Community Benefit Report 2022

McCall



Continuing Our Legacy of Excellence in Health Care

From our founding in 1902 to 2022, when we were recognized as one of the top 15 health systems in the nation for the ninth consecutive year, St. Luke's has always been a leader in quality care and a dedicated community partner.

As Idaho's only locally based, not-for-profit, community owned and led health system, we are committed to providing all patients with the highest quality health care, regardless of their ability to pay.

15 Top Health Systems



Supported by amazing community partners, visionary board members and a highly dedicated team, St. Luke's delivers on its mission with care and compassion, and I'm proud and grateful to be part of that.

- Chris Roth, St. Luke's President and CEO



St. Luke's has prioritized access to services as the community grows. In 2022, medication lockers were installed at St. Luke's Clinic – Payette Lakes Family Medicine for contactless prescription pick up. The locker will soon be relocated to the hospital's main lobby for 24/7 availability.



The Tutor Mobile, in partnership with local community organizations and with support from a St. Luke's grant, addresses social determinants of health as it travels to neighborhoods in the area to provide books, educational experiments and healthy snacks to kids.



At a Glance: Caring for Our Communities in 2022

St. Luke's primary service area is Ada County, with our secondary service area covering southwest and southcentral Idaho, eastern Oregon and northern Nevada. The numbers below provide a broad overview of the rich benefits St. Luke's provides to local communities in these counties: Ada, Blaine, Canyon, Elmore, Jerome, Twin Falls and Valley. Please note that community benefits provided outside these counties is not captured in this data. All numbers are current as of the fiscal year ending Sept. 30, 2022.



Community Needs Determination Process

St. Luke's community health efforts are directed by community needs assessments, St. Luke's community boards and community health managers. In 2022, St. Luke's published our most recent Community Health Needs Assessment, which is designed to help us better understand the most significant health challenges facing the individuals and families in our service areas.

Community Health and Engagement, in collaboration with internal and external stakeholders, is responsible for developing, implementing and maintaining optimal community health initiatives designed to address our communities' most significant health needs.



It is exciting to invest in solutions and relationships that solve multiple challenges in our community, allowing us to increase our reach and impact to improve lives.

> - Theresa McLeod, St. Luke's Administrator of Community Health and Engagement

Report of Community Benefits 2022 St. Luke's McCall

St. Luke's McCall is a critical access hospital and a leader in health and wellness promotion. Founded in 1956 as McCall Memorial Hospital, the medical center and clinics integrated with St. Luke's Health System in 2010.



\$32.1 Million Total Community Benefit



Providing a High Quality of Care







St. Luke's provides health care to eligible patients without charge or at a reduced rate, based upon a sliding scale derived from federal poverty guidelines.





Giving Thanks

Our work assessing and addressing community needs would not be possible without a visionary board of directors and dedicated community boards. We are grateful for their partnership and guidance.

St. Luke's Health Sy	stem Board	l of Directors a	s of
Sept. 30, 2022:			

Bob Lokken, Chair Andrew Scoggin, Chair-Elect Emily Baker Brigette Bilyeu Tom Corrick Rosa Dàvila Lucie DiMaggio, MD Mark Durcan Lisa Grow Allan Korn, MD Dan Krahn Jon Miller Chris Roth, President/CEO Rich Raimondi Bill Whitacre

St. Luke's McCall Community Board Members as of Sept. 30, 2022:

Robert Vosskuhler, MD, Chair Juan Bonilla Jill Calhoun Sarah Covault Eddie Droge, MD Amber Green Doug Irvine, MD Patrick Kinney, MD Dean Martens Dawn Matus Gary Thompson Hon. Darla Williamson Kurt Wolf Aana Vannov

The information provided in this report is required by Idaho Code 63-602D, which states that 501(c)(3) hospitals having 150 or more beds must file a community benefit report with the Board of Equalization by Dec. 31 of each year. According to the code, the report is to include a description of the process the hospital has used to determine general community needs that align with the hospital's mission. In addition, the report shall include the hospital's amount of:

• Unreimbursed services for the prior year (charity care, bad debt, and under-reimbursed care covered through government programs).

Donated time, funds, subsidies and in-kind services.

Additions to capital such as physical plant and equipment.

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