

2019 S. L. Gimbel Foundation Fund Grant Application

	Internal Use Only:
Grant	
No:_	

Organization / Agency Information

Organization/Agency Name:					
EveryStep Hospice					
Physical Address:					
3000 Easton Boulevard, Des Moines,	IA 50317`				
Mailing Address: 3000 Easton Bo	ulevard				
Des Moines IA 50317					
CEO or Director & Title:					
Mr. Tray Wade, President and CEO					
Phone:	Fax:	Email:			
(515) 271-1328		Tray Wade			
		Tel: (515) 274-3400			
		twade@everystep.org			
Contact Person & Title:					
Jane Flanagan, Development					
Phone:	one: Email:				
515) 271-1328 jflanagan@everystep.org					
Web Site Address: Tax ID:					
http://www.everystep.org		421093718			
Des Moines IA 50317 CEO or Director & Title: Mr. Tray Wade, President and CEO Phone: (515) 271-1328 Contact Person & Title: Jane Flanagan, Development Phone: (515) 271-1328 Web Site Address:	Fax:	Tray Wade Tel: (515) 274-3400 twade@everystep.org Email: jflanagan@everystep.org Tax ID:			

Program / Grant Information

Program Area: Health

Program/Projec	t Name:	Amount of Grant Requested:	
Hospice Charity (Care - Patient Financial As	sistance	\$25,000
Total	Per 990, Percentage	Per 990, Percentage of	Per 990, Percentage of
Organization	of Program Service	Management & General	Management & General
Budget:	Expenses (Column	Expenses (Column Expenses Only (Column	
\$17,954,095	<i>B</i> / <i>Column A x 100</i>):	C / Column A x 100):	(Column C+D / Column A x
	85%	14%	100):
			15%

Purpose of Grant Request (one sentence):

For all patients to receive quality, compassionate end-of-life care reguardless of financial resources.

Program Start Date (Month and Year):		Program End Date (Month and Year):
7/1/2019	6/30/2020	

Gimbel Grants Received: List Year(s) and Award Amount(s)

\$25,000 in 2013 for Hospice Charity Care



Signature:

Signature:

Deb Milligan, Chair (past) ()

Executive Director/President (print name and title):

Tray Wade, President and CEO

S.L. Gimbel Foundation Fund Grant Application

Internal Use Only:	
Grant	

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Physical Address 3000 Easton Blvd			Dog Mains	City/State/Zip	
Mailing Address:			Des Moins	es, IA 50317	
3000 Easton Blvd			Des Moine	<i>City/State/Zip</i> es, IA 50317	
<i>CEO or Director:</i> Tray Wade			President :	Title: and CEO	
<i>Phone:</i> 515-274-3400		Fax: 515-27	4-1137	Email: twade@everystep.org	
<i>Contact Person:</i> Jane Flanagan, D	evelopment Coordi	inator	-President-	Title:	
<i>Phone:</i> 515-271-1328		Fax: 515-27	4-1137	Email: jflanagan@everstep.org	
Web Site Address: www.everystep.org				Tax ID; 421093718	
				12(00)	
Program / Gran Interest Area: c Program/Project	t Information Animal Protection		ucation =:Environment	Health =:Human Dignity Amount of Grant Requested:	
Program / Gran Interest Area: Program/Project: Charity Care - Pat Total Organization	t Information Animal Protection Name: lent Financial Assist Per 990, Percenta Program Service Expenses (Column	stace age of	Per 990, Percentage of Management & General Expenses Only (Column C	Health DHuman Dignity Amount of Grant Requested: 25,000 Per 990, Percentage of Management & General Expenses and Fundraising (Column C+D /	
Program / Gran Interest Area: Drogram/Project Charity Care - Pat	t Information Animal Protection Name: Ient Financial Assist Per 990, Percenta Program Service	stace age of	Per 990, Percentage of Management & General	Health DHuman Dignity Amount of Grant Requested: 25,000 Per 990, Percentage of Management & General Expenses	
Program / Gram Interest Area: Program/Project Charity Care - Pat Total Organization Budget: \$17,951,095	t Information Animal Protection Name: lent Financial Assis Per 990, Percenta Program Service Expenses (Column Column A x 100):	stace age of an B/	Per 990, Percentage of <u>Management & General</u> <u>Expenses Only</u> (Column C / Column A x 100):	Health DHuman Dignity Amount of Grant Requested: 25,000 Per 990, Percentage of Management & General Expenses and Fundraising (Column C+D / Column A x 100):	
Program / Gran Interest Area: Program/Project Charity Care - Pat Total Organization Budget: \$17,951,095 Purpose of Grant	t Information Animal Protection Name: lent Financial Assis Per 990, Percenta Program Service Expenses (Column Column A x 100): 85% Request (one sente	stace age of an B/ : ence):	Per 990, Percentage of <u>Management & General</u> <u>Expenses Only</u> (Column C / Column A x 100):	Health DHuman Dignity Amount of Grant Requested: 25,000 Per 990, Percentage of Management & General Expenses and Fundraising (Column C+D / Column A x 100): 15%	
Program / Gram Interest Area: Program/Project Charity Care - Pat Total Organization Budget: \$17,951,095 Purpose of Grant For all patients to Program Start Da	t Information Animal Protection Name: lent Financial Assis Per 990, Percenta Program Service Expenses (Column Column A x 100): 85% Request (one sente	stace age of in B/ : ence): mpassion	Per 990, Percentage of <u>Management & General</u> <u>Expenses Only</u> (Column C / Column A x 100): 14% nate end-of-life care regardle	Health DHuman Dignity Amount of Grant Requested: 25,000 Per 990, Percentage of Management & General Expenses and Fundraising (Column C+D / Column A x 100): 15% ess of financial resources. End Date (Month and Year):	
Program / Gram Interest Area: Description Program/Project: Charity Care - Pat Total Organization Budget: \$17,951,095 Purpose of Grant For all patients to Program Start Da July 2019	t Information Animal Protection Name: Ient Financial Assis Per 990, Percenta Program Service Expenses (Column Column A x 100): 85% Request (one sente	stace age of in B/ : ence): enpassion	Per 990, Percentage of <u>Management & General</u> <u>Expenses Only</u> (Column C / Column A x 100): 14% nate end-of-life care regardie <u>Program</u> June 20:	Health DHuman Dignity Amount of Grant Requested: 25,000 Per 990, Percentage of Management & General Expenses and Fundraising (Column C+D / Column A x 100): 15% ess of financial resources. End Date (Month and Year):	

Program Start Date (Month and Year): Program End Date (Month and Year): 7/1/2019 6/30/2020 Gimbel Grants Received: List Year(s) and Award Amount(s)

\$25,000 in 2013 for Hospice Charity Care

2019 S.L. Gimbel Foundation Fund APPLICATION **Narrative**

I. Organization Background

1977, a group of health care providers, clergy and civic leaders met to discuss the need in the Des Moines community for a special kind of service. On February 7, 1978, Hospice of Central Iowa (HCI Care Services) was incorporated under the laws of the State of Iowa. That was the beginning of what today is EveryStep Hospice, a non-profit organization serving more than 1,500 patients and their families each year throughout 47 counties in Iowa.

1993, Kavanagh House on 56th Street in Des Moines opens; a 12-bed residential hospice facility. 2010, HCI Care Services opens a thrift store in Urbandale, HCI Giving Tree. Proceeds from thrift store sales go toward programs that benefit hospice patients and their families.

2012, HCI Care Services and the non-profit organization Visiting Nurse Services of Iowa formalized a community partnership.

2014, the organization welcomes fellow non-profit organization Amanda the Panda into its array of services. Based in West Des Moines, Amanda the Panda helps children and families grieve after the death of a loved one, with year-long support offered at no cost to participants.

2018, all organizations rebranded under a new name... EveryStep with the mission of empowering individuals, supporting families and strengthening communities.

Organizational Accomplishments:

Since 2016, quality scores continue to meet or exceed national averages on the Family Evaluation of Hospice Care survey's four domains of care. Positive Feedback from employees led to a Top Workplace in 2016, 2017 and 2018. Tray Wade becomes President and CEO as Norene Mostkoff leaves to pursue new opportunities.

In 2017, 159 Cheer Boxes were delivered to grieving families. A survivor's grief doesn't become debilitating. More than 6,000 hours of free bereavement services including camps, support groups, memorial gatherings and one-on-one meetings. A veteran is officially honored for service – 74 ceremonies to honor Veterans, some of who were honored for the first time. A dying patient is made comfortable, surrounded by care and compassion. Hospice teams cared for an average of 224 patients per day supporting more than 1,617 patients.

In 2018, 77 special ceremonies were held to honor Veterans. 200 Cheer Boxes were delivered to grieving families. 40 years of bringing compassionate hospice care to people where they live. 25 years of offering a comfortable, home-like haven at the Kavanagh House. Rebranding for the future – our vision is to be an innovative, forward-thinking organization with a common mission driving all programs. That vision came to live with the launch of an updated mission state and new name for the organization. EveryStep reflects the reassurance, comforting care and support offered to individuals and families as they face life's

EveryStep is the same independent, non-profit organization with the people and programs trusted for decades.

Program Activities:

EveryStep is a nonprofit health care and support services organization offering compassion and guidance during life's most challenging moments. Formerly known as HCI Hospice Care Services, Visiting Nurse Services and Amanda the Panda. EveryStep serves 47 Iowa counties from offices in Des Moines, Centerville, Council Bluffs, Creston, Knoxville, Mount Ayr, Mount Pleasant, Osceola, Perry and hospice houses in Creston and Des Moines. More than 32 programs offer services such as prenatal education, home visits, home health care, hospice care, grief support, flu immunizations, family support, connection to community resources and other services for infants, children, young mothers, immigrants and refugees, families and seniors.

II. Project Information:

A) Statement of Need

While medical care for many patients is covered by Medicare, Medicaid and private insurance, there are those who have no benefits or means to support medical care. Some families simply have no resources to support the heavy burden of caring for a loved-one at the end of their life.

B) Project Description

Charity Care pays for patient's medical care when needed, and room and board at one of the hospice facilities owned and operated by EveryStep. When a patient decides to live at one of the hospice facilities, it is usually because they have no one who can be their full-time caregiver or their caregiver is no longer able to serve that role. In addition to addressing medical needs, EveryStep assists with connecting patients and families with the social service resources that allow them to maintain a quality of life. This includes financial and non-financial support. Patient Financial Assistance is our largest donor supported program proving financial resources in the most trying of times. Patient Financial Assistance allows patients and families a peace of mind at the end of life.

C) Project Goal, Objectives, Activities & Expected Outcomes

Project Goal:

All people received quality, compassionate end-of-life care regardless of financial resources.

Project Objectives:

Four percent of patients or 40 patients will receive all or part-financial assistance for their care at EveryStep Hospice homecare and hospice facilities.

Program Activities:

EveryStep is a nonprofit health care and support services organization offering compassion and guidance during life's most challenging moments. Formerly known as HCI Hospice Care Services, Visiting Nurse Services and Amanda the Panda. EveryStep serves 47 Iowa counties from offices in Des Moines, Centerville, Council Bluffs, Creston, Knoxville, Mount Ayr, Mount Pleasant, Osceola, Perry and hospice houses in Creston and Des Moines. More than 32 programs offer services such as prenatal education, home visits, home health care, hospice care, grief support, flu immunizations, family support, connection to community resources and other services for infants, children, young mothers, immigrants and refugees, families and seniors.

Expected Outcomes:

EveryStep Hospice will provide financial assistance to 40 patients in 2019 which will enable all people to receive quality, compassionate end-of-life care.

Evaluation:

5. Evaluation

A family survey is administered for EveryStep Hospice entitled Hospice Consumer Assessment of Healthcare Providers and Systems. It is administered by a third party. Using this survey, track the overall progress of the 40 families served by the program. The survey along with EveryStep Hospice quality improvement program, provides benchmarks with other Iowa and national hospice organizations as well as initiatives to improve overall quality.

D) Timeline

Provide a timeline for implementing the project. State the start date and ending date of the project, include timeframes for specific activities, as appropriate. This is an ongoing project.

E) Target Population

Who will this grant serve? How many people will be impacted? Provide a breakdown: Number of Children, Youth, Adults, Seniors, Animals.

For patients to access the programs, they must first qualify, and support may be based on a sliding fee scale. The nature of the program does not lend itself to a specific type of person or population group. All people can be adversely affected by the demands of caring for a loved one with a terminal illness. EveryStep Hospice serves all individuals of any age with any end-stage illness, such as cancer, heart, lung or liver disease, Lou Gehrig's disease (ALS), AIDS or Alzheimer's disease.

F) Projects in the Community

How does this project relate to other existing projects in the community? Who else in the community is providing this service or has a similar project? Who are your community partners (if any)? How are you utilizing volunteers?

The most experienced hospice provider in Iowa. Founded in 1978, EveryStep Hospice was the first hospice provider in Iowa. Kavanagh House on 56th Street in Des Moines, opened in 1993, was one of Iowa's first hospice houses. EveryStep is an independent, not-for-profit organization community-based hospice. Staff and volunteers are trained specifically to work with individuals and their families who are coping with an end-stage illness. No one is turned away due to an inability to pay. High educational standards for staff. Whether it's helping to pay for utilities because finances are tight or recreating a favorite home-cooked meal, patients find quality of life on their terms. Sometimes this means fulfilling wishes and create lasting memories for patients and their families. EveryStep goes above and beyond, offering specialized care and recognition for Veterans. EveryStep's staff is on-call 24 hours, seven days a week to respond to our patients' needs. EveryStep's corps of more than 900 volunteers is key to providing quality care. A solid, trusted presence serving nearly half of Iowa's counties. Grief and loss services available to the entire community through counseling, resources and variety of support groups. Also offer programs and resources to help train and support caregivers.

G) <u>Use of Grant Funds</u>

How will you use the grant funds? Medical care, room and board at hospice facilities.

III. Project Future

A) Sustainability

Charity care is supported through generous gifts from individuals and organizations within the communities served. Memorial donations continue to support the program while a few special events provide additional funding when needed. Constant research takes place to seek out new funders who support such programs.

IV. Governance, Executive Leadership and Key Personnel/Staff Qualifications

A) Governance

EveryStep Hospice Board of Directors are composed of adult citizens who represent a cross section of the community. These citizens shall be legally responsible for establishing policy and planning in the best interest of the organization. Board committees serve as a resource to the board. They plan and promote activities in various areas of the program and are defined, controlled and directed by the Board. Staff members may participate in committee meetings as advisors. Each committee may develop policies and standards to be brought before the Board. Each committee may make plans for services and projects. Records and minutes of all committee meetings are kept. The success of the Board depends upon the effectiveness of its committee. It is at the committee level where the study and screening of the issues and the interaction take place. Reports or recommendations can be most thoughtfully formulated for the Board to take such action as it deems advisable.

B) Management

Describe the qualifications of key personnel/staff responsible for the project.

Tray Wade, MHA, MA, President and CEO, Tom Mouser, MD, VP Chief Medical Officer (board certified in Palliative and Hospice Care), Tammy Stapp, VP Clinical Services

Organization Name:

Hospice of Central Iowa dba EveryStep Hospice

- V. Project Budget and Narrative (Do not delete these instructions on your completed form).
 - A) Budget Table: Provide a detailed line-item budget for your entire project by completing the table below.

Requested line items should be limited to Ten (10) line items. The less the better.

A breakdown of specific line item requests and attendant costs should include:

- 1) Line item requests for materials, supplies, equipment and others:
 - a. Identify and list the type of materials, supplies, equipment, etc.
 - b. Specify the unit cost, number of units, and total cost
 - c. Use a formula/equation as applicable. (i.e. 40 books @ \$100 each = \$4000)
- 2) Line item requests for staff compensation, benefits: Do not use FTE percentages.
 - a. Identify the position; for each position request, **specify the hourly rate and the number of hours** (i.e. $$20/hr \times 20 \text{ hours/week} \times 20 \text{ weeks} = $8,000)$
 - b. For benefits, provide the formula and calculation (i.e. $\$8,000 \times 25\% = \$2,000$)
- 3) Line items on Salaries/Personnel included in budget (contribution or in-kind) but NOT requested from the Gimbel Foundation must be broken down per number 2) above: Provide rate of pay per hour and number of hours.

Line Item Request	Line Item Description (Maximum two lines)	Support From Your Agency	Support From Other Funders	Requested Amount From Gimbel/TCF	Line Item Total of Project
Room & Board	\$225 per day maximum at hospice facility		327,825	25,000	352,825
Medical Care	Amount determined by level of care and level of assistance needed	100,000			100,000
TOTALS:		\$100,00	\$327,825	\$25,000	\$452,825

(Kavanagh House in Des Moines, Greater Regional Hospice House in Creston). While some patients need complete support financially, there are some who are on a sliding f scale because they have some means to pay for the room and board. We always look to other community resources to assist patients when possible. No one is turned away due a lack of financial resources. The amount of Charity Care budgeted is based on projected census numbers, trends an history of the program. We anticipate the project to be funded through a variety of EveryStep Foundation active such as memorials, direct mail and social media campaigns, special events and grants. Foundation maintains reserves to make sure no one is turned away regardless of finance resources.	ile
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	ts. The

B) <u>Narrative</u>: The budget narrative is the justification of "how" and/or "why" a line item helps to meet the project deliverables. Provide a description for each line item request as necessary. Explain how the line item relates to the

VI. Sources of Funding: Please list your current sources of funding and amounts.

Secured/Awarded

Name of Funder: Foundation, Corporation, Government	Amount
Blumenthal Family Foundation	\$5,000
FBL Financial	\$10,000
West Bancorporation Foundation	\$4,000
Marion County Community Foundation	\$2,500
Combined Federal Campaign	\$5,000
City of Des Moines Employees	\$10,000
Memorial Donations	\$416,325
	\$

Pending

Name of Funder: Foundation, Corporation, Government	Amount	Decision Date
Polk County Board of Supervisors	\$10,000	September
United Way of Marion County	\$2,500	August
Storey-Kenworthy Foundation	\$5,000	August
	\$	
	\$	
	\$	

Diversity of Funding Sources: A financially healthy organization should have a diverse mix of funding sources. Complete those categories that apply to your organization using figures from your most recent fiscal year.

Funding Source	Amount	% of Total	Funding	Amount	% of Total
		Revenue	Source		Revenue
Contributions	\$1,569	%	Program Fees	\$17,265,811	95.07%
Fundraising/Special Events	\$0	%	Interest Income	\$0	%
Corp/Foundation Grants	\$422,269	2.33%	Other:	\$449,787	2.48%
Government Grants	\$21,600	.12%	Other:	\$	%

Notes:	

VII. Financial Analysis

Agency Name:	Hospice of Central I	<u>owa dba Ever</u>	yStep Hospice	
Most Current Fiscal	Year (Dates): From_	7/1/17	To:	6/30/18

This section presents an overview of an applicant organization's financial health and will be reviewed along with the grant proposal. Provide all the information requested on your entire organization. Include any notes that may explain any extraordinary circumstances. Information should be taken from your most recent 990 and audit. **Double check your figures!**

Form 990, Part IX: Statement of Functional Expenses

1) Transfer the totals for each of the columns, Line 25- Total functional expenses (page 10)

(A)	(B)	(C)	(D)
Total Expenses	Program service	Management &	Fundraising expenses
	expenses	general expenses	
\$17,599,474	\$14,953,513	\$2,510,942	\$135,019

2) Calculate the percentages of Columns B, C, and D, over A (per totals above)

- Program services (B) A general rule is that at least 75% of total expenses should be used to support programs
- Management & general administration (C) A general rule is that no more than 15% of total expenses should be used for management & general expenses
- Fundraising (D) A general rule is that no more than 10% of total expenses should be used for fundraising

(A)	(B)	(C)	(D)
Total Expenses	Program service	Management &	Fundraising expenses
	expenses	general expenses	
	Columns B / A x 100	Columns C / A x 100	Columns D / A x 100
Must equal 100%	85%	14%	1%

3) Calculate the difference between your CURRENT year budget for management & general expenses and your previous management & general expenses per your 990 (Column C)

	Column C, Management & general expenses per 990 above	Differential
14%	14%	0%

If the differential is above (+) or below (-) 10%, provide an explanation:

Quick Ratio: Measures the level of liquidity and measures only current assets that can be quickly turned to cash. A generally standard Quick Ratio equals 1 or more.

Cash	+ Accounts Receivables	/Current Liabilities	= Quick Ratio
\$143,321	\$1,713,287	\$1,865,187	99.5

Excess or Deficit for the Year:

Excess or (Deficit)	Excess or (Deficit)
Most recent fiscal year end	Prior fiscal year end
\$(305,212) Budget FY19	\$343,269 Actual FY18

		FY18			FY19	
			Actual		Budget	
Revenue						
Hospice Patient	t Care					
	Routine	\$	16,879,373	\$	16,611,714	
	Inpatient	\$	1,896,800	\$	1,631,483	
	Respite	\$	107,280	\$	41,100	
	Per Service	\$	59,611	\$	82,224	
	Nursing Home Residency Fee	\$	2,102,137	\$	2,103,165	
	Kavanagh Residency Fee	\$	679,500	\$	685,283	
	Contractual Adjustments	\$	(4,898,219)	\$	(3,905,357)	
	Hospice Patient Care	\$	16,826,481	\$	17,249,611	
Giving Tree						
	Giving Tree	\$	448,318	\$	449,787	
		\$	448,318	\$	449,787	
Home Care		-				
	Skilled Home Care - Commercial	\$		\$	16,200	
	Total	\$	-	\$	16,200	
Grants - Govern	nment					
02-4078-00-	00 Grant/Contract - State & Co-00-00-	\$	52,077	\$	21,600	
	Total	\$	52,077	\$	21,600	
Foundation Gra	ents					
	Foundation Grants	\$	696,993	\$	875,094	
		\$	696,993	\$	875,094	
Donations & U	nited Way			····		
	Donations & United Way	\$	86,562	\$	-	
		\$	86,562	\$		
Charity Care				***********	***************************************	
Ominy Ome	Charity Care	\$	(302,166)	\$	(452,825)	
	charty care	\$	(302,166)		(452,825)	
Other Revenue			(302,100)	Φ	(432,623)	
Other Revenue	Other Revenue	\$	70.002	\$		
	Onier Revenue		79,885		-	
to Mind		\$	79,885	\$		
In Kind		•	08.400			
	In Kind	\$	83,482	\$	1,569	
F#4 . *		\$	83,482	\$	1,569	
	Operating Revenue	<u>s</u>	17,971,632	<u>\$</u>	18,161,036	
Expenses						
Salaries						
	Salaries - RN	\$	3,207,117	\$	3,184,373	
	Salaries - HHA	\$	1,006,895	\$	1,096,770	
	Salaries - MSW	\$	469,333	\$	477,721	
	Salaries - Bereavement	\$	239,047	\$	247,759	
	Salaries - Chaplain	\$	315,029	\$	272,467	

	Salaries - Physician/Nurse Practitioner	\$	473,192	\$	439,935
	Salaries - Volunteer Coordinator	\$	198,664	\$	183,927
	Salaries - Administrative PFC	\$	1,329,717	\$	1,544,553
	Salaries - Other Administrative	\$	817,031	\$	370,288
	Salaries - Complementary Therapist	\$	81,189	\$	81,889
	Salaries	S	8,137,214	S	7,899,681
Benefits					
	Payroll Taxes	\$	590,255	\$	604,326
	Employee Benefits - Insurance	\$	751,830	\$	717,491
	Employee Benefits - Other	\$	3,807	\$	3,500
	Employee Benefits - Pension	\$	197,454	\$	189,592
	Benefits	s	1,543,347	S	1,514,909
Contracted St	taffing				
	Contracted Nursing	\$	34,509	\$	19,455
	Contracted Health Aide	\$	30,124	\$	
	Contracted Services	\$	43,795	\$	56,895
	Contracted Staffing	<u> </u>	108,427	\$	76,350
Contracted Fa	acilities Pass Thru				
	Contracted Facilities	\$	2,424,656	\$	2,436,520
	Contracted Facilities	S	2,424,656	\$	2,436,520
Travel & Trai	nsportation				
	Mileage	\$	444,678	\$	472,226
	Fleet	\$	7,728	\$	6,029
	Travel Out of Area	\$	8,007	\$	11,400
	Travel & Transportation	S	460,413	\$	489,655
Program Expe	enses				
	Medical Supplies	\$	229,787	\$	279,833
	Durable Medical Equipment	\$	497,190	\$	503,840
	Groceries	\$	25,910	\$	23,955
	Infusion Therapy	\$	42,280	\$	42,541
	Pharmaceuticals	\$	530,649	\$	536,754
	Quality of Life	\$	34,763	\$	31,995
	Fundraising Expenses	\$	96	\$	
	Volunteer Expense	\$	19,886	\$	34,256
	Contracted Food Service	\$	68,902	\$	73,927
	Other Professional Fees	\$	137,630	\$	125,002
	Complementary Therapies	\$	16,700	\$	18,827
	Outpatient	\$	195,372	\$	183,048
	Program Expenses	<u> </u>	1,799,165	- <u>-</u>	1,853,976
Organizationa			x1///1100	٠	1,000,770
~. Panicanous	Marketing & Public Relations	\$	123,359	\$	112,442
	Bad Debts	\$	142,500	\$	180,000
	Insurance - Casualty/Liability	\$	101,890	ъ \$	-
	Professional Fees - Administrative				110,026
		\$	1,925,272	\$	2,307,387
	Lodging and Accommodations	\$	7,900	\$	14,483
	Employee Recognition & Activities	\$	56,862	\$	62,566
	Organizational Expenses		2,357,783	S	2,786,904

Occupancy Expenses				
Information Technology Expense	\$	73,978	\$	97,639
Building & Office Expenses	\$	319,877	\$	353,455
Building Lease	\$	69,209	\$	72,755
Telephone	\$	240,492	\$	261,550
Utilities	\$	112,782	\$	107,700
Occupancy Expenses	\$	816,336	S	893,099
Miscellaneous	\$	59	\$	-
Total Expenses	\$	17,647,401	s	17,951,095
EBITDA	\$	324,231	s	209,942
Depreciation				
Depreciation	\$	600,809	\$	515,154
Total Depreciation	s	600,809	s	515,154
Other Income				

Interest & Dividends

Other Income

Total Other Income

Change in Interest of Foundation

Net Income (Loss)

Investment Gain (Loss)

Change in Value Charitable Gift Annuities

Change in Interest of Foundation

Total Change in Interest of Foundation

\$

\$

\$

\$

S

157,277 \$

261,929 \$

(1,427) \$

417,862 S

632,151 \$

632,151 \$

773,435 S

(305,212)

83 \$

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX Do not include amounts reported on lines 6b, 7b, (B) Program service expenses (C) Management and general expenses (D) Fundraising (A) Total expenses 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . . . Grants and other assistance to domestic 2 individuals. See Part IV, line 22 34,275 34.275 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 . . . Benefits paid to or for members 0 Compensation of current officers, directors, trustees, and key employees 279,102 279,102 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . 7 Other salaries and wages 7,772,384 7.479.829 292,555 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 286,098 191,833 94,265 Other employee benefits 9 876,473 669,662 206,811 589,233 10 Payroll taxes 557,379 31,854 Fees for services (non-employees): 11 Management а 1,069 1,069 Legal Accounting 75,187 17,922 57,265 C Professional fundraising services. See Part IV, line 17 ė Investment management fees f Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . . 1,733,241 1,733,241 Advertising and promotion . . . 12 320,474 274,444 46,030 13 Office expenses 73,838 14 Information technology . . 74,465 627 15 Royalties 235,393 220,340 15,053 16 Occupancy Travel 568,042 562,870 5,172 17 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 20 Interest 21 Payments to affiliates 600,072 538,090 61,982 Depreciation, depletion, and amortization . 22 23 24 Other expenses, Itemize expenses not covered above (List miscellaneous expenses in line 24e, If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) CONTRACTED FACILITY AND ROOM & BOARD 2,218,712 2,218,712 а PHARMACY & DIRECT PATIENT SUPPLIES 757,641 757,641 b MEDICAL EQUIPMENT 496,709 496,642 67 C PATIENT CARE d 398,952 398,022 930 All other expenses 281,952 142,500 4,433 135,019 Total functional expenses. Add lines 1 through 24e 17,599,474 14,953,513 2,510,942 135,019 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)



Clinical Services

	Bud	lget FY 2019
Revenue		
Patient Care		17,287,411
Foundation and Other		876,663
Thrift Store		449,787
Total Operating Revenue	\$	18,613,861
Charity Care		(452,825)
Net Operating Revenue	\$	18,161,036
Expenses		
Salaries		7,899,681
Taxes and Benefits		1,514,909
Contracted Facility - Inpatient and Respite		2,436,520
Contracted Staffing		76,350
Patient Care - Program Expenses		1,821,981
Quality of Life		31,995
Organizational Expense		2,786,903
Occupancy and Office Supplies		893,099
Travel and Transportation		489,655
Total Operating Expenses	\$	17,951,093
Depreciation		515,154
Net Operating Income (Loss)	\$	(305,211)

Internal Revenue Service

 Director, Exempt Organizations Rulings & Agreements
 P.O. Box 2508
 Cincinnati, OH 45201 **Department of the Treasury**

Date: MAY 0 4 2011

Employer Identification Number: 42-1093718

Hospice of Central Iowa 2910 Westown Pkwy STE 200 West Des Moines, IA 50266

Person to Contact - ID Number: John Rice - 0677001

Contact Telephone Number: 877-829-5500 Toll-Free

Dear Sir or Madam:

In your letter dated February 8, 2011, you requested classification as a public charity described in section(s) 509(a)(2) of the Internal Revenue Code.

In our letter dated June 1978 we determined that you were exempt under section 501(c)(3) of the Code. We further determined that you were not a private foundation, and you were classified as a public charity described in section(s) 509(a)(1) and 170(b)(1)(A)(vi) of the Code.

Based on information you provided, we have determined that you meet the requirements for classification as a public charity described in section(s) 509(a)(2) of the Code. Accordingly, this letter modifies our letter of June 1978 and we have updated your public charity status in our records as you have requested.

Since your exempt status was not under consideration, you continue to be classified as an organization exempt from Federal income tax under section 501(c)(3) of the Code.

Grantors and contributors may generally rely on this determination of your foundation status unless the Internal Revenue Service publishes notice that you are no longer recognized as tax exempt or classified as a public charity in the Internal Revenue Bulletin. However, if a grantor or contributor takes any action, or fails to take any action, which causes you to lose your exempt status or causes you to be reclassified as a private foundation, that party cannot rely on this determination. Furthermore, a contributor or grantor who knows that the Internal Revenue Service has notified your organization of any change in your exempt status or foundation status cannot rely on this determination.

Please see enclosed Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, for some helpful information about your responsibilities as an exempt organization.

Because this letter could help resolve any questions about your exempt status and/or foundation status, you should keep it with your permanent records.

If you have any questions, please contact the person whose name and telephone number are shown in the heading of this letter.

Sincerely,

Lois G. Lerner

Director, Exempt Organizations Rulings and Agreements

Letter 4425, Rev. 10-2010 Catalog Number 52256W



November 2018

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S.L. Gimbel Foundation Fund Grant Evaluation Form August 15, 2014

• Describe key outcomes and results based on goals & obj. Provide number of clients served and other relevant statistics.

Patient Financial Assistance makes it possible for patients to live where they want to regardless of financial resources. We reached our goal of 90% of patients die in their place of choice in FY 2014. A total of 61 patients received some type of assistance through our charity care program. Donors raised \$216,300 for charity care. The organization cared for 1,354 patients in FY 2014. The funds from S.L. Gimbel Foundation provide care for approximately seven patients.

• What were challenges and obstacles you encountered (if any) in attaining your goals & obj. How did you overcome and/or address the challenges and obstacles? Lessons learned?

The median length of stay is only 13 days. Sometimes this short length of time makes it difficult for the patient and family members to take full advantage of the range of services we provide.

• Describe any unintended positive outcomes as a result of the efforts supported by this grant.

Our Centerville team received a referral from the University of Iowa Hospitals and Clinics in May for an infant whose family lived in Ottumwa and did not speak any English and had limited financial resources. The social worker on the case in Iowa City shared that there were no hospices in Ottumwa who would accept the patient. An Interpreter with our community partner, Visiting Nurse Services of Iowa, helped communicate for our team and the baby's family.

Our dedicated efforts to provide care for this family made a positive impact on University of Iowa Hospitals and Clinics social workers involved in this case. Our relationship has continued as we received another referral a couple of weeks later for another infant.

We are proud to be able to care for these special cases and donor supported charity care makes it possible.

• Describe the overall effect this grant has had on your organization.

While other hospice organizations in the community are providing some level of charity care, no one else in the community will take all patients regardless of family dynamics, complicated pain, management or lack of financial resources. We work side by side with other professional caregivers in long-term care facilities, hospitals and assisted living facilities to reach the patient's care plan goals.

• Tell us a few success stories that made an impact

Please see story above regarding the Centerville team

• Provide financial report on use of grant funds.

Funds were spent on room and board at Kavanagh House on 56th Street and Bright Kavanagh House in Des Moines, Iowa.