BettER than Ever

Ellis Medicine’s remarkable restructuring journey reaches a significant milestone with the final stage of the new emergency department project.
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**MISSION:** To meet the health and wellness needs of our community with excellence

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Improving Access to Care

QuickCare

The grocery store may be the last place you would expect to get high quality healthcare, but QuickCare, a walk-in health center for common illnesses, is changing that in our region. In early 2014, Ellis Medicine providers started seeing patients at two new QuickCare locations located within Price Chopper’s Market Bistro store in Latham and in the Route 9 Price Chopper in Malta.

“People love them,” says David Liebers, MD, chief medical officer at Ellis Medicine and medical director of QuickCare. “The idea behind QuickCare is to provide an innovative way for folks to access quick, quality and affordable medical care.”

Mary Anne Boardman’s seven-year-old daughter, Sarah, wasn’t feeling well. She called her pediatrician, but they couldn’t see her until later in the evening. Concerned, Mary Anne decided to take Sarah to be evaluated at QuickCare within the Market Bistro in Latham that she recently heard about. “I walked in a frazzled mother,” explains Mary Anne, who lives in Colonie. “As soon as I arrived, I was comforted by Ellen [the nurse practitioner on shift]. The service was absolutely amazing. Now, every time we are at the grocery store, Sarah always asks to stop and see Ellen. I am really glad that we decided to come to QuickCare to be seen.”

Plans to open additional QuickCare locations are being evaluated.
THE PATIENT.
Charlotte Hall tells her story with dry eyes and humor. My boobs did their job, she said, it’s OK they’re gone. I’m glad I’m still here.
Charlotte, 67, found a lump in her breast in April of last year, just as she and her husband, John, were preparing to move upstate from Long Island. Charlotte had just recovered from open heart surgery to replace her aortic valve. John was about to have surgery to fix a hernia. Charlotte told herself the lump, about the size of a pencil eraser, was probably just a cyst, like the ones she had before. Months went by before she saw a doctor. By the time mammography confirmed Charlotte had tumors in both breasts, she and John were living in Glenville. They knew no one except their daughter. Charlotte heard the word “cancer,” and her mind went blank.

THE DOCTOR.
When he met Charlotte for the first time, she was surrounded by her family in his waiting room – all three of her children and John. When she asked the doctor hesitantly if everyone could come into the appointment, Arvind Mahatme, MD, MSHA waved them all in.
“The support system is important, because when people hear ‘cancer,’ everything shuts down,” Mahatme said.
Mahatme, 41, has a reputation for being a hard boss and a stickler for detail. He became a doctor because he wanted to make a difference in people’s lives and because he wanted a career that wouldn’t be boring. He said he is fascinated by the human body because no two are the same. Mahatme chose surgical oncology after doing his residency at the Moffitt Cancer Center in Tampa, Fla., and focused on breast cancer because it is so common. Mahatme joined Ellis Medicine in February 2013. Charlotte was scheduled to meet other surgeons after Mahatme, but after the appointment, she chose him, and her family agreed. This was the man who would take her life in his hands.
“I started crying, I was so relieved,” Charlotte said.

THE TREATMENT.
“No patient is curable until we’re proven otherwise,” Mahatme said of his approach to cancer patients. “My job is to fully educate the patient, say whether or not she will make a good candidate for the option she chooses, and give a prognosis. I support whatever choice patients make, as long as it’s an educated one.”
Charlotte’s diagnosis was invasive ductal carcinoma, which means the cancer started in her milk ducts and spread.
Cancer was also found in two of her lymph nodes, which was treated with 16 weeks of chemotherapy. She will be on hormone therapy treatments for five years.
Charlotte chose a bilateral, or double, mastectomy. She was not interested in reconstructive surgery afterward. She had the same attitude about it as she did about the hats and wigs she owned, but rarely used, when chemotherapy caused all her hair to fall out. It wasn’t important to her.

“I’m here, I’m alive. That’s what’s important,” she said. “I have prosthetics – forms – I can wear for dressy occasions, but they’re uncomfortable.”
Mahatme said Charlotte’s “zest for life,” played a big role in her recovery following the surgery in September. Charlotte has different ideas. It was her doctor, she said.
“It’s wonderful to know the person doing this to your body, doing it for you, is making sure it’s all done in a certain way,” Charlotte said. “I think he’s brilliant.”

PROGNOSIS
Charlotte is in good health, but she said her energy level is low, something she attributes to the hormone therapy. She wears a compression sleeve on her right arm to combat swelling. Her hair, once “pin straight” is a shaggy crewcut now, and coming in curly at the nape of her neck. She and John will celebrate their 45th wedding anniversary next month. They are expecting their fourth grandchild any day now.
The hardest thing to make, Charlotte said, is not her own experience but that of her sister, Jill Monaco. She, too, found a lump in her breast, but told no one. It wasn’t until the cancer was advanced, and Monaco couldn’t stand the pain any longer, that she went to the hospital. She died in July.
“It hit me hard, because I am an example of what can be done today to treat cancer,” Charlotte said.
“It’s a great milestone for Ellis and our community that has been a long time coming,” said Joanne McDonough, MD, MPH, chair of Emergency Care at Ellis Medicine about the opening of the new ER addition at Ellis Hospital. “The new space is beautiful, and will help improve patient care; but it’s only the first part of the ER modernization. There is more work being done before we are complete, and have additional beds.”

The new ER addition features more spacious patient rooms and care team work areas, a dedicated mental health treatment unit, two state-of-the-art resuscitation rooms, an ambulatory care suite for patients with less serious needs, as well as advanced imaging such as digital CT and X-rays for faster care and diagnosis.
MORE TO COME
With the new addition open, construction work turned to modernizing the old emergency department space on the A-wing, 1st floor of Ellis Hospital, and putting the finishing touches on the new Rosa Road parking garage. The new parking garage will be completed in November 2014 and the final construction work will wrap up in the first quarter of 2015, at which time the ER will have a main treatment area the length of a football field, and a total of 60 beds needed to handle the more than 90,000 patients seen annually. The new ER will enable Ellis to consolidate down to one 24/7 ER in Schenectady, which translates to more efficient, high quality and cost effective care for the community.

LAST ACT OF ‘BERGER’ REFORMS
The new emergency department marks the final capital project that was set into motion by the 2006 New York State Commission on Health Care Facilities in the 21st Century (a.k.a. “Berger Commission”) report on rightsizing healthcare. Back then, the sounds coming from Schenectady healthcare were nothing short of deafening. It was a cacophony of duplicative services, little partnership within the community and bleeding bank statements for Schenectady’s three inpatient hospitals. Since then, Ellis Hospital, St. Clare’s Hospital and Bellevue Woman’s Hospital became a unified organization called Ellis Medicine; inpatient care was centralized at Ellis Hospital; the Ellis nursing home and school of nursing were relocated to the McClellan Street Health Center in Schenectady; unprecedented community collaboration led to the formation of a health home model of care to break down barriers to healthcare; the Medical Center of Clifton Park was built and opened; Bellevue Woman’s Center was modernized and expanded; and the organization’s financial footing has been stabilized.

"This monumental ER project, and all the other capital projects we’ve undertaken in recent years, have been made possible, initially, by the state funds from the Berger Commission, and, throughout, by the unbelievable generosity of our community [to the Our Health Our Future: The Campaign for Ellis Medicine],” Ellis President & CEO James W. Connolly explains. “The other key ingredient to our success has been the talented employees and medical staff at work at Ellis Medicine who are committed to keeping the pace of a leader in a very competitive industry.”

ELLIS’ ENCORE
The healthcare landscape is changing at a rapid pace, with a trend towards population health management, prevention and wellness. Ellis, to its now nationally, state and regional recognition as a reform leader, continues to be at the forefront of progressive and innovative change.

“We are now firmly down the path of forming an Accountable Care Organization to ensure we are a viable organization in a new era of pay-for-performance healthcare,” says Ellis Medicine Board of Trustees Chair Deborah Mullaney. “Our partnerships with physicians, other healthcare systems, insurers, and community agencies will be critical to our future success.”

The sounds of progress that have been coming from Ellis Medicine for several years should reverberate as sweet music to the ears of patients and the Schenectady community at large, for Ellis is a community health system that knows how to learn a new score for business and turn the difficult notes into a sweet melody of change.
YOUR DOCTOR IS IN, YOUR NEIGHBORHOOD
Ellis Primary Care is growing to better meet the needs of the communities it serves. In 2014, Ellis added two new locations in Ballston Spa and Malta, and moved its Glenville office to larger, more modern space at the new Socha Plaza at 115 Saratoga Road.

“We are growing to keep pace with the needs of our community,” says Dean Limeri, MD, medical director of Ellis Primary Care at Ellis Medicine. “Building relationships between primary care providers and their patients is critical to ensure people have the ongoing support they need to stay healthy and better manage chronic diseases.” Ellis has nine primary care offices in Ballston Spa, Clifton Park, Glenville, Latham, Malta and Schenectady. Learn more or request an appointment at ellismedicine.org.

“We have turned to Ellis and Dr. [Dean] Limeri for our care over so many years – from regular check-ups to the flu and everything in between. We have appreciated being able to get such personal and trusted care, close to home.”

Marilyn Moynihan, Burnt Hills

Osteopathic manipulative treatment is offered at Ellis Primary Care in Ballston Spa, which opened in May 2014.
Addressing Community Needs

UMATTER SCHENECTADY

Ellis Medicine and nearly 70 community partners working as the Schenectady Coalition for a Healthy Community have taken the information gathered from the 2013 door-to-door health survey in Schenectady and have embarked on an action plan.

Improving access to much needed education programs for the diabetes/obesity and teen pregnancy health challenges in Schenectady are the first areas of focus for the coalition. Ellis and its partners have created a pilot program called “Learn to Live Well” that includes: diabetes education from Ellis Medicine certified diabetes educators; nutrition and healthy living tips from Price Chopper and Cornell Cooperative Extension dietitians; physical activity/exercise instruction from the Schenectady YMCA; and a self-management/stress management session taught by CDPHP. The four-class series is being offered initially at religious congregations in the community.

In terms of teen pregnancy, Ellis and its partners, including Planned Parenthood and the Schenectady City School District, are holding focus groups with teenage girls from Schenectady High School to better understand the root causes of teen pregnancy. The goal of these efforts is to develop a community teen pregnancy public awareness campaign that would be promoted through the schools and by various community organizations.

“We are looking to replicate public awareness campaigns that have been successful in Milwaukee and New York City where they have seen a dramatic decrease in teen pregnancy after implementing these campaigns,” explained Erin Buckenmeyer, community health outreach coordinator for Ellis Medicine. “We are also working to better train our providers so they can recognize and address this topic with their patients, recognizing that in many cases, education is needed to help these young women focus on the future and see different opportunities for themselves.”

NEXT STEPS

The coalition will focus next on access and enhanced programs to address mental health, substance abuse, asthma and nutrition issues identified as challenges in the Schenectady community. A second UMatter survey is also planned for the future. Efforts to secure grant funding to support all of these efforts are ongoing.
Think healthcare is complicated and the changes are hard to keep up with? Believe me, you’re not alone. I have come to refer to the current state of healthcare for hospitals as “No Man’s Land” because of the state of flux we find ourselves in.

NO MAN’S LAND IS THAT MIDDLE GROUND BETWEEN THE PLACE WE HAVE COME FROM AND THE DESTINATION WE ARE HEADED TO.

The place from where we have come from is the fee-for-service environment. Fee-for-service is a reimbursement model where healthcare providers are paid a fee for each service such as an office visit, diagnostic test or procedure. Traditionally, this model has proved costly. High costs of healthcare result from a number of factors, but one focus of healthcare reform is for organizations to ensure care is being delivered in the most cost-effective manner possible.

While much of how healthcare providers continue to get paid is from this fee-for-service model, we are awash in a ton of change. A new method of reimbursement that is being rolled out is pay-for-performance. This is the land to which we are destined. Under this method of payment, healthcare providers are rewarded for their ability to meet quality goals and demonstrate cost effectiveness. In order for an organization to be truly successful in a pay-for-performance world, healthcare services and programs need to be closely aligned and all members of the healthcare spectrum – physicians, nurses, case managers, home health aides and the patient – must be working smoothly together.

REDUCING THE CONSUMPTION CURVE, NOT THE COST CURVE

In healthcare, you often hear “you need to reduce costs!” This statement doesn’t tell the whole picture. Costs need to be reduced, yes, but the problem is consumption. We are spending too much money treating people with chronic diseases, when intervening early may have prevented the onset of chronic disease and its symptoms.

In fact, five percent of the population accounts for about 50 percent of the American healthcare system’s spending. The 5% is comprised of those who are chronically ill. They are often the underserved that are “frequent flyers” in our emergency departments and admitted in our hospitals. They require an enormous amount of resources from hospitals, physicians, nurses and staff. Often, the problems that require frequent trips to the emergency department are not new diagnoses, rather the poor management of existing conditions such as diabetes, congestive heart failure and asthma.

Nearly two years ago, Ellis Medicine partnered with the Visiting Nurse Service of Northeastern New York and many community agencies to create Care Central. Care Central aims to help those who have limited access to healthcare services and to be a centralized location for community support services. One aspect of Care Central is its Chronic Care Team, which works with its many of the aforementioned “frequent flyers” to help them gain access to the medications they need to prevent complications and to connect them with community services to help manage their conditions.

Often, the problem with the 5% isn’t that they aren’t necessarily extremely sick; instead, it’s that they have obstacles to accessing care and are often difficult to find in the system. That’s where Care Central steps in – to connect these patients with the services they need.
We have invested heavily into quality analytics so we can analyze all the claims data for treatment. This data warehouse has allowed us to deeply examine any trends within the community and identify patients who are consuming the most healthcare and reallocate the right resources to care for them effectively. The data also gives us insight into how we can prevent the onset of chronic illness for future generations. By understanding a prevalence of end stage renal disease, we can intervene with patients early on, before costly treatment is even needed.

Also, when patients arrive in the emergency department, they are identified as those who could benefit from having the help of Care Central to help manage their care outside of the hospital. Our Care Central team of registered nurses, social workers and support staff visit patients while they are in the hospital to introduce themselves and their services. The team continues to assist the patient when they leave the hospital and return home, helping them coordinate their follow-up appointments or connect with the services they need to keep them well in their own homes and/or keep their chronic conditions from getting worse.

Ellis Medicine’s investment in Care Central is similar to that of a research and development expense. Ellis does not receive an economic incentive for its efforts in Care Central; instead, Ellis loses revenue on the inpatient side if Care Central is successful in its mission – to keep the chronically ill out of the hospital. So why has Ellis invested so heavily in a program that ultimately reduces its revenue? The answer is simple – it is the right thing to do for our community.

Care Central is still evolving to meet the needs of the community and provide the right services to the right people in the right places. The success of Care Central will ultimately be realized if the “frequent flyers” access the emergency department less than they have before and become healthier in their own homes. We need to help bridge the gap between 5% and 50% not only for the overall financial health of our country, but most importantly, to help those in greatest need of our assistance in accessing high quality healthcare.

So, we are in a situation where we are investing in programs to move toward a pay-for-performance arena and losing potential revenue in a fee-for-service reimbursement model. A financially stable not-for-profit healthcare organization is needed to continually re-invest in state-of-the-art technology and new facilities. The situation leaves organizations financially strapped and in the place I mentioned before – “No Man’s Land.” So, how do we prepare for the future and remain stable in the present? It’s a question we are answering each day in our efforts to provide the highest quality, patient-centered care.

Despite the challenge of “No Man’s Land” we are moving forward with the development of programs such as Care Central not only because that is where healthcare is heading, but also it is what is right for our patients.

James W. Connolly
President & CEO, Ellis Medicine

About Care Central

Care Central is a New York State designated “Health Home” that provides personalized clinical and social support and service coordination aimed at improving the health and well-being of the community. The Care Central team, operated by the Visiting Nurse Service of Northeastern New York, links members to doctors, creates individualized plans of care, and links treatment across providers – whether at home, an outpatient office or in the hospital.

WHO IS ELIGIBLE?
Currently, Care Central is reaching out to an identified group of people who don’t have a doctor, suffer from chronic conditions, and/or have mental health concerns.
Collaboration

DIABETES & ENDOCRINE CARE

Ellis Medicine and St. Peter’s Health Partners (SPHP) have developed a new physician practice called Capital Region Diabetes & Endocrine Care, P.C. The practice operates a multidisciplinary program that will provide diagnosis, treatment and long-term care for all individuals with diabetes, as well as other endocrine and metabolic disorders. Capital Region Diabetes & Endocrine Care has an office at Ellis Medical Center of Clifton Park, in Albany at Albany Memorial Hospital, and in East Greenbush at Samaritan Hospital’s Family Medical Group, with a Schenectady office on McClellan Street opening soon.

The experienced team of experts is led by full-time physicians Jill Abelseth, MD, FACE; Shagun Bindlish, MD; James Figge, MD, MBA, FACP; and Allison Graziadei, MD. Dr. Graziadei is an Ellis Medical Group physician who sees patients at the Medical Center of Clifton Park. She is accepting patients (518.579.2750). The provider team also includes five advanced practitioners and 12 certified diabetes educators.

In the Capital Region, there are currently more than 43,000 residents with diabetes, with an additional 110,000 patients with prediabetes. In addition, more than 115,000 Capital Region residents are considered obese. Capital Region Diabetes & Endocrine Care was created to help fight this growing medical, social and economic issue.

The program provides Capital Region residents with ways to improve their overall health and well-being, particularly related to efforts to reduce obesity and the prevalence of metabolic syndrome, a pre-diabetic condition that also puts patients at higher risk for heart disease, peripheral vascular disease and stroke.

Working Together (left to right): Joseph Gambino, CEO, Hometown Health; James W. Connolly, president & CEO, Ellis Medicine; James K. Reed, MD, president & CEO, St. Peter’s Health Partners; and Victor Giulianelli, president & CEO, St. Mary’s Healthcare, Amsterdam.

Innovative Health Alliance

COLLABORATION IS THE PRESCRIPTION FOR SUCCESS IN NEW ERA OF HEALTHCARE

Healthcare is changing and organizations like Ellis Medicine and St. Peter’s Health Partners (SPHP) are adapting to that change through unprecedented collaboration. Ellis and SPHP formed a regional alliance in 2014 called Innovative Health Alliance of New York, which will provide a variety of opportunities for both organizations. This includes the creation and operation of the Capital Region’s first Clinically Integrated Network (CIN).

A CIN is a partnership among physicians, hospital(s) and/or health system(s), collectively committed to active, ongoing clinical initiatives designed to control costs and improve the quality of healthcare services. The new physician-led CIN will allow private physician groups, SPHP and Ellis to work together in coordinating and improving the delivery of healthcare, as well as participating in new methods of reimbursement. Ellis Medicine and SPHP have created the initial legal structure and are funding the information technology and administrative infrastructure that will help establish this new physician health system partnership.

It is envisioned and encouraged that private physician groups, other health providers, and other health systems will join Ellis and SPHP in this initiative. In fact, St. Mary’s Healthcare in Amsterdam and Hometown Health, a regional Federal Qualified Health Center in Schenectady, are already involved in the project.

This alignment with SPHP is not a merger. Rather, it is a partnership to help both organizations improve the quality and delivery of care, while improving the health of the community. For more information about Innovative Health Alliance, visit IHANY.org.
Quality Matters

MEASURES OF QUALITY
Ellis Medicine’s physicians, nurses and staff work tirelessly to ensure the highest quality of care in the safest environment possible. As part of these efforts, Ellis works with several regulatory and ratings agencies to track clinical care, patient outcomes and patient satisfaction. The following chart demonstrates Ellis’ high marks for the care of patients being treated for heart attacks, heart failure, pneumonia and surgical care.

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<tr>
<th>National Quality Improvement Goals</th>
<th>Compared to other Joint Commission Accredited Organizations</th>
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<tbody>
<tr>
<td>Heart Attack Care</td>
<td>+</td>
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<tr>
<td>Heart Failure Care</td>
<td>+</td>
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<tr>
<td>Pneumonia Care</td>
<td>+</td>
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<tr>
<td>Surgical Care</td>
<td>+</td>
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* best possible results
* above the target range/value
* similar to the target range/value
* below the target range/value

Reporting period – January 2013 through December 2013

CESAREAN BIRTHS
A cesarean birth is generally considered to involve more risk than a natural birth, so a lower c-section rate is more desirable than a higher rate. At Bellevue Woman’s Center, a service of Ellis Medicine, the rate for cesarean (c-section) births is below the Northeastern New York rate. The risks and benefits associated with a cesarean or natural birth are different for each patient. Therefore, a pregnant woman should discuss these issues with her doctor.

PATIENT SATISFACTION
Ellis strives to provide very good care for a very good stay, always. In order to do so, we regularly survey our patients after they leave the hospital to track how satisfied they are with the care they received.

Would Patient Recommend the Hospital to Family and Friends?

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<th>Average for Reporting US Hospitals</th>
<th>Ellis Hospital’s Rate</th>
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<tr>
<td></td>
<td>+</td>
<td>94%</td>
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Based on completed Ellis surveys from October 2012 through September 2013 with respondents choosing either “definitely yes” or “probably yes.”
The Bottom Line Report
FINANCIAL SUMMARY 2013 *

As a not-for-profit hospital, Ellis reinvests any surplus funds to:
- expand, replace and modernize its facilities and medical equipment;
- support programs aimed at improving quality of care and patient safety;
- improve the overall delivery of and accessibility to healthcare in our community.

COMMUNITY & CHARITY PROGRAMS – 2013
Charity Care (free care at cost for low-income patients) ........................................... $1.6 million
Uninsured Discounts (reduced rates for uninsured patients measured in charges) ........ $32.3 million
Bad Debts (services for which no payment was received) ...................................... $14.15 million
Community Benefits (free health screenings, health education, etc.) ....................... $5.8 million
*financial detail unaudited at time of publication

HONORS:
- A New York State designated Primary Stroke Center and recipient of the Gold/Gold Plus Award from the American Stroke Association (2007-2014).
- A fully accredited Center of Excellence by the American College of Surgeons and the American Society of Metabolic and Bariatric Surgery.
- A Blue Distinction Center for Bariatric Surgery, Cardiac Care and for Knee & Hip Replacement as awarded by BlueCross BlueShield of Northeastern New York.
- 2013 Partners in Performance Excellence Gold Baldrige Award winner, recognized for our dedication and work to create a culture and systems where innovation and performance excellence become the accepted norm.
- 5 Rings Award by IntelliCentrics, Inc. in recognition for excellence in vendor credentialing and creating a culture of vigilance, making hospitals safer for employees and patients.
- 2013 “Corporation of the Year” designated by the Chamber of Schenectady County.
The American Cancer Society recommends a CT scan for lung cancer of high risk patients:
- Aged 55 – 74 years
- Fairly good health
- Have smoking history equivalent to a pack a day for 30 years
- Currently smoke or have quit within the past 15 years

Ellis Medicine’s new Lung Cancer Screening program provides at-risk patients a CT scan to detect any lesions in their lungs. If the CT scan shows an abnormality, Ellis uses the state-of-the-art Electromagnetic Navigation Bronchoscopy to sample the lesion.

“Previously, patients had to take a ‘wait and see’ approach with repeat CT scans as biopsies were impractical due to the local of the abnormality,” said Christopher Dolinsky, MD. “The new screening program provides hope by detecting lung cancer in its early stages when it is most treatable.”

The ENB procedure uses a 3D CT scan of the lungs to create an accurate map of the lungs. Using this computerized map as a guide, a small catheter with GPS-like technology can be directed down the many small branches of the bronchial tree to biopsy practically anywhere in the lung. The doctor is able to navigate the airways until the catheter reaches the targeted area of the lung for testing.

The minimally invasive procedure can typically be performed in less than one hour, compared to more invasive surgical options which may require a hospital stay or greater risk of complications.

To ensure the best treatment outcomes, patients need a good team at their side. Ellis’ Lung Cancer Screening program has a patient care team comprised of radiologists, pathologists, pulmonologists, surgeons, radiation and medical oncologists and oncology nurse navigators. This team works collaboratively to ensure that patients receive the most efficient and compassionate care. We will continue to support patients all the way through their treatment plan.

For early detection to advanced treatment options and support, Ellis’ cancer care team offers the state-of-the-art treatment and compassion you need in the battle against cancer. For more information on Ellis’ Lung Cancer Screening program, please call 518.243.4317.

**SCRENNING GUIDELINES**

**TEAM APPROACH**

Lung cancer accounts for more deaths than any other cancer in both men and women. The key to successful treatment and survival is early screening and diagnosis.

**Breathe Easier With Early Detection**

Lung cancer accounts for more deaths than any other cancer in both men and women. The key to successful treatment and survival is early screening and diagnosis.

**2014 Data**

<table>
<thead>
<tr>
<th>Cancer Type</th>
<th>Estimated New Cases</th>
<th>Estimated Deaths</th>
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<tbody>
<tr>
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<td>Breast</td>
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<tr>
<td>Lung</td>
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*2014 Data*
The Impact of Giving

The generous support of individuals, businesses, and friends is critical to guarantee that our community will continue to have the best healthcare for generations to come. Gifts of all types and sizes are used to purchase state-of-the-art medical equipment and supplies, support healthcare programs that serve the community, and upgrade and expand facilities.

DURING 2013-2014, THE GENEROSITY OF MANY WHO CONTRIBUTED TO OUR HEALTH OUR FUTURE: THE CAMPAIGN FOR ELLIS MEDICINE HELPED:

- open the new Neil and Jane Golub Center for Emergency Care, which will see up to 90,000 patients per year – the busiest ER in the Capital Region;
- purchase new medical equipment and add additional patient rooms for the Medical Center of Clifton Park to provide 24/7 emergent care for the southern Saratoga County community;
- expand and modernize Bellevue Woman’s Center with private patient rooms, a special newborn nursery, modern, convenient testing for breast cancer and heart disease, and a beautiful healing garden;
- fund the Ellis Asthma program for school children in Schenectady;
- hire a pharmacist dedicated to the emergency department at Ellis Hospital;
- purchase children’s books and Pack-n-Plays for new moms enrolled in “Before Your Baby Basics” classes at Bellevue Woman’s Center;
- provide educational opportunities for nurses and respiratory therapists;
- purchase equipment to diagnose and treat cancer;
- support Sugar Free Gang activities and camp for children with diabetes;
- create sensory rooms for geriatric patients and adolescent and adult psychiatric patients;
- provide activities and entertainment for residents of the Ellis Residential & Rehabilitation Center;
- purchase physical therapy equipment for Spine and Pain Care in Clifton Park;
- shuttle patients from food kitchens and homeless shelters to Ellis for medical care;
- offer more than $20,000 in scholarships for 27 students at the Belanger School of Nursing;
- purchase the latest technology to treat severe, life-threatening asthma and diagnose breast cancer.

ELLIS BY THE NUMBERS (2013)

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<th>Stat</th>
<th>Number</th>
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<tr>
<td>people had state-of-the-art heart surgery</td>
<td>310</td>
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<tr>
<td>people received lifesaving emergency care</td>
<td>82,622</td>
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<tr>
<td>people received Emergent Care at the Medical Center of Clifton Park.</td>
<td>28,391</td>
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<tr>
<td>cancer patients were treated with skill and compassion</td>
<td>8,500</td>
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<tr>
<td>women had a mammogram</td>
<td>24,091</td>
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<tr>
<td>babies were welcomed into the world at Bellevue Woman’s Center</td>
<td>2,569</td>
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<tr>
<td>people had hip or knee replacement and can walk with greater ease</td>
<td>820</td>
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While dining with her parents and husband in January 2013, Coleen Stevens, of Glenville, felt a sudden onset of pain. “I knew I had a kidney stone, as it was already being monitored by a doctor, but this pain was just so focused and so intense, I couldn’t even think.” Coleen’s husband, Scott, brought her to Ellis Hospital immediately to be seen. “I just needed a good ER, and I needed it fast,” says Coleen. “Ellis took care of me the moment I arrived.”

During her two day stay in the hospital, Scott began to experience tightness in his chest, and worried that he might be having heart issues. A friend told him not to hesitate, and to get to the hospital. “What’s wonderful about Ellis is, if you walk in the front door and say ‘I have chest pain,’ it’s not even a minute until you’re on a stretcher hooked up to an EKG,” says Scott.

After being evaluated, it was determined that there was no major cause for concern. Stress was the cause of Scott’s tightness in his chest, which came as a pleasant surprise for the couple.

The Stevens are in their second year of co-chairing the Foundation for Ellis Medicine’s Cardiac Classic 5k event, which takes place every Thanksgiving morning. The Cardiac Classic started as a St. Clare’s tradition 33 years ago and transitioned over to Ellis when the hospitals came together in 2007. The Stevens have been runners for years and look forward to the event each year.

“We enjoy seeing familiar faces every year,” explains Coleen about the camaraderie of the Cardiac Classic. “Even though we only see these people on this morning, it’s like we are all friends.”

“It’s events like this that define a community,” adds Scott. When asked why they choose to give back to the community, the Stevens say that it has a lot to do with humble beginnings, gratitude and social responsibility. “We started our business [Dimension Fabricators in Glenville] with nothing but a dream, and this is a way to express our gratitude and share it with others,” says Scott. “You need hospitals, school systems, boys and girls clubs to make the community better for all—and this is our turn, our time to help.”

For Jim and Sandra Buhrmaster of Glenville, having access to top quality healthcare close to home is not just a cause they are proud to support, but a life-saving necessity. Every year, the Buhrmasters get season tickets for Syracuse basketball, so they had become accustomed to the many hills that the large campus has. However, when Sandra began to become winded and tired to the point of not wanting to attend the games, she knew something wasn’t right. Already being monitored by her cardiologist, she called her physician, who recommended she go to the hospital right away. The next day Sandra went in for cardiac testing, assuming everything was fine. “I thought to myself, this is ridiculous, I know it’s just reflux,” she notes. However, the doctor informed Sandra that she had three blocked arteries and emergency open heart surgery was her only option—and it had to be done fast. The next day she went in to Ellis Hospital for surgery, and would spend nine days in the hospital recovering.

“The care start to finish was wonderful—those doctors and nurses...they’re unbelievable,” says Sandra. “I had 24 hour, personal care, and I think I made some good friends. I would never consider going anywhere else.”

Supporting Ellis Medicine and healthcare for the community continues to be a major focus for the Buhrmasters. “Our passion is for everyone to receive equal and outstanding healthcare. Changes are happening, but they must be done, and we are happy to support it,” explains Jim. “With four boys, we’ve spent a lot of time in and out of the hospital. And now having gone through personal experiences with Ellis as patients, it really brings the mission home for us.”

To learn how you can support Ellis Medicine and its programs, or to make a gift to the Foundation for Ellis Medicine, call 518.243.4600 or visit ellismedicine.org.
Education & Support

COMMUNITY PROGRAMS
Take advantage of the many health and wellness classes and support programs offered on Ellis Medicine’s main campuses throughout the year, including:

CARE CENTRAL (1.888.633.4661)
Access to primary and dental care and other outpatient services in one convenient location at the McClellan Street Health Center (Schenectady). Our Health Services Navigators help connect you to the healthcare, social and community services you need.

COMMUNITY SHUTTLE
Ellis provides free transportation to the McClellan Street Health Center making stops in downtown Schenectady weekdays, and a shuttle to Bellevue Woman’s Center on Wednesdays.

CANCER SCREENINGS
Programs to help those who have no health insurance get breast, cervical and colorectal screenings.

CARDIAC REHABILITATION
Whether you’ve had a heart attack, angioplasty, or cardiac surgery, or if you have angina, we help you achieve a complete recovery and adopt healthy exercise habits.

MATERNITY CLASSES
All About Infants, Breastfeeding Preparation, Infant Safety & CPR, Maternity Tour, Pain Relief for Labor & Delivery, Prepared Childbirth, and a Sibling Class are offered at Bellevue Woman’s Center.

24-HOUR MENTAL HEALTH CRISIS
Information & Referral Hotline (518.243.4000)

MEDICAL ALERT SERVICE
A personal emergency response and support service for seniors.

WOMEN’S HEART PROGRAM
Comprehensive screening to detect heart problems or risk of heart disease, the number one killer of American women. Plus, education for living heart healthy.

Health & Wellness Programs

ASTHMA EDUCATION
Comprehensive asthma education programs that help children and adults live well with their disease.

DIABETES EDUCATION
Ellis Diabetes Care offers many education and support programs for adults and children with diabetes and for those people at risk for diabetes.

HEARTSMART NUTRITION
Let our registered dietitians teach you ways to modify your diet to be lower in fat and sodium, read food labels, smart shopping tips and health cooking strategies to be heart healthy.

SMOKING CESSATION
Ellis regularly hosts Seton Health’s “The Butt Stops Here” program to help light to heavy tobacco users quit.

MEDICAL NUTRITION
Our registered dietitians can tailor nutrition education to meet your personal health needs.

SUPPORT GROUPS
Ongoing support programs focused on breastfeeding, cancer, mental illness, diabetes, congestive heart failure, stroke and weight loss surgery.

For more information call 518.243.3333 or view Ellis’ community classes at ellismedicine.org
Want to learn more?

ELLIS CALL CENTER – 518.243.3333

Information | Physician Referrals | Scheduling

ELLIS HOSPITAL
518.243.4000
1101 Nott Street | Schenectady, NY 12308

BELLEVUE WOMAN’S CENTER
518.346.9400
2210 Troy-Schenectady Road | Niskayuna, NY 12309

McCLELLAN STREET HEALTH CENTER
518.382.2000
600 McClellan Street | Schenectady, NY 12304

MEDICAL CENTER OF CLIFTON PARK
518.579.2800
103 Sitterly Road | Clifton Park, NY 12065

Please call 518.243.3333, or visit ellismedicine.org to request an appointment for Ellis services.