

**The North Carolina Medical Care Commission  
Reporting for Community Improvement and Charity Care/Community Benefit by a  
Continuing Care Retirement Community (CCRC)**

**Community Improvement Relationships** is an active process CCRC linking with the community agencies and organizations responsible for assessing and planning to meet the health and other needs of the community. CCRCs are expected to connection with these agencies and organizations to better define how the CCRC can use its particular strengths and talents to meet community benefit needs.

**Charity Care** is the unreimbursed costs to the facility of providing health care, housing, or other services to a resident who is uninsured, underinsured, or otherwise unable to pay for all or part of the services rendered. (Session Law 2001-17; GS 105-278.6A). Most likely the first priority identified by a CCRC for charity care/community benefits would be to provide charity care for its residents.

**Community Benefits** are the unreimbursed costs to the facility of providing the following:

1. Services, including health, recreation, community research, and education activities provided to the community at large, including the elderly.
2. Charitable donations.
3. Donated volunteer services
4. Donations and voluntary payments to government agencies.  
(Session Law 2001-17; GS 105-278.6A)

**POLICY:**

The CCRC shall submit at the time of borrowing and every year thereafter commencing with fiscal year ending in calendar 2001 the following information to the Medical Care Commission as long as the CCRC has outstanding North Carolina Medical Care Commission debt.

1. North Carolina Medical Care Commission, Executive Summary of the CCRCs Community Improvement Relationships.
2. North Carolina Medical Care Commission, Charity Care/Community Benefit Report
3. Any supplemental reports that describe Charity Care/Community Benefit programs and cost/expenses (e.g. IRS Form 990, Section III, annual reports, etc.)



North Carolina Medicare Commission  
Executive Summary of the CCRCs Community Improvement Relationships  
Continuing Care Retirement Community (CCRC)  
Organization: Cornelia Nixon Davis, Inc. Date: 5/12/2011

**1. Statement of the CCRCs Mission and commitment to charity care/community benefit.**

Cornelia Nixon Davis, Inc. is a not-for-profit corporation dedicated to providing quality health, wellness and rehabilitation services to aging adults in a loving continuum of care environment in which each resident lives at an optimum level of function and dignity.

Since opening in 1966 our campus has been recognized for its quality health care and for its investment in our residents and staff. CND, Inc. 's Board of Directors is comprised of local business and community leaders, many of whom have dedicated over twenty years of service to the organization. They know our community and the needs of our residents and ensure that appropriate resources are invested in our core services as well as extra amenities that set apart our campus from most for-profit skilled nursing and assisted living communities. Mr. Champion McDowell Davis, our founder, was an outspoken proponent of quality health care for all people without regard to class, race, religion, or income. Mr. Davis dedicated the last decade of his life to transforming his family's former peanut plantation into a state of the art skilled nursing facility for the benefit of all.

All of the beds at our skilled nursing facility, Davis Health Care Center, are certified to meet the needs of Medicaid eligible residents.

**2. Describe geographic service area and target populations for community benefits.**

Our primary service area includes the city of Wilmington and extends throughout New Hanover County. Approximately 70% to 80% of our senior population resides in New Hanover County. Brunswick and Pender are surrounding counties and are also served. As the populations of the northern end of New Hanover County and the Southern end of Pender County have expanded there has been a greater need for skilled nursing and rehabilitative services. The target populations we serve include the elderly living in the three county region who need skilled nursing and rehabilitative services. Since our coastal area attracts many people from other parts of North Carolina and other states, the diversity of our population now includes active seniors who increasingly need rehabilitative services for joint replacement or injuries that occur from daily living. The population age 65 and older in New Hanover County is 13.1 % versus the state average of 12.1 %. We also focus much of our efforts on workforce training and retention to ensure that the medical needs of this growing population continue to be met. Our current training efforts related to nurses, CNAs, medical residents, and nursing home administrators have a statewide impact.

**3. Describe the relationships with agencies and organizations within the community.**

CND, Inc. enjoys excellent relationships with agencies and organizations within our community because we can be counted on to participate and add value to the partnerships. Our reputation was publicly acknowledged during the 2008 certificate of need hearing when families and administrators from other organizations noted the reputation for quality enjoyed by Cornelia Nixon Davis, Inc. Currently our campus is the only not-for-profit skilled nursing facility in New Hanover County. We welcome the arrival of the Lutheran Homes for the Aging in our community and look forward to participating in many joint efforts to highlight the benefits of nonprofit care. Whether through membership in professional organizations, board service, volunteer opportunities, or mentor relationships our staff and board members seek to give back to the community as good corporate citizens.

**4. List current community benefit programs.**

Current Outreach Efforts:

In partnership with South East Area Health Education Center, Davis Health Care Center serves as a geriatric training site for medical residents in the internal medicine and family medicine programs at New Hanover Regional Memorial Hospital. Residents spend a rotation on our campus to learn the holistic needs of the geriatric patient. In addition to exposing these residents to issues involving the aging, an additional goal is to encourage physicians to select geriatrics as their specialty. Two faculty members with SEAHEC (both geriatricians) supervise the program, provide medical care to approximately 1/3 of our residents and also provide in-service training to our staff. This partnership has now been replicated with Cape Lejeune's medical residents, increasing the scope of this training benefit. Our campus serves as a training site and now a testing site for Certified Nursing Assistants. In an attempt to train CNAs in both health-related issues as well as our corporate culture. Although it is not a requirement for participation, to date more than half of the CNAs trained at our facility have chosen to become employed by our corporation. We are approved as a testing site for CNA certification. This certification will allow more CNAs to quickly become employed rather than waiting several months to take the test in a nearby location or having to drive long distances to take the test. Nursing students from Cape Fear Community College serve a six week rotation at Davis Health Care Center and UNC-Wilmington students serve a three week rotation on our campus. This cooperative training exposes nursing students to the issues that impact the elderly and prepare them for their nursing careers. Mt. Olive College holds its Health Care Administrator classes program at Davis Health Care Center. Two semesters of classes have been held to date in the evenings, allowing Davis and Champions leadership team members to volunteer as speakers for this program. Staff members are selected to teach portions of the class that relate to their field of expertise. Executive Director, Charles Long, is currently serving for a second time as a Preceptor for an Administrator in Training. His willingness to spend extra hours to train and mentor a future nursing home administrator is a sign of his commitment to the profession and the community. Davis Health Care Center's nurse educator has trained medication aides to work in our facilities as well as other long term care facilities. As a charitable provider of long-term care services, we are a resource for many institutions of higher learning. Annually, the UNCW Recreational Therapy places an intern on our campus to learn skills from our licensed Recreational Therapist and her team. Social Work faculty and students from UNC-Wilmington participate in projects on our campus. We provide an unreimbursed horticultural therapy program that operates in our greenhouse and therapy courtyard. This program is a model for the state and will hopefully be replicated in other skilled nursing facilities. Our leadership team members participate in a number of community boards including Elderhaus (adult day care), PACE (a program of all-inclusive care for the elderly), Lower Cape Fear Hospice & Life Care Center, Skilled Nursing Facilities Partnership collaborative sharing between skilled nursing and New Hanover Regional), Health Care Marketing Group (sharing of information to inform the public about health issues impacting the elderly), and CND, Inc. is the lead local organization in the State of NC Workforce Strategies initiative. Our corporation's leaders are regularly called upon for their expertise. In years past, Davis Health Care Center's Executive Director was invited to testify at state hearings regarding disaster preparedness for nursing homes. Due to his presentation, state officials were given a better understanding of the difficulties nursing homes face in evacuating the medically fragile.

During the past year our campus hosted estate planning workshops, blood drives, and dementia care workshops. We have also participated in job fairs throughout the county to increase interest in the field of health care. Our dietician volunteers within the community in a clinic for homeless families. Our involvement with outside community agencies includes, but is not limited to the following: New Hanover County, Council of Governments, Eastern NC Alzheimer's Association, Cape Fear Area United Way, Department of Social Services, Lower Cape Fear Hospice & Life Care Center, American Red Cross, University of North Carolina-Wilmington, Cape Fear Community College, Mount Olive College, New Hanover Department of Aging, South East Area Health Education Center, and Wilmington Rotary Club.

Our participation in the NC Medicaid program amounted to \$4,178,782 in charity care for the 2010 fiscal year.

**Detailed Application for Property Tax Exemption Under G.S. 105-**

**Instructions** (Return to County Tax Office No Later Than October 1, 2001)

A facility may be granted a total exclusion under Section 1, G.S. 105-278.6A, (c), provided that conditions (1) through (5) are met AND condition (6) a. OR (6) b. is met.

If the facility qualifies under (6) a. AND meets conditions (1) through (5), check this box to obtain a total exemption. Only complete identifying information and signature. Do not complete the rest of the form. (Provide relevant documentation.)

If the facility qualifies under (6) b. AND meets conditions (1) through (5), complete the rest of the form below.

Provide all relevant attachments as noted under each category.

**REVENUE**

**Total Resident Revenue - As Disclosed in Most Recent Audited Financial Statement**

(Includes all monthly service fees, fee for service charges, amortized entry fee income for the year, and any fees collected that would not otherwise be amortized into income for the year associated with living in the facility. Excludes investment income, contributions and income from non-resident sources.) Attach Relevant Sections of Most Recent Audited Financial Statements

(1) 21,179,018

**CHARITY CARE**

**(A) Unreimbursed Health Care**

(From Medicare/Medicaid or Third Party cost reports, internal resident assistance data certified by the facility or audited financial statements which show amount of unreimbursed costs) Attach Applicable Pages of Cost Reports

4,178,782

**(B) Unreimbursed Housing and Services**

(From internal assistance reports (Lyons software or spreadsheet) certified by the facility and/or audited statements which show amount of unreimbursed costs and/or as disclosed in most recent audited financial statement)

**Total Charity Care**

(2) 4,178,782

**COMMUNITY BENEFITS**

(Amounts claimed are to be taken from audited financial statements which either footnote the amount or disclose the amount in the statement of operations as a line item and/or can be taken from documented receipt letters from entities receiving the service, donation or volunteer service, and/or as documented in the Lyons Software or similar spreadsheet program certified by the facility. The amounts are limited to actual expenses incurred by the facility to perform the service or provide the donation.)

**(A) Services**

(Verifiable unreimbursed expenses incurred by the facility to provide health, recreation, community research, and education activities to the community at large, including the elderly - DOES NOT include resident volunteer time.)

**(B) Charitable Donations**

(Actual cash outlay or equivalent dollar amount of donated items originally acquired by the facility and documented in facility community benefit report (Lyons software or spreadsheet) and/or noted in audited financial statements.)

**Detailed Application for Property Tax Exemption Under G.S. 105-**

**(C) Donated Volunteer Services**

(Cost to the facility for allowing employees to volunteer in community service projects or organizations and/or actual unreimbursed facility material, space and volunteer time as documented based on wages paid by the facility for the volunteer during the service period/project)

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**(D) Donations and Voluntary Payments to Government Agencies**

(Amounts to be taken from Receipted donations/payments from government agency receiving donation/payment when the facility would otherwise not have to pay the agency – goodwill.)

\_\_\_\_\_

**Total Community Benefits**

(3) \_\_\_\_\_

**Total Community Benefits and Charity Care (2) + (3)**

(4) 4,178,782

**Percentage of Resident Revenue**

Total Community Benefits and Charity Care Divided by  
Total Resident Revenue

(4) 4,178,782  
(1) 21,179,018

Percentage of Resident Revenue (4) divided by (1)

20 %

**Exclusion Percentage Based on Percent of Resident Revenue Above**

<b>% of Revenue</b>	<b>Exclusion %</b>
5%	100%
4%	80%
3%	60%
2%	40%
1%	20%

Exclusion % 100

Facility Name Cornelia Nixon Davis, Inc. County New Hanover

Facility Address 1011 Porters Neck Road, Wilmington, NC 28411

***By Signing Below We Hereby Certify the Information Stated Above is Correct and True as Supported by Our Financial and Facility Records:***

  
 \_\_\_\_\_ Date 5-12-2011  
 Officer's Signature

Cornelia Nixon Davis Inc.  
Charity Care  
For the Fiscal Year Ended 9/30/2010

	Resident Days	Effective Reimbursement Rate	Revenue
<b>Net Resident Revenue</b>			
Medicare	8,522.00	431.09	3,673,750.00
Private	<u>26,330.00</u>	202.87	<u>5,341,500.00</u>
SNF Non Medicaid Total	34,852.00	258.67	9,015,250.00
Private Pay - Assisted Living	<u>43,921.00</u>	125.70	<u>5,520,860.00</u>
Total Non Medicaid	<u>78,773.00</u>		<u>14,536,110.00</u>
Medicaid -SNF	34,622.00	140.20	4,853,837.00
Medicaid - ALF	<u>3,526.00</u>	103.83	<u>366,116.00</u>
Total Medicaid	<u>38,148.00</u>		<u>5,219,953.00</u>
Medicare B Revenue			1,177,068.00
Other Resident Revenue			190,320.00
Medical Office			<u>55,567.00</u>
Total	<u>116,921.00</u>		<u>21,179,018.00</u>
	<u>SNF</u>	<u>ALF</u>	<u>Combined</u>
Average Non Medicaid Rate	258.67	125.70	
Less Average Medicaid Rate	<u>(140.20)</u>	<u>(103.83)</u>	
Charity Care Rate	<u>118.47</u>	<u>21.87</u>	
Medicaid Census	34,622.00	3,526.00	38,148.00
Charity Care Provided	4,101,668.34	77,113.62	4,178,781.96
Net Corporate Resident Revenue			21,179,018.00
Charity Care Percentage			20%

