

Hospital Community Benefit Accountability

National Jewish Health Annual Report

August 31, 2020

Submitted to: Department of Health Care Policy & Financing



COLORADO

**Department of Health Care
Policy & Financing**

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I. Overview

House Bill 19-1320 requires non-profit tax-exempt general hospitals, Denver Health Medical Center, and University of Colorado Hospital to complete a community health needs assessment every three years and an annual community benefit implementation plan every year¹. Each reporting hospital is required to convene a public meeting at least once per year to seek feedback on the hospital's community benefit activities and implementation plans. These hospitals are required to submit a report to the Department of Health Care Policy & Financing (the Department) that includes but not limited to the following:

- Information on the public meeting held
- The most recent Community Health Needs Assessment
- The most recent Community Benefit Implementation Plan (This requirement will be waived for the report due September 1, 2020)
- The most recent submitted IRS form 990 including Schedule H
- A description of investments included in Schedule H
- Expenses included on form 990

More information can be found on the [Hospital Community Benefit Accountability webpage](#). Please direct any questions to hcpf_hospitalcommunity@state.co.us.

¹ Long Term Care and Critical Access hospitals are not required to report.

II. Checklist

A. Sections within this report

- Public meeting reporting section completed
- Investment and expenses reporting section completed
- URL of the page on the hospital's website where the report will be posted
<https://www.nationaljewish.org/about/community-health-needs-assessment>

B. Attachments submitted with report

- Most recent Community Health Needs Assessment
- Most recent Community Benefit Implementation Plan (Optional)
- List of individuals and organizations invited to the public meeting (Optional)
- List of public meeting attendees and organizations represented (Optional)
- Public meeting agenda (Optional)
- Summary of the public meeting discussion (Optional)
- Most recent submitted form 990 including Schedule H or equivalent

III. Public Meeting Reporting

Provide the following information on the public meeting held during the previous twelve months:

Date: August 20, 2020

Time: 5:30

Location: Virtual by Zoom

Describe your outreach efforts for the public meeting being reported: (Optional)

Included within summary report attached.

Describe the actions taken as a result of feedback from meeting participants:

Included within summary report attached.

IV. Investment and Expenses Reporting

Provide the following information on the expenses included on submitted form 990

Total expenses included on Line 18 of Section 1 of submitted form 990:

See attached 990/Schedule H

Revenue less expenses included on Line 19 of Section 1 of submitted form 990:

See attached 990/Schedule H

Reporting Hospitals not required to complete form 990 shall provide the above information as described on Lines 18 and 19 of form 990.

Provide a description of each investment made that was included in Parts I, II, and III of Schedule H that addressed a community Identified Health Need and include the following:

- Cost of the investment. For this reporting purpose, “investment” means the hospital’s expense net of offsetting revenue for financial assistance and means-tested government programs, other community benefits such as community health improvement services and community benefit operations, and/or community building activities. See the IRS instructions for Parts I, II, and III of Schedule H of Form 990 at www.irs.gov/pub/irs-pdf/i990sh.pdf.
- For each investment that addressed a Community Identified Health Need identify the following categories:
 - ✓ Free or Discounted Health Care Services
 - ✓ Programs that Address Health Behaviors or Risk
 - ✓ Programs that Address the Social Determinants of Health

There is a crosswalk available on the [Hospital Community Benefit Accountability webpage](#) under the resources section.

- For each investment that addressed a Community Identified Health Need describe available evidence that shows how the investment improves Community health outcomes

Separate each investment (expense) as a numbered list

1. See attached 990/Schedule H\ and attached crosswalk

V. Report Certification

I certify that the information in this report is for National Jewish Health and provided according to all requirements set forth by the Department's regulations found in the Code of Colorado Regulations (CCR) at 10 CCR 2505-10, Section 8.5000.

I agree to provide additional explanation or documentation at the Department's requests within 10 business days of the request.

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**Letter from the President & CEO
August 2020**

In 1899, when National Jewish Health first opened its doors, tuberculosis was a pandemic. We served indigent tuberculosis patients and, for the first 70 years, did not charge for the care of patients who had traveled here for treatment for tuberculosis and other respiratory diseases. Our motto, still visible above the entrance to one of our oldest buildings: “None may enter who can pay. None can pay who enter.”

Today, as we face another pandemic, COVID-19, that spirit of community engagement and support continues to resonate at National Jewish Health. Since March 2020, National Jewish Health has invested millions of dollars and placed an intense focus on caring for children and adults with COVID-19, preventing the spread of disease, testing for infection and antibodies to the SARS-CoV-2 coronavirus, educating patients and health care professionals about the virus, and researching the disease it causes and potential new treatments.

At the same time, we have maintained our broader commitment to the improvement of community health. We continue to treat patients from all over Colorado and the nation who suffer the most challenging cases of lung, heart and related diseases, including providing care for critically ill patients at five Colorado hospitals. We remain committed to treat all patients, children and adults, on a first-come, first-served basis, with no limits on the number of Medicaid and underserved patients we see. We have continued to educate and care for up to 90 children each year with chronic diseases at our free, K-8 school, the Morgridge Academy, on our main Denver campus. We continue to educate our patients and community members in person and in online resources about the diagnosis and management of their illnesses. And, we have a deep focus on research, investing more than \$23.5 million every year to advance care, discover new treatments and improve the lives of the people we serve.

In 2018 and early 2019, we conducted an extensive assessment to determine how we could continue to best meet the health needs of our community. We published our 2019 Community Health Needs Assessment and Implementation Plan, to guide our efforts to meet the health needs of our local and national communities. In August 2020, National Jewish Health hosted a virtual Community Health Benefits Discussion to share our efforts on behalf of the community and to seek input from community members about their priorities, needs and desires for improved community health.

In the following pages, you can read our 2020 Community Health Benefits Accountability Report, which outlines our existing services for community health, the input we have received from the community, and how we plan to meet those needs as we continue our 121-year tradition of serving our community. We hope you will review this report, offer additional feedback, and join us in this effort if you can.

A handwritten signature in blue ink, appearing to read "MSL", is written over a white background.

Michael Salem, MD



Hospital Community Benefit Accountability Report

National Jewish Health

August 31, 2020

About National Jewish Health

National Jewish Health is an academic, specialty care hospital headquartered in Denver, Colorado, since 1899. Care is provided at 24 locations across the state and through collaborations with Saint Joseph Hospital and SCL Health and University of Colorado in Denver, Mount Sinai Hospital in New York City and Jefferson Health in Philadelphia. National Jewish Health also provides critical care management and inpatient care at several hospitals in Denver and through telemedicine in five western states.

National Jewish Health was founded as a not-for-profit hospital that also sought to research and understand the diseases facing our communities as well as to provide education for patients, families, and medical doctors and caregivers. Today, National Jewish Health continues that mission and is the only facility in the world dedicated exclusively to groundbreaking medical research and treatment of patients with respiratory and related disorders.

Community Health Needs Assessment and Implementation Plan

The National Jewish Health Community Health Needs Assessment was last published in June 2019, and the Community Health Implementation Plan was published in November 2019. Both of these reports were prepared and informed by assessments of community health programs that are a part of the focus at National Jewish Health.

Also key were the ongoing community input opportunities, which included focus groups, outreach calls and dialogue. In the summer and fall of 2018, National Jewish Health collaborated with Saint Joseph Hospital and the Denver Department of Public Health and Environment to conduct two focus groups of community stakeholders to gather input on community health needs. In spring 2019, National Jewish Health surveyed six community health providers about the needs of their clients and providers. Information and ideas gathered through these sessions were used to help guide the development of these reports. Those focus groups, surveys and the resulting reports have guided our plans and the steps we are taking to contribute to the benefit of our community and improve the health of its residents.

These plans are attached in Appendices 1 and 2 and can also be found on the National Jewish Health website at:

<https://www.nationaljewish.org/about/community-health-needs-assessment>

Community Health Benefits Discussion

On August 20, 2020, National Jewish Health hosted a virtual Community Health Benefits Discussion to share our efforts on behalf of the community and to seek input from community members about their priorities, needs and desires for improved community health. National Jewish Health senior leadership and community outreach leadership attended and led an overview of the programs that provide community benefit.

Attendees from across the metro area joined the virtual meeting.

Outreach

To promote the event and assure that key organizations as well as the general public were invited, National Jewish Health used a variety of approaches. One of the ongoing public facing strategies was to post a pinned event invitation on Facebook 10 days before the meeting and then use social media to continue to feature the meeting for the days leading up to the event. An email invitation was sent on August 12, and again on August 17, to approximately 85 individuals at various health, public health, government and other related organizations. In addition, an advertisement was placed in the August 19 edition of the *Denver Post* inviting the community to the public meeting.

National Jewish Health community outreach staff directly contacted representatives from a several organizations via email and phone. Twenty people from the community attended the virtual meeting, including individual citizens and representatives of several community organizations.

A link to the recorded meeting was sent to representatives of two additional community health clinics who expressed interest in the meeting but could not attend the live meeting.

Organizations Invited

Colorado Department of Public Health & Environment (CDPHE)

- CDPHE Colorado Health Assessment and Planning System
- CDPHE Office of Health Equity
- CDPHE Center for Health and Environmental Data
- CDPHE Health Facilities and Emergency Medical Services

Denver Department of Public Health

Tri-County Health Department

Jefferson County Public Health Department

Denver Chamber of Commerce

Greater Englewood Chamber of Commerce

Aurora Chamber of Commerce

South and West Metro Denver Chambers of Commerce

Colorado Community Health Network

Colorado Consumer Health Initiatives

Healthier Colorado

Colorado Center for Law & Policy

Colorado Association of Local Public Health Officials (CALPHO)

Colorado Association of School Executives

County Human Services Directors Association

Colorado Rural Health Centers

Denver Regional Council on Governments

Disability Law Colorado

Colorado Department of Saving People Money on Healthcare

Colorado Department of Human Services

Colorado Department of State

Colorado Commission on Higher Education

Denver City Council - representatives from District 5 and 10.

Colorado State Representative Angela Williams

Colorado State Representative Chris Hansen

Colorado State Representative Leslie Herod

Every Child Pediatrics

Denver Health Community Health Clinics Family Medicine

Denver Health Community Health Clinics Pediatrics

2040 Partners for Health

Clinica Tepayac

Stride Community Health Center

Salud Clinic Health Centers

Finally, the recorded meeting was posted online shortly after the virtual meeting ended. It can be found here: <https://www.nationaljewish.org/about/community-health-needs-assessment>.

Speakers:

- Michael Salem, M.D., President & CEO
- Steve Frankel, M.D., Executive Vice President, Clinical Affairs
- Chris Forkner, Executive Vice President, Corporate Affairs
- Greg Downey, M.D., Executive Vice President, Research & Education
- Lauren Green-Caldwell, Vice President Communications

Agenda:

- Overview and Commitment to our Communities
- Response to COVID-19 Challenges
- Community Benefit Profile and by the Numbers
- Unique Research Mission
- Community Program Highlights
- News Steps and Questions & Answers

Speakers addressed an overview and history of National Jewish Health, including 70 years of free care; the National Jewish Health mission and vision; current care, research and collaborations; new programs in response to the COVID-19 pandemic; a summary of the most recent Community Health Needs Assessment; and current community benefit programs, activities and expenditures. The meeting was then opened to questions from the audience.

Follow-up Survey

Following the meeting, additional feedback was solicited through a survey sent to participants of the National Jewish Health meeting as well as meetings hosted by Centura Health, SCL Health, Denver Health and UC Health. Sixty-five people responded to the survey, including meeting participants and people representing the organizations invited to the various meetings.

Survey respondents ranked access to care, mental health and social determinants of health as the highest community health priorities. They ranked food security, housing and social connection as the social determinants of health they would most like hospitals to address. Overwhelmingly, participants said that anxiety and depression are the health behaviors for which people in the community need more information and/or support.

Feedback is still coming in from invitees and attendees. We continue to analyze that input and will incorporate it into our future plans.

Form 990, including Schedule H

The 2018 Form 990, the most recent one filed, outlines investments of \$37.3 million made by National Jewish Health for community health, through financial assistance, subsidized health services, professional education, research, community health improvement services and programs. This number represents 13.72 percent of unrestricted annual revenue that is reinvested into our communities each year. *See Appendix 3 for the Form 990.*

Description of Investments that Addressed a Community-Identified Health Need

Because 2020 has been a year like no other, the focus of Community Outreach and Benefits were shifted early in the year and focused on meeting the needs caused by the pandemic. Here is a brief description of the type of services and focus provided by National Jewish Health over the past several months. Following the section on the pandemic response, this report summarizes other ongoing programs that also focus on meeting community needs.

COVID-19 Response and Programs

As an academic medical center with specialized expertise in respiratory medicine, National Jewish Health has taken a leadership role in the COVID-19 pandemic response. National Jewish Health has invested millions of dollars and focused intensely on developing and launching a wide variety of programs to meet this challenge and protect our community's health.

At the start of the pandemic, National Jewish Health quickly created **Acute Respiratory Care Clinics** for both children and adults needing urgent care for suspected and confirmed COVID-19 cases. These clinics provided diagnostic services, medical care and referral, as needed, to area hospitals. These clinics helped to reduce demands on overcrowded local emergency rooms and hospitals. The clinics served both existing National Jewish Health patients and the community at large.

Many COVID-19 patients have persistent symptoms and on-going functional impairment. National Jewish Health developed both adult and pediatric **Respiratory Recovery Clinics** to help care for patients with functional impairment and persistent symptoms, getting answers for them and getting them back to their usual state of health and usual function. The clinics continue to serve both existing National Jewish Health patients and the community at large.

National Jewish Health rapidly developed and launched tests for COVID-19 infection and for antibodies to the novel coronavirus, which indicate past infection. In addition to purchasing machinery to run the tests and developing protocols to obtain dependable, accurate results, National Jewish Health set up testing tents in our parking lots for drive-through testing. These programs continue to operate and are open to the public. National Jewish Health also provides testing services to help the Colorado Department of Public Health and Environment, and to help meet the needs of public health agencies for testing in Wyoming, Montana and New

Mexico, and the University of Denver, other schools and several businesses. Results for these tests have generally been available within 24-48 hours.

National Jewish Health devoted significant resources in mounting a robust, accurate and constantly updated COVID-19 website to provide valuable information about the pandemic to our local, national and worldwide community. In consultation with our own experts and with information gathered from peer-reviewed scientific studies and other authoritative sources, National Jewish Health published extensive information for Patient Care & Testing, Prevention & Tips, About Coronavirus, News & Research and links to additional authoritative sources of information. The site also included situation updates, which linked to daily news updates.

The National Jewish Health COVID-19 web site proved enormously valuable to the community, as evidenced by the number of people who viewed the content. Between March 1 and August 15, 2020, the site recorded 5.3 million page views, more than doubling overall traffic to the National Jewish Health web site. Pages on “How to put on a Surgical Mask,” “COVID-19 Antibody Testing” and “COVID-19 Symptoms” each received more than 1.3 million visits.

National Jewish Health is primarily an out-patient facility. However, it quickly expanded its inpatient capacity to 46 beds (its full number of licensed beds), available if necessary to help overwhelmed local hospitals handle a surge in COVID-19 patients and other immune compromised patients.

National Jewish Health developed a robust, secure and sustainable telehealth program for patients who could not come to our campus for in-person visits. At the peak of the pandemic, National Jewish Health physicians were seeing more than 750 patients per week via telehealth visits. Telehealth will continue to be an important resource for Colorado patients now and in the future.

In response to the pandemic, National Jewish Health made numerous changes to its facility, including augmented air flows, filtering and cleaning techniques.

National Jewish Health critical care experts were on the front lines of the COVID-19 pandemic at Saint Joseph Hospital, Rose Medical Center and Swedish Medical Center – hospitals where we manage critical care beds on a regular basis. Doctors from National Jewish Health also manage 600 critical-care beds via tele-ICU services for 25 Banner Health Hospitals in five western states and continued this service throughout the pandemic. Fifteen critical care and specialty physicians traveled to New York during the height of the pandemic to serve in intensive care units at several hospitals in the Mount Sinai Health System.

Researchers across the institution quickly launched basic, translational and clinical research projects, often before any funding became available, to better understand the SARS-CoV-2 virus, the COVID-19 disease and to conduct clinical trials of experimental treatments at several hospitals. More than 70 basic research studies from National Jewish Health doctors have been submitted for funding or have received grants to proceed.

Medical Research for Improvements in Care and New Treatments

National Jewish Health faculty and staff conduct extensive basic, translational and clinical research on a wide variety of respiratory, immune and related diseases, which helps prevent these diseases and deliver new treatments and medications that benefit both our nearby and national communities.

In the most recent reporting year, National Jewish Health invested \$23.5 million in research in addition to receiving more than \$50 million in grant funding, mostly from the National Institutes of Health (NIH). As an NIH-funded Clinical and Translational Research Center, the center provides an infrastructure for community-based research in collaboration with the University of Colorado.

In recent years, research findings have included the most effective treatment yet for cystic fibrosis; the origins and course of asthma as well as several new treatments for this disease; the first-ever treatments for idiopathic pulmonary fibrosis; new treatments for food allergy and insight into its causes, which could help prevent the disease; strategies to motivate sleep apnea patients to adhere to prescribed therapy; and a novel therapy for vocal cord dysfunction.

Currently, National Jewish Health researchers participate in national research networks to understand, prevent and treat asthma, idiopathic pulmonary disease, cystic fibrosis, food allergy, eczema, and how best to treat critically ill patients in intensive care. Among other studies, the following are examples:

- National Jewish Health researchers are leading COPDGene®, the largest study ever done to understand the causes, progression and prevention of chronic obstructive pulmonary disease.
- We are conducting research on hazardous air pollution in Denver and how best to help residents reduce their exposure in the Globeville, Elyria and Swansea neighborhoods.
- We are conducting several investigations of electronic cigarettes and their impact on lung health.

Free or Discounted Health Services

National Jewish Health provided \$5.7 million of free or discounted health services to people in need in our community as reported in the most recent Form 990. This included care provided to Medicaid patients, participants in the Colorado Indigent Care Program and our own charity care, funded by money raised from donors around the country.

Programs That Address Health Behaviors or Risk

Tobacco use is the leading cause of preventable death in the United States. National Jewish Health has developed a comprehensive, evidence-based tobacco-cessation program, which we operate in Colorado and 19 additional states. In 2019, National Jewish Health researched and

developed a new program aimed specifically at teens and young adults to address addiction to electronic cigarettes. National Jewish Health conducts ongoing research into the illnesses caused by tobacco products and into the many unknowns with vaping and e-cigarettes. This research can lead to new and better treatments and provides insights into helping people stop using tobacco products.

Obesity. Professor of Medicine Fred Wamboldt, MD, worked with Salud Family Health Centers to develop a protocol and guide for physicians to quickly initiate conversations with patients about weight management. The protocol refers patients to staff for follow-up conversations that connect patients with resources to help them better understand the negative health consequences of obesity and to better manage their weight.

Physical activity. The Walk-with-a-Doc program, led by the National Jewish Health Director of Cardiovascular Prevention and Wellness Andrew Freeman, MD, invites the public to monthly walks and health-promoting talks by physicians in parks around Denver. These sessions are free and open to the public.

Air Pollution. Professor of Medicine Lisa Cicutto, PhD, is managing a three-year project to help residents of poor, industrialized neighborhoods in Denver understand and reduce their exposures to hazardous air pollutants.

Education. National Jewish Health provides education for both health care providers and patients. These programs, which are outlined in the attached Community Health Needs Assessment, improve diagnosis and treatment of patients' diseases and provide the tools for improved health-related behavior.

Programs that Address the Social Determinants of Health

Research for the 2019 National Jewish Health Community Health Needs Assessment identified various environmental, social and economic factors, including poverty, education, air pollution, access to care and insurance coverage, which contribute to poor health in five counties (Adams, Arapahoe, Denver, Douglas and Jefferson) of the Denver metro area. Below are several programs that address these social determinants of health.

Morgridge Academy. National Jewish Health operates the Morgridge Academy, a free K-8 school for children whose chronic disease impedes their ability to attend school. Most of the children suffer asthma and other respiratory and allergic diseases. The vast majority come from low-income families and are eligible for free and reduced-cost lunch. By addressing immediate health needs and providing a safe, nurturing environment for learning, the Morgridge Academy delivers an education that greatly improves not only their health, but also economic and social opportunities for these children. In addition, nurses and staff teach both students and their families how to care for themselves, avoid behaviors that worsen their disease and manage exacerbations of disease, thus reducing the burden of disease.

Comprehensive Respiratory Care Clinic. With support from the Kaiser Foundation, National Jewish Health partnered with safety-net providers to pilot a program to improve respiratory care access for medically indigent patients and, through coordinators, worked to coordinate financial assistance and medical care for this population.

Free lung testing. In 2018, National Jewish Health staff participated in 92 free community outreach events in and around Colorado, at which educational materials and free lung testing were offered. Lung testing can help detect lung disease that needs medical attention. Each year, National Jewish Health reaches out to its local communities with this free service. While this service has been suspended during the COVID-19 pandemic, National Jewish Health is committed to reviewing how this or a similar service can be added back into its services safely when conditions permit.

Appendix included in filing

Appendix 1 - 2019 Community Health Needs Assessment

Appendix 2 – Community Health Needs Assessment 2019 Implementation Plan

Appendix 3 – 2018 National Jewish Health Form 990 including Schedule H

Submission Contact:

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Colorado Department of Health Care Policy & Finance

Crosswalk – National Jewish Health

Prepared to accompany the 2020 Hospital Community Benefit Accountability Report and based on the 2018 IRS/990 report filing.
September 2020 r2

Schedule H Part I Categories	Description	Community Benefit Categories	Investments
Financial Assistance at cost (charity care)	Health care services provided for free or at reduced prices to low income patients	Free or discounted health care services	\$72,218
Unreimbursed Medicaid	Government sponsored means-tested health care programs and services	Discounted government program services	\$4,608,268
Unreimbursed costs (other means-tested government programs)	Government sponsored means-tested health care programs and services. Examples include: State Children's Health Insurance Programs, medical programs for low-income or medically indigent persons not eligible for Medicaid	Discounted government program services	\$1,024,483
Community health improvement services	Program services and activities carried out to improve community health, such as health education classes for disease management, disease prevention, support groups, health screenings, wellness and community-based clinical services. <i>(Details of investments listed below)</i>		
Community Health Education	Specific areas include: Education programs, classes, support groups, both onsite and online resources, more than 200 MedFacts, TestFacts, videos and materials such as inhaler technique, and "What is COPD?" and many others related to the specialty care illnesses and diseases we treat and designed to support patients and the community	Programs that address Health Behaviors or Risk	\$3,885
Community Health Education	Operation of Morgridge Academy, a free K-8 school for up to 90 chronically ill children located on the main campus at National Jewish Health. The school is focused on providing well-rounded education for students as well as education on managing their illness (extended to families and student's home support network)	Programs that address the Social Determinants of Health	\$1,252,578

Community-based clinical services	Specific areas/focus include: Pediatric asthma program extended clinic hours and additional clinic locations. Access to specialty care including expansion of programs through safety-net clinics for respiratory care, amyotrophic lateral sclerosis patients, pulmonary, and scleroderma programs as well as behavioral health and specialized day programs for the most severe patients.	Programs that address Health Behaviors or Risk	\$2,508,666
Community benefit operations	Examples include: Participation in community coalitions and collaborative efforts with the community, including costs associated with conducting the community health needs assessment, including research and collaboration with Saint Joseph Hospital, Denver Department of Public Health and Environment, Metro Caring, Every Child Pediatrics, Denver Health Community Health Clinics-Family Medicine and Pediatrics, 2040 Partners for Health, Clinica Tepeyac, STRIDE and Salud Family Health Centers	Programs that address the Social Determinants of Health	\$279,692
Health professions education	Educating future and current health care professionals is a distinguishing characteristic of not-for-profit health care and a core focus for National Jewish Health. It includes educational programs for physicians (residents and fellows), medical students, nurses, nursing students, and other health professionals when that education is necessary for a degree, certificate or training required by state law accrediting body or health profession specialty. <i>(Details of investments listed below)</i>		
Education for health professionals	Examples include: Costs related to the residency program (clinical training, fellowships) at National Jewish Health; costs related to clinical training and licensing for nurses, pharmacy students, radiology students, respiratory students. Cost related to maintaining and providing access to the National Jewish Health Medical Library	Programs that address the Social Determinants of Health	\$3,444,445
Subsidized Services	Subsidized health services are patient care programs provided despite a financial loss so significant that losses remain after removing the effects of financial assistance, Medicaid shortfalls, and bad debt. The services are provided because they meet identified community health needs and if these services were no longer offered, they would be unavailable in the area, or the community's capacity to provide the services would be below the community's need, or provision of the services would become the responsibility of the government or other not-for-profit organization. Examples include: outpatient programs, special clinics <i>(Details of investments listed below)</i>		

<p>Community Health Improvement</p>	<p>National Jewish Health is committed to meeting the medical needs of the underserved. National Jewish Health offers free lung testing programs with spirometry, subsidizes an inner city asthma program in Denver Public Schools, distributes an asthma tool kit program on the western slope and other locations in Colorado, and offers a free asthma care and teaching program in lower income Colorado communities, clinics for miners with lung disease throughout the state.</p>	<p>Programs that address Health Behaviors or Risk</p>	<p>\$546,324</p>
<p>Research</p>	<p>Research Programs help increase understanding of illnesses or how specific groups of people respond to certain diseases, or to increasing knowledge of how to address categories of illnesses. Research can lead to new treatments and medications and more effective approaches to care.</p>	<p>Programs that address Health Behaviors or Risk</p>	<p>\$23,555,682</p>
<p>Research commitment</p>	<p>National Jewish Health has a long time and deep commitment to discovery and research.</p> <p>Example: During the recent time of COVID, more than 70 research studies were designed and many funded and launched, included studies to help define basic elements of the disease, to those focused on new treatments, to clinical trials of potential drugs and therapies.</p> <p>Example: Ongoing study led by a nursing professor of medicine to engage residents of low-income, industrialized communities within Denver to collect and interpret air quality data.</p> <p>Example: National Jewish Health physician scientists are leading a study that seeks to follow children in Puerto Rico from birth through 3-years-of-age to help understand the root causes of asthma.</p> <p>Example: A National Jewish Health physician scientist leads a national long-term study on COPD to help understand causes, differences in how the disease is experienced by varying groups of people.</p>	<p>Programs that address Health Behaviors or Risk</p>	<p>\$23,555,682</p>

Other Categories Financial Assistance Policy	National Jewish Health has a 121-year history of providing financial assistance to people who have health care needs and are unable to pay for medically-necessary care. National Jewish Health screens for financial assistance policy (FAP) eligibility 240 days after the first self-pay balance statement. During the first 120 days National Jewish Health collects on all accounts (excluding extraordinary collection practices) until a patient applies for financial assistance. If they are found eligible, the discount is calculated and applied, the balance due is determined and normal collections practices resume for the remaining balance. During the last 120 days, if a patient applies for National Jewish Health financial assistance, all collection efforts (including any extraordinary collection practices) are suspended. If the patient is determined to be FAP eligible, any extraordinary collection efforts are reversed, the discount is calculated and applied, the balance due calculated, and normal collection efforts are resumed for this balance.		
Schedule H Part III Categories	Bad Debt, Medicare & Collection	Category	Investment
Bad Debt	Bad Debt	Other Costs	\$1,832,648
Medicare	Medicare	Discounted government program services	\$28,109,445