Why is community benefit?

Community benefit includes many types of health-related services that Oregon’s community hospitals provide, without compensation, to address health needs in the community.

Some examples of these services are free or discounted health care through financial assistance and “charity care,” financial or in-kind support for public health programs, health education, screening and prevention services, medical research, medical education, community health investments, and more.

Why does it matter?

Oregon’s nonprofit hospitals and health systems are driven by a mission to provide high-quality health care no matter patients’ ability to pay.

Hospitals are dedicated to promoting and improving the health of local communities and their residents by providing a range of vital services. Because much of what influences our health happens outside of hospitals and doctor’s offices, hospitals’ community benefit programs often extend to our schools, workplaces, and neighborhoods.
Total hospital community benefit increased by 12.9% to $1.97 billion between FY 2020 and 2021.

Despite expected reduction in need for charity care following coverage expansion (now at 95% of Oregonians), hospitals have increased their community benefit investment since 2016. By law, charity care means free or discounted health services provided to persons who cannot afford to pay and from whom a hospital has no expectation of payment (ORS 442.601).

In recent years, charity care spending levels have risen, an indication that many Oregonians are struggling to pay their share of rising health care costs.
In FY 2021, Oregon hospitals provided over $1.5 billion in care that was not reimbursed. This investment came despite difficult financial conditions for hospitals, including sharply rising labor and other costs combined with flat revenues.
Unreimbursed Medicaid

$1 billion
51% of total community benefit spending

FY 2020: $863M
FY 2021: $1B (+16%)

This category makes up the largest share of community benefit spending for a simple reason: the state’s Medicaid program (known as the Oregon Health Plan) does not cover the cost of caring for patients.

Medicaid underpayment is around $1 billion, or 51% of total community benefit spending.

This represents a 16% increase over fiscal year 2020.

Charity care

$292 million
15% of total community benefit spending

FY 2020: $279M
FY 2021: $292M (+4.7%)

Charity care is free or discounted health care provided to patients according to financial assistance policies. Patients with a household income of up to 400% of the federal poverty level may qualify for financial assistance.
Samaritan Health: The healing power of art

The Arts in Healthcare program at Samaritan Health Services has been making an impact for so long that it’s easy to forget how innovative it has been since its beginnings almost 20 years ago.

This community benefit project, known as ArtsCare, incorporates art and music in healthcare settings to promote patient healing and the emotional well-being of staff and visitors.

The ArtsCare experience brings specially trained artists to patients and staff in hospital areas such as cancer treatment ambulatory infusion, medical/surgical units, cardiac rehabilitation and mental health. The artists work with various mediums including clay, drawing, painting, printmaking, fiber art, mixed media and other visual art. The artists also offer creative writing workshops including personal narrative, storytelling and poetry. Musicians visit the hospitals regularly to provide the healing sounds of harp, viola, guitar and vocals. Many workshops combine different art forms.

Having music in the air and art activities to calm the mind or stimulate the senses isn’t the only way ArtsCare makes an impact in the healthcare setting. Samaritan’s focus on providing a healing environment includes working with ArtsCare to curate art collections to complement the healing aesthetic in each hospital.

The combination can have a profound influence, as described by this patient:

“I took bits and pieces of broken scraps of clay and formed them into art—just like my life has been broken, I know it can once again be beautiful in a different way.”

It’s not just patients who feel the impact. One artist stated, “This is the most important thing I’ve ever done.”

In addition to working with patients and staff, ArtsCare partners with local nonprofit organizations. These partnerships allow ArtsCare to offer art-as-healing opportunities to different groups such as veterans, seniors and teens.

Samaritan Health Services supports the program, along with donor support through the Samaritan Foundation. The donations help fund innovative arts programming in health care and community settings throughout Benton, Lincoln and Linn counties.

The program has conducted research on its effectiveness, and organizers have presented the findings at local and national arts in health conferences.
Subsidized health services & other programs

$173 million
9% of total community benefit spending

$75 million
3.8% of total community benefit spending

Subsidized health services
FY 2020: $142M
FY 2021: $173M (+22%)

Other programs
FY 2020: $59M
FY 2021: $75M (+27%)

Community health improvement

$79 million
4.8% of total community benefit spending

FY 2020: $88M
FY 2021: $79M (-10%)

These activities are designed specifically to improve the health of the community such as education events, health screenings, hotlines and support groups.

Hospitals address other gaps in government programs where payment to hospitals also does not cover the cost of care.

Oregon hospitals spent $79 million on programs such as vaccine clinics, preventive screenings and education activities provided at no cost to residents.
PeaceHealth: House calls for unhoused patients

For staff at an integrated health clinic at PeaceHealth in downtown Eugene, “meeting people where they are” is more than just an expression—it’s central to their mission.

Every other week, a PeaceHealth team from the Unified Care Clinic (or UCare), including a provider, nurse and case manager, travels across town to a shelter community to help patients with prescriptions, chronic conditions and basic wound care. The case manager helps these unhoused patients, many of whom have not used health care services in years, register as PeaceHealth patients and apply for Medicaid.

Care expands into the community thanks to a PeaceHealth partnership with Community Supported Shelters, a local nonprofit that supports several clustered encampments around Eugene.

One such patient, a man named Jeffrey, had tooth pain so severe he pulled five out himself. He needed treatment, but dental clinics wouldn’t offer services until he addressed his high blood pressure. That’s where the UCare Clinic team entered the picture, arranging treatment for Jeffrey’s other medical issues and clearing the way for dental care.

Other patients may have barriers to treatment, but the UCare Clinic staff can treat both physical and behavioral health issues. Many of the people served by the UCare team haven’t been getting regular medical care. They often have untreated chronic conditions complicated by mental illness or substance use disorder.

“We do everything we can to try to meet patients where they are, without judgment,” said Kathy Kernan, a PeaceHealth nurse practitioner.

“It is incredibly fulfilling when, despite so many obstacles in their lives, patients begin to trust us and start making meaningful improvements in their health.”
Cash & in-kind contributions

- $28 million
  - 1.4% of total community benefit spending

- FY 2020: $30M
- FY 2021: $28M (-6.7%)

Funds and services include grants, scholarships, food, equipment and meeting space for individuals or groups in the community.

Health professions education & research

- $304 million
  - 15% of total community benefit spending

- FY 2020: $228M
- FY 2021: $304M (+33%)

$258 million was spent preparing future health care professionals by providing a clinical setting for training, internships, vocational experience and residencies.

An additional $46 million went to clinical and community health research as well as studies on health care delivery, with results being shared outside the hospital.
St. Anthony: Keeping kids safe and families together in Pendleton

Today, she’s clean and sober and has regained custody of her four children. Jenna thanks Pioneer Relief Nursery (PRN), which helped her find housing through the state and has continued to support her family in other ways as well. “They’ve helped us with clothing, they’ve helped us with parenting,” she said. “They’ve helped us with food when we needed it.”

Jenna said her son Cody didn’t talk much when he started at the PRN pre-school in 2018. That’s common for children who have experienced trauma, said PRN Executive Director Libby Hoffman. Now Cody is a lively, talkative child who loves his teachers and looks forward to seeing them during home visits.

PRN is a child abuse and neglect prevention program supported with community benefit funding by CHI St. Anthony Hospital in Pendleton. St. Anthony donated the building and provides maintenance as well as support for many of the programs, including the clothes closet and diaper drives.

Most of the families are referred to PRN through substance abuse programs, and almost all of them live below the federal poverty line. The program addresses risk factors that cause stress for parents and children, which can lead to child abuse and neglect.

The PRN prevention efforts have proven to be extremely successful.

Teachers focus on helping children regulate their emotions both in and out of the classroom. They also help parents bond with their children, with the goal of positioning the kids for success in school and the adults for successful parenting.

Hoffman says just knowing they have someone in their corner can give parents hope where none existed before.

Jenna is a great example of that. Her face lights up when she talks about her home, her job, and her kids’ happiness. She is supporting her family.

“It feels great to be where I’m at because I’ve done this with my support team.”

Jenna Caswell has come a long way in five years.

“I was part of the drug life, I was part of the street life, my kids were there with me until they got taken away by the state of Oregon and went into foster care.”