

**SCHEDULE H  
(Form 990)**

**Hospitals**

OMB No. 1545-0047

**2023**

Complete if the organization answered "Yes" on Form 990, Part IV, question 20a.  
Attach to Form 990.

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

<b>Name of the organization</b> NORTON - KING'S DAUGHTERS' HEALTH, INC.	<b>Employer identification number</b> 35   0895832
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**Part I Financial Assistance and Certain Other Community Benefits at Cost**

	Yes	No
<b>1a</b> Did the organization have a financial assistance policy during the tax year? If "No," skip to question 6a. . . . .	✓	
<b>1b</b> If "Yes," was it a written policy? . . . . .	✓	
<b>2</b> If the organization had multiple hospital facilities, indicate which of the following best describes application of the financial assistance policy to its various hospital facilities during the tax year: <input checked="" type="checkbox"/> Applied uniformly to all hospital facilities <input type="checkbox"/> Applied uniformly to most hospital facilities <input type="checkbox"/> Generally tailored to individual hospital facilities		
<b>3</b> Answer the following based on the financial assistance eligibility criteria that applied to the largest number of the organization's patients during the tax year.		
<b>a</b> Did the organization use Federal Poverty Guidelines (FPG) as a factor in determining eligibility for providing free care? If "Yes," indicate which of the following was the FPG family income limit for eligibility for free care: <input type="checkbox"/> 100% <input type="checkbox"/> 150% <input type="checkbox"/> 200% <input checked="" type="checkbox"/> Other <u>350</u> %	✓	
<b>b</b> Did the organization use FPG as a factor in determining eligibility for providing discounted care? If "Yes," indicate which of the following was the family income limit for eligibility for discounted care: . . . . . <input type="checkbox"/> 200% <input type="checkbox"/> 250% <input type="checkbox"/> 300% <input type="checkbox"/> 350% <input type="checkbox"/> 400% <input type="checkbox"/> Other _____ %		✓
<b>c</b> If the organization used factors other than FPG in determining eligibility, describe in Part VI the criteria used for determining eligibility for free or discounted care. Include in the description whether the organization used an asset test or other threshold, regardless of income, as a factor in determining eligibility for free or discounted care.		
<b>4</b> Did the organization's financial assistance policy that applied to the largest number of its patients during the tax year provide for free or discounted care to the "medically indigent"? . . . . .		✓
<b>5a</b> Did the organization budget amounts for free or discounted care provided under its financial assistance policy during the tax year?	✓	
<b>b</b> If "Yes," did the organization's financial assistance expenses exceed the budgeted amount? . . . . .	✓	
<b>c</b> If "Yes" to line 5b, as a result of budget considerations, was the organization unable to provide free or discounted care to a patient who was eligible for free or discounted care? . . . . .		✓
<b>6a</b> Did the organization prepare a community benefit report during the tax year? . . . . .		✓
<b>b</b> If "Yes," did the organization make it available to the public? . . . . .		

<b>7 Financial Assistance and Certain Other Community Benefits at Cost</b>						
<b>Financial Assistance and Means-Tested Government Programs</b>	<b>(a) Number of activities or programs (optional)</b>	<b>(b) Persons served (optional)</b>	<b>(c) Total community benefit expense</b>	<b>(d) Direct offsetting revenue</b>	<b>(e) Net community benefit expense</b>	<b>(f) Percent of total expense</b>
<b>a</b> Financial Assistance at cost (from Worksheet 1) . . . . .			397,594	0	397,594	0.24
<b>b</b> Medicaid (from Worksheet 3, column a)			36,489,454	18,682,356	17,807,098	10.86
<b>c</b> Costs of other means-tested government programs (from Worksheet 3, column b) . . . . .					0	0.00
<b>d Total. Financial Assistance and Means-Tested Government Programs</b>	0	0	36,887,048	18,682,356	18,204,692	11.10
<b>Other Benefits</b>						
<b>e</b> Community health improvement services and community benefit operations (from Worksheet 4) . . . . .			482,336	71,327	411,009	0.25
<b>f</b> Health professions education (from Worksheet 5) . . . . .			232,223	78,525	153,698	0.09
<b>g</b> Subsidized health services (from Worksheet 6) . . . . .			2,972,248	2,607,883	364,365	0.22
<b>h</b> Research (from Worksheet 7) . . . . .					0	0.00
<b>i</b> Cash and in-kind contributions for community benefit (from Worksheet 8) . . . . .					0	0.00
<b>j Total. Other Benefits</b> . . . . .	0	0	3,686,807	2,757,735	929,072	0.57
<b>k Total. Add lines 7d and 7j</b> . . . . .	0	0	40,573,855	21,440,091	19,133,764	11.67

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 50192T Schedule H (Form 990) 2023

**Part II Community Building Activities.** Complete this table if the organization conducted any community building activities during the tax year, and describe in Part VI how its community building activities promoted the health of the communities it serves.

	(a) Number of activities or programs (optional)	(b) Persons served (optional)	(c) Total community building expense	(d) Direct offsetting revenue	(e) Net community building expense	(f) Percent of total expense
1 Physical improvements and housing					0	0.00
2 Economic development					0	0.00
3 Community support					0	0.00
4 Environmental improvements					0	0.00
5 Leadership development and training for community members					0	0.00
6 Coalition building					0	0.00
7 Community health improvement advocacy					0	0.00
8 Workforce development					0	0.00
9 Other					0	0.00
10 Total	0	0	0	0	0	0.00

**Part III Bad Debt, Medicare, & Collection Practices**

**Section A. Bad Debt Expense**

		Yes	No
1 Did the organization report bad debt expense in accordance with Healthcare Financial Management Association Statement No. 15?	1	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2 Enter the amount of the organization's bad debt expense. Explain in Part VI the methodology used by the organization to estimate this amount . . . . .	2		
3 Enter the estimated amount of the organization's bad debt expense attributable to patients eligible under the organization's financial assistance policy. Explain in Part VI the methodology used by the organization to estimate this amount and the rationale, if any, . . . . .	3		
4 Provide in Part VI the text of the footnote to the organization's financial statements that describes bad debt expense or the page number on which this footnote is contained in the attached financial statements.			

**Section B. Medicare**

5 Enter total revenue received from Medicare (including DSH and IME) . . . . .	5	21,804,881
6 Enter Medicare allowable costs of care relating to payments on line 5 . . . . .	6	27,200,578
7 Subtract line 6 from line 5. This is the surplus (or shortfall) . . . . .	7	(5,395,697)
8 Describe in Part VI the extent to which any shortfall reported on line 7 should be treated as community benefit. Also describe in Part VI the costing methodology or source used to determine the amount reported on line 6. Check the box that describes the method used: <input type="checkbox"/> Cost accounting system <input type="checkbox"/> Cost to charge ratio <input checked="" type="checkbox"/> Other		

**Section C. Collection Practices**

9a Did the organization have a written debt collection policy during the tax year? . . . . .	9a	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b If "Yes," did the organization's collection policy that applied to the largest number of its patients during the tax year contain provisions on the collection practices to be followed for patients who are known to qualify for financial assistance? Describe in Part VI . . . . .	9b	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**Part IV Management Companies and Joint Ventures** (owned 10% or more by officers, directors, trustees, key employees, and physicians—see instructions)

(a) Name of entity	(b) Description of primary activity of entity	(c) Organization's profit % or stock ownership %	(d) Officers, directors, trustees, or key employees' profit % or stock ownership %	(e) Physicians' profit % or stock ownership %
1				
2				
3				
4				
5				
6				
7				
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11				
12				
13				

**Part V Facility Information**

**Section A. Hospital Facilities**

(list in order of size, from largest to smallest—see instructions)

How many hospital facilities did the organization operate during the tax year? 1

Name, address, primary website address, and state license number (and if a group return, the name and EIN of the subordinate hospital organization that operates the hospital facility):

1 NORTON-KING'S DAUGHTERS' HEALTH, INC.  
 1373 EAST STATE ROAD 62,, P.O. BOX 447, MADISON, IN 4725  
 HTTPS://NORTONKDH.COM/ STATE LICENSE NO. :  
 22-005063-1

2

3

4

5

6

7

8

9

10

Licensed hospital	General medical	Children's hospital	Teaching hospital	Critical access	Research facility	ER-24 hours	ER-other	Other (describe)	Facility reporting group
✓	✓					✓			

**Part V Facility Information** (continued)

**Section B. Facility Policies and Practices**

(complete a separate Section B for each of the hospital facilities or facility reporting groups listed in Part V, Section A)

Name of hospital facility or letter of facility reporting group: NORTON-KING'S DAUGHTERS' HEALTH, INC.

Line number of hospital facility, or line numbers of hospital facilities in a facility reporting group (from Part V, Section A): 1

Community Health Needs Assessment		Yes	No
1	Was the hospital facility first licensed, registered, or similarly recognized by a state as a hospital facility in the current tax year or the immediately preceding tax year?		✓
2	Was the hospital facility acquired or placed into service as a tax-exempt hospital in the current tax year or the immediately preceding tax year? If "Yes," provide details of the acquisition in Section C		✓
3	During the tax year or either of the two immediately preceding tax years, did the hospital facility conduct a community health needs assessment (CHNA)? If "No," skip to line 12 If "Yes," indicate what the CHNA report describes (check all that apply):	✓	
a	<input checked="" type="checkbox"/> A definition of the community served by the hospital facility		
b	<input checked="" type="checkbox"/> Demographics of the community		
c	<input checked="" type="checkbox"/> Existing health care facilities and resources within the community that are available to respond to the health needs of the community		
d	<input checked="" type="checkbox"/> How data was obtained		
e	<input checked="" type="checkbox"/> The significant health needs of the community		
f	<input checked="" type="checkbox"/> Primary and chronic disease needs and other health issues of uninsured persons, low-income persons, and minority groups		
g	<input checked="" type="checkbox"/> The process for identifying and prioritizing community health needs and services to meet the community health needs		
h	<input checked="" type="checkbox"/> The process for consulting with persons representing the community's interests		
i	<input checked="" type="checkbox"/> The impact of any actions taken to address the significant health needs identified in the hospital facility's prior CHNA(s)		
j	<input type="checkbox"/> Other (describe in Section C)		
4	Indicate the tax year the hospital facility last conducted a CHNA: <u>20 23</u>		
5	In conducting its most recent CHNA, did the hospital facility take into account input from persons who represent the broad interests of the community served by the hospital facility, including those with special knowledge of or expertise in public health? If "Yes," describe in Section C how the hospital facility took into account input from persons who represent the community, and identify the persons the hospital facility consulted	✓	
6a	Was the hospital facility's CHNA conducted with one or more other hospital facilities? If "Yes," list the other hospital facilities in Section C		✓
6b	Was the hospital facility's CHNA conducted with one or more organizations other than hospital facilities? If "Yes," list the other organizations in Section C	✓	
7	Did the hospital facility make its CHNA report widely available to the public? If "Yes," indicate how the CHNA report was made widely available (check all that apply):	✓	
a	<input checked="" type="checkbox"/> Hospital facility's website (list url): <u>(SEE STATEMENT)</u>		
b	<input type="checkbox"/> Other website (list url): _____		
c	<input checked="" type="checkbox"/> Made a paper copy available for public inspection without charge at the hospital facility		
d	<input type="checkbox"/> Other (describe in Section C)		
8	Did the hospital facility adopt an implementation strategy to meet the significant community health needs identified through its most recently conducted CHNA? If "No," skip to line 11	✓	
9	Indicate the tax year the hospital facility last adopted an implementation strategy: <u>20 23</u>		
10	Is the hospital facility's most recently adopted implementation strategy posted on a website?	✓	
a	If "Yes," (list url): <u>(SEE STATEMENT)</u>		
b	If "No," is the hospital facility's most recently adopted implementation strategy attached to this return?		
11	Describe in Section C how the hospital facility is addressing the significant needs identified in its most recently conducted CHNA and any such needs that are not being addressed together with the reasons why such needs are not being addressed.		
12a	Did the organization incur an excise tax under section 4959 for the hospital facility's failure to conduct a CHNA as required by section 501(r)(3)?		✓
b	If "Yes" to line 12a, did the organization file Form 4720 to report the section 4959 excise tax?		
c	If "Yes" to line 12b, what is the total amount of section 4959 excise tax the organization reported on Form 4720 for all of its hospital facilities? \$		

**Part V Facility Information (continued)**

**Financial Assistance Policy (FAP)**

Name of hospital facility or letter of facility reporting group: NORTON-KING'S DAUGHTERS' HEALTH, INC.

		Yes	No
13	Did the hospital facility have in place during the tax year a written financial assistance policy that: Explained eligibility criteria for financial assistance, and whether such assistance included free or discounted care? If "Yes," indicate the eligibility criteria explained in the FAP:	✓	
a	<input checked="" type="checkbox"/> Federal poverty guidelines (FPG), with FPG family income limit for eligibility for free care of <u>3 5 0</u> % and FPG family income limit for eligibility for discounted care of <u>    </u> %		
b	<input type="checkbox"/> Income level other than FPG (describe in Section C)		
c	<input checked="" type="checkbox"/> Asset level		
d	<input type="checkbox"/> Medical indigency		
e	<input checked="" type="checkbox"/> Insurance status		
f	<input checked="" type="checkbox"/> Underinsurance status		
g	<input checked="" type="checkbox"/> Residency		
h	<input checked="" type="checkbox"/> Other (describe in Section C)		
14	Explained the basis for calculating amounts charged to patients?	✓	
15	Explained the method for applying for financial assistance? If "Yes," indicate how the hospital facility's FAP or FAP application form (including accompanying instructions) explained the method for applying for financial assistance (check all that apply):	✓	
a	<input checked="" type="checkbox"/> Described the information the hospital facility may require an individual to provide as part of his or her application		
b	<input checked="" type="checkbox"/> Described the supporting documentation the hospital facility may require an individual to submit as part of his or her application		
c	<input checked="" type="checkbox"/> Provided the contact information of hospital facility staff who can provide an individual with information about the FAP and FAP application process		
d	<input type="checkbox"/> Provided the contact information of nonprofit organizations or government agencies that may be sources of assistance with FAP applications		
e	<input type="checkbox"/> Other (describe in Section C)		
16	Was widely publicized within the community served by the hospital facility? If "Yes," indicate how the hospital facility publicized the policy (check all that apply):	✓	
a	<input checked="" type="checkbox"/> The FAP was widely available on a website (list url): <u>(SEE STATEMENT)</u>		
b	<input checked="" type="checkbox"/> The FAP application form was widely available on a website (list url): <u>(SEE STATEMENT)</u>		
c	<input checked="" type="checkbox"/> A plain language summary of the FAP was widely available on a website (list url): <u>(SEE STATEMENT)</u>		
d	<input checked="" type="checkbox"/> The FAP was available upon request and without charge (in public locations in the hospital facility and by mail)		
e	<input checked="" type="checkbox"/> The FAP application form was available upon request and without charge (in public locations in the hospital facility and by mail)		
f	<input checked="" type="checkbox"/> A plain language summary of the FAP was available upon request and without charge (in public locations in the hospital facility and by mail)		
g	<input checked="" type="checkbox"/> Individuals were notified about the FAP by being offered a paper copy of the plain language summary of the FAP, by receiving a conspicuous written notice about the FAP on their billing statements, and via conspicuous public displays or other measures reasonably calculated to attract patients' attention		
h	<input checked="" type="checkbox"/> Notified members of the community who are most likely to require financial assistance about availability of the FAP		
i	<input checked="" type="checkbox"/> The FAP, FAP application form, and plain language summary of the FAP were translated into the primary language(s) spoken by Limited English Proficiency (LEP) populations		
j	<input type="checkbox"/> Other (describe in Section C)		

**Part V Facility Information** (continued)

**Billing and Collections**

Name of hospital facility or letter of facility reporting group: NORTON-KING'S DAUGHTERS' HEALTH, INC.

	Yes	No
<b>17</b> Did the hospital facility have in place during the tax year a separate billing and collections policy, or a written financial assistance policy (FAP) that explained all of the actions the hospital facility or other authorized party may take upon nonpayment? . . . . .	✓	
<b>18</b> Check all of the following actions against an individual that were permitted under the hospital facility's policies during the tax year before making reasonable efforts to determine the individual's eligibility under the facility's FAP:		
<b>a</b> <input type="checkbox"/> Reporting to credit agency(ies)		
<b>b</b> <input type="checkbox"/> Selling an individual's debt to another party		
<b>c</b> <input type="checkbox"/> Deferring, denying, or requiring a payment before providing medically necessary care due to nonpayment of a previous bill for care covered under the hospital facility's FAP		
<b>d</b> <input type="checkbox"/> Actions that require a legal or judicial process		
<b>e</b> <input type="checkbox"/> Other similar actions (describe in Section C)		
<b>f</b> <input checked="" type="checkbox"/> None of these actions or other similar actions were permitted		
<b>19</b> Did the hospital facility or other authorized party perform any of the following actions during the tax year before making reasonable efforts to determine the individual's eligibility under the facility's FAP? . . . . .		✓
If "Yes," check all actions in which the hospital facility or a third party engaged:		
<b>a</b> <input type="checkbox"/> Reporting to credit agency(ies)		
<b>b</b> <input type="checkbox"/> Selling an individual's debt to another party		
<b>c</b> <input type="checkbox"/> Deferring, denying, or requiring a payment before providing medically necessary care due to nonpayment of a previous bill for care covered under the hospital facility's FAP		
<b>d</b> <input type="checkbox"/> Actions that require a legal or judicial process		
<b>e</b> <input type="checkbox"/> Other similar actions (describe in Section C)		
<b>20</b> Indicate which efforts the hospital facility or other authorized party made before initiating any of the actions listed (whether or not checked) in line 19 (check all that apply):		
<b>a</b> <input checked="" type="checkbox"/> Provided a written notice about upcoming ECAs (Extraordinary Collection Action) and a plain language summary of the FAP at least 30 days before initiating those ECAs (if not, describe in Section C)		
<b>b</b> <input checked="" type="checkbox"/> Made a reasonable effort to orally notify individuals about the FAP and FAP application process (if not, describe in Section C)		
<b>c</b> <input checked="" type="checkbox"/> Processed incomplete and complete FAP applications (if not, describe in Section C)		
<b>d</b> <input checked="" type="checkbox"/> Made presumptive eligibility determinations (if not, describe in Section C)		
<b>e</b> <input type="checkbox"/> Other (describe in Section C)		
<b>f</b> <input type="checkbox"/> None of these efforts were made		

**Policy Relating to Emergency Medical Care**

<b>21</b> Did the hospital facility have in place during the tax year a written policy relating to emergency medical care that required the hospital facility to provide, without discrimination, care for emergency medical conditions to individuals regardless of their eligibility under the hospital facility's financial assistance policy? . . . . .	✓	
If "No," indicate why:		
<b>a</b> <input type="checkbox"/> The hospital facility did not provide care for any emergency medical conditions		
<b>b</b> <input type="checkbox"/> The hospital facility's policy was not in writing		
<b>c</b> <input type="checkbox"/> The hospital facility limited who was eligible to receive care for emergency medical conditions (describe in Section C)		
<b>d</b> <input type="checkbox"/> Other (describe in Section C)		

**Part V Facility Information** *(continued)*

**Charges to Individuals Eligible for Assistance Under the FAP (FAP-Eligible Individuals)**

Name of hospital facility or letter of facility reporting group: NORTON-KING'S DAUGHTERS' HEALTH, INC.

		Yes	No
<b>22</b>	Indicate how the hospital facility determined, during the tax year, the maximum amounts that can be charged to FAP-eligible individuals for emergency or other medically necessary care:		
<b>a</b>	<input type="checkbox"/> The hospital facility used a look-back method based on claims allowed by Medicare fee-for-service during a prior 12-month period		
<b>b</b>	<input type="checkbox"/> The hospital facility used a look-back method based on claims allowed by Medicare fee-for-service and all private health insurers that pay claims to the hospital facility during a prior 12-month period		
<b>c</b>	<input checked="" type="checkbox"/> The hospital facility used a look-back method based on claims allowed by Medicaid, either alone or in combination with Medicare fee-for-service and all private health insurers that pay claims to the hospital facility during a prior 12-month period		
<b>d</b>	<input type="checkbox"/> The hospital facility used a prospective Medicare or Medicaid method		
<b>23</b>	During the tax year, did the hospital facility charge any FAP-eligible individual to whom the hospital facility provided emergency or other medically necessary services more than the amounts generally billed to individuals who had insurance covering such care? . . . . . If "Yes," explain in Section C.	23	✓
<b>24</b>	During the tax year, did the hospital facility charge any FAP-eligible individual an amount equal to the gross charge for any service provided to that individual? . . . . . If "Yes," explain in Section C.	24	✓

Schedule H (Form 990) 2023

Part V, Section C

**Supplemental Information.** Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 2, 3j, 5, 6a, 6b, 7d, 11, 13b, 13h, 15e, 16j, 18e, 19e, 20a, 20b, 20c, 20d, 20e, 21c, 21d, 23, and 24. If applicable, provide separate descriptions for each hospital facility in a facility reporting group, designated by facility reporting group letter and hospital facility line number from Part V, Section A ("A, 1," "A, 4," "B, 2," "B, 3," etc.) and name of hospital facility.

Return Reference - Identifier	Explanation
SCHEDULE H, PART V, SECTION B, LINE 3E - THE SIGNIFICANT HEALTH NEEDS OF THE COMMUNITY	THE SIGNIFICANT HEALTH NEEDS ARE A PRIORITIZED DESCRIPTION OF THE SIGNIFICANT HEALTH NEEDS OF THE COMMUNITY WHICH ARE IDENTIFIED THROUGH CHNA.
SCHEDULE H, PART V, SECTION B, LINE 5 - INPUT FROM PERSONS WHO REPRESENT BROAD INTERESTS OF COMMUNITY SERVED	<p>FACILITY NAME: NORTON-KING'S DAUGHTERS' HEALTH, INC.</p> <p>DESCRIPTION: NORTON KING'S DAUGHTERS' HEALTH CONDUCTED A COMMUNITYWIDE SURVEY TO OBTAIN FEEDBACK FROM THE GENERAL PUBLIC REGARDING HEALTH NEEDS AND PERCEPTIONS. THE COMMUNITY SURVEY WAS MADE AVAILABLE IN ENGLISH AND SPANISH THROUGH ONLINE AND PAPER SURVEYING METHODS. THERE WERE 551 SURVEYS COLLECTED. SURVEYS THAT FELL OUTSIDE OF THE TRI-COUNTY COMMUNITY OR WERE MISSING THE ZIP CODE, AGE, GENDER, RACE AND EDUCATIONAL ATTAINMENT DEMOGRAPHIC INFORMATION WERE EXCLUDED FROM THE RESULTS LEAVING 480 SURVEYS TO BE USED FOR THE ASSESSMENT.</p> <p>IN ADDITION, NORTON KING'S DAUGHTERS' HEALTH OBTAINED INPUT FROM 23 VARIOUS COMMUNITY STAKEHOLDERS, INCLUDING 7 NORTON KING'S DAUGHTERS' HEALTH EMPLOYED PHYSICIANS, 16 COMMUNITY LEADERS IN JEFFERSON COUNTY AND NINE LEADERS FROM AREAS SURROUNDING JEFFERSON COUNTY THROUGH VIRTUAL MEETINGS. COMMUNITY LEADERS REPRESENT AREAS OF PUBLIC HEALTH, MAJOR EMPLOYERS, PUBLIC SCHOOLS, SOCIAL SERVICES ORGANIZATIONS AND COMMUNITY HEALTH DEPARTMENTS. SALVATION ARMY, RUTH HAVEN, MADISON CONSOLIDATED HIGH SCHOOL, MORGAN-NAY FUNERAL CENTER/JEFFERSON COUNTY, HANOVER BAPTIST CHURCH, MADISON CONSOLIDATED SCHOOLS, SUPER ATV, TRIMBLE COUNTY HEALTH DEPARTMENT, JEFFERSON COUNTY HEALTH DEPARTMENT, IVY TECH, GIRLS INCORPORATED, CENTERSTONE COMMUNITY FOUNDATION, JEFFERSON COUNTY JUDGE CITY, OF HANOVER CITY COUNCIL, AND CASA AMIGA REPRESENTATIVES WERE ALL INCLUDED AS PART OF THE PROCESS TO INTERVIEW PEOPLE WHO REPRESENT THE COMMUNITY, THESE INTERVIEWS FOCUSED ON THE FOLLOWING FOUR KEY AREAS: PRESSING PROBLEMS IN HEALTH CARE, BARRIERS TO HEALTH CARE, HEALTH CARE ENGAGEMENT AND GLOBAL OR UNIVERSAL ISSUES INVOLVING HEALTH CARE.</p> <p>TO ENSURE THE MEDICALLY UNDERSERVED WERE REPRESENTED IN THIS CHNA, MEDIAN HOUSEHOLD INCOMES IN NEIGHBORHOODS THROUGHOUT THE TRI-COUNTY AREA WERE COMPARED TO IDENTIFY AREAS WITH A LOWER MEDIAN INCOME.</p>
SCHEDULE H, PART V, SECTION B, LINE 6B - CHNA CONDUCTED WITH ONE OR MORE ORGANIZATIONS OTHER THAN HOSPITAL FACILITIES	<p>FACILITY NAME: OTHER ORGANIZATONS</p> <p>DESCRIPTION: NORTON KING'S DAUGHTERS' HEALTH COLLABORATED WITH A VARIETY OF PARTNERS RANGING FROM LOCAL SOCIAL SERVICES ORGANIZATIONS TO THE MADISON COUNTY PUBLIC SCHOOL SYSTEM AND OTHER COMMUNITY ORGANIZATIONS. NORTON HEALTHCARE CONDUCTED A COMMUNITY WIDE SURVEY TO OBTAIN FEEDBACK FROM THE GENERAL PUBLIC REGARDING HEALTH NEEDS AND PERCEPTIONS. THE COMMUNITY SURVEY WAS MADE AVAILABLE IN ENGLISH AND SPANISH, THROUGH ONLINE AND PAPER SURVEYING METHODS. COMMUNITY INPUT ALSO WAS OBTAINED THROUGH KEY STAKEHOLDER INTERVIEWS OF 23 COMMUNITY LEADERS AND HEALTH CARE PROVIDERS. TO ENSURE THE MEDICALLY UNDERSERVED WERE REPRESENTED IN THIS CHNA, INTERVIEWS WERE CONDUCTED WITH REPRESENTATIVES FROM THE SALVATION ARMY, MADISON COUNTY PUBLIC SCHOOLS AS WELL AS AGENCIES PROVIDING SERVICES RELATED TO MENTAL HEALTH, FOOD INSECURITIES AND RECENT IMMIGRATION TO THE UNITED STATES.</p>
SCHEDULE H, PART V, SECTION B, LINE 7 - HOSPITAL FACILITY'S WEBSITE (LIST URL)	<p><a href="https://live-nkdh.pantheonsite.io/wp-content/uploads/2023/09/2023-NKDH-COMMUNITY-HEALTH-NEEDS-ASSESSMENT.PDF">HTTPS://LIVE-NKDH.PANTHEONSITE.IO/WP-CONTENT/UPLOADS/2023/09/2023-NKDH-COMMUNITY-HEALTH-NEEDS-ASSESSMENT.PDF</a></p>
SCHEDULE H, PART V, SECTION B, LINE 10 - IF "YES", (LIST URL)	<p><a href="https://nortonkdh.com/wp-content/uploads/2024/08/CHNA-2022-STRATEGIES-2023-UPDATES.PDF">HTTPS://NORTONKDH.COM/WP-CONTENT/UPLOADS/2024/08/CHNA-2022-STRATEGIES-2023-UPDATES.PDF</a></p>



Return Reference - Identifier	Explanation
<p>SCHEDULE H, PART V, SECTION B, LINE 11 - HOW HOSPITAL FACILITY IS ADDRESSING NEEDS IDENTIFIED IN CHNA</p>	<p><b>FACILITY NAME:</b> NORTON-KING'S DAUGHTERS' HEALTH, INC.</p> <p><b>DESCRIPTION:</b> <b>SUBSTANCE USE</b> HEALTHY COMMUNITIES INITIATIVES ARE LED BY NORTON KING'S DAUGHTERS' HEALTH (NKDH) AND INCLUDES STAFF AND COMMUNITY MEMBERS. IN 2023 HEALTHY COMMUNITY INITIATIVES HOSTED A RALLY FOR RECOVERY EVENT INCLUDING THE SHOWING OF THE MOVIE THE ADDICTS WAKE. NORTON KING'S DAUGHTERS' HEALTH SUPPORTED THE LOCAL RECOVERY CAFE, A SUBSTANCE ABUSE SUPPORT FACILITY. NKDH WORKED WITH THE LOCAL HEALTH DEPARTMENT TO HOST A DRUG DROP OFF EVENT FOR EXPIRED/UNUSED MEDICATIONS AND SYRINGES.</p> <p><b>MENTAL HEALTH/ SUICIDE</b> HEALTHY COMMUNITIES INITIATIVE (HCI) OF JEFFERSON COUNTY FOCUSES ON BRINGING COMMUNITY MEMBERS TOGETHER TO ADDRESS THE MAJOR HEALTH NEEDS OF THE COMMUNITY. THE SUICIDE RATE FOR JEFFERSON COUNTY SURPASSES STATE AND LOCAL AVERAGES, AND JEFFERSON COUNTY HAS BEEN DESIGNATED A MENTAL HEALTH PROFESSIONAL SHORTAGE AREA BY THE STATE OF INDIANA. NORTON KING'S DAUGHTERS' HEALTH IN PARTNERHIP WITH COMMUNITY MEMBERS HAVE DEVELOPED A ZERO SUICIDE PLAN FOR JEFFERSON COUNTY. KEY COMPONENTS OF THE ZERO SUICIDE PLAN INCLUDE TRAINING - THIS INCLUDES PROVIDING MENTAL HEALTH AND SUICIDE AWARENESS TRAINING FOR THE COMMUNITY, UTILIZING SUCH TOOLS AS APPLIED SUICIDE INTERVENTION SKILLS TRAINING (ASIST), QUESTION, PERSUADE AND REFER (QPR) AND MENTAL HEALTH FIRST AID TRAINING. COMMUNITY AWARENESS / BREAKING THE STIGMA - RAISING AWARENESS IN THE COMMUNITY TO DISCUSS MENTAL HEALTH ISSUES, INCLUDING SUICIDE, SO THAT THE COMMUNITY UNDERSTANDS THAT MENTAL HEALTH WELLNESS IS JUST AS IMPORTANT AS PHYSICAL HEALTH WELLNESS. COMMUNICATION / RESOURCE GUIDE - PROMOTING THE VARIOUS WAYS TO SEEK HELP IN AND OUTSIDE THE COMMUNITY, INCLUDING THE RESOURCE PAGE AVAILABLE ON THE CLEARINGHOUSE WEBSITE. REDUCE LETHAL MEANS - ENCOURAGING PEOPLE TO PUT GUN LOCKS ON THEIR WEAPONS (AVAILABLE FROM NKDH AND LOCAL LAW ENFORCEMENT) AND TO PROPERLY DISPOSE OF UNUSED MEDICATIONS THROUGH FREE DROP-OFF PROGRAMS. COPING SKILLS / BUILDING RESILIENCY - HELPING THE COMMUNITY TO BUILD RESILIENCY THROUGH THE USE OF MINDFULNESS PROGRAMS, MEDITATION AND PROMOTION OF "SEIZE THE AWKWARD" CAMPAIGN THROUGH THE AMERICAN FOUNDATION FOR SUICIDE PREVENTION. EDUCATION / BEST DEMONSTRATED PRACTICES / DATA - PARTICIPATION IN STATE AND NATIONAL PROGRAMS SUCH AS NAMI (NATIONAL ALLIANCE ON MENTAL ILLNESS), MENTAL HEALTH AMERICA - INDIANA, AND THE INDIANA SUICIDE PREVENTION NETWORK. THE TEAM HAS PARTNERED WITH MADISON CONSOLIDATED SCHOOLS (MCS) ON A COUNSELING INITIATIVE GRANT AWARDED BY THE LILLY ENDOWMENT. THIS GRANT PROVIDES ADDITIONAL SUICIDE PREVENTION TRAINING FOR THE STUDENTS AND TEACHERS/FACULTY FOR ALL JEFFERSON COUNTY SCHOOLS AND PARENTS/CAREGIVERS. RECOGNIZED MENTAL HEALTH AWARENESS MONTH AND SUICIDE AWARENESS MONTH. HOSTED A YOUTH WORKER CAFE TRAINING. DISTRIBUTED GUN LOCKS FOR SUICIDE AND ACCIDENTAL DEATH PREVENTION AT A COMMUNITY EVENT. HELPED TO PROMOTE THE OUT OF THE DARKNESS SUICIDE AWARENESS WALK. NKDH HOSTS A QUARTERLY ART SHOW FOR THE MADISON ALT CLUB. VARIOUS PAINTINGS ARE ON DISPLAY IN THE HOSPITAL CAFE AS PART OF THE ON-GOING ART OF HEALING EXHIBIT.</p> <p><b>OBESITY</b> THE WELLNESS COORDINATOR COMPLETED 40 COMMUNITY SPEAKING ENGAGEMENTS IN 2023. THESE FOCUSED ON WELLNESS AND DISEASE PREVENTION TOPICS SUCH AS; NUTRITION, HEART DISEASE, STRESS MANAGEMENT, SUN SAFETY, PHYSICAL ACTIVITY, SELF-DEFENSE, ETC. HEALTHY LIFESTYLES TEAM, AS PART OF NORTON KING'S DAUGHTERS' HEALTH HEALTHY COMMUNITY INITIATIVES, HOSTED A LARGE COMMUNITY HEALTH FAIR IN 2023 WHICH INCLUDED 17 BOOTHS OFFERING HEALTH INFORMATION AND RESOURCES. IN ADDITION, FREE HEALTH SCREENS, HEALTHY SNACKS, AND DOOR PRIZES WERE PROVIDED. HOSTED A HEALTHY YOUTH TAILGATE PARTY. THIS EVENT SERVED OVER 250 YOUTH AND GUARDIANS. A TOTAL OF 17 AGENCIES AND 50 VOLUNTEERS OFFERED GAMES AND ACTIVITIES THAT OFFERED HEALTH RESOURCES AND HEALTH EDUCATION.</p> <p><b>PHYSICAL INACTIVITY</b> NOH RUN THE FALLS 5K WALK/RUN WAS HOSTED BY NORTON KING'S DAUGHTERS' HEALTH IN 2023 AND HAD 243 WALKERS AND RUNNERS PARTICIPATED IN THIS COMMUNITY 5K IN 2023. NORTON KING'S DAUGHTERS' HEALTH PROVIDED TWO WOMEN'S SAFE AND SELF-DEFENSE WORKSHOPS IN 2023.</p> <p><b>TOBACCO USE INCLUDING VAPING</b> NORTON KING'S DAUGHTERS' HEALTH EMPLOYS A FULL TIME STATE GRANT FUNDED TOBACCO COORDINATOR. IN 2023 THERE WERE 1,181 ELECTRONIC PATIENT REFERRALS TO THE INDIANA QUITLINE. PHYSICIANS WERE PROVIDED OFFICES WITH FOLDERS FOR PATIENTS THAT INCLUDE CESSATION RESOURCES AND STAFF WERE TRAINED TO MAKE QUITLINE REFERRALS. NORTON KING'S DAUGHTERS' HEALTH MOTHER BABY SERVICES PROVIDED TOBACCO FREE CESSATION EDUCATION TO NEW MOMS WITH RESOURCES AND INCENTIVES. NORTON KING'S DAUGHTERS' HEALTH CANCER TREATMENT CENTER PROVIDES TOBACCO RESOURCES FOR CANCER PATIENTS AND HAS A TOBACCO TREATMENT SPECIALIST ON STAFF. NORTON KING'S DAUGHTERS' HEALTH COLLABORATED WITH SOUTHWESTERN SCHOOL CORPORATION TO START A VOICE PROGRAM. VOICE IS A YOUTH-LED TOBACCO INITIATIVE, WHICH EDUCATES YOUTH ON TOBACCO MARKETING AND DANGERS OF TOBACCO. IN ADDITION, WORK IS TAKING PLACE WITH THE SCHOOL ON POLICY CHANGE AND PROGRAMS TO ASSIST YOUTH WHEN THEY ARE CAUGHT WITH TOBACCO PRODUCTS. - PROVIDED TOBACCO RESOURCES TO LOW INCOME MOTHERS WORKING WITH COUNTY WIC SERVICES AND LIFE CHOICES CLINIC (PREGNANCY CRISIS CLINIC). THE NORTON KING'S DAUGHTERS' CANCER CENTER PROVIDED TOBACCO QUIT RESOURCE KITS TO A LOCAL EMPLOYER, THE SALVATION ARMY, AND THE HOUSE OF HOPE FOOD PANTRY DURING THE GREAT AMERICAN SMOKEOUT. NORTON KING'S DAUGHTERS' HOSTED A HIDDEN IN PLAIN SIGHT BACKPACK TRAINING FOR YOUTH SERVING ORGANIZATIONS. HIDDEN IN PLAIN SIGHT BACKPACKS IS A TOOL USED TO TRAIN WHAT PRODUCTS LOOK LIKE, SIGNS OF SUBSTANCE USE, AND HOW TO START A CONVERSATION WITH YOUTH. NORTON KING'S DAUGHTERS' HOSTED A COMMUNITY CONVERSATION TO REVIEW THE RESULTS OF THE 2022 YOUTH TOBACCO SURVEY.</p> <p><b>NUTRITIONAL NEEDS</b> A WELLNESS COORDINATOR FROM NORTON KING'S DAUGHTERS' HEALTH ATTENDED A HIGH SCHOOL GIRLS WELLNESS FAIR, OFFERING EDUCATION INFORMATION FOR TEENS AND NUTRITION. FIT KIDS PROGRAM IS AN INTERACTIVE HEALTH EDUCATION PROGRAM FOR AREA 5TH GRADE CLASSROOMS. ALL FOUR LESSONS INCLUDE TAKE HOME CHALLENGES AND GUARDIAN INFORMATION FOCUSED ON EXERCISE AND HEALTHY EATING. NORTON KING'S DAUGHTERS' HEALTH OFFERED THE PROGRAM TO 5 SCHOOL</p>

Return Reference - Identifier	Explanation
	<p>SYSTEMS AND REACHED 15 DIFFERENT 5TH GRADE CLASSES (346 TOTAL STUDENTS AND TEACHERS).</p> <p>HEALTH LITERACY  NORTON KING'S DAUGHTERS' HEALTH PROVIDES COMMUNITY-BASED EDUCATION OPPORTUNITIES TO IMPROVE ACCESS AND AWARENESS OF HEALTH INFORMATION THROUGH COMMUNITY OUTREACH SUCH AS HEALTH FAIRS AND COMMUNITY SPEAKING ENGAGEMENTS ON HEALTHY LIVING. NORTON KING'S DAUGHTERS' HEALTH AND NORTON CANCER INSTITUTE-MADISON HOSTED A NO-COST SKIN CANCER SCREENING. DURING THE EVENT THEY SCREENED 115 PEOPLE. EDUCATION MATERIAL AND SUNSCREEN WERE ALSO DISTRIBUTED. 324 EXPECTING MOTHERS PARTICIPATED IN AN EDUCATIONAL PREP VISIT PRIOR TO DELIVERY AT NORTON KING'S DAUGHTERS' HEALTH. IN ADDITION, EIGHT COUPLES ATTENDED THE CHILDBIRTH CLASS SERIES. SIXTEEN MOTHERS PARTICIPATED IN BREASTFEEDING CONSULTATIONS AND ONE CAME TO A BREAST PUMPING EDUCATION CLASS. NKDH SERVES AS AN AHA PROVIDER SITE HOSTING A VARIETY OF TRAININGS FOR EMPLOYEES AND COMMUNITY MEMBERS. TRAINING INCLUDE: ACLS, INSTRUCTOR AND PROVIDER BLS, INSTRUCTOR AND PROVIDER HEARTSAVER, CPR AED, FIRST AID, K-12 SCHOOLS, INSTRUCTOR, AND PEDIATRIC - PALS; INSTRUCTOR AND PROVIDER. IN 2023, A TOTAL OF 1,054 PEOPLE RECEIVED TRAINING AND AN E-COMPLETION CARD. NORTON KING'S DAUGHTERS' HEALTH OFFERED FREE COLORECTAL SCREENING KITS AT PROVIDER OFFICES AND THE CANCER CENTER DURING THE MONTH OF MARCH. A TOTAL OF 224 HIGH SCHOOL AND COLLEGE STUDENTS WERE HOSTED FOR JOB SHADOW OPPORTUNITIES OR STRUCTURED INTERNSHIPS AT NKDH IN 2023. IN ADDITION, 10 HIGH SCHOOL STUDENTS PARTICIPATE IN THE NKDH HOSTED MEDICAL EXPLORERS PROGRAM. HEALTH EDUCATION INFORMATION WAS PROVIDED BY NKDH AT THE JEFFERSON COUNTY 4-H FAIR. NORTON KING'S DAUGHTERS' HEALTH OFFERED BLOOD PRESSURE CHECKS AT THE HOUSE OF HOPE FOOD PANTRY QUARTERLY IN 2023. AVERAGED 25 PARTICIPANTS AT EACH EVENT. A WELLNESS COORDINATOR FROM NORTON KING'S DAUGHTERS' HEALTH PROVIDING PRE/POST-NATAL EDUCATION AT A COMMUNITY BABY SHOWER EVENT FOR NEW MOMS. PARTICIPATED IN A MILITARY APPRECIATION EVENT IN 2023 OFFERING WELLNESS AND TOBACCO EDUCATION INFORMATION. OVER 100 VETERAN'S AND SPOUSES ATTENDED. BLOOD PRESSURE CHECKS WERE OFFERED. NORTON KING'S DAUGHTERS' HEALTH OFFERED A MONTHLY "TO YOUR HEALTH" PODCAST 30-MINUTE EDUCATION PODCAST WITH VARIOUS HEALTH TOPICS WAS OFFERED MONTHLY ON A LOCAL RADIO STATION AND AVAILABLE TO LISTEN ON THE HOSPITALS' WEBSITE. A CORPORATE FLU SHOT CLINIC WAS HELD IN 2023.</p>
<p>SCHEDULE H, PART V, SECTION B, LINE 13H - OTHER ELIGIBILITY CRITERIA FOR FINANCIAL ASSISTANCE</p>	<p>FACILITY NAME:  NORTON-KING'S DAUGHTERS' HEALTH, INC.</p> <p>DESCRIPTION:  13H ADDITIONAL CRITERIA - (1) THE PATIENT DOES NOT QUALIFY FOR SUBSIDIZED COVERAGE OF GOVERNMENT ASSISTANCE SUCH AS DISPROPORTIONATE SHARE HOSPITAL, CHILDREN'S HEALTH INSURANCE PROGRAM, MEDICAID, MEDICAID MANAGED CARE ORGANIZATION, OR HOOSIER HEALTHCARE. (2) TO BE ELIGIBLE FOR ASSISTANCE FOR NON-EMERGENT MEDICALLY NECESSARY CARE, A PATIENT (OR THAT PATIENT'S GUARANTOR) MUST BE A RESIDENT OF KENTUCKY, INDIANA, TENNESSEE, OHIO, OR ILLINOIS. THIS RESIDENCY REQUIREMENT DOES NOT APPLY TO EMERGENCY CARE.</p>
<p>SCHEDULE H, PART V, SECTION B, LINE 16A - FAP AVAILABLE WEBSITE</p>	<p><a href="https://nortonhealthcare.com/wp-content/uploads/2024/01/norton-healthcare-financial-assistance-policy-4815-4822-7651-v28-09.30.23.pdf">HTTPS://NORTONHEALTHCARE.COM/WP-CONTENT/UPLOADS/2024/01/NORTON-HEALTHCARE-FINANCIAL-ASSISTANCE-POLICY-4815-4822-7651-V28-09.30.23.PDF</a></p>
<p>SCHEDULE H, PART V, SECTION B, LINE 16B - FAP APPLICATION FORM WEBSITE</p>	<p><a href="https://nortonhealthcare.com/wp-content/uploads/2024/03/norton-healthcare-application-for-financial-assistance-effective-1-1-2023-updated-lockbox-1.pdf">HTTPS://NORTONHEALTHCARE.COM/WP-CONTENT/UPLOADS/2024/03/NORTON-HEALTHCARE-APPLICATION-FOR-FINANCIAL-ASSISTANCE-EFFECTIVE-1-1-2023-UPDATED-LOCKBOX-1.PDF</a></p>
<p>SCHEDULE H, PART V, SECTION B, LINE 16C - PLAIN LANGUAGE FAP SUMMARY WEBSITE</p>	<p><a href="https://nortonhealthcare.com/wp-content/uploads/2023/07/norton-healthcare-financial-assistance-policy-summary-4850-8939-9875-v13-9.30.23.pdf">HTTPS://NORTONHEALTHCARE.COM/WP-CONTENT/UPLOADS/2023/07/NORTON-HEALTHCARE-FINANCIAL-ASSISTANCE-POLICY-SUMMARY-4850-8939-9875-V13-9.30.23.PDF</a></p>

**Part V Facility Information** *(continued)*

**Section D. Other Health Care Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility**  
 (list in order of size, from largest to smallest)

How many non-hospital health care facilities did the organization operate during the tax year? 8

Name and address	Type of facility (describe)
<b>1</b> REHABILITATION CENTER AND HOME CARE 2670 N MICHIGAN ROAD MADISON, IN 47250	OUTPATIENT REHABILITATION CENTER AND HOME CARE SERVICES
<b>2</b> DOWNTOWN MEDICAL OFFICE BUILDING 630 NORTH BROADWAY MADISON, IN 47250	PHYSICIAN MEDICAL OFFICE AND HOSPITAL STAFF
<b>3</b> CARROLLTON MEDICAL OFFICE BUILDING 205 MARWILL DRIVE CARROLLTON, KY 41008	PHYSICIAN MEDICAL OFFICE
<b>4</b> TRIMBLE COUNTY MEDICAL OFFICE BUILDING 10235 US HIGHWAY 421 MILTON, KY 40045	PHYSICIAN MEDICAL OFFICE
<b>5</b> CONVENIENT CARE CENTER 445 CLIFTY DRIVE MADISON, IN 47250	CONVENIENT CARE CENTER
<b>6</b> HANOVER MEDICAL OFFICE BUILDING 36 MEDICAL PLAZA HANOVER, IN 47243	PHYSICIAN MEDICAL OFFICE
<b>7</b> SWITZERLAND COUNTY MEDICAL OFFICE BUILDING 1190 WEST MAIN STREET VEVAY, IN 47043	PHYSICIAN MEDICAL OFFICE
<b>8</b> VERSAILLES MEDICAL OFFICE BUILDING 206 W TYSON STREET VERSAILLES, IN 47042	PHYSICIAN MEDICAL OFFICE
<b>9</b>  	
<b>10</b>  	

## Provide the following information.

- 1 **Required descriptions.** Provide the descriptions required for Part I, lines 3c, 6a, and 7; Part II; Part III, lines 2, 3, 4, 8 and 9b.
- 2 **Needs assessment.** Describe how the organization assesses the health care needs of the communities it serves, in addition to any needs assessments reported in Part V, Section B.
- 3 **Patient education of eligibility for assistance.** Describe how the organization informs and educates patients and persons who may be billed for patient care about their eligibility for assistance under federal, state, or local government programs or under the organization's financial assistance policy.
- 4 **Community information.** Describe the community the organization serves, taking into account the geographic area and demographic constituents it serves.
- 5 **Promotion of community health.** Provide any other information important to describing how the organization's hospital facilities or other health care facilities further its exempt purpose by promoting the health of the community (e.g., open medical staff, community board, use of surplus funds, etc.).
- 6 **Affiliated health care system.** If the organization is part of an affiliated health care system, describe the respective roles of the organization and its affiliates in promoting the health of the communities served.
- 7 **State filing of community benefit report.** If applicable, identify all states with which the organization, or a related organization, files a community benefit report.

Return Reference - Identifier	Explanation
SCHEDULE H, PART I, LINE 6A -	NORTON-KING'S DAUGHTERS' HEALTH DOES NOT PREPARE A FORMAL COMMUNITY BENEFIT REPORT. HOWEVER, CERTAIN COMMUNITY BENEFIT INFORMATION IS PROVIDED TO THE STATE OF INDIANA ON THE "HOSPITAL FISCAL REPORT STATE FORM 49520" WHICH IS FILED ANNUALLY.
SCHEDULE H, PART I, LINE 7 - DESCRIBE SUBSIDIZED HEALTH SERVICE COSTS FROM PHYSICIAN CLINIC ON LINE 7G	NO COSTS ATTRIBUTABLE TO A PHYSICIAN CLINIC WERE INCLUDED ON LINE 7G.
SCHEDULE H, PART I, LINE 7 - EXPLANATION OF COSTING METHODOLOGY USED FOR CALCULATING LINE 7 TABLE	IF COSTS COULD BE DIRECTLY IDENTIFIED TO A PARTICULAR LINE, THAN THOSE DIRECT COSTS WERE UTILIZED. IF COSTS COULD NOT BE DIRECTLY IDENTIFIED, THEN A COST-TO-CHARGE RATIO WAS UTILIZED.
SCHEDULE H, PART II - DESCRIBE HOW COMMUNITY BUILDING ACTIVITIES PROMOTE THE HEALTH OF THE COMMUNITY	NORTON KING'S DAUGHTERS' HEALTH SUPPORTED OVER 19 COMMUNITY ORGANIZATIONS WITH ACTIVE ATTENDANCE AND PARTICIPATION IN THE FOLLOWING COMMUNITY COALITIONS/GROUPS: JEFFERSON COUNTY JUSTICE TREATMENT AND PREVENTION COALITION (JCJTAP), JEFFERSON COUNTY UNITED WAY BOARD, MADISON CONSOLIDATED SCHOOLS WELLNESS COMMITTEE, PURDUE EXTENSION HEALTH AND HUMAN SERVICES BOARD, PURDUE EXTENSION ADVISORY BOARD, PREVENT CHILD ABUSE OF JEFFERSON COUNTY BOARD, COURT APPOINTED SPECIAL ADVOCATES OF JEFFERSON COUNTY BOARD (CASA), INDIANA HOSPITAL ASSOCIATION BOARD, TRILOGY HEALTH CAMPUS ADVISORY BOARD LOCAL EMERGENCY PLANNING COMMITTEE, 911 ADVISORY BOARD, EMERGENCY MANAGEMENT ASSOCIATION BOARD, DISTRICT 9 HEALTHCARE COALITION, ADVISORY BOARD FOR HANOVER COLLEGE'S DPT PROGRAM, IVY TECH MEDICAL ASSISTANT ADVISORY BOARD, IVY TECH ADVISORY BOARD, JEFFERSON COUNTY SART, JEFFERSON COUNTY CHILD'S ADVOCACY CENTER (CAC) CASE REVIEW COMMITTEE, AND A PARTNER AND HOST SITE FOR THE LEADERSHIP JEFFERSON COUNTY PROGRAM. THIS COMMUNITY INVOLVEMENT HELPED IMPROVE ACCESS TO HEALTH SERVICES, ENHANCED THE HEALTH OF THE COMMUNITY, ADVANCED MEDICAL AND HEALTH CARE KNOWLEDGE, AND RELIEVED OR REDUCED THE BURDEN OF GOVERNMENT OR COMMUNITY EFFORT. NORTON KING'S DAUGHTERS' HEALTH PURPOSE IS TO PROVIDE QUALITY HEALTH CARE TO ALL THOSE WE SERVE, IN A MANNER THAT RESPONDS TO THE NEEDS OF OUR COMMUNITIES AND HONORS OUR FAITH HERITAGE. OUR COMMUNITY BENEFIT INITIATIVE ALIGNS WITH OUR MISSION TO PROMOTE THE HEALTH OF THE COMMUNITY THROUGH SERVICE ON LOCAL BOARDS, ADVISORY COUNCILS AND VOLUNTEERING.
SCHEDULE H, PART III, LINE 2 - METHODOLOGY USED TO ESTIMATE BAD DEBT	IN ACCORDANCE WITH ACCOUNTING GUIDANCE, BAD DEBT IS NO LONGER AN EXPENSE, BUT IS INCLUDED AS A REDUCTION IN NET PATIENT SERVICE REVENUE. THE FOLLOWING PARAGRAPH PER THE CONSOLIDATED, AUDITED FINANCIAL STATEMENTS FOR NORTON HEALTHCARE, INC. (PAGE 19, FIRST PARAGRAPH) DISCUSSES THE HANDLING OF PATIENT DEDUCTIBLE AND COINSURANCE NOT PAID BY PATIENTS:  "GENERALLY, PATIENTS WHO ARE COVERED BY THIRD-PARTY PAYORS ARE RESPONSIBLE FOR PATIENT RESPONSIBILITY BALANCES, INCLUDING DEDUCTIBLES AND COINSURANCE, WHICH VARY IN AMOUNT. THE CORPORATION ESTIMATES THE TRANSACTION PRICE FOR PATIENTS WITH DEDUCTIBLES AND COINSURANCE BASED ON HISTORICAL EXPERIENCE AND CURRENT MARKET CONDITIONS. THE INITIAL ESTIMATE OF THE TRANSACTION PRICE IS DETERMINED BY REDUCING THE STANDARD CHARGE BY ANY EXPLICIT PRICE CONCESSIONS, DISCOUNTS, AND/OR IMPLICIT PRICE CONCESSIONS. SUBSEQUENT CHANGES TO THE ESTIMATE OF THE TRANSACTION PRICE ARE GENERALLY RECORDED AS ADJUSTMENTS TO NET PATIENT SERVICE REVENUE IN THE PERIOD OF CHANGE. ADJUSTMENTS ARISING FROM A CHANGE IN THE TRANSACTION PRICE WERE NOT MATERIAL TO NET PATIENT SERVICE REVENUE FOR EITHER PERIOD".
SCHEDULE H, PART III, LINE 3 - FAP ELIGIBLE PATIENT BAD DEBT CALCULATION METHODOLOGY	THE HOSPITAL HAS A DETAILED FINANCIAL ASSISTANCE POLICY WHICH STATES THAT TO PARTICIPATE, CANDIDATES MUST COOPERATE FULLY. IN ADDITION, THE HOSPITAL EDUCATES PATIENTS WITH LIMITED ABILITY TO PAY REGARDING FINANCIAL ASSISTANCE. FOR THIS REASON, THE ORGANIZATION BELIEVES THAT IT ACCURATELY CAPTURES FINANCIAL ASSISTANCE PROGRAM DEDUCTIONS AND THE AMOUNT OF BAD DEBT EXPENSE ATTRIBUTABLE TO PATIENTS ELIGIBLE UNDER THE ORGANIZATION'S FAP POLICY IS NEGLIGIBLE.

Return Reference - Identifier	Explanation
SCHEDULE H, PART III, LINE 4 - FOOTNOTE IN ORGANIZATION'S FINANCIAL STATEMENTS DESCRIBING BAD DEBT	<p>IN ACCORDANCE WITH ACCOUNTING GUIDANCE, BAD DEBT IS NO LONGER AN EXPENSE, BUT IS INCLUDED AS A REDUCTION IN NET PATIENT SERVICE REVENUE. THE FOLLOWING PARAGRAPH PER THE CONSOLIDATED, AUDITED FINANCIAL STATEMENTS FOR NORTON HEALTHCARE, INC. (PAGE 19, FIRST PARAGRAPH) DISCUSSES THE HANDLING OF PATIENT DEDUCTIBLE AND COINSURANCE NOT PAID BY PATIENTS:</p> <p>"GENERALLY, PATIENTS WHO ARE COVERED BY THIRD-PARTY PAYORS ARE RESPONSIBLE FOR PATIENT RESPONSIBILITY BALANCES, INCLUDING DEDUCTIBLES AND COINSURANCE, WHICH VARY IN AMOUNT. THE CORPORATION ESTIMATES THE TRANSACTION PRICE FOR PATIENTS WITH DEDUCTIBLES AND COINSURANCE BASED ON HISTORICAL EXPERIENCE AND CURRENT MARKET CONDITIONS. THE INITIAL ESTIMATE OF THE TRANSACTION PRICE IS DETERMINED BY REDUCING THE STANDARD CHARGE BY ANY EXPLICIT PRICE CONCESSIONS, DISCOUNTS, AND/OR IMPLICIT PRICE CONCESSIONS. SUBSEQUENT CHANGES TO THE ESTIMATE OF THE TRANSACTION PRICE ARE GENERALLY RECORDED AS ADJUSTMENTS TO NET PATIENT SERVICE REVENUE IN THE PERIOD OF CHANGE. ADJUSTMENTS ARISING FROM A CHANGE IN THE TRANSACTION PRICE WERE NOT MATERIAL TO NET PATIENT SERVICE REVENUE FOR EITHER PERIOD".</p>
SCHEDULE H, PART III, LINE 8 -	THE MEDICARE COST REPORT WAS THE SOURCE OF INFORMATION REPORTED ON PART III LINE 6.
SCHEDULE H, PART III, LINE 8 - DESCRIBE EXTENT ANY SHORTFALL FROM LINE 7 TREATED AS COMMUNITY BENEFIT AND COSTING METHOD USED	<p>PART III LINE 6 - THE COSTING METHODOLOGY USED TO DETERMINE THE MEDICARE ALLOWABLE COST WAS BASED ON THE MEDICARE PRINCIPLES USED IN COMPLETING THE MEDICARE COST REPORT. ALL COST REPORTED CAME FROM THE MEDICARE COST REPORT.</p> <p>PART III LINE 7 - THE HOSPITAL ACCEPTS ALL MEDICARE PATIENTS WITH THE KNOWLEDGE THAT THERE MAY BE SHORTFALLS AND OPERATES TO PROMOTE THE HEALTH OF THE COMMUNITY. THE HOSPITAL BELIEVES THAT ANY MEDICARE SHORTFALLS SHOULD BE TREATED AS COMMUNITY BENEFIT BECAUSE MEDICARE DOES NOT TYPICALLY FULLY COMPENSATE FOR THE COST OF PROVIDING HEALTHCARE TO MEDICARE BENEFICIARIES.</p>
SCHEDULE H, PART III, LINE 9B - DID COLLECTION POLICY CONTAIN PROVISIONS ON COLLECTION PRACTICES FOR PATIENTS WHO ARE KNOWN TO QUALIFY FOR ASSISTANCE	<p>AFTER THE PATIENT'S INITIAL SCREENING FOR FINANCIAL ASSISTANCE AND IT IS BELIEVED THAT THE PATIENT QUALIFIES FOR FINANCIAL ASSISTANCE, THEN NORTON-KING'S DAUGHTERS' HEALTH, INC. WILL NOT START COLLECTION EFFORTS PENDING THE PATIENT SUBMITTING THE NECESSARY INFORMATION TO DOCUMENT MEETING THE FINANCIAL ASSISTANCE QUALIFICATIONS. IF THE PATIENT SUBMITS THE NECESSARY DOCUMENTATION WITHIN A REASONABLE TIME PERIOD, THEN THERE WILL BE NO COLLECTION EFFORTS MADE TO COLLECT ANY AMOUNT FROM THE PATIENT. THE PATIENT MAY RECEIVE A STATEMENT/BILL REFLECTING THE AMOUNT DUE THROUGH THE FINANCIAL ASSISTANCE APPLICATION PROCESS PENDING THE PATIENT'S FINANCIAL ASSISTANCE APPLICATION, BUT THERE WILL BE NO COLLECTION EFFORTS. ONLY AFTER AN ATTEMPT IS MADE TO CONTACT THE PATIENT TO OBTAIN THE NECESSARY DOCUMENTATION FOR COMPLETING THE FINANCIAL ASSISTANCE APPLICATION AND THE PATIENT NOT RESPONDING WILL COLLECTION EFFORTS BEGIN. THERE IS ONGOING EFFORT THROUGHOUT THE COLLECTION PROCESS TO SCREEN FOR MEDICAID ELIGIBILITY AND THE NEED FOR PROVIDING FINANCIAL ASSISTANCE APPLICATIONS TO PATIENTS. WHEN A PATIENT IS APPROVED FOR FINANCIAL ASSISTANCE, THEIR ACCOUNT BALANCE IS WRITTEN OFF</p>
SCHEDULE H, PART V, SECTION B, LINE 11 -	<p>CHILD ABUSE/NEGLECT - NORTON KING'S DAUGHTERS' HEALTH STAFF CONTINUED TO SUPPORT THE RESILIENT JEFFERSON COUNTY EFFORT TO MAKE JEFFERSON COUNTY A TRAUMA-INFORMED COMMUNITY THROUGH THE DEVELOPMENT OF EDUCATION FOR HEALTH CARE PROVIDERS AND THE COMMUNITY. NORTON KING'S DAUGHTERS' HEALTH HOSTED A CONFERENCE FOR RESILIENT JEFFERSON COUNTY. THIS PROJECT FOCUSES ON THE ADVERSE CHILDHOOD EXPERIENCES (ACES) INITIATIVE. AN ACE TRAINING WAS ALSO HELD. RESILIENT JEFFERSON COUNTY IS A COALITION OF COMMUNITY MEMBERS AND THEIR MISSION IS TO TRANSFORM THE COMMUNITY AND THE HEALTH OF FUTURE GENERATIONS BY BECOMING TRAUMA-INFORMED AND PREVENTING ADVERSE CHILDHOOD EXPERIENCES (ACES).</p> <p>OTHER NEEDS - NORTON KING'S DAUGHTERS' HEALTH COMMUNITY HEALTH NEEDS ASSESSMENT INCLUDED A PRIORITIZATION PROCESS TO RANK IDENTIFIED NEEDS AND ISSUES BASED ON PERCEPTION OF THE COMMUNITY, SECONDARY RESEARCH AND HOW THE ISSUES ALIGN WITH NHC'S MISSION, VISION, VALUES AND STRATEGIC PRIORITIES. IDENTIFIED NEEDS WERE CATEGORIZED INTO FOUR CATEGORIES: HEALTH CONDITIONS, ACCESS TO CARE, BEHAVIORAL CONDITIONS AND SOCIOECONOMIC/ DEMOGRAPHIC NEEDS. NORTON KING'S DAUGHTERS' HEALTH EXECUTIVE LEADERSHIP AND THE BOARD OF TRUSTEES IDENTIFIED AREAS IN THE BEHAVIORAL AND SOCIOECONOMIC CATEGORIES WHERE NORTON KING'S DAUGHTERS' HEALTH CAN MOST EFFECTIVELY FOCUS ITS RESOURCES TO HAVE SIGNIFICANT IMPACT. THOSE AREAS OF FOCUS ARE: SUBSTANCE USE, MENTAL HEALTH, OBESITY, PHYSICAL INACTIVITY, TOBACCO USE, NUTRITIONAL NEEDS, LACK OF HEALTH LITERACY, AND CHILD ABUSE/NEGLECT. NEEDS THAT WERE IDENTIFIED BUT ARE CURRENTLY NOT AN AREA OF FOCUS FOR NHC ARE DISTRACTED DRIVING, TRANSPORTATION, AND POVERTY LEVELS. NORTON KING'S DAUGHTERS' HEALTH CONTINUES TO HAVE A COMPREHENSIVE CHARITY CARE POLICY HOWEVER, THEY ARE NOT CURRENTLY IN A POSITION TO SIGNIFICANTLY INFLUENCE THE POVERTY LEVELS OR TRANSPORTATION CONCERNS THAT EXIST IN THE POPULATION THAT THEY SERVE. THESE FALL OUTSIDE OF THE CURRENT CORE COMPETENCIES OF THE ORGANIZATION AND THEREFORE ARE NOT ADDRESSED DIRECTLY IN OUR COMMUNITY HEALTH NEEDS IMPLEMENTATION STRATEGIES. NORTON KING'S DAUGHTERS' HEALTH HAS A DESIRE TO CONTINUE PROVIDING CLINICAL PROGRAMS AND SERVICES TO MEET COMMUNITY NEEDS WHILE ALSO PURSUING CONTINUOUS IMPROVEMENT IN EXISTING AND FUTURE PROGRAMS TO IMPROVE THE OVERALL HEALTH OF THE COMMUNITY WE SERVE.</p>
SCHEDULE H, PART V, SECTION B, LINE 13 - ELIGIBILITY CRITERIA EXPLAINED IN FAP	NORTON-KING'S DAUGHTERS' HEALTH, INC. HAS A POLICY WHERE WE DISCOUNT CHARGES FOR ALL SELF-PAY PATIENTS WITH NO INSURANCE COVERAGE REGARDLESS OF INCOME QUALIFICATIONS. BECAUSE OF THIS POLICY, WE LEFT LINE 13A "FPG FAMILY INCOME LIMIT FOR ELIGIBILITY FOR DISCOUNTED CARE" BLANK.

Return Reference - Identifier	Explanation
<p>SCHEDULE H, PART VI, LINE 2 - NEEDS ASSESSMENT</p>	<p>NORTON KING'S DAUGHTERS' HEALTH REGULARLY AND CONSISTENTLY EVALUATES WORKFORCE AND COMMUNITY HEALTH CARE NEEDS THROUGH PARTNERSHIPS WITH LOCAL HEALTH DEPARTMENTS, EMERGENCY MEDICAL SERVICES, AND LOCAL UNIVERSITIES. PARTNERSHIPS WITH THESE ORGANIZATIONS, ALONG WITH NOT-FOR-PROFIT HEALTH CARE ORGANIZATIONS SUCH AS THE AMERICAN CANCER SOCIETY, AMERICAN HEART ASSOCIATION AND OTHERS, ALSO PROVIDE NHI IMPORTANT STATISTICS AND DATA TO USE IN EVALUATING COMMUNITY ACCESS TO HEALTH CARE SERVICES AND HEALTH CARE DISPARITIES. ADDITIONALLY, NORTON KING'S DAUGHTERS' HEALTH ACCESSES DATA FROM ORGANIZATIONS SUCH AS THE CENTER FOR DISEASE CONTROL AND THE UNITED STATES CENSUS BUREAU TO ASSESS AREAS OF GREATEST ANTICIPATED POPULATION GROWTH AND LOW-INCOME AREAS, BOTH OF WHICH MAY BE IN GREATEST NEED FOR PREVENTION EDUCATION, FREE SCREENINGS AND ACCESS TO HEALTH CARE.</p> <p>NORTON HEALTHCARE, INC. (NHC), THE PARENT COMPANY OF NORTON KING'S DAUGHTERS' HEALTH, CONDUCTED A COMMUNITY HEALTH NEEDS ASSESSMENT (CHNA) FOR NORTON KING'S DAUGHTERS' HEALTH. THE CHNA DEFINED THE PATIENT SERVICE AREA BY PATIENT ORIGIN FOR INPATIENT STAYS, DEMOGRAPHIC, SOCIOECONOMIC, POPULATION, AND OTHER HEALTH RELATED INDICATORS UTILIZED TO PROVIDE INFORMATION ON THE HEALTH STATUS OF THE COMMUNITY. COMMUNITY INPUT WAS PROVIDED THROUGH PROVIDER AND COMMUNITY INTERVIEWS, TARGETED FOCUS GROUPS AND A COMMUNITY HEALTH SURVEY. HEALTH NEEDS WERE PRIORITIZED AND ADDRESSED BASED ON HEALTH STATUS FINDINGS AND COMMUNITY INPUT. THE CHNA IS A COMPONENT OF THE ORGANIZATIONS STRATEGIC PLANNING PROCESS AS RESOURCES ARE NECESSARY TO IMPLEMENT STRATEGIES OUTLINED FOR PRIORITIES IDENTIFIED. THE NORTON KING'S DAUGHTERS' HEALTH'S BOARD OF TRUSTEES AS WELL AS THE LEADERSHIP OF NORTON KING'S DAUGHTERS' HEALTH, AND THE HOSPITAL CHIEF ADMINISTRATIVE OFFICER HAVE APPROVED THE ASSESSMENT AND IMPLEMENTATION PLAN.</p>

Return Reference - Identifier	Explanation
<p>SCHEDULE H, PART VI, LINE 3 - PATIENT EDUCATION</p>	<p>SIGNAGE IS POSTED IN ALL NORTON HEALTHCARE, INC. (NHC) HOSPITAL FACILITIES, INCLUDING THE ADMISSION AREA AND EMERGENCY ROOM, PROVIDING INFORMATION ON THE ABILITY TO APPLY FOR FINANCIAL ASSISTANCE AND TO SEEK HELP IN PAYING YOUR BILL. THE SIGNAGE AT NORTON-KING'S DAUGHTERS' HEALTH, INC. IS TRANSLATED INTO TWO LANGUAGES AND ARE CONTAINED ON THE SAME POSTER. THE LANGUAGES ARE ENGLISH AND SPANISH. AT THE TIME OF REGISTRATION, THE PATIENT ACCESS/REGISTRATION DEPARTMENT DISCUSSES WITH THE PATIENT THE FINANCIAL ASSISTANCE/CHARITY OPTIONS, GUIDELINES, AND PROVIDES ASSISTANCE AS NEEDED IN FILLING OUT A FINANCIAL ASSISTANCE APPLICATION AND ANSWERING QUESTIONS. ADDITIONAL QUESTIONS FROM THE PATIENT/GUARANTOR CAN BE FACILITATED THROUGH THE NHC SINGLE BILLING OFFICE (SBO) AREA, CUSTOMER SERVICE, AND NHC VENDORS. NHC HAS CREATED A NUMBER OF DIFFERENT OPTIONS FOR THE PATIENT/GUARANTOR TO SUPPLY THE INFORMATION/APPLICATION FOR FINANCIAL ASSISTANCE TO NHC. THOSE VARIOUS METHODS OF DELIVERY INCLUDE: IN PERSON, BY MAIL, BY FAX, ON-LINE APPLICATION SUBMISSION VIA THE WEBSITE, AND BY SPECIFIC EMAIL ADDRESS. THESE VARIOUS OPTIONS ARE PUBLICIZED AND MADE KNOWN TO THE PATIENT. IN 2023 STATEMENTS MAILED TO THE GUARANTORS BY NORTON HOSPITALS, INC. (NHI) CONTAINED INFORMATION TO START THE FINANCIAL ASSISTANCE APPLICATION PROCESS</p> <p>NORTON-KING'S DAUGHTERS' HEALTH, INC. EMPLOYS AN OUTSIDE ELIGIBILITY VENDOR, CLAIMAID. ALL SELF-PAY ACCOUNTS FOR THE FACILITIES ARE PLACED FOR ELIGIBILITY SCREENING WITH CLAIMAID. THEY SCREEN FOR NHC FINANCIAL ASSISTANCE, MEDICAID, MEDICAID MANAGED CARE ORGANIZATIONS, PRESUMPTIVE ELIGIBILITY. IN ADDITION, THEY MAY PROVIDE EDUCATION AND REFERRAL ASSISTANCE TO THE APPROPRIATE COUNTY/STATE DEPARTMENTS FOR FOOD STAMPS, RENT ASSISTANCE, HEATING ASSISTANCE, ETC. THE PROCESS OF COMPLETING THE APPLICATION IS OFTEN PERFORMED BY CLAIMAID. THEY PROTECT FILING DEADLINES BY SUBMITTING THE APPROPRIATE FORMS TO THE STATE/COUNTY. THEY FOLLOW UP TO WITH A STATE CASEWORKER AS NEEDED. ALL OF THE SERVICES PROVIDED BY CLAIMAID ARE AT NO COST TO THE PATIENT. COST TO THE HOSPITALS FOR THESE ELIGIBILITY AND ENROLLMENT SERVICES WAS IN EXCESS OF \$253,000 IN 2023.</p> <p>NHC HAS A STAFF OF 11 FULL-TIME EMPLOYEES INCLUDING A SUPERVISOR THAT ARE DEDICATED TO PERFORMING THE FOLLOWING FUNCTIONS: PROCESSING, REVIEWING, AND APPROVING THE HUNDREDS OF FINANCIAL ASSISTANCE APPLICATIONS RECEIVED EACH WEEK. ADDITIONALLY, SOME OF THOSE EMPLOYEES MAKE OUT-BOUND CALLS TO SOLICIT FINANCIAL ASSISTANCE INFORMATION NEEDED TO PROCESS THE PATIENT'S APPLICATION. FINANCIAL ASSISTANCE FOR NORTON FINANCIAL ASSISTANCE IS NOT LIMITED TO THE SELF-PAY POPULATION. EVEN PATIENTS WITH INSURANCE COVERAGE ARE ENCOURAGED TO APPLY FOR ASSISTANCE SO THEIR DEDUCTIBLE, CO-PAYMENTS, AND CO-INSURANCE AMOUNTS ARE COVERED UNDER THE VARIOUS ASSISTANCE PROGRAMS. FINANCIAL COUNSELORS/SOCIAL WORKERS AT THE FACILITIES ARE EDUCATED AND TRAINED TO ASSIST WITH COUNSELING PATIENTS TO DETERMINE AND EXPLAIN OUR FINANCIAL ASSISTANCE PROGRAMS. THEY CONTINUE TO RECEIVE ON-GOING EDUCATION THROUGHOUT THE ENTIRE YEAR REGARDING ELIGIBILITY CHANGES AND ADDITIONS FOR NORTON FINANCIAL ASSISTANCE, DSH/KCHIP, MEDICAID, MEDICAID MANAGED CARE ORGANIZATION, PRESUMPTIVE ELIGIBILITY, ETC.</p> <p>CHARITY INFORMATION WAS PROVIDED ON THE BACK OF THE SBO STATEMENT. NHI ENSURES THAT ALL PATIENTS WERE MADE AWARE OF FINANCIAL ASSISTANCE REGARDLESS OF WHERE THE PATIENT'S ACCOUNT MAY HAVE BEEN IN THE COLLECTION CYCLE. EVEN IF THE PATIENT/GUARANTOR HAD NOT PREVIOUSLY AVAILED THEMSELVES OF THE OPPORTUNITY TO APPLY FOR FINANCIAL ASSISTANCE AND DECIDED THEY WILL NOW COOPERATE, NKDH THEN ALLOWED THE PATIENT/GUARANTOR TO APPLY AND BE APPROVED IF THEY MET THE QUALIFICATIONS.</p> <p>FINANCIAL ASSISTANCE NOTIFICATIONS AND APPLICATIONS WERE MADE AVAILABLE TO THE PATIENT/GUARANTOR VIA TELEPHONE, FACE TO FACE MEETINGS, WEBSITE, MAIL, ELECTRONICALLY, ETC. PRIMARY COLLECTION AGENCIES CHOSEN BY NHI INCLUDE WITH THEIR INITIAL PLACEMENT LETTER AN INSERT OF A COPY OF A FINANCIAL ASSISTANCE APPLICATION FOR THE GUARANTOR TO COMPLETE. CALLS RESULTING FROM NOTIFICATION CORRESPONDENCE SENT BY THE COLLECTION AGENCIES MAY BE ROUTED TO SPANISH-SPEAKING CUSTOMER SERVICE REPRESENTATIVES OR PATIENT/GUARANTORS MAY ALSO REQUEST AN INTERPRETER SERVICE TO ASSIST IN FACILITATING INFORMATION REGARDING FINANCIAL ASSISTANCE. NHI HAS TRANSLATED THE FULL FINANCIAL ASSISTANCE POLICY, FINANCIAL ASSISTANCE APPLICATIONS, BILLING AND COLLECTION POLICY AND THE PLAIN LANGUAGE SUMMARY INTO FIVE LANGUAGES: ENGLISH, SPANISH, VIETNAMESE, CROATIAN, AND ARABIC. NHI'S CUSTOMER SERVICE DEPARTMENT ROUTINELY INSTRUCTS AND SCREENS PATIENTS IN THE PROTOCOL REGARDING FINANCIAL ASSISTANCE THROUGH THE NORTON FINANCIAL ASSISTANCE PROGRAM. SINCE 2023, NHI HAS OFFERED AT THE TIME OF FINAL BILLING ALL TRUE HOSPITAL SELF-PAY PATIENTS A SIGNIFICANT DISCOUNT OFF OF THE TOTAL CHARGES THAT WERE REFLECTED ON THEIR MONTHLY STATEMENTS AND THE AMOUNT DUE. CONTRACTED COLLECTION AGENCIES ARE REQUIRED TO SOLICIT FINANCIAL ASSISTANCE APPLICATIONS WHEN THE PATIENT/GUARANTOR INDICATES "CANNOT PAY". THE STATEMENT PROVIDED BY NHI IN 2023 INCLUDED THE LINK TO THE NHC WEBSITE TO ALLOW THE PATIENT/GUARANTOR TO LEARN MORE ABOUT FINANCIAL ASSISTANCE THE STATEMENT BACKER ALSO INCLUDED A QR CODE THAT CONNECTS THE PATIENT TO OUR FINANCIAL ASSISTANCE WEBPAGE WHERE THE PATIENT CAN APPLY ONLINE OR DOWNLOAD AN APPLICATION. THE STATEMENT BACKER ALSO PROVIDED INSTRUCTIONS ON WHERE THE PATIENT CAN SEND THEIR COMPLETED APPLICATION; OPTIONS INCLUDE MAILING, FAXING, OR BRINGING THE APPLICATION DIRECTLY TO THE FACILITIES, OR EMAILING THE FORM TO PFS. THE STATEMENT ALSO INCLUDED A PHONE NUMBER TO CALL TO LEARN MORE ABOUT THE APPLICATION PROCESS AND DISCUSS FINANCIAL ASSISTANCE OPTIONS.</p>

Return Reference - Identifier	Explanation
<p>SCHEDULE H, PART VI, LINE 4 - COMMUNITY INFORMATION</p>	<p>PRIMARY SERVICE AREA - NORTON KING'S DAUGHTERS' HEALTH'S (NKDH) PRIMARY SERVICE AREA POPULATION IS OVER 95,000 AND EXPECTED TO INCREASE 2% BETWEEN 2024 AND 2029. THE PRIMARY SERVICE AREA INCLUDES AN AREA INCLUSIVE OF 5 COUNTIES, 2 OF WHICH ARE LOCATED ALONG THE OHIO RIVER BORDER IN KENTUCKY, 2 BORDER THE RIVER IN INDIANA, AND INCLUDES 1 ADDITIONAL INDIANA COUNTY THAT DOES NOT BORDER THE OHIO RIVER. APPROXIMATELY 35% OF THE POPULATION IS OVER 55 YEARS OLD; COMPARED TO 30% IN THE USA. THIS PORTION OF THE POPULATION TENDS TO USE ADDITIONAL HEALTHCARE SERVICES. THE PEDIATRIC POPULATION IN 2024 WAS ESTIMATED AT 21,048 AND IS EXPECTED TO DECREASE TO 20,689 WITHIN 5 YEARS AND REPRESENTS 21% OF THE POPULATION. THE NUMBER OF HOUSEHOLDS IN THE PRIMARY SERVICE AREA WAS ESTIMATED AT 37,514 IN 2024 AND IS EXPECTED TO INCREASE 2% BY 2029. THE UNEMPLOYMENT RATE IS APPROXIMATELY 3%. CURRENTLY 12% OF THE ADULT POPULATION DOES NOT HAVE A HIGH SCHOOL DEGREE AND 18% HAVE A HOUSEHOLD INCOME THAT IS LESS THAN \$25,000 A YEAR; THE MEDIAN HOUSEHOLD INCOME IS \$68,163 COMPARED TO \$74,580 FOR THE UNITED STATES. NKDH'S PRIMARY SERVICE AREA'S POPULATION IS 31% URBAN AND 69% RURAL. TWO AREAS WITHIN JEFFERSON COUNTY HAVE BEEN DESIGNATED AS MEDICALLY UNDERSERVED AREAS BY THE HEALTH RESOURCES AND SERVICES ADMINISTRATION (HRSA). THE HRSA IS THE PRIMARY FEDERAL AGENCY FOR IMPROVING HEALTH CARE FOR PEOPLE WHO ARE ECONOMICALLY AND MEDICALLY VULNERABLE. IT WORKS WITH STATE PARTNERS TO DETERMINE AREAS WITH TOO FEW PRIMARY CARE, DENTAL AND MENTAL HEALTH PROVIDERS AND SERVICES. THERE ARE LIMITED FEDERAL RESOURCES, SO THE DESIGNATION HELPS TO PRIORITIZE AND FOCUS RESOURCES TO AREAS WITH THIS DESIGNATION.</p> <p>SECONDARY SERVICE AREA - NORTON KING'S DAUGHTERS' HEALTH'S SECONDARY SERVICE AREA INCLUDES 5 COUNTIES. NKDH'S SECONDARY SERVICE AREA POPULATION WAS 195,148 IN 2024 AND IS EXPECTED TO INCREASE 4 % BETWEEN 2024 AND 2029. THE SECONDARY SERVICE AREA SPREADS ACROSS 1 KENTUCKY COUNTY AND 4 INDIANA COUNTIES. THE 55+ AGE COHORT REPRESENTS 32% OF THE SECONDARY SERVICE AREA POPULATION AND IS ABOVE THE 30% 55+ PERCENTAGE IN THE UNITED STATES. THE PEDIATRIC POPULATION IN 2024 WAS ESTIMATED AT 43,291 AND EXPECTED TO SLIGHTLY INCREASE TO 43,367 BY 2029. ALTHOUGH THE PEDIATRIC POPULATION IS EXPECTED TO REMAIN RELATIVELY FLAT (LESS THAN 1% GROWTH), THERE IS A NEED FOR CHILDREN TO HAVE APPROPRIATE ACCESS TO CARE IN THE RURAL AREAS OF KENTUCKY. THE NUMBER OF HOUSEHOLDS IN THE SECONDARY SERVICE AREA WAS ESTIMATED AT 77,926 IN 2024 AND IS EXPECTED TO INCREASE 4.1% BY 2029. ALMOST 15,000 ADULTS IN THIS SERVICE AREA DO NOT HAVE A HIGH SCHOOL EDUCATION AND THE AVERAGE HOUSEHOLD INCOME IS UNDER \$25,000 FOR 16% OF THE POPULATION. THE UNEMPLOYMENT RATE IS APPROXIMATELY 3%. THE MEDIAN HOUSEHOLD INCOME IS 67,078, 2% LESS THAN THE PRIMARY SERVICE AREA AVERAGE HOUSEHOLD INCOME. NKDH'S SECONDARY SERVICE AREA'S POPULATION IS 58% SUBURBAN AND 42% RURAL.</p>



Return Reference - Identifier	Explanation
<p>SCHEDULE H, PART VI, LINE 5 - PROMOTION OF COMMUNITY HEALTH</p>	<p>THE MAJORITY OF HOSPITAL'S BOARD OF DIRECTORS IS COMPRISED OF INDIVIDUALS WHO LIVE AND WORK IN THE HOSPITAL SERVICES AREA. THE MAJORITY OF THESE INDIVIDUALS ARE NEITHER EMPLOYEES, NOR CONTRACTORS OF THE ORGANIZATION, NOR FAMILY MEMBERS THEREOF. THE HOSPITAL EXTENDS MEDICAL STAFF PRIVILEGES TO ALL QUALIFIED PHYSICIANS IN ITS COMMUNITY FOR SOME OR ALL OF ITS DEPARTMENTS. THE ORGANIZATION ALSO APPLIES A PORTION OF SURPLUS FUNDS TO IMPROVEMENTS IN PATIENT CARE. HISTORICALLY, THE HOSPITAL HAS EMPLOYED A FULL TIME COMMUNITY WELLNESS COORDINATOR. THIS POSITION PROVIDES OUTREACH SERVICES IN AREAS OF NEED TO THE COMMUNITIES WE SERVE. IN ADDITION TO THESE SERVICES, THE HOSPITAL ALSO SERVES AS THE FISCAL AGENT FOR VARIOUS GRANTS. ALL OF THESE SERVICES HELP US MEET THE IDENTIFIED NEEDS OF THE COMMUNITIES WE SERVE. PARTICIPATION IN THE BELOW COMMUNITY ORGANIZATIONS IS PART OF THE HOSPITAL'S INDIANA STATE DEPARTMENT OF HEALTH COMMUNITY BENEFIT PLAN AND GOALS.</p> <p>2023 NORTON-KING'S DAUGHTERS' HEALTH OVERVIEW OF COMMUNITY BENEFIT ACTIVITIES –</p> <p>(1) HEALTH SCREENS / FAIRS - SCREENED 115 PEOPLE AT A FREE SKIN CANCER SCREEN HELD IN MAY. EDUCATION MATERIAL AND SUNSCREEN WERE ALSO DISTRIBUTED. OFFERED FREE COLORECTAL SCREENING KITS AT PROVIDER OFFICES AND THE CANCER CENTER DURING THE MONTH OF MARCH. PARTICIPATED IN THE JEFFERSON COUNTY 4-H FAIR. HEALTH EDUCATION INFORMATION WAS PROVIDED. OFFERED BLOOD PRESSURE CHECKS AT THE HOUSE OF HOPE FOOD PANTRY QUARTERLY IN 2023. AVERAGED 25 PARTICIPANTS AT EACH EVENT. ATTENDED A COMMUNITY BABY SHOWER EVENT FOR NEW MOMS, PROVIDING PRE/POST-NATAL EDUCATION. ATTENDED A HIGH SCHOOL GIRLS WELLNESS FAIR, OFFERING EDUCATION INFORMATION FOR TEENS AND NUTRITION. PARTICIPATED IN A MILITARY APPRECIATION EVENT OFFERING WELLNESS AND TOBACCO EDUCATION INFORMATION. OVER 100 VETERAN'S AND SPOUSES ATTENDED. BLOOD PRESSURE CHECKS WERE OFFERED.</p> <p>(2) CORPORATE FLU SHOTS - ONE CORPORATE FLU SHOT CLINIC WAS HELD IN 2023.</p> <p>(3) COMMUNITY HEALTH EDUCATION OPPORTUNITIES/CLASSES/SPECIAL EVENTS: HEALTH/WELLNESS SPEAKING ENGAGEMENTS - THE WELLNESS COORDINATOR COMPLETED 40 COMMUNITY SPEAKING ENGAGEMENTS IN 2023. THESE FOCUSED ON WELLNESS AND DISEASE PREVENTION TOPICS SUCH AS; NUTRITION, HEART DISEASE, STRESS MANAGEMENT, SUN SAFETY, PHYSICAL ACTIVITY, SELF-DEFENSE, ETC.</p> <p>(4) FIT KIDS PROGRAM - INTERACTIVE HEALTH EDUCATION PROGRAM FOR AREA 5TH GRADE CLASSROOMS. ALL FOUR LESSONS INCLUDE TAKE HOME CHALLENGES AND GUARDIAN INFORMATION FOCUSED ON EXERCISE AND HEALTHY EATING. OFFERED THE PROGRAM TO 5 SCHOOL SYSTEMS AND REACHED 15 DIFFERENT 5TH GRADE CLASSES (346 TOTAL STUDENTS AND TEACHERS).</p> <p>(5) SELF-DEFENSE - PROVIDED TWO WOMEN'S SAFE AND SELF-DEFENSE WORKSHOPS.</p> <p>(6) TOBACCO CESSATION &amp; EDUCATION - NORTON KING'S DAUGHTERS' HEALTH EMPLOYS A FULL TIME STATE GRANT FUNDED TOBACCO COORDINATOR. 2023 ACCOMPLISHMENTS INCLUDE: 1,181 ELECTRONIC PATIENT REFERRALS TO THE IN QUITLINE IN 2023; NKDH MOTHER BABY SERVICES PROVIDED TOBACCO FREE CESSATION EDUCATION TO NEW MOMS WITH RESOURCES AND INCENTIVES; NKDH CANCER TREATMENT CENTER PROVIDES TOBACCO RESOURCES FOR CANCER PATIENTS AND HAS A TOBACCO TREATMENT SPECIALIST ON STAFF; PROVIDED PHYSICIAN OFFICES WITH FOLDERS FOR PATIENTS THAT INCLUDE CESSATION RESOURCES AND STAFF WERE TRAINED TO MAKE QUITLINE REFERRALS; COLLABORATED WITH SOUTHWESTERN SCHOOL CORPORATION TO START A VOICE PROGRAM. VOICE IS A YOUTH-LED TOBACCO INITIATIVE, WHICH EDUCATES YOUTH ON TOBACCO MARKETING AND DANGERS OF TOBACCO. IN ADDITION, WORK IS TAKING PLACE WITH THE SCHOOL ON POLICY CHANGE AND PROGRAMS TO ASSIST YOUTH WHEN THEY ARE CAUGHT WITH TOBACCO PRODUCTS.; PROVIDED TOBACCO RESOURCES TO LOW INCOME MOTHERS WORKING WITH COUNTY WIC SERVICES AND LIFE CHOICES CLINIC (PREGNANCY CRISIS CLINIC); PARTNERED WITH THE NKDH CANCER CENTER TO PROVIDE TOBACCO QUIT RESOURCE KITS TO A LOCAL EMPLOYER, THE SALVATION ARMY, AND THE HOUSE OF HOPE FOOD PANTRY DURING THE GREAT AMERICAN SMOKEOUT; HOSTED A HIDDEN IN PLAIN SIGHT BACKPACK TRAINING FOR YOUTH SERVING ORGANIZATIONS; HOSTED A COMMUNITY CONVERSATION TO REVIEW THE RESULTS OF THE 2022 YOUTH TOBACCO SURVEY.</p> <p>(7) CPR AND FIRST AID CLASSES - NKDH SERVES AS AN AHA PROVIDER SITE HOSTING A VARIETY OF TRAININGS FOR EMPLOYEES AND COMMUNITY MEMBERS. TRAINING INCLUDED ACLS/INSTRUCTOR AND PROVIDER; BLS/INSTRUCTOR AND PROVIDER; HEARTSAVER/CPR AED, FIRST AID, K-12 SCHOOLS, INSTRUCTOR, AND PEDIATRIC ; PALS/INSTRUCTOR AND PROVIDER . IN 2023, A TOTAL OF 1,054 PEOPLE RECEIVED TRAINING AND AN E-COMPLETION CARD.</p> <p>(8) PRENATAL EDUCATION - OB PREP PROGRAM – 324 EXPECTING MOTHERS PARTICIPATED IN AN EDUCATIONAL PREP VISIT PRIOR TO DELIVERY. IN ADDITION, EIGHT COUPLES ATTENDED THE CHILDBIRTH CLASS SERIES. SIXTEEN MOTHERS PARTICIPATED IN BREASTFEEDING CONSULTATIONS AND ONE CAME TO A BREAST PUMPING EDUCATION CLASS.</p> <p>(9) MONTHLY "TO YOUR HEALTH" PODCAST - 30-MINUTE EDUCATION PODCAST WITH VARIOUS HEALTH TOPICS WAS OFFERED MONTHLY ON A LOCAL RADIO STATION AND AVAILABLE TO LISTEN ON THE HOSPITALS' WEBSITE.</p> <p>(10)NKDH RUN THE FALLS 5K WALK/RUN - 243 WALKERS AND RUNNERS PARTICIPATED IN THIS COMMUNITY 5K HOSTED BY NKDH.</p> <p>(11) CANCER SUPPORT ACTIVITES - HOSTED A CANCER SURVIVORSHIP SEMINAR IN SEPTEMBER WITH APPROXIMATELY 50 PEOPLE IN ATTENDANCE. PROVIDED FREE SUNSCREEN TO GOLFERS AND VOLUNTEERS AT THE NORTON KDH GOLF BENEFIT EVENT. PROVIDED FREE SUNSCREEN TO LOCAL MUSIC FESTIVAL ATTENDEES.</p> <p>(12) EMPLOYEE HEALTH OPPORTUNITIES FOR NKDH STAFF - WELLNESS NEWSLETTERS AND CALENDARS PROVIDED TO STAFF. EMPLOYEE ASSISTANCE PROGRAM AVAILABLE FREE FOR STAFF AND DEPENDENTS. FREE NICOTINE REPLACEMENT THERAPY PRODUCTS FOR STAFF WHEN REQUESTED. STRESS MANAGEMENT INFORMATION PROVIDED TO ALL STAFF.</p> <p>(13) COMMUNITY SERVICE ACTIVITIES: ACTIVE ATTENDANCE AND PARTICIPATION IN THE FOLLOWING COMMUNITY COALITIONS/GROUPS - JEFFERSON COUNTY JUSTICE TREATMENT AND PREVENTION</p>

Return Reference - Identifier	Explanation
	<p>COALITION (JCJTAP); JEFFERSON COUNTY UNITED WAY BOARD; MADISON CONSOLIDATED SCHOOLS WELLNESS COMMITTEE; PURDUE EXTENSION HEALTH AND HUMAN SERVICES BOARD PURDUE EXTENSION ADVISORY BOARD; PREVENT CHILD ABUSE OF JEFFERSON COUNTY BOARD; COURT APPOINTED SPECIAL ADVOCATES OF JEFFERSON COUNTY BOARD (CASA); INDIANA HOSPITAL ASSOCIATION BOARD; TRILOGY HEALTH CAMPUS ADVISORY BOARD; LOCAL EMERGENCY PLANNING COMMITTEE; 911 ADVISORY BOARD; EMERGENCY MANAGEMENT ASSOCIATION BOARD; DISTRICT 9 HEALTHCARE COALITION; ADVISORY BOARD FOR HANOVER COLLEGE'S DPT PROGRAM; IVY TECH MEDICAL ASSISTANT ADVISORY BOARD; IVY TECH ADVISORY BOARD; JEFFERSON COUNTY SART; JEFFERSON COUNTY CHILD'S ADVOCACY CENTER (CAC) CASE REVIEW COMMITTEE; PARTNER AND HOST SITE FOR THE LEADERSHIP JEFFERSON COUNTY PROGRAM</p> <p>(14) EMS STAND-BY AT VARIOUS COMMUNITY ACTIVITIES - EMS PROVIDES STAND-BY COVERAGE AT A VARIETY OF POPULATED JEFFERSON COUNTY ACTIVITIES.</p> <p>(15) ATHLETIC TRAINING/REHAB SERVICES - SPORTS MEDICINE SERVICES WERE PROVIDED TO THREE JEFFERSON COUNTY SCHOOLS.</p> <p>(16) SUPPORT TO VARIOUS AREA SCHOOLS WITH INTERNSHIPS - A TOTAL OF 224 HIGH SCHOOL AND COLLEGE STUDENTS WERE HOSTED FOR JOB SHADOW OPPORTUNITIES OR STRUCTURED INTERNSHIPS IN 2023. IN ADDITION, 10 HIGH SCHOOL STUDENTS PARTICIPATE IN THE NKDH HOSTED MEDICAL EXPLORERS PROGRAM.</p> <p>(17) ART OF HEALING EXHIBIT - HOST A QUARTERLY ART SHOW FOR THE MADISON ART CLUB. VARIOUS PAINTINGS ARE ON DISPLAY IN THE HOSPITAL CAFÉ AS PART OF THE ON-GOING ART OF HEALING EXHIBIT.</p> <p>(18) HEALTHY COMMUNITIES INITIATIVE (HCI): EFFORTS ARE LED BY NORTON KING'S DAUGHTERS' HEALTH WHICH INCLUDE A PAID COORDINATOR FUNDED BY THE NKDH FOUNDATION. HCI IS COMPRISED OF THREE TEAMS WHICH INCLUDE NKDH STAFF AND COMMUNITY MEMBERS.</p> <p>2023 HCI TEAM ACCOMPLISHMENTS - SUBSTANCE ABUSE TEAM: - HOSTED A RALLY FOR RECOVERY EVENT INCLUDING THE SHOWING OF THE MOVIE THE ADDICTS WAKE; SUPPORTED THE LOCAL RECOVERY CAFÉ, A SUBSTANCE ABUSE SUPPORT FACILITY; MAINTAINED A RESOURCE LIST FOR SUBSTANCE ABUSE RECOVERY MEETINGS IN THE COMMUNITY; WORKED WITH THE LOCAL HEALTH DEPARTMENT TO HOST A DRUG DROP OFF EVENT FOR EXPIRED/UNUSED MEDICATIONS AND SYRINGES.</p> <p>MENTAL HEALTH/ZERO SUICIDE TEAM: - RECOGNIZED MENTAL HEALTH AWARENESS MONTH AND SUICIDE AWARENESS MONTH; HOSTED A YOUTH WORKER CAFÉ TRAINING; DISTRIBUTED GUN LOCKS FOR SUICIDE AND ACCIDENTAL DEATH PREVENTION AT A COMMUNITY EVENT; HELPED TO PROMOTE THE OUT OF THE DARKNESS SUICIDE AWARENESS WALK; HOSTED A CONFERENCE FOR RESILIENT JEFFERSON COUNTY. THIS PROJECT FOCUSES ON THE ADVERSE CHILDHOOD EXPERIENCES (ACES) INITIATIVE. AN ACE TRAINING WAS ALSO HELD.</p> <p>HEALTHY LIFESTYLES TEAM: (OVERWEIGHT/OBESITY, TOBACCO, CHRONIC DISEASE) - HOSTED A LARGE COMMUNITY HEALTH FAIR WHICH INCLUDED 17 BOOTHS OFFERING HEALTH INFORMATION AND RESOURCES. IN ADDITION, FREE HEALTH SCREENS, HEALTHY SNACKS, AND DOOR PRIZES WERE PROVIDED; HOSTED A HEALTHY YOUTH TAILGATE PARTY( OVER 250 YOUTH AND GUARDIANS). A TOTAL OF 17 AGENCIES AND 50 VOLUNTEERS OFFERED GAMES/ACTIVITIES THAT OFFERED HEALTH RESOURCES AND EDUCATION.</p>
<p>SCHEDULE H, PART VI, LINE 6 - DESCRIPTION OF AFFILIATED GROUP</p>	<p>NORTON HEALTHCARE, INC. (THE CONTROLLING COMPANY) AND ITS AFFILIATES, INCLUDING NORTON HOSPITALS, INC., NORTON PROPERTIES, INC., COMMUNITY MEDICAL ASSOCIATES, INC., NORTON PHARMACIES, PLLC, THE CHILDREN'S HOSPITAL FOUNDATION, INC., NORTON HEALTHCARE FOUNDATION, INC., AND NORTON ENTERPRISES, INC. OPERATE IN THE LOUISVILLE, KENTUCKY METROPOLITAN AREA AND THE OPERATIONS OF THE AFFILIATED HEALTHCARE SYSTEM INCLUDE 1,907 LICENSED BEDS, OVER 300 PHYSICIAN PRACTICE LOCATIONS, AND 18 NORTON IMMEDIATE CARE CENTER LOCATIONS, AND OTHER ANCILLARY HEALTH CARE SERVICES.</p> <p>NORTON HEALTHCARE - INDIANA, INC. IS AN AFFILIATE OF NHC AND OPERATES NORTON KING'S DAUGHTERS' HOSPITAL IN MADISON IN, NORTON CLARK HOSPITAL IN JEFFERSONVILLE, IN, AND NORTON SCOTT HOSPITAL IN SCOTTSBURG, IN. NORTON KING'S DAUGHTERS' HOSPITAL HAS 86 LICENSED BEDS AND 8 PHYSICIAN PRACTICE AND OTHER ANCILLARY HEALTH CARE SERVICE LOCATIONS. NORTON CLARK HOSPITAL HAS 236 LICENSED BEDS AND INCLUDES TWO MEDICAL OFFICE BUILDINGS AND AN OUTPATIENT SURGERY CENTER. NORTON SCOTT HOSPITAL IS A 25 BED CRITICAL ACCESS HOSPITAL.</p>