

Annual Report of Community Benefits



BaylorScott&White

HEALTH

Baylor Scott & White Medical Center – Grapevine

1650 West College Street, Grapevine, TX 76051

Taxpayer ID # 75-1777119

For the Fiscal Year Ended June 30, 2024

OUR Mission:

Baylor Scott & White Medical Center - Grapevine, an affiliated hospital of Baylor Scott & White Health (BSWH), is committed to fulfilling its mission: *“founded as a Christian ministry of healing, Baylor Scott & White Health promotes the well-being of all individuals, families and communities.”*

OUR Community:

For the 2022 Community Health Needs Assessment (CHNA), the community served by the hospital is Dallas, Denton and Tarrant Counties and was determined based on the contiguous ZIP codes within the associated counties that made up nearly 80% of the hospital facilities' inpatient admissions over the 12-month period of FY20.

OUR Community Health Needs:

The complete 2022 Community Health Needs Assessment (CHNA) and Implementation Strategy can be found at BSWHealth.com/CommunityNeeds. This assessment is a compilation of public and hospital data and input gleaned from stakeholders representing the broad interests of the community. The following health concerns are identified in priority order based on the results of the CHNA.

Priority	Need	Category of need
1	Diabetes	Conditions/diseases
2	Access to healthcare	Access to care
3	Depression/social isolation	Mental health Environment
4	Emergency department utilization	Utilization
5	Mentally unhealthy days/coping mechanisms	Mental health
6	Income inequality	Population & income

OUR Community Benefit:

FY24 Total \$ 68,024,650

Charity Care \$ 16,010,004

Unreimbursed cost of providing care to the indigent, uninsured and underinsured as well as the unreimbursed cost of providing care through Medicaid and other government-sponsored indigent health care programs.

Government Sponsored Programs \$ 48,823,702

Unreimbursed cost of providing medical care to the beneficiaries of Medicare and other federal, state, and local government health care programs.

Community Health Improvement \$ 224,479

The programs and services that extend beyond patient care activities and include services directed to both individuals and larger populations in the community. These services include such things as educational information about preventive health care and treatment for specific diseases, informational health lectures to help understand various conditions and diseases as well as available treatment options, opportunities that promote healthy activity and wellness initiatives, health fairs and screenings, and support groups.

Health Professions Education \$ 1,271,277

Baylor Scott & White Health provides opportunities for health professionals to further their education and training. This includes clinical education and supervision for clinical rotations for medical students, nursing students, and other health care professions. Opportunities include but are not limited to Baylor Scott & White employees.

Subsidized Health Services \$ 1,417,270

Clinical programs that are provided despite a financial loss because it meets an identified community need and if no longer offered, it would either be unavailable in the area or fall to the responsibility of government or another not-for-profit organization to provide. (Examples include: outpatient/outreach palliative care services, ECI, and injury prevention/trauma)

Financial and In-Kind Donations \$ 49,134

Baylor Scott & White provides community benefit program grants and support to local non-profit organizations through dedicated community benefit funds as well as donations of staff time, medical supplies or equipment.

Other Community Benefits \$ 228,784

Baylor Scott & White Health provides other services with the goal of improving the overall health of the community including ongoing assessment of community health needs and evaluation of community health programs and services.

Total Operating Expenses and Calculation of the Ratio of Cost to Charge

Baylor Scott & White Health *Baylor Scott & White Medical Center – Grapevine*

For the Fiscal Year Ended June 30, 2023 300,066,064

Calculation of the Ratio of Cost to Charge Section 311.046(a)(5)

Total Patient Revenues (a) 1,246,353,693
(from 2023 Medicare Cost Report, Worksheet G-3, Line 1)

Total Operating Expenses (b) 269,685,154
(from 2023 Medicare Cost Report, Worksheet A, Line 118, Col. 7)

Initial Ratio of Cost to Charge ((b) divided by (a)) (c) 21.64%

Application of Initial Ratio of Cost to Charge to Bad-Debt Expense

Bad Debt Expense (d) 36,476,039
(from 2024 audited financial statements)

Multiply "Bad Debt Expense" by "Initial Ratio of Cost to Charge" ((d)*(c)) (e) 7,893,415

Add the allowable "Bad-Debt Expense" to "Total Operating Expenses" ((b) + (e)) (f) 277,578,569

Calculation of Ratio of Cost to Charge ((f) divided by (a)) (g) 22.27%