox"/> 200% <input type="checkbox"/> Other _____ %		
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:	X	
<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 _____ %		
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"?	X	
5a Did the organization budget amounts for free or discounted care provided under its financial assistance policy during the tax year?	X	
b If "Yes," did the organization's financial assistance expenses exceed the budgeted amount?	X	
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?		X
6a Did the organization prepare a community benefit report during the tax year?	X	
b If "Yes," did the organization make it available to the public?	X	

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	(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
Financial Assistance and Means-Tested Government Programs						
a Financial Assistance at cost (from Worksheet 1)		3,390	5,572,399.		5,572,399.	1.40%
b Medicaid (from Worksheet 3, column a)		24,831	24,821,684.		24,821,684.	6.23%
c Costs of other means-tested government programs (from Worksheet 3, column b)		37,670	15,402,907.		15,402,907.	3.86%
d Total Financial Assistance and Means-Tested Government Programs		65,891	45,796,990.		45,796,990.	11.49%
Other Benefits						
e Community health improvement services and community benefit operations (from Worksheet 4)	16	13,193	1,571,807.	136,061.	1,435,746.	.36%
f Health professions education (from Worksheet 5)	2	887	7,641,157.		7,641,157.	1.92%
g Subsidized health services (from Worksheet 6)	2	4,935	1,301,271.		1,301,271.	.33%
h Research (from Worksheet 7)						.00%
i Cash and in-kind contributions for community benefit (from Worksheet 8)	2	1,800	214,636.	24,050.	190,586.	.05%
j Total. Other Benefits	22	20,815	10,728,871.	160,111.	10,568,760.	2.66%
k Total. Add lines 7d and 7j	22	86,706	56,525,861.	160,111.	56,365,750.	14.15%

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 St. Vincent's Medical Center

If reporting on Part V, Section B for a single hospital facility 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 Section C)		
2 Indicate the tax year the hospital facility last conducted a CHNA: <u>20 12</u>		
3 In conducting its most recent CHNA, did the hospital facility take into account input from persons who represent the broad interests of the community served by the hospital facility, including those with special knowledge of or expertise in public health? If "Yes," describe in Section C 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 Section C	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 (list url): <u>See Narrative</u>		
b <input type="checkbox"/> Other website (list url):		
c <input checked="" type="checkbox"/> Available upon request from the hospital facility		
d <input type="checkbox"/> Other (describe in Section C)		
6 If the hospital facility addressed needs identified in its most recently conducted CHNA, indicate how (check all that apply as of the end of the tax year):		
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 checked="" type="checkbox"/> Participation in the development of a community-wide plan		
d <input checked="" type="checkbox"/> Participation in the execution of a community-wide plan		
e <input type="checkbox"/> Inclusion of a community benefit section in operational plans		
f <input 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 Section C)		
7 Did the hospital facility address all of the needs identified in its most recently conducted CHNA? If "No," explain in Section C 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
b 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) St. Vincent's Medical Center

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 free care?	X	
If "Yes," indicate the FPG family income limit for eligibility for free care: <u>200</u> %			
If "No," explain in Section C the criteria the hospital facility used.			
11	Used FPG to determine eligibility for providing discounted care?	X	
If "Yes," indicate the FPG family income limit for eligibility for discounted care: <u>400</u> %			
If "No," explain in Section C 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 checked="" type="checkbox"/> Uninsured discount		
f	<input checked="" type="checkbox"/> Medicaid/Medicare		
g	<input type="checkbox"/> State regulation		
h	<input type="checkbox"/> Residency		
i	<input type="checkbox"/> Other (describe in Section C)		
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 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 Section C)		

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 the individual'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 Section C)		
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 individual'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 Section C)		

Part V Facility Information (continued) St. Vincent's Medical Center

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 individuals regarding the individuals' bills
- d Documented its determination of whether individuals were eligible for financial assistance under the hospital facility's financial assistance policy
- e Other (describe in Section C)

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	X	

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 Section C)
- d Other (describe in Section C)

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 Section C)

21 During the tax year, did the hospital facility charge any FAP-eligible individual 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?

21		X
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If "Yes," explain in Section C.

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

22		X
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If "Yes," explain in Section C.

Part V Facility Information (continued)

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

St. Vincent's Medical Center:

Part V, Section B, Line 3: The Primary Care Action Group (PCAG), which

initiated the Community Health Needs Assessment for the Greater

Bridgeport, Connecticut area, was comprised of many members. These members

were St. Vincent's Medical Center, Bridgeport Hospital, Optimus

Healthcare, Southwest Community Health Center, the City of Bridgeport

Department of Health and Social Services, the Stratford Health Department,

the Fairfield Health Department, the Trumbull/Monroe Health District, the

Easton Health Department, AmeriCares Free Clinic of Bridgeport, LLC, the

Connecticut Department of Social Services, the Connecticut Department of

Mental Health and Addiction Services, the Greater Bridgeport Medical

Association, the Southwestern Area Health Education Center, and the

Bridgeport Child Advocacy Coalition. In September of 2012, the PCAG

engaged a non-profit public health consulting organization called Health

Resources in Action (HRiA) which was responsible for conducting research

and collecting data for the Assessment. HRiA developed a quantitative

survey which was administered to 1,302 individuals in the six towns

covered by the Assessment. HRiA also surveyed 200 key stakeholders through

either one-on-one interviews or focus groups.

St. Vincent's Medical Center:

Part V, Section B, Line 4: The CHNA was conducted with the following

other hospital facility:

- Bridgeport Hospital

Part V Facility Information (continued)

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

St. Vincent's Medical Center:

Part V, Section B, Line 14g: A brochure is available to patients

explaining the Financial Assistance Policy and is given to them upon

request. Also, financial counselors are available to meet with patients

who require financial assistance.

St. Vincent's Medical Center:

Part V, Section B, Line 21: A small portion of patients may have been

charged in error; however, corrections to these patient accounts were made

when the errors were identified.

St. Vincent's Medical Center:

Part V, Section B, Line 22: A small portion of patients may have been

charged in error; however, corrections to these patient accounts were made

when the errors were identified.

Part V, Section B, Line 5a:

The Hospital facility's CHNA is listed on the following

website:

[http://www.stvincents.org/community-wellness/=/media/Images/community-](http://www.stvincents.org/community-wellness/=/media/Images/community-wellness/Programs%20-%20Support%20-%20Wellness%20-%20Education%20-%20)

[wellness/Programs%20-%20Support%20-%20Wellness%20-%20Education%20-%20](http://www.stvincents.org/community-wellness/Programs%20-%20Support%20-%20Wellness%20-%20Education%20-%20)

Part V Facility Information *(continued)*

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6l, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Prevention/All_PDFs/GreaterBridgeportCHA_FINALApril%204.ashx

Part V, Section B, Line 7:

The Hospital facility's Implementation Plan is listed on the following website:

http://www.stvincents.org/community-wellness/=/media/Images/community-wellness/Programs%20-%20Support%20-%20Wellness%20-%20Education%20-%20Prevention/All_PDFs/Greater%20Bridgeport%20Region%20CHIP%202013%20Final%2006-27-2013%20_V2_.ashx

Part V Facility Information (continued)**Section D. 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? 12

Name and address	Type of Facility (describe)
1 The Behavioral Hlth Ctr at Bridgeport 2400 Main Street Bridgeport, CT 06606-5323	Outpatient Behavioral Health Services
2 The Behavioral Health Ctr at Norwalk 1 Lois Street Norwalk, CT 06851	Outpatient Behavioral Health Services
3 St. Vincent's Ctr for Wound Healing 115 Technology Drive Trumbull, CT 06611	Wound Care Services
4 Family Health Center 762 Lindley Street Bridgeport, CT 06606	Family Health Clinic
5 St. Vincent's Urgent Care Ctr Bridgep 4600 Main Street Bridgeport, CT 06606	Urgent Care Walk-In Center
6 St. Vincent's Urgent Care Ctr Fairfie 1055 Post Road Fairfield, CT 06824	Urgent Care Walk-In Center
7 St. Vincent's Urgent Care Ctr Monroe 401 Monroe Turnpike Monroe, CT 06468	Urgent Care Walk-In Center
8 St. Vincent's Urgent Care Ctr Shelton 2 Trap Falls Road, Suite 105 Shelton, CT 06484	Urgent Care Walk-In Center
9 Cardiology Phys. of Fairfield County 4675 Main Street Bridgeport, CT 06606	Cardiology
10 Cardiology Phys. of Fairfield County 40 Cross Street Norwalk, CT 06851	Cardiology

Schedule H (Form 990) 2013

Part VI Supplemental Information

Provide the following information.

- 1 **Required descriptions.** Provide the descriptions required for Part I, lines 3c, 6a, and 7; Part II and Part III, lines 2, 3, 4, 8 and 9b.
- 2 **Needs assessment.** Describe how the organization assesses the health care needs of the communities it serves, in addition to any CHNAs 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.

Part I, Line 7:

The cost of providing charity care, means tested government programs, and community benefit programs is estimated using internal cost data and is calculated in compliance with guidelines established by both the Catholic Health Association (CHA) and the Internal Revenue Service. The Organization uses a cost accounting system that addresses all patient segments. The best available data was used to calculate the amounts reported in the table. For the information in the table, a cost accounting system was used for all data.

Part I, Line 7g:

The Organization employs its physicians at physician clinics, so the associated costs and charges relating to those physician services are included in all relevant categories in Part I.

Part II, Community Building Activities:

St. Vincent's Medical Center (The Medical Center) provided community building activities in FY 2014, Breast cancer screenings and

Part VI Supplemental Information (Continuation)

mobile mammograms were provided to underserved women. The Medical Center also provided education about the importance of early detection of breast cancer. Prostate cancer screenings were conducted for uninsured men in the community, as well. The Medical Center also operated a Family Health Center that provided healthcare to patients who were uninsured and who did not have a primary physician. This program also offered medical testing, financial counseling, and social services. Community education programs were offered on a wide array of topics including cardiology, oncology, nutrition, smoking, geriatrics, and diabetes.

Part III, Line 2:

The provision for doubtful accounts is based upon management's assessment of expected net collections considering economic conditions, historical experience, trends in health care coverage, and other collection indicators. Periodically throughout the year, management assesses the adequacy of the allowance for doubtful accounts based upon historical write-off experience by payor category, including those amounts not covered by insurance. The results of this review are then used to make any modifications to the provision for doubtful accounts to establish an appropriate allowance for doubtful accounts. After satisfaction of amounts due from insurance and reasonable efforts to collect from the patient have been exhausted, the Medical Center follows established guidelines for placing certain past-due patient balances with collection agencies, subject to the terms of certain restrictions on collection efforts as determined by Ascension Health. Accounts receivable are written off after collection efforts have been followed in accordance with the Medical Center's policies.

Part VI Supplemental Information (Continuation)

Part III, Line 3:

St. Vincent's Medical Center has a very robust financial assistance program; therefore, no estimate is made for bad debt attributed to financial assistance eligible patients.

Part III, Line 4:

Per the consolidated audited financial statements of St. Vincent's Medical Center:

The provision for doubtful accounts is based upon management's assessment of expected net collections considering economic conditions, historical experience, trends in health care coverage, and other collection indicators. Periodically throughout the year, management assesses the adequacy of the allowance for doubtful accounts based upon historical write-off experience by payor category, including those amounts not covered by insurance. The results of this review are then used to make any modifications to the provision for doubtful accounts to establish an appropriate allowance for doubtful accounts. After satisfaction of amounts due from insurance and reasonable efforts to collect from the patient have been exhausted, the Medical Center follows established guidelines for placing certain past-due patient balances with collection agencies, subject to the terms of certain restrictions on collection efforts as determined by Ascension Health. Accounts receivable are written off after collection efforts have been followed in accordance with the Medical Center's policies.

The methodology for determining the allowance for doubtful accounts and related write-offs on uninsured patient accounts has remained consistent

Part VI Supplemental Information (Continuation)

with the prior year. The Medical Center has not experienced material changes in write-off trends and has not materially changed its charity care policy in the current fiscal year.

Part III, Line 8:

St. Vincent's Medical Center follows the Catholic Health Association (CHA) guidelines for determining community benefit. CHA community benefit reporting guidelines suggest that Medicare shortfall is not treated as community benefit.

Part III, Line 9b:

The St. Vincent's Medical Center Collection and Debt Referral Policy states, "All patients receiving services are given the opportunity to take advantage of policies developed to assist them financially. These policies include charity care, free bed funds, financial counseling as well as state and federal programs."

Part VI, Line 2:

St. Vincent's Medical Center (SVMC) is committed to serving the Greater Bridgeport, Connecticut Area by developing partnerships to provide support and services for the healthcare needs of its community. Through healthcare education, medical care, and support services, the Organization reaches into the community to enhance local neighborhoods and their quality of life. We deliver a broad range of services with sensitivity to the individual needs of our patients and their families. The relationships developed with our community partners have provided much needed healthcare services to the citizens of our community.

Part VI Supplemental Information (Continuation)

Our tradition of improving the health of the community dates back over 110 years, when local Catholic physicians identified a need to meet the holistic needs of the large European immigrant population. They contacted the pastor of the nearby St. Patrick's Church, who in turn collaborated with The Daughters of Charity. Their vision was realized when the doors of SVMC opened in June 1905. Since that time, all associates of SVMC have stood behind its mission to support underserved patients and their families. Our mission, vision, and values provide a strong foundation for the work we do - a framework that expresses our priorities for what we will achieve and how we will achieve it.

Primary Care Action Group (PCAG)

SVMC is committed to making a lasting impact on the community it serves. To that end, SVMC has organized the primary care providers in the City of Bridgeport into a Primary Care Action Group (PCAG). The expressed purpose of this group is to increase the access of the underserved and uninsured to primary care and specialty care. The group has developed guiding principles and a strategic action plan to achieve its objective. Through this effort, SVMC was a key partner in the development of a Regional Health Information Organization, creating the ability to identify overlap in services to each organization's respective clients.

The PCAG collaboration, in which St. Vincent's plays a leading role, has created four task forces, through its Community Health Improvement Plan, to address the most urgent health care issues in the Greater Bridgeport Region, as identified by the Community Health Needs Assessment. The goals of the individual task forces are to: reduce the incidence, progression and burden of cardiovascular disease and diabetes through a strategy of

Part VI Supplemental Information (Continuation)

preventive screenings and education for area residents; reduce and prevent obesity by creating environments that promote healthy eating and active living in the region; improve access to quality health care for all individuals living in the region; and increase the understanding of mental health and substance abuse as public health issues in order to achieve equal access to prevention and treatment for area residents.

Action plans have been developed for each of the task forces and implementation has begun.

Hope Dispensary

In the spring of 2011, under the leadership of SVMC staff, the PCAG launched the Bridgeport Hope Dispensary, a pharmacy offering medication, free of charge, to the low income uninsured and underinsured, a much needed service in the area to keep individuals with chronic illness healthy. (See more background and results under Promotion of Community Health, Part VI, Line 5).

"Know Your Numbers" Heart Disease & Diabetes Awareness Campaign

In February 2014, in collaboration with the PCAG Cardiovascular/Diabetes Task Force, St. Vincent's Medical Center played a significant role in organizing and coordinating the area's first "Know Your Numbers" Heart Disease and Diabetes Awareness Campaign. Know Your Numbers succeeded in reaching out to the public and, in particular, the underserved at soup kitchens, pantries, churches and schools, and helped them understand the importance of prevention and monitoring of their chronic conditions in order to stay healthy. More than half received health education on how to prevent or better manage their existing disease, while 50% received a

Part VI Supplemental Information (Continuation)

doctor referral based on screening results. (See results/more information under Promotion of Community Health, Part VI, Line 5).

Community Health Needs Assessment/Community Health Improvement Plan

Understanding the current health status of the community is important in order to identify priorities for future planning and funding, the existing strengths and assets upon which to build, and areas for further collaboration and coordination across organizations, institutions, and community groups. To this end, SVMC, through the PCAG, led a comprehensive regional health planning effort comprised of two phases: (1) a Community Health Needs Assessment to identify the health-related needs and community strengths in the Greater Bridgeport Area and (2) a Community Health Improvement Plan to determine the key health priorities, overarching goals, and specific strategies to implement across the service area.

The Community Health Needs Assessment is a key tool for SVMC as it ensures it is fully meeting the needs of the community it serves. The Community Health Needs Assessment identified the health-related needs and strengths of the Greater Bridgeport Area through a social determinants of health framework, which defines health in the broadest sense and recognizes numerous factors at multiple levels - from lifestyle behaviors (e.g., healthy eating and active living), to clinical care (e.g., access to medical services), to social and economic factors (e.g., poverty), to the physical environment (e.g., air quality) - which have an impact on the community's health.

Patient Family Advisory Board

In addition to greater community surveillance, SVMC puts a priority on

Part VI Supplemental Information (Continuation)

input from patients and their families. SVMC recognizes that input from patients and families is critical in the delivery of quality medical care to the community. In 2007, SVMC implemented a Patient Family Advisory Board (PFAB) as a vehicle to give a meaningful voice to patients and their families. The PFAB acts as an advisory committee to the SVMC Board of Directors, administration, and staff.

The objectives of the PFAB include the following: to provide a forum that enables patients and family members to have direct input and influence on policies, programs, practices, and the development and planning of new facilities that impact the care and services received at SVMC; to provide a method to channel information and ideas and concerns of patients and families to SVMC leadership and staff; to increase the patient-centeredness of the care delivered at SVMC; to improve collaboration between caregivers, patients, and families such that concerns regarding quality of care are addressed promptly and effectively; and to serve as a diverse and representational link between SVMC and the community.

In an effort to further integrate the patient/family voice institution-wide, a number of patient care committees - Infection Prevention, Bright Ideas, Re-Igniting the Spirit of Caring, Public Space, Values Recognition - are populated with membership from PFAB. In addition, SVMC will be piloting a program to have a PFAB presence at the unit level. These patient/family advisors interact with staff, patients, and families at the front line of service delivery.

Part VI, Line 3:

Schedule H (Form 990)

Part VI Supplemental Information (Continuation)

The St. Vincent's Medical Center Financial Assistance Program

screens patients for all programs that will assist in covering medical

expenses, including federal and state programs, free bed funds, and

income-based financial assistance.

At the time of pre-registration and registration, all patients without

insurance are referred to an on-site Financial Counselor for an initial

screening. The Financial Counselor assesses the patient's needs and begins

the appropriate financial assistance application.

Financial assistance staff members are trained on how to qualify patients

for the various Medicaid, charity care, and financial assistance programs.

The staff regularly attends community meetings and information update

sessions to remain updated on changes to state and federal assistance

programs.

In addition, all billing and collections notices inform patients that they

may call the Charity Counselor. If a patient contacts the billing or

collection agencies and inquires about financial assistance, they will be

directed to the Charity Counselor. A patient can request financial

assistance at any point in the revenue cycle.

St. Vincent's has two full time Charity Care Counselors. One is at St.

Vincent's Medical Center and one is at its clinic, St. Vincent's Family

Health Center.

Information on financial assistance options is posted in the admitting and

registration areas, the emergency room, case management area, customer

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service, and patient access departments. Contact information is clearly visible and information is printed in both English and Spanish.

The Financial Assistance Program is highlighted on the Organization's external website with direct links to contact information and the application for assistance. A link to the United Way 211 website is also provided, allowing patients to access further information about available assistance.

A financial assistance brochure has been developed and is available to patients and families at the time of registration. This brochure is displayed in the emergency department, urgent care centers, case management, customer service, and patient access departments. The brochure is also mailed upon request.

By virtue of its location and mission, SVMC's uncompensated care costs were \$48.2 million, based on charges, including charity care and bad debt.

Part VI, Line 4:

The primary service area (PSA) of St. Vincent's Medical Center (SVMC) consists of the City of Bridgeport and the surrounding towns of Fairfield, Easton, Monroe, Trumbull, Stratford, and Shelton. According to U.S. Census Bureau estimates, the total estimated population of the PSA at July 1, 2013 is over 365,000. This is an increase of approximately 2% compared to the April 2010 population estimates.

Bridgeport is located in Northeast Fairfield County along Long Island Sound, partway between New York City and Boston. Composed of 16 square

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miles of land mass and with 144,229 residents (Census 2010), Bridgeport is the largest city in Connecticut and the fourth largest city in New England. Its 9,014 people per square mile makes Bridgeport the most densely populated city in Connecticut.

Bridgeport's surrounding towns are principally white collar, with only pockets of poverty, reflecting, in large part, Fairfield County's affluence. However, Bridgeport is the poorest city in the state and one of the 10 poorest cities in the nation. Bridgeport represents an island of poverty in an otherwise affluent Fairfield County, one of the wealthiest counties in the country. Bridgeport's per capita income average of \$19,802 is less than half (45.4%) of neighboring Trumbull (\$43,576) and slightly more than one-third (35.6%) of the average per capita income of neighboring Fairfield (\$55,579) (American Community Survey 2005-2009). Bridgeport's average per capita income also falls short of both the Connecticut average of \$36,468 and the national average of \$27,041 (American Community Survey 2005-2009).

Bridgeport is an area that is socially and economically challenged with many patients who are unemployed, uninsured or underinsured, and without resources. Although Fairfield County has a reputation for affluence, it is clear that many of the area's residents fall well outside this category, and look to St. Vincent's as a safety net.

Bridgeport's population is 39.6% White, 34.6% Black or African American, 0.5% American Indian and Alaska Native, 3.4% Asian, 0.1% Native Hawaiian and Other Pacific Islander, 17.5% some other race, and 4.3% two or more races (U.S. Census 2010). Approximately 38.2% of Bridgeport's population

Part VI Supplemental Information (Continuation)

is Hispanic or Latino (of any race) (U.S. Census 2010). As the U.S. Census 2010 data shows, Bridgeport has a significantly higher percentage of Black or African Americans and Hispanics or Latinos of any race than the State of Connecticut.

Bridgeport also has a high rate of unemployment, the third worst in the state as of September 2014. The Connecticut Department of Labor reported that the unemployment rate in Bridgeport is 9.6%, compared to 6.2% statewide or 5.1% in Fairfield, 5.1% in Trumbull, and 7.2% in Stratford, Bridgeport's closest neighboring communities (Connecticut Labor Market Information 2014). Bridgeport residents who are employed often earn only a minimum wage, which is not a living wage in this geographic area. Bridgeport youth are twice as likely to be unemployed as youth in Fairfield County and statewide. (www.ctdol.state.ct.us/lmi/laus/lmi123.asp)

Additionally, the cost of living and real estate make it difficult for middle class families to settle in the area. As a result, SVMC's workforce shortages occur in professional and technical positions.

Families, and particularly children, living in poverty are more likely to suffer from poor health, drop out of school, and experience hunger, homelessness, and violence. During the 2012-2013 school year, nearly 100% of Bridgeport Public School students were eligible for free or reduced-price lunch because they lived in families earning less than 185% of the federal poverty level compared to 36.7% of students nationwide. (Bridgeport Child Advocacy Coalition, State of the Child Report, 2014).

Many Bridgeport residents also face transportation issues as 21.1% did not

Part VI Supplemental Information (Continuation)

own a car compared to 8.2% in Fairfield County and 9.5% statewide.

In 2013, 49.9% of Bridgeport children under the age of 18 lived in single-parent homes compared to 32.0% of children statewide. In 2013, 44.3% of families in Bridgeport headed by single females with children under the age of 18 lived in poverty. This included 12,200 children. In 2009, Bridgeport area homeless shelters served 518 adults and 231 children, while a total of 3,136 requests were denied. In the year prior to September 30, 2014, 285 children spent time in a Bridgeport area homeless shelter. The number of children who attend early childhood education programs also falls short of statewide rates.

The teenage birth rate for Bridgeport teens aged 15-17 was more than 4 times the statewide rate. From 2012-2013, incidences of child abuse or neglect rose in Bridgeport by more than 13.5% versus a 3.4% statewide increase. In 2012-13, only 40.8% of Bridgeport Public School students met the health standards on all four state physical fitness tests compared to 51.1% statewide. According to the Connecticut Department of Public Health, analysis of data from the 2009-10 and 2011-12 school years found that 15.3% of Bridgeport students had asthma.

The 2000 Census shows 38%, or approximately 52,820 adult residents, had no high school diploma. The poor, homeless, and those with limited education are often less likely to seek preventative care and fill prescriptions and are more likely to delay treatment in an emergency. The uninsured are more likely to suffer from poor health and are up to three times more likely to die early than those with health insurance (Bridgeport Child Advocacy Coalition, 2008). All these factors present tremendous challenges to

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healthcare providers in their efforts to keep the community healthy. SVMC

has implemented strategies to improve healthcare access and quality of

care for area residents. (For more on St. Vincent's strategies, See Part

VI, Line 5, Promotion of Community Health).

Connecticut has the second highest incidence of breast cancer in the

country, second only to Rhode Island. According to the 2011 Community

Profile of Breast Cancer by Susan G. Komen, SVMC's primary service area,

the Greater Bridgeport Area, has a higher incidence of breast cancer,

higher late stage diagnosis, and a higher mortality rate than the State of

Connecticut incidence rates.

According to the recently completed Community Health Needs Assessment, 1

in 25 Fairfield County residents has had a heart attack and 1 in 20 has

been diagnosed with diabetes. Additionally almost 6 in 10 adults are

overweight or obese, 1 in 4 children and adolescents are overweight or

obese, 1 in 4 people did not participate in any leisure time physical

activity in the past month and, only 1 in 3 people consumed the

recommended five servings of fruits and vegetables daily. Our Assessment

also revealed that the prevalence of mental illness in adults ranged from

17.7% to 26.5% in our primary service area. Our high school youth

attempted suicide at twice the rate of the national average, 1 in 10

adults participated in binge drinking behavior in the last 30 days, and 1

in 4 people currently smoke in the City of Bridgeport. The Assessment also

uncovered significant problems with access to health care: 1 in 20 people

in the Greater Bridgeport Community do not have health insurance and 6 in

10 people experience one or more barriers in accessing adequate health

care.

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Bridgeport is crossed by Interstate 95, a main vehicular corridor from New York to Boston that is cited as the main source of air toxins and greenhouse gases in the city. The Industrial Revolution of the 1930's left Bridgeport with numerous Brownfield sites, which are linked to lead poisoning, and multiple cancers. A Johns-Hopkins study of Brownfields in the Baltimore, MD area, demonstrated a 20% increase in mortality, 27% increase in cancer mortality, 33% increase in lung cancer mortality, and 39% increase in respiratory mortality among residents in higher Brownfield hazard zones. This strongly corroborates the theory that Brownfields are detrimental to human health (Litt & Tran 2002). The poor air quality in Bridgeport may be a major factor in the 25% incidence of asthma in households in the city (Bridgeport Health Information Program Survey, 2007).

Physician Shortage

In our primary and secondary service areas, we continue to see a significant decrease in the number of primary care physicians and in access points for patients. This is based on multiple factors, including the increased cost of living in the region, an aging population of current primary care physicians and the retirement of others, as well as a shift to other institutions through acquisitions of practices.

In the spring of 2013, SVMC's Medical Staff Development Plan projected a current need for six additional primary care physicians in the Greater Bridgeport Community. This projection is only based on the current demographic profile of patients. However, 36% of SVMC

Part VI Supplemental Information (Continuation)

physicians are over the age of 55, well over the national average of 28%. Due to the age of our medical staff, there is an anticipated need for an additional 48 primary care physicians over the next 10 years.

In a 2013 telephone survey of 230 primary care physicians in our community, only 39% could be confirmed as accepting new Medicare patients and only 38% could be confirmed as accepting new Medicaid patients. Many of these underinsured patients turn to the SVMC Family Health Center, an ambulatory primary care clinic.

Overall, the primary and secondary service areas remain underserved. (Please see Promotion of Community Health Part VI, Line 5 for information on how St. Vincent's MultiSpecialty Group (MSG), a subsidiary of St. Vincent's Medical Center, has developed a plan to increase access to primary care and specialty services to the community. See also Part VI, Line 6 Affiliated Health Care System, for more on MSG).

Part VI, Line 5:

St. Vincent's Medical Center's (SVMC) mission, vision, and values provide a strong foundation for the work we do to serve our community - a framework that expresses our priorities for what we will achieve and how we will achieve it. The mission statement of SVMC says that, "Rooted in the healing ministry of Jesus, we commit to provide quality, holistic care to all faiths with special concern for those who are poor, vulnerable and underserved."

The Organization is dedicated to promoting healthy living at every

Part VI Supplemental Information (Continuation)

stage of life and enhancing life by addressing the unique needs of patients, families, and our community. Healthcare education, wellness, and disease prevention education is offered through a wealth of resources such as symposiums, classes, and support groups. Our outreach programs and partnerships are designed to enhance public health and quality of life in the Greater Bridgeport Area and improve access to health services for members of the community we serve. We seek to advance medical or healthcare knowledge through education and relieve or enhance any ongoing public healthcare efforts. Our programs reach adults and teenagers, men and women, infants and seniors, providing health education and care, regardless of ability to pay.

Cardiology and Oncology seminars, wellness programs, screenings and support groups helped people learn to live healthier lives. St. Vincent's Medical Center is proud to have sponsored more than 27 programs in the last fiscal year, reaching more than 21,000 people in our community. Almost 1,000 healthcare professionals and medical students in the Bridgeport area attended our health education seminars and lectures to advance their knowledge and share ideas.

Each year, St. Vincent's SWIM Across the Sound cancer charity serves more than 20,000 individuals (see Part VI, Line 6, Affiliated Health Care System) through the Teen Smoke Stopper program and through support groups reaching almost 1,000 people that help patients and family members deal with a diagnosis of cancer, offering hope, information, financial support, and psychosocial services. During Fiscal 2014, the SWIM provided support of approximately \$773,000 to SWIM sponsored programs.

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St. Vincent's Multispecialty Group (MSG)

St. Vincent's MultiSpecialty Group, Inc. (MSG), a subsidiary of St.

Vincent's Medical Center (for more, see Affiliated Health Care System,

Part VI, Line 6), has responded to the shortage of primary care

physicians and lack of access to care for patients in the community by

enlarging its network of providers. Since 2012, we have added

approximately 102 physicians including nine primary care doctors that

are aligned or employed through MSG, and currently have more than 175

physician members. This includes primary care physicians, intensivists,

hospitalists, surgical, oncological and cardiac specialists, urgent

care and emergency medicine physicians, as well as pediatricians. MSG

also employs almost 80 physician assistants and advanced practice

registered nurses, and is constantly growing.

MSG continues to work with community physicians who may be close to

retirement or looking to create a secession plan for their practices.

Understanding the needs of the community, it is the goal of MSG to

increase the number of employed physicians by 45 over the next three

years, in order to close the gaps where there are issues with access

and the ability for the community patients to receive care. A vital

part of our mission is our goal to practice population health

management and provide more healthcare access points for patients and

enhance their quality of care, regardless of their ability to pay or

their insurance status. We are committed to delivering care to any

patient in need.

Over the past year we have been planning the opening of another urgent

Part VI Supplemental Information (Continuation)

care walk-in facility in Stratford which, when opened in early 2015, will bring the total to five with another scheduled to open in Milford in late spring 2015. Our current facilities are located in Bridgeport, Shelton, Monroe, and Fairfield. The Milford opening is a demonstration of the fact that we are beginning to penetrate our secondary service area to fill the need for both primary and urgent care.

The Stratford Urgent Care Center will become part of St. Vincent's Stratford Health & Wellness Center, a new, state-of-the-art medical building scheduled to open in early 2015 in Stratford, and which will offer preventative, primary and urgent care. It will grow to include more services including cardiology testing, wound care, and a patient education center which will offer lectures, presentations and is complete with kitchen facilities for healthy nutrition and cooking demonstrations.

In January of 2015, Stratford will also become the home of the first St. Vincent's Health Check Clinic, located inside the Oronoque Pharmacy not far from the Oronoque Village Seniors Community and Sikorsky Aircraft. Patients will be able to visit the Health Check Clinic for illnesses such as seasonal allergies, flu-like symptoms, minor eye and ear infections, sprains and strains, low back pain, insect bites, minor skin wounds, fatigue, poison ivy and other non-emergency medical conditions. The service will also offer camp physicals, flu shots, TB testing and reading, blood pressure screening and consultation, and some vaccinations. No appointments will be necessary.

Cancer Center

Schedule H (Form 990)

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In 2010, SVMC broke ground on the Elizabeth M. Pfriem SWIM Center for Cancer Care and the renovated and expanded Michael J. Daly Emergency Department. The Elizabeth Pfriem SWIM Center for Cancer Care contains all oncology services under one roof. These services encompass the full spectrum of cancer care and include community outreach, screening and prevention, diagnostic services, surgical and medical oncology, radiation therapy, interventional oncology, clinical trials, dedicated inpatient and outpatient cancer units, palliative care, pain management, integrative oncology, support services, patient and provider education and survivorship. The Center offers integrative oncology services, including a boutique, spa services, nutrition counseling, social work, financial counseling, a meditation area, support services, and a survivorship program.

Emergency Department

The Michael J. Daly Center for Emergency and Trauma Care was renamed in December of 2009 as the first section of the expanded and refurbished emergency department which opened in the Fall 2010. The completely renovated emergency department, which tripled in size and holds 60 beds to accommodate the more than 80,000 emergency room visits annually, includes specialized trauma and critical care suites, a "Fast Track" area for minor case needs, dedicated OB/GYN rooms, pediatric area, expanded behavioral health and psychiatric area with a focus on privacy and safety, improvements in diagnostic equipment, including its own CT scanner, ultrasound and X-ray equipment to expedite diagnosis and treatment of emergency room patients, and a permanent decontamination facility for hazardous spills.

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In 2014, St. Vincent's Medical Center launched "planMYcare.com," Fairfield County's first self-scheduled urgent care service that enables patients to check-in for a projected treatment time. Patients will be able to access St. Vincent's Emergency Department and all urgent care centers online, view the next open appointments, and book the most convenient location and time frame available. St. Vincent's planMYcare.com offers patients the convenience of staying at home or missing less work rather than sit in a waiting room. Likewise, this service gives patients the ability to choose which St. Vincent's Urgent Care Center can best accommodate the patient's schedule, which is crucial for the majority of working mothers and caregivers.

At the same time, staff knows approximately when a patient will arrive and what injury, illness, or treatment they may require, saving even more time.

Family Health Center

SVMC's commitment to the community can be seen in the work of our Family Health Center (FHC). The FHC is located one block from the main campus of the hospital. It provides quality care for the patient and their entire family in one convenient location. Specialty services are offered, as well as pediatric services, adult medical care, and geriatric care. Healthcare is provided to those in the Greater Bridgeport Community who are uninsured, underinsured, low-income, handicapped, homeless, and/or frail elderly. The FHC provides a private practice model of care to those who lack continuity of care.

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Family Health Center visits for last year, excluding no-charge patients

such as nurse only visits and blood draws, were 19,514. Total

individual patients numbered 6,488. Of these patients, 50% were

Medicaid, 20% were Medicare and 30% were charity care, which includes

undocumented patients. St. Vincent's Family Health Center also provided

charity care for discharge dialysis patients in the amount of \$500,000.

Hope Dispensary

In the spring of 2011, under the leadership of SVMC staff, the Primary

Care Action Group launched the Hope Dispensary in Bridgeport, a

pharmacy offering medication, free of charge, to low income, uninsured,

and underinsured persons. The Dispensary was launched in direct

response to the economic downturn. With more and more residents

unemployed or underemployed, the Dispensary becomes even more critical

to ensuring a healthy community. The Dispensary runs on very few

resources, providing essential services with very low overhead. This

state licensed pharmacy is available for all patients of SVMC, and is

proving to be an enormous asset for patients with chronic illness. The

Primary Care Action Group and the Hope Dispensary emphasize the values

and institutional commitment to serving the poor and vulnerable

throughout the Bridgeport community.

The Hope Dispensary in FY 2014 served approximately 2,900 patients and

provided them with medication worth more than \$940,000, both from the

national Dispensary of Hope stock and from manufacturer patient

assistance programs. Of that total, the Dispensary itself filled 4,652

prescriptions amounting to \$536,500 worth of medication. They have

documented 526 new, unduplicated patients served, 100% of which were

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below the 200% of the Federal Poverty Level.

Mammography

SVMC was among the first organizations in Connecticut to make the promise of mammography screening to women without insurance, not knowing what the response would be initially. Since those early times, SVMC has screened many thousands of women who would not have had access to screening. By providing breast screenings in this regional community, medically underserved populations have been able to access services that are imperative for promoting breast health and reducing breast cancer mortality. In the past year, we have been able to provide nearly 673 screening mammograms, over 215 diagnostic mammograms, and over 368 breast ultrasounds.

This breast screening program reaches out to at-risk, asymptomatic women who have barriers that prevent them from accessing services and who are medically underserved, elderly, minority, uninsured, or underinsured. SVMC removes barriers to care by improving access through its customized coach with digital mobile mammography and through a bilingual staff and materials.

Our screening facilities include our customized Digital Mobile Mammography Coach and the Women's Imaging Center located in the new Elizabeth M. Pfriem SWIM Center for Cancer Care. St. Vincent's Medical Center provides a full range of inpatient and outpatient services with regional centers of excellence. Its American College of Radiology recognized Breast Imaging Center of Excellence operates a comprehensive

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oncology service, which is indicative of SVMC's commitment to provide expert care. The American College of Radiology accredited our Breast Ultrasound and Image-Guided Biopsy services. The ACR Commission on Quality and Safety accredited our mammography services and mobile mammography services. SVMC is committed to voluntary inspection and compliance with defined performance standards. SVMC received Full Accreditation with Commendation from the American College of Surgeon's National Commission on Cancer and the Cancer Center can be characterized as a facility with strong organizational capabilities and institutional commitment.

Breast Clinic

Unique to this program is our Breast Clinic, which employs a health care team approach and case management involving a radiologist, nurse, technologist, bilingual schedulers and staff. If breast problems are discovered, a Breast Health Educator/Navigator along with our Hispanic case manager will go "above and beyond" the requirements for follow up with all of our patients to provide the necessary education and resources. All of the women will be closely followed and possibly referred to clinics/medical centers in the area in which they reside; assuring follow up is obtained and no one is left without resources.

Integrative Oncology Support for Community

Integrative Oncology at St. Vincent's Elizabeth M. Pfriem SWIM Center for Cancer Care provides a wide range of unique services and therapies to both cancer patients and their family members. Programs focus on wellness of mind, body, and spirit from diagnosis, through treatment and beyond. Most integrative survivorship programs are free of charge

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and can be modified based on the needs of individual patients and family members. There are more than 18 programs to choose from, including yoga, music therapy, massage therapy and acupuncture, exercise and aquatic programs for cancer patients, narrative knowledge, lay navigation, patient and caregiver support groups for specific cancers, nutrition programs for cancer patients and survivors, Look Good, Feel Better Program, and oncology rehabilitation services. Integrative Oncology therapies can go a long way towards putting the patient back in control, providing symptomatic relief, and enhancing quality of life. These are available to cancer patients regardless of whether they were treated at St. Vincent's or not.

Women's Health Expo

Approximately 4,100 area residents attended a two day Women's Health Expo at Harbor Yard in Bridgeport in September 2014 which was sponsored by St. Vincent's and offered free health screenings and an ask the doctor and ask the pharmacist component.

Cardiac Community Services

In response to the increase of heart disease in women, the St. Vincent's Regina L. Cozza Women at Heart (WAH) Program began in 2004 to educate women in the community about the risk factors for cardiac disease and the differences in women's symptoms. The program consists of community events offering the following free screenings and assessments:

- Blood Pressure Screenings
- Blood Sugar Screenings

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- Educational Literature - Obtained from American Heart Association;
 Cardiovascular Nurses Association; U.S. Department of Health and Human
 Services Office of Women's Health; National Heart, Lung and Blood
 Institute and the Diabetes Association

- Counseling
- Body Fat Testing
- BMI (Body Mass Index)
- Cholesterol Screenings (free and reduced fees)
- Women's Cardiac Assessments
- Framingham Risk Assessment
- Educational Lectures by Nurses and Physicians

The program is supported through an endowment established through SVMC
 Foundation, enabling the program to provide screenings free of charge
 to women. The program includes the entire list of items above plus
 height/weight screening and nutritional lectures and counseling.

All programs are free to the public and numerous locations including
 soup kitchens have been utilized on an ongoing basis in the Greater
 Bridgeport Area to reach women in the community.

Heart Fair

A St. Vincent's Heart Fair is held annually. In February of 2014, the
 Heart Fair was held at Harbor Yard Arena in Bridgeport to reach more
 underserved individuals and families. Approximately 50 free cholesterol
 screenings were performed, along with free blood pressure checks.
 Informational videos on cardiac topics and printed material to help
 people stay healthy were also available.

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Know Your Numbers

In February 2014, in collaboration with the Primary Care Action Group's (PCAG) Cardiovascular/Diabetes Task Force, St. Vincent's Medical Center played a significant role in organizing and coordinating the area's first "Know Your Numbers" heart disease and diabetes awareness campaign. Know Your Numbers succeeded in reaching out to the public and, in particular, the underserved at soup kitchens, food pantries, churches and schools, senior centers, and other community locations, to help them understand the importance of prevention and monitoring of their chronic conditions in order to stay healthy. Our Communications Department actively supported the effort to ensure that the screenings were well publicized and attended.

A grass-roots public education campaign, Know Your Numbers drew from the best ideas of population health and brought information on risk factors for heart disease and diabetes and how to get screened to the people in the community rather than making them seek it out. Free screenings included Body Mass Index (BMI), blood pressure, blood sugar, and cholesterol. For those whose numbers warranted it, St. Vincent's Family Health Center and several area clinics were on hand to facilitate convenient follow-up to primary care physicians or clinics.

While Know Your Numbers reached more than 200 people across 10 sites, 49% of those served came from Bridgeport, with the highest concentration at Bridgeport soup kitchens and an inner city church. Staff and volunteers from St. Vincent's led the campaign which also included volunteers from other healthcare organizations and the Boards

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of Health of Bridgeport and surrounding towns. The campaign did reach its goal of identifying unknown cases of cardiovascular disease and diabetes, with 50% of people screened receiving a doctor referral based on their results.

Although various socioeconomic groups were included, the campaign's main focus was in educating an important target audience in the community at risk for cardiovascular disease: the low-income and minority populations. Almost 50 black participants were screened through the program and results bore out local and national studies showing significant risk factor averages at each site for obesity, blood pressure, and diabetes.

Staff and volunteers from both St. Vincent's Medical Center and Bridgeport Hospital, other service organizations, and the Boards of Health of Bridgeport and the surrounding towns of Stratford, Fairfield, Trumbull, and Monroe came together to teach individuals the link between these screening numbers and their overall health. More than half received health education on how to prevent or better manage their existing disease while 50% received a doctor referral based on screening results.

Armed with results from the last campaign, we are ready to double the locations and increase the numbers of volunteers to conduct the screenings and broaden the safety net for the underserved.

Parish Nurse Program

The Parish Nurse Program is a broad-reaching partnership with 76

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churches of all faiths in the Greater Bridgeport Area and all of
Fairfield County supporting nurses in their faith communities through
collaboration and networking. Through the program, our nurses provide
educational programs, health screenings, referrals, resources and
support to the parishioners of the churches. Our Parish Nurses
participated in a community wide health awareness program called "Know
Your Numbers."

Farmers Market

Since 2009, St. Vincent's has operated a farm stand in collaboration
with the Wholesome Wave Foundation, making healthful locally grown food
available to those in Bridgeport who need it most and to its own
employees. Through the collaboration, the doubling of incentive coupons
such as SNAP and WIC for people living below the income threshold has
been made possible.

During the 2014 Farmers Market season, in addition to providing a
healthy option for its own employees, volunteers and visitors, the St.
Vincent's Farm Stand served 1,716 incentive-based customers. It had a
high volume of incentive-based customers because of this doubling
feature and due to its location in front of the Hospital, which meant
it was easily accessible by public transportation, a big plus for
underserved area residents. Transportation normally poses a barrier for
such residents to buy healthy fresh food.

The St. Vincent's stand is open to the general public and operates one
day a week. The Farm Stand is another way in which St. Vincent's
responded to the Community Health Needs Assessment that identified

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obesity and the high incidence of diabetes and cardiac disease as major challenges in the Greater Bridgeport Area. The Farm Stand extends the services the Hospital provides beyond medical treatment and medications into providing access to healthy food and nutrition education which can help fight obesity and chronic illnesses such as diabetes and heart disease and promote overall wellness. It ties in with the national healthcare shift to an emphasis on prevention versus mere treatment of disease, which translates into both improved quality of life for residents and cost savings.

The Farm Stand is another way in which St. Vincent's demonstrates its mission of caring for the community.

Food Drive

Starting in 2011, St. Vincent's Mission Services Committee and Aquarion Water Company, have annually collaborated on a project called the House of Hope Food Drive, which assists area food banks and shelters who were experiencing severe shortages. With a shed decorated to look like a house located outside St. Vincent's Medical Center, the House of Hope most recently passed its goal and collected almost five tons or 10,000 pounds of food, which was distributed to area food banks and shelters.

The initiative received heavy support from the staff and visitors to St. Vincent's Medical Center and its affiliates. Monetary donations were translated into double the food purchased through an agreement with an area supermarket chain. The drive originated as a response to the needs of the underserved in the community by helping to stock area food banks and shelters with healthy and readily accessible foodstuffs.

The Port 5 Veterans Group became a recipient for the first time in

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2014.

Educational/Career Programs Offered to Area Students

St. Vincent's Medical Center conducts student tours and educational programs for elementary, middle, high school, and sometimes college students in an effort to provide information about health and technology, lessen anxiety about hospital visits and give an overview of medical careers. Through the experience of seeing medical professionals at work in the Hospital, students can envision themselves in these roles. They also learn about necessary educational requirements, qualifications, and professional opportunities through a close-up, hands-on approach. The personal stories of how individuals followed different paths and discovered rewarding careers in healthcare are inspirational and motivational for many students as well. These programs vary in length running from 2-6 hours with staff from many departments taking time out from their busy work day to participate.

The number of groups visiting the Medical Center for the healthcare career tour averages about 25-30 annually. St. Vincent's focuses on inner city students from Bridgeport and Stratford, and also has a well-developed program with Trumbull High School. Students from throughout Fairfield County are also accommodated. Students come from public, private, and religious schools, and also include the handicapped and mentally disabled. St. Vincent's has formed collaborations with a number of organizations that are working with Bridgeport youth, such as Project GearUp out of Yale University and BASE CAMP for Bridgeport high school girls interested in STEM. SVMC

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often hosts groups of students from these programs.

Volunteers

Volunteers are an integral component to fulfilling the mission of the Organization. In FY 2014, 520 volunteers provided the Medical Center with more than 46,000 hours of service. Volunteers work in every department of the Medical Center, providing nurturing support and expertise to patients and their families. In fiscal year 2015, Volunteer Services will focus strategy on the patient experience and volunteer programs to build a job pipeline for the community.

Behavioral Health

Since 2003, St. Vincent's has offered comprehensive educational programs for the community, designed to increase awareness and provide resources on a full spectrum of behavioral health issues. St. Vincent's serves the mental health needs of the PSA through both inpatient and outpatient services, through St. Vincent's Behavioral Health, a department of the Medical Center.

The mission of St. Vincent's Behavioral Health Services is to offer an integrated and complete continuum of mental health, addiction, dual-diagnosis, and supportive services for children, adolescents, and adults. St. Vincent's strives to fulfill this mission by effectively addressing the behavioral health needs of the community and also strives to be a leader in prevention and education of mental health and substance abuse issues. These programs were formerly operated by Hall-Brooke Behavioral Health Services, which was an affiliate of St.

Part VI Supplemental Information (Continuation)

Vincent's Medical Center, Hall-Brooke provided mental health services

for more than 110 years and, in 2001, completed building a 76-bed

psychiatric hospital which includes 60 adult beds and 16

child/adolescents beds. This facility is now operated by the Medical

Center.

Residential Behavioral Health Services

St. Vincent's Behavioral Health Services also operates the Community

Residential Services program which provides residential support and

permanent supportive housing to persons age 18 and over who are

homeless with significant behavioral health disorders. Interventions

and services are focused on recovery, relapse prevention, development

of independence, assistance with activities of daily living, illness

self-management, and access to health care benefits, crisis

intervention, access to community mainstream services and 24 hour

emergency on-call services. The program operates 10 shared living

residential sites, 7 family units, and 59 scattered site apartments in

the communities of Norwalk, Bridgeport, and Fairfield, Connecticut.

Based upon 97% occupancy at these sites, Community Residential Services

provided approximately 44,318 days of residential support/housing

services. Grants from the U.S. Department of Housing and Urban

Development and the Connecticut Department of Mental Health and

Addiction Services provide funding for these programs.

Autism and Developmental Services

St. Vincent's Autism and Developmental Services program provides

outpatient advocacy and treatment services for children with autism

spectrum disorders. The program provided 195 patient/family visits for

Part VI Supplemental Information (Continuation)

resource coordination, diagnostic testing, parent support groups,
individual and family therapy, family workshops, sibling support
groups, and social skills groups.

Part VI, Line 6:

The St. Vincent's Medical Center (Medical Center), a
subsidiary of its parent, St. Vincent's Health Services Corporation
(SVHS), is a member of Ascension Health. In December 2011, Ascension
Health Alliance, doing business as Ascension, became the sole corporate
member and parent organization of Ascension Health, a Catholic,
national health system, consisting primarily of nonprofit corporations
that own and operate local health care facilities, or Health
Ministries, located in 23 of the United States and the District of
Columbia. In addition to serving as the sole corporate member of
Ascension Health, Ascension serves as the member or shareholder of
various other subsidiaries. Ascension, its subsidiaries, and the Health
Ministries are referred to collectively, from time to time hereafter as
the System.

Ascension is sponsored by Ascension Sponsor, a Public Juridic Person.

The Participating Entities of Ascension Sponsor are: the Daughters of
Charity of St. Vincent de Paul, St. Louise Province, the Congregation
of St. Joseph, the Congregation of the Sisters of St. Joseph of
Carondelet, the Congregation of Alexian Brothers of the Immaculate
Conception Province-American Province and the Sisters of the Sorrowful
Mother of the Third Order of St. Francis of Assisi - US/Caribbean
Province.

Part VI Supplemental Information (Continuation)

The Medical Center is a nonprofit hospital system, consisting of an acute care hospital located in Bridgeport, Connecticut and a behavioral health hospital located in Westport, Connecticut. The Medical Center provides inpatient, outpatient, and emergency care services for residents of the Greater Bridgeport Area and its neighboring towns. Admitting physicians are primarily practitioners in the local area. Subsidiaries of the Medical Center include the St. Vincent's Multispecialty Group, Inc. (Multispecialty Group) and the St. Vincent's College, Inc. (College). The Multispecialty Group, a nonprofit subsidiary of the Medical Center, is a consolidated group of primary care and specialty physicians and allied health professionals providing services to the Medical Center and the community. The College, a nonprofit subsidiary of the Medical Center, is an institution of higher learning that offers bachelor degrees in nursing and radiologic sciences, associate degrees in nursing, radiography, medical assisting, and general studies, as well as certificate programs in multiple health care fields. The Medical Center is related to Ascension Health's other sponsored organizations through common control. Substantially all expenses of Ascension Health are related to providing health care services.

The accompanying consolidated financial statements include the accounts of the Medical Center, the Multispecialty Group, and the College. All significant intercompany transactions have been eliminated in consolidation.

On July 1, 2013, Hall-Brooke Behavioral Health Services, Inc.

(Hall-Brooke) closed its special education school and merged its

Part VI Supplemental Information (Continuation)

remaining operations and all of its assets with the Medical Center. In

consideration, the Medical Center assumed all of the outstanding

liabilities and future operations of Hall-Brooke and the responsibility

to continue to engage in the operations of the remaining services.

Mission

The System directs its governance and management activities toward

strong, vibrant, Catholic Health Ministries united in service and

healing and dedicates its resources to spiritually centered care, which

sustains and improves the health of the individuals and communities it

serves. In accordance with the System's mission of service to those

persons living in poverty and other vulnerable persons, each Health

Ministry accepts patients regardless of their ability to pay. The

System uses four categories to identify the resources utilized for the

care of persons living in poverty and community benefit programs:

- Traditional charity care includes the cost of services provided to

persons who cannot afford health care because of inadequate resources

and/or who are uninsured or underinsured.

- Unpaid cost of public programs, excluding Medicare, represents the

unpaid cost of services provided to persons covered by public programs

for persons living in poverty and other vulnerable persons.

- Cost of other programs for persons living in poverty and other

vulnerable persons includes unreimbursed costs of programs

intentionally designed to serve the persons living in poverty and other

vulnerable persons of the community, including substance abusers, the

homeless, victims of child abuse, and persons with acquired immune

deficiency syndrome.

Part VI Supplemental Information (Continuation)

- Community benefit consists of the unreimbursed costs of community benefit programs and services for the general community, not solely for the persons living in poverty, including health promotion and education, health clinics and screenings, and medical research.

Discounts are provided to all uninsured patients, including those with the means to pay. Discounts provided to those patients who did not qualify for assistance under charity care guidelines are not included in the cost of providing care to persons living in poverty and other community benefit programs. The cost of providing care to persons living in poverty and other community benefit programs is estimated using internal cost data and is estimated by reducing charges forgone by a factor derived from the ratio of total operating expenses to billed charges for patient care.

The amount of traditional charity care provided, determined on the basis of cost, was approximately \$5,600,000 and \$4,444,000 for the years ended September 30, 2014 and 2013, respectively. The amount of unpaid cost of public programs, cost of other programs for persons living in poverty and other vulnerable persons, and community benefit cost are reported in the accompanying supplementary information.

St. Vincent's Health Services (Health Services)
St. Vincent's Health Services (Health Services), the parent company of St. Vincents Medical Center, is a nonprofit integrated health delivery system. Health Services consists of the following organizations - St. Vincent's Medical Center, St. Vincent's Foundation, St. Vincent's College, Inc., St. Vincent's Multispecialty Group, St. Vincent's

Part VI Supplemental Information (Continuation)

Special Needs Services, and St. Vincent's Development, Inc. Through the work of the Medical Center, in partnership with our affiliate network, Health Services is able to meet the comprehensive needs of its home community and the surrounding community.

St. Vincent's Multispecialty Group (MSG)

St. Vincent's Multispecialty Group, Inc. (MSG) is a subsidiary of the Medical Center. With more than 175 physicians, more than 75 nurse practitioners, and physician assistants board certified within their respective specialties, MSG is one of the largest provider networks within Fairfield County, Connecticut. The size of the network enables us to offer the community expanded access and coordination of care; however, the singular focus of providing a comprehensive approach to health care is solely dedicated to a patient's individual needs.

St. Vincent's Medical Center Foundation, Inc.

As a philanthropic arm, St. Vincent's Medical Center Foundation's (the Foundation) primary purpose is to raise funds in order to help meet certain financial needs of St. Vincent's Health Services Corp. The Foundation's goal is to create and perpetuate financial support for programs and services on behalf of St. Vincent's historic mission to serve the poor and medically underserved populations. The growing support for St. Vincent's throughout the region is a reflection of our mission-driven programs and the quality of our services. The Foundation works tirelessly to raise nearly \$2 million a year for its SWIM Across the Sound cancer charity through almost 30 fundraising events annually to reach people who do not have access to critical screening services, and to provide free or subsidized services to the community. It also

Part VI Supplemental Information *(Continuation)*

raises more than \$1 million a year in support of the other entities.

SWIM Across the Sound Cancer Charity

The Foundation works extremely hard year-round and the SWIM Across the Sound has demonstrated commitment to the cause of supporting people with cancer since 1987. Neighboring hospitals, which do not conduct as extensive a fundraising effort for patient care as St. Vincent's, routinely send patients to St. Vincent's when their grant money ends, or when they are not able to pay for free care. St. Vincent's provides a substantial safety net to the region, as you do not need to be a patient at St. Vincent's to be helped by the SWIM.

The SWIM offers 45 unique programs and services ranging from cancer education, support, and screening - from prevention to survivorship. St. Vincent's mission to serve the community can most poignantly be observed in their one-on-one financial assistance program, funded and operated by the Foundation. Often a diagnosis of cancer can be financially devastating to the patient and her/his family. We step in when a patient is undergoing treatment to relieve financial hardships.

Assistance is there as a safety net for those who have nowhere else to turn. In the past few years, St. Vincent's Foundation has provided direct financial assistance in the amount of more than \$600,000 annually to the community.

The SWIM's one-on-one financial assistance helps to pay utility bills, car payments, and rent/mortgage payments so a family member can take time off from work to be with their loved one when it

Part VI Supplemental Information (Continuation)

is so important to be at their side. With a \$2,500 cap per patient,
 which reflects an increase of \$500 over the last few years, the
 Foundation provides one of the largest financial assistance programs
 for cancer patients in the country. Once the \$2,500 cap is reached, the
 Foundation can use funds from their "Above and Beyond Fund," or will
 make every attempt possible to secure additional support for the
 patient.

The SWIM is there for the patient who is undergoing local radiation and
 is experiencing some skin reactions and requires a special prescription
 that is not covered by their insurance. The SWIM is there for the woman
 who needs a wig and prostheses. The SWIM is there for the family that
 needs family counseling because there are small children left
 motherless and they need extra assistance in picking up the pieces and
 moving forward with their own lives. The SWIM is there to pay
 transportation costs to get to appointments and to support a patient
 with nutritional and exercise counseling. The SWIM also funds support
 groups that help patients and family members deal with a diagnosis of
 cancer, offering hope, information, financial support and psychosocial
 services.

With ever growing needs because of the economic downturn and lack of
 health care access, there are more and more women in need of breast
 health care within our service area than ever. Frequently, patients are
 referred from surrounding hospitals to St. Vincent's SWIM cancer
 services. Recently, we have also received numerous requests for
 assistance beyond our traditional service area.

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Smokestoppers

As part of St. Vincent's mission to reduce and prevent cancer, St.

Vincent's Foundation established the St. Vincent's SWIM Smokestoppers

Program in March of 1996. Smokestoppers is a unique and interactive

tobacco prevention and smoking cessation program designed for young

people. The SWIM Smokestoppers offers a lively and inspiring program

that educates Connecticut's young people about the dangers of smoking

and the use of so-called "smokeless" tobacco. Smokestoppers currently

combines two kinds of courses, offered free to the community: (1)

prevention classes for students who do not yet smoke and (2) cessation

classes to help teens who are already smoking take the difficult step

of quitting. Program presenters are former smokers, who share their

experiences in a relevant, accessible way.

The program has a proven record of helping thousands of young people,

and is consistently invited back to schools year after year. In the 18

years since its inception, our Smokestoppers Program has reached over

250,000 young people in 200 schools throughout the state. Presenters

research current trends in youth tobacco use, new products, and new

marketing strategies used by the tobacco companies to target young

people. This research is integrated into the presentation, creating an

updated, relevant program for each and every session.

St. Vincent's College

St. Vincent's College (the College), a nonprofit subsidiary of St.

Vincent's Medical Center, is the only college in the State of

Connecticut committed solely to the preparation of nurses and allied

health professionals. As a single purpose institution, the College

Part VI Supplemental Information (Continuation)

focuses solely on educating students for the healthcare ministry at the certificate, associate and bachelor levels.

St. Vincent's College offers associate degrees in nursing, radiologic sciences, medical assisting, and general studies. In addition, two online baccalaureate completion programs in Nursing (RN-BSN) and Radiologic Sciences (BSRS) are the College's newest and fastest growing programs. The College also offers a number of certificate programs, some designed to provide entry level job skills and others that are post degree certificate and continuing education programs designed to prepare health professionals for additional roles. Many who enroll at St. Vincent's College are returning to college to seek second careers or have had a life changing experience which has led them to pursue a healthcare career.

For more than 100 years, St. Vincent's College has played a significant role in serving the healthcare needs of the Greater Bridgeport Area and surrounding communities. The College is focused on educating healthcare professionals for current and emerging roles in response to the changing healthcare landscape. An immediate need is being addressed through the online RN-BSN completion program. This program provides a pathway for registered nurses to earn a baccalaureate degree. The knowledge and skills gained in this program prepare nurses to render an even higher level of care and gives them greater role flexibility within their chosen profession of nursing. Increasing numbers of BSN prepared nurses also support hospitals in the attainment and maintenance of Nursing Magnet Recognition, the highest national honor for nursing excellence. St. Vincent's Medical Center is a designated

Part VI Supplemental Information (Continuation)

Magnet Hospital.

Another bachelor degree completion program offered by St. Vincent's

College is the Bachelor of Science in Radiologic Sciences (BSRS). This

program is also designed to support the need of the healthcare

community for radiographers with specialized certifications in a number

of imaging modalities, i.e. Sonography, MRI Imaging, CT Scanning,

Mammography and Bone Densitometry and in Healthcare Management.

The College has traditionally served students from Fairfield and New

Haven Counties and attracts students from 81 cities and towns across

Connecticut, representing seven of the eight counties in Connecticut:

- 44% of the students come from the Greater Bridgeport Area

- 92% from Fairfield and New Haven Counties

- 99% of the current students (average age 30) are Connecticut

residents preparing to enter the workforce or advance their careers in

healthcare fields that are seeing continued growth in our state.

- More than 80% of St. Vincent's students work full or part time while

also completing their education.

- More than 70% of St. Vincent's students apply for aid

- 60% of students who complete the aid application have a family income

of less than \$50K per year - many are also supporting families

- Thirty-seven percent (37%) of the student population are ethnic

minorities

The vast majority of the College's graduates have sought and found jobs

in the Fairfield and New Haven County areas of the state. Future

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graduates are expected to do the same.

St. Vincent's Special Needs Services

St. Vincent's Special Needs Services (SVSNS) is a human services

organization with a mission "to foster the physical, educational,

spiritual, emotional, and social development of persons with

disabilities so they may play, learn, work and live in the community."

SVSNS began in 1955 when the organization was founded as a United

Cerebral Palsy Clinic to provide medical evaluation and therapeutic

intervention for young children with cerebral palsy and other

developmental disabilities. Several years later, a comprehensive school

program was developed and licensed by the Connecticut State Board of

Education.

A private school program for children with special needs is the central

focus of programming provided at the SVSNS Feroletto Children's

Development Center in Trumbull, Connecticut. The Center is located in

the Trumbull Corporate Park and spans 43,000 square feet. During their

2014 fiscal year, this special needs school provided educational and

health services to approximately 75 students from several towns

throughout the state. Their diagnoses include cerebral palsy, acquired

traumatic brain injury, and congenital or chromosomal abnormalities,

among others. Most of the students have more than one diagnosis. Eleven

of the students reside in one of the three pediatric group homes, one

of which is in the school building.

While the children are receiving an education at the Feroletto Center,

this is not a traditional school as it also provides health services in

Part VI Supplemental Information (Continuation)

conjunction with traditional-based school curricula. The staff includes
 special education teachers and assistants, physical therapists,
 occupational therapists, speech language pathologists, registered
 nurses, licensed practical nurses, and community recreation and family
 support facilitators. This is the only facility of its kind in the
 region.

St. Vincent's Development Corporation

St. Vincent's Development Corporation is a nonprofit corporation
 managing various real estate holdings within the Greater Bridgeport
 Area.

Part VI, Line 7, List of States Receiving Community Benefit Report:

CT