

COMMUNITY BENEFIT PROGRAM

Aspirus Medford Hospital & Clinics is dedicated to improving our community service and focusing continuously on meeting the changing health care needs of our community. It is with this ambition that in 2014 we established our Community Benefit Program.

The following community health needs were identified through our Community Health Improvement Plan process:

Community Health Need	Prioritization
Access to Care	Primary
Nutrition	Primary
Physical Activity	Primary
Substance Abuse	Secondary
Cost of Care	Secondary
Health Care for children	Secondary
Health Education	Secondary
Health Care for the Elderly	Tertiary
Chronic Diseases	Tertiary
Mental Health	Tertiary
Dental Health	Tertiary

Aspirus Medford Hospital & Clinics is responding to these identified community health needs through a series of steps that we collectively refer to as our “implementation strategy.” Included in this strategy is the establishment of a community benefit program in which community agencies and members can apply for funding for programs and initiatives that have a direct impact on a community health need.

A Community Benefit is a program or activity that provides treatment or promotes health and healing that is:

- Responsive to identified health priorities determined in collaboration with community stakeholders;
- Focused on persons who are low income, disenfranchised or located in an area with disproportionate unmet health-related needs;
- Integrated into the facility’s strategic planning and budgeting process;
- Planned and implemented with program objectives and measurable outcomes that are beneficial to community stakeholders; and
- Effective in reducing the burden of government or other community efforts.

Community benefits also include charity care and the un-reimbursed costs of Medicaid and other means-tested government-funded insurance programs for the indigent, as well as health professions education, research, efforts to build upon the community’s capacity and the costs associated with community benefit operations.

Aspirus Medford Hospital & Clinics will accept applications for program support on an ongoing basis throughout the year. For your convenience, the application is attached.

Please return completed applications to:

Aspirus Medford Hospital & Clinics
Attn: Community Benefit Program
135 S. Gibson St.
Medford, WI 54451

We are excited to help your agency make a positive impact on the health needs of our community!



Aspirus - Medford Community Benefit Funding Request Form

Name of Program/Event:

Start Date of Event:

End Date of Event: N/A

Contact Person Information

Name:

Address:

Phone Number:

E-mail Address:

Community Health Need Addressed: Any – Determined by Committee

Primary	Secondary	Tertiary
<input type="checkbox"/> Access to Care	<input type="checkbox"/> Substance Abuse	<input type="checkbox"/> Health Care for the Elderly
<input type="checkbox"/> Nutrition	<input type="checkbox"/> Cost of Care	<input type="checkbox"/> Chronic Disease
<input type="checkbox"/> Physical Activity	<input type="checkbox"/> Health Care for Children	<input type="checkbox"/> Mental Health
	<input type="checkbox"/> Health Education	<input type="checkbox"/> Dental Health
<input type="checkbox"/> Other: _____		

How was this need demonstrated?

Sponsoring AMHC Department or Organization:

Target Population:

Total Estimated Cost:

- Handouts \$
- Supplies Used \$
- Booth Rental \$
- Equipment \$
- Other \$

Program Site:

- Community Hospital Business Other:

Number of Persons Served:

- | | | | |
|---------------------------------------|----------------------------------|----------------------------------|------------------------------------|
| <input type="checkbox"/> 0 – 10 | <input type="checkbox"/> 41-50 | <input type="checkbox"/> 126-150 | <input type="checkbox"/> 301-400 |
| <input type="checkbox"/> 11-20 | <input type="checkbox"/> 51-75 | <input type="checkbox"/> 151-175 | <input type="checkbox"/> 401-500 |
| <input type="checkbox"/> 21-30 | <input type="checkbox"/> 76-100 | <input type="checkbox"/> 176-200 | <input type="checkbox"/> 501-1,000 |
| <input type="checkbox"/> 31-40 | <input type="checkbox"/> 101-125 | <input type="checkbox"/> 201-300 | <input type="checkbox"/> 1,001+ |
| <input type="checkbox"/> Other: _____ | | | |

Additional Sources of Funding: Various business and community donations throughout town.

Source:	\$
Source:	\$
Source:	\$
Source:	\$
Source:	\$

If this is more than a one-time event, how will funding this project be sustainable after Community Benefit Funding is exhausted?

List Any Community Partners:

Additional Information:



For Aspirus - Medford Staff Only:

Employees' Time Spent In Preparation For and During Actual Event

Name:	Dept:	Time (Hrs):
Name:	Dept:	Time (Hrs):
Name:	Dept:	Time (Hrs):
Name:	Dept:	Time (Hrs):
Name:	Dept:	Time (Hrs):
Name:	Dept:	Time (Hrs):

Community Benefit Request Scoring
For Community Benefit Committee Completion Only

Does this Request Meet the Criteria for Community Benefit: Yes No

Target Population(s)/Communities: Will the intervention fit the needs and characteristic of the people and communities we have identified?

1 2 3 4 5 6 7 8 9 10

Number of People: How many people will be helped by this intervention?

1 2 3 4 5 6 7 8 9 10

(0-10) (11-25) (26-50) (51-100) (101-150) (151-200) (201-350) (351-500) (501-1,000) (1,001+)

Estimated Effectiveness/Efficiency? Is there a record to date on the selected approach? Are there adequate resources to implement this intervention strategy?

1 2 3 4 5 6 7 8 9 10

Existing Efforts: Who else is working on this? What is our role? Is it meaningful? How can we best complement/enhance an existing effort?

1 2 3 4 5 6 7 8 9 10

Degree of Controversy: Is this intervention acceptable to the community? Will this intervention offend important constituents?

1 2 3 4 5 6 7 8 9 10

Additional Considerations:

Final Community Benefit Score (Out of 50): _____

Approval Status: Approved
 Denied
 Deferred