

## Nevada Hospital Reporting (Pursuant to NRS 449.490, Sections 2 through 4)

### Demographic Information

Name of Organization	Renown Regional Medical Center
Location (City & State)	Reno, Nevada
Fiscal Year Ended	06/30/2015
Description of Organization (number of facilities, bed size, major services & centers of excellence)	Renown Regional Medical center is a Nevada nonprofit and federally tax exempt 501c3 corporation that operates 808-bed level II Trauma Center. The Medical Center provides a full range of medical and surgical services to both inpatients and outpatients.
Governance/Organizational Structure (tax exempt status, affiliated entities)	Renown Regional Medical Center is governed by a community based Board of Governors and is a Nevada nonprofit and federal 501c3 tax exempt corporation

### Capital Improvements

#### New Service Lines:

New Service Lines: NONE

#### Major Facility Expansion:

Description	Prior Years Costs	Current Year Cost	R=Replace N=New	Const. In Progress?
	\$	\$		
	\$	\$		

#### Major Equipment:

Description	Prior Years Costs	Current Year Cost	R=Replace N=New	Expansion
Da Vinci XIXI		\$1,698,845	N	
Da Vinci SIE		\$ 628,340	N	
O-Arm Imaging System		\$ 914,451	N	
Hospital Beds		\$1,179,014	R	
Bedside Monitors		\$ 595,644	R	
Ultrasound Machines		\$1,069,364	R	
Stretchers		\$ 571,332	R	

#### Other Additions and Total Additions for the Period:

Other capital additions for the period not included above	\$10,919,367
<b>Total Additions for the Period (Sum of Expansion, Equipment &amp; Other Additions)</b>	<b>\$17,576,357</b>

### Home Office Allocation

Describe the **methodology** used to allocate home office costs to the hospital

The actual home office expenses are allocated to subsidiaries based on the relationship of budgeted subsidiary revenue to the combined budgeted revenue for all subsidiaries.

## Community Benefits Structure

Hospital Mission Statement	Renown Health makes a genuine difference in the health and well-being of the people and communities we serve.
Hospital Vision	Renown Health, with our partners, will inspire better health in our communities.
Hospital Values	Caring, Integrity, Collaboration, Excellence
Hospital Community Benefit Plan (groups to target, decision makers, goals)	Renown completes a community needs assessment that is used to develop a community benefit plan to meet the needs of our community. The Renown Health Board of Directors reviews the needs assessment and approves the plan. Renown has a community benefit committee that develops the needs assessment, community benefit plan and tracks the community benefit activities during the year.

## Mission Mapping (these are not required fields)

	Yes	No
Does your mission map to your strategic planning process?	Yes	
Do you have a dedicated community benefits coordinator?	Yes	
Do you have a charitable foundation?	Yes	
Do you conduct teaching and research?	Yes	
Do you operate a Level I or Level II trauma center?	Yes	
Are you the sole provider in your geographic area of any specific clinical services? (If Yes, list services.)	<ul style="list-style-type: none"> <li>- Pediatric ICU</li> <li>- Children's Imaging Center with region's only low dose 128-slice CT scanner</li> <li>- Level II Trauma Center</li> <li>- Neuro biplane angiography</li> <li>- Neuro interventional suites</li> <li>- JCAHO-accredited Primary Stroke Program</li> <li>- ABRET-accredited epilepsy-monitoring lab</li> <li>- Children's ER</li> <li>- Only CHA-Affiliated Children's Hospital (formerly NACHRI)</li> <li>- D-spect cameras to rule out heart attacks faster</li> <li>- Children's Specialty Care Clinic</li> <li>- Children's Cystic Fibrosis Clinic</li> <li>- Only triple accredited Cancer program</li> <li>- Only daVinci Epicenter training site in Nevada</li> <li>- Varian True-Beam Linear Accelerator</li> <li>- Only hospital affiliated with Children's Miracle Network Hospitals in the region</li> <li>- Northern Nevada's first and only SonoCiné full breast screening ultrasound</li> <li>- Only Heart Nurse Navigator program</li> </ul>	

### Community Health Improvements Services

	Benefit \$2,743,831
Community Health Education	\$0
Community-Based Clinical Services	\$1,206,716
Health Care Support Services	\$1,537,115

### Health Professions Education

	Benefit \$3,719,447
Physicians/Medical Students (net of Direct GME payments)	\$2,777,762
Nurses/Nursing Students	\$580,423
Other Health Professional Education	\$361,262
Scholarships/Funding for Professional Education	\$0

### Subsidized Health Services

	Benefit <del>\$58,065,164</del>
Total Uncompensated Cost from Uncompensated Cost Report filed with DHCFP	\$70,534,547
Less: <b>Medicaid</b> Disproportionate Share Payments received for the Period	\$4,567,302
Less: Other Payments Received for these Accounts (County Supplemental Funds, etc.)	\$6,705,378
Net Uncompensated Care	\$59,261,867
Uncompensated SCHIP (Nevada Checkup) Cost	\$0
Uncompensated Medicare Cost (see instructions)	\$0
Uncompensated Clinic or Other Cost	\$734,336
Other Subsidized Health Services	\$0
Less: Cost Reported in Another Category	\$8,580,696
Total Subsidized Health Services	\$51,415,507

### Research

	Benefit \$286,799
Clinical Research	\$286,799
Community Health Research	\$0
Other	\$0

### Financial Contributions

	Benefit \$2,172,537
Cash Donations	\$1,972,450
Grants	\$0
In-Kind Donations	\$0
Cost of Fund Raising for Community Programs	\$200,087

### Community Building Activities

	Benefit \$0 <i>207,209</i>
Physical Improvements and Housing	\$0
Economic Development	\$0
Community Support	\$0
Environmental Improvements	\$0 <i>207,209</i>
Leadership Development and Leadership Training for Community Members	\$0

Coalition Building	\$0
Community Health Improvement Advocacy	\$0
Workforce Development	\$0

### Community Benefit Operations

	Benefit \$69,823
Dedicated Staff	\$69,823
Community Health Needs/Health Assets Assessment	\$0
Other Resources	\$0

### Other Community Benefits

(Briefly explain other community Benefits provided but not captured in sections above)	Benefit \$0
Property Tax (see below)	\$0
	\$0
Other Community Benefits Subtotal	\$0

### Total Community Benefit

	Benefit <del>\$67,057,601</del> 60,615,153
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### Other Community Support

	Benefit \$60,017
Property Tax	\$60,017
Sales and Use Tax	\$0
Modified Business Tax	\$0
Other Tax (describe)	\$0
Assessment for not meeting minimum care obligation of NRS 439B.340	\$0
Total Other Community Support	\$60,017

### Total Community Benefits & Other Community Support

	<del>\$67,117,618</del> 60,675,170
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List and briefly explain educational classes offered

See attachment A for full listing.

List and briefly describe other community benefits provided to the community for which the costs cannot be captured

Renown Regional Medical Center is an accredited, 808-licensed bed, general and acute-care hospital serving communities in northern Nevada, northeastern California and the adjacent areas of Oregon and Idaho. A not-for-profit hospital offering a full range of medical, diagnostic and ancillary services, Renown Regional provides the only designated Level II Trauma Center between Sacramento and Salt Lake City. It is the teaching facility for the professional development of the region's healthcare professionals.

Renown Regional provides necessary healthcare services regardless of race, creed, sex, national origin, handicap, age or ability to pay. People in our community have access to Renown Regional services in specialties including cancer, heart, neurosciences, orthopedics, surgery, intensive care and women's and children's health. Renown Regional is governed by a board of community members, the majority of who live in our primary service area and who are neither employees, independent contractors or family members. Renown Regional extends privileges on its medical staff to all eligible and qualified physicians. All surplus funds are retained in the organization to make improvements in patient care, medical education and research. As part of an integrated health network, Renown Regional Medical Center provides many services to the community that otherwise would require that people travel to other cities to receive care. These programs, services and technology include a Level II Trauma Center, a pediatric intensive care unit, TomoTherapy High Art System and Varian TrueBeam, biplane angiography, a dedicated PET/CT scanner, a Joint Commission-certified Primary Stroke Center, comprehensive amputee services, an ABRET-accredited Epilepsy Monitoring Lab, an Intersocietal Commission-accredited Echocardiography Lab, multi-specialty da Vinci Robotic Surgery Program and a Chest Pain Center using the D-SPECT heart camera. Renown Regional also offers access to the largest number of clinical research trials in the region.

Renown Regional comprises of the Medical Center and multiple Centers for Advanced Medicine; these house medical specialty and subspecialty practices. In partnership with the more than 733 physicians on its medical staff, Renown Regional offers more than 40 physician specialties, including cardiac surgery, cardiology, endocrinology, geriatrics, gynecologic oncology, infectious disease, neurosurgery, orthopedics, otolaryngology, pediatric anesthesia, pediatric endocrinology, pediatric gastroenterology, pediatric neurology, pediatric oncology and hematology, perinatology, plastic surgery, psychiatry, pulmonary medicine, radiation therapy, radiology, rheumatology, urology, nephrology, physiatry and medical acupuncture.

For the fiscal year ending June 30, 2015, Renown Regional, along with its parent, Renown Health and its subsidiaries, provided more than \$78 million in benefit to the community (using community benefit numbers gathered by the Nevada Hospital Association using state-approved criteria to ensure consistency). For a full report on the benefit Renown Health provided to our community as well as our needs assessment and community benefit plan go to [www.renown.org/communitybenefit](http://www.renown.org/communitybenefit).

### Discounted Services & Reduced Charges Policy & Procedures

Charity Care Policy: (attach copies of actual policies if first filing or policy changed)	Policy Effective Date: 6/11/13
Does the hospital have a policy? (Yes or No)	Yes
Policy covers up to what % of Federal Poverty Level?	100%
Discounts given up to what %?	100% of balance less a co-pay of \$100 (co-pay can be waived in cases of extreme hardship)
Amount of time to make arrangements (in days or months)	Any time the patient expresses a financial hardship and wishes assistance up to one year of service and/or up to 60 days post denial from a governmental program

Other comments	
Prompt Pay or Other Discounts: (attach copies of actual policies if first filing or policy changed)	Policy Effective Date: 8/1/06
Does the hospital have a policy? (Yes or No)	Yes
Discounts given up to what %?	40%
Amount of time to make arrangements? (in days or months)	10% discount given if patient pays in full prior to or at time of service/discharge; additional 30% given to all uninsured patients.
Other comments	

### Collection of Accounts Receivable Policies & Procedures

Effective Date of Policy	2/11/14
Does hospital have established policy?	Yes
Does hospital make every reasonable effort to help patient to obtain coverage? (Yes or No)	Yes
Number of patient contacts before referral to collection agency	Minimum of 7 attempts
Is collection policy consistent with the Fair Debt Collection Practices Act? (Yes or No)	Yes
Methods of communication with patient (e.g. phone, letter, etc.)	Telephone and written
Number of days prior to referral to collection agency	120 days unless patient has told us they do not intend to pay the bill or the account statements are returned due to a bad address and the patient's phone is disconnected or not in service or the patient fails to cooperate with obtaining financial assistance.
Is the patient notified in writing of referral to collection agency?	Yes
Is the patient notified in writing prior to a lawsuit being begun?	Yes
Other comments	

### Chargemaster

Is hospital chargemaster available in accordance with NRS 449.490 (4) requirements? (Yes or No)	Yes
Is the chargemaster updated at least monthly? (Yes or No)	Yes
How is the chargemaster made available? (E.g. format, location, etc.)	Electronically, at 1000 Ryland St., Suite 303, Reno, NV, with the assistance of our chargemaster staff.

**Addendum to Nevada Hospital Report:**

(Complete all shaded areas.)

**Hospital: Renown Regional****FYE: 2015**

Line #			
1	Net Income (from NHQR for FYE, Tab A01, last column-including non-operating gain/loss)		<u>\$71,911,899</u>
	<b>Operating Margin:</b>		
2	Net Operating Income (from NHQR tab A01, column Q)		\$75,058,495
3	Total Operating Revenue (from NHQR, Tab A01, column M)		<u>594,698,895</u>
4	Operating Margin (Line 2 divided by Line 3)		<u>12.62%</u>
	<b>Calculation of Total Ratio of Cost to Charges:</b>		
5	Total Operating Cost (from NHQR, Tab A01, column O)		<u>\$519,640,400</u>
6	Inpatient Billed Charges (from NHQR, Tab A02, column I)	\$ 1,435,487,870	
7	Outpatient (from NHQR, Tab A03, column I)	1,030,940,430	
8	Long Term Care (from NHQR, Tab A04, column I)	0	
9	Clinic (from NHQR, Tab A05, column I)	4,717,908	
10	Sub Acute (from NHQR, Tab A06, column I)	0	
11	Total Billed Charges (Sum of lines 6 through 10)		<u>2,471,146,208</u>
12	Total Ratio of Cost to Charges (Line 5 divided by Line 11)		<u>0.2103</u>
	<b>Average Daily Occupancy:</b>		
13	Patient Days (from NHQR Utilization Report, Tab A02, column I)		<u>145,823</u>
14	Observation hours	444,488	
15	Hours in the day	24	
16	Equivalent observation patient days (Line 14 divided by Line 15)		<u>18,520</u>
17	Total Patient Days (Line 13 + Line 16)		<u>164,343</u>
18	Days in the Reporting Period		<u>365</u>
19	Average Daily Occupancy (Line 17 divided by Line 18)		<u>450</u>
20	Total Community Benefits (from Nevada Hospital Report Total Community Benefit Line)		<u>\$60,615,153</u>
21	Community Benefits as a % of Net Operating Revenue (Line 18 divided by Line 3)		<u>0.101925787</u>
22	Is the hospital owned by a consolidated corporation? Yes or No		Yes
23	Is the net income of the consolidated corporation publicly available? Yes or No		No
24	If you answered "Yes" to both of the questions on lines 20 and 21, report the net income of the consolidated corporation on this line and attach the annual report.		
25	<b>Medicare Ratio of Cost to Charges</b>		<u>0.1960</u>

## Home Office Services

If you are provided services from the home office, please mark the type of services provided below:

	<b>"X" those which apply</b>
Information Technology	X
Hospital Management	X
Cash Management	X
Insurance Administration (including professional & general liability, workers comp & property)	X
Risk management	X
Human Resources	X
Medicare & Medicaid Reimbursement Services	X
Accounting & management reporting, accounts payable	X
Decision support	X
Taxation	X
Internal Audit	X
Finance	X
Patient Billing & Collection-Centralized business office	X
Design & Construction	
Equipment/Supplies Purchasing	X
Marketing & Public Relations	X
Physician Recruitment	X
Issuance of equity or long-term debt, shareholder relations	X
Payroll & related taxes	X
Employee benefits & pensions	X
Property/Facilities Management	X
Continuing Education	X
Corporate Compliance	X
Mailroom/Messenger	X
Printing and Duplicating	X
Planning	X
Business Development	X
Contracting	X
Intern Program	X
Child Care Center	X
Telecommunications	X
Community Benefit	X