

Form **990**
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2021
Open to Public Inspection

A For the 2021 calendar year, or tax year beginning 10-01-2021, and ending 09-30-2022

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization
Southern Baptist Hospital of Florida Inc

Doing business as
See Schedule O

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
1660 Prudential Dr 203

City or town, state or province, country, and ZIP or foreign postal code
Jacksonville, FL 32207

D Employer identification number
59-0747311

E Telephone number
(904) 202-2883

G Gross receipts \$ 2,055,809,929

F Name and address of principal officer:
Michael A Mayo
841 Prudential Dr Ste 1601
Jacksonville, FL 32207

H(a) Is this a group return for subordinates? Yes No

H(b) Are all subordinates included? Yes No
If "No," attach a list. See instructions.

H(c) Group exemption number ▶

I Tax-exempt status: 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527

J Website: ▶ www.baptistjax.com

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 1965

M State of legal domicile: FL

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
Continue the healing ministry of Christ by providing accessible, quality healthcare services at a reasonable cost in an atmosphere that fosters respect and compassion.

2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
3 Number of voting members of the governing body (Part VI, line 1a)	14
4 Number of independent voting members of the governing body (Part VI, line 1b)	10
5 Total number of individuals employed in calendar year 2021 (Part V, line 2a)	10,156
6 Total number of volunteers (estimate if necessary)	218
7a Total unrelated business revenue from Part VIII, column (C), line 12	494,610
7b Net unrelated business taxable income from Form 990-T, Part I, line 11	62,889

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	56,034,598	30,973,166
9 Program service revenue (Part VIII, line 2g)	1,719,925,479	1,812,055,633
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	58,115,549	211,552,132
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,160,372	587,461
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,835,235,998	2,055,168,392
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	2,542,855	7,534,395
14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	751,058,673	900,028,987
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 0		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	805,689,256	856,381,270
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	1,559,290,784	1,763,944,652
19 Revenue less expenses. Subtract line 18 from line 12	275,945,214	291,223,740
	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	4,112,924,251	3,830,046,034
21 Total liabilities (Part X, line 26)	1,529,237,950	1,473,087,581
22 Net assets or fund balances. Subtract line 21 from line 20	2,583,686,301	2,356,958,453

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here Signature of officer: ***** Date: 2023-08-11
Keith Tickell CFO
Type or print name and title

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ▶				Firm's EIN ▶
	Firm's address ▶				Phone no.

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

1 Briefly describe the organization's mission:

Continue the healing ministry of Christ by providing accessible, quality healthcare services at a reasonable cost in an atmosphere that fosters respect and compassion.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 1,488,328,956 including grants of \$ 7,534,395) (Revenue \$ 1,812,087,873)
See Additional Data

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 1,488,328,956

Part IV Checklist of Required Schedules

Table with 3 columns: Question Number, Question Text, Yes, No. Rows include questions 1 through 21 regarding organizational requirements, such as political activities, lobbying, and financial reporting.

Part IV Checklist of Required Schedules (continued)

		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22 Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23 Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	No
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b	No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26	No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27	No
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	28a	No
b	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>	28b	No
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c	No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29 Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33 Yes	
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34 Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	No
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38 Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a 301	
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b 0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

<p>2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return</p>	<p>2a 10,156</p>		
<p>b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.</p>	<p>2b</p>	<p>Yes</p>	
<p>3a Did the organization have unrelated business gross income of \$1,000 or more during the year?</p>	<p>3a</p>	<p>Yes</p>	
<p>b If "Yes," has it filed a Form 990-T for this year?<i>If "No" to line 3b, provide an explanation in Schedule O</i></p>	<p>3b</p>	<p>Yes</p>	
<p>4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?</p>	<p>4a</p>		<p>No</p>
<p>b If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).</p>			
<p>5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</p>	<p>5a</p>		<p>No</p>
<p>b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</p>	<p>5b</p>		<p>No</p>
<p>c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?</p>	<p>5c</p>		
<p>6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?</p>	<p>6a</p>		<p>No</p>
<p>b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?</p>	<p>6b</p>		
<p>7 Organizations that may receive deductible contributions under section 170(c).</p>			
<p>a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?</p>	<p>7a</p>		<p>No</p>
<p>b If "Yes," did the organization notify the donor of the value of the goods or services provided?</p>	<p>7b</p>		
<p>c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?</p>	<p>7c</p>		<p>No</p>
<p>d If "Yes," indicate the number of Forms 8282 filed during the year</p>	<p>7d</p>		
<p>e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?</p>	<p>7e</p>		<p>No</p>
<p>f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?</p>	<p>7f</p>		<p>No</p>
<p>g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?</p>	<p>7g</p>		
<p>h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?</p>	<p>7h</p>		
<p>8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?</p>	<p>8</p>		
<p>9 Sponsoring organizations maintaining donor advised funds.</p>			
<p>a Did the sponsoring organization make any taxable distributions under section 4966?</p>	<p>9a</p>		
<p>b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?</p>	<p>9b</p>		
<p>10 Section 501(c)(7) organizations. Enter:</p>			
<p>a Initiation fees and capital contributions included on Part VIII, line 12</p>	<p>10a</p>		
<p>b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities</p>	<p>10b</p>		
<p>11 Section 501(c)(12) organizations. Enter:</p>			
<p>a Gross income from members or shareholders</p>	<p>11a</p>		
<p>b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)</p>	<p>11b</p>		
<p>12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?</p>			
<p>b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.</p>	<p>12b</p>		
<p>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</p>			
<p>a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.</p>	<p>13a</p>		
<p>b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans</p>	<p>13b</p>		
<p>c Enter the amount of reserves on hand</p>	<p>13c</p>		
<p>14a Did the organization receive any payments for indoor tanning services during the tax year?</p>	<p>14a</p>		<p>No</p>
<p>b If "Yes," has it filed a Form 720 to report these payments?<i>If "No," provide an explanation in Schedule O</i></p>	<p>14b</p>		
<p>15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.</p>	<p>15</p>	<p>Yes</p>	
<p>16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.</p>	<p>16</p>		<p>No</p>
<p>17 Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.</p>	<p>17</p>		

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI



Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a (14), 1b (10), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed
18 Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records:

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

Table with columns (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax under sections 512 - 514. Rows include Contributions, Gifts, Grants and Other Similar Amounts; Program Service Revenue; and Other Revenue.

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, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	7,527,995	7,527,995		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	6,400	6,400		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	0	0		
4 Benefits paid to or for members	0	0		
5 Compensation of current officers, directors, trustees, and key employees	3,284,998	1,642,499	1,642,499	0
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
7 Other salaries and wages	693,657,401	582,672,217	110,985,184	0
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	28,665,625	24,079,125	4,586,500	0
9 Other employee benefits	127,727,742	107,291,303	20,436,439	0
10 Payroll taxes	46,693,221	39,222,306	7,470,915	0
11 Fees for services (non-employees):				
a Management	6,015,648	4,271,110	1,744,538	0
b Legal	648,622	324,311	324,311	0
c Accounting	750,968	375,484	375,484	0
d Lobbying	0	0	0	0
e Professional fundraising services. See Part IV, line 17	0			0
f Investment management fees	0	0	0	0
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	116,533,482	82,738,772	33,794,710	0
12 Advertising and promotion	84,080	59,697	24,383	0
13 Office expenses	77,424,256	54,971,222	22,453,034	0
14 Information technology	9,796,608	6,955,592	2,841,016	0
15 Royalties	200,514	142,365	58,149	0
16 Occupancy	36,443,014	25,874,540	10,568,474	0
17 Travel	609,697	432,885	176,812	0
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19 Conferences, conventions, and meetings	810,401	575,385	235,016	0
20 Interest	28,256,266	20,061,949	8,194,317	0
21 Payments to affiliates	0	0	0	0
22 Depreciation, depletion, and amortization	122,177,984	86,746,369	35,431,615	0
23 Insurance	28,941,849	20,548,713	8,393,136	0
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.)				
a Hospital/Medical Supplies	375,180,278	375,180,278	0	0
b Patient Transportation	4,183,374	4,183,374	0	0
c Patient Reference Lab	7,110,013	7,110,013	0	0
d AHCA NICA ASSESSMENTS	20,941,247	20,941,247	0	0
e All other expenses	20,272,969	14,393,805	5,879,164	0
25 Total functional expenses. Add lines 1 through 24e	1,763,944,652	1,488,328,956	275,615,696	0
26 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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part IX

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	13,346	1	76,776
	2 Savings and temporary cash investments	0	2	0
	3 Pledges and grants receivable, net	0	3	0
	4 Accounts receivable, net	291,242,523	4	353,297,832
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0	5	0
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) . . .	0	6	0
	7 Notes and loans receivable, net	0	7	0
	8 Inventories for sale or use	28,955,028	8	31,201,124
	9 Prepaid expenses and deferred charges	13,434,407	9	16,913,048
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 2,585,218,638		
	b Less: accumulated depreciation	10b 1,258,518,252	1,166,512,606	10c 1,326,700,386
	11 Investments—publicly traded securities	2,005,029,542	11	1,544,177,978
	12 Investments—other securities. See Part IV, line 11	0	12	
	13 Investments—program-related. See Part IV, line 11	0	13	
	14 Intangible assets	5,754,175	14	5,754,175
	15 Other assets. See Part IV, line 11	601,982,624	15	551,924,715
16 Total assets. Add lines 1 through 15 (must equal line 33)	4,112,924,251	16	3,830,046,034	
Liabilities	17 Accounts payable and accrued expenses	522,545,934	17	462,099,440
	18 Grants payable	0	18	0
	19 Deferred revenue	0	19	0
	20 Tax-exempt bond liabilities	793,822,621	20	860,038,500
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0	22	0
	23 Secured mortgages and notes payable to unrelated third parties	0	23	0
	24 Unsecured notes and loans payable to unrelated third parties	0	24	0
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D	212,869,395	25	150,949,641
	26 Total liabilities. Add lines 17 through 25	1,529,237,950	26	1,473,087,581
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	2,356,902,831	27	2,165,613,004
	28 Net assets with donor restrictions	226,783,470	28	191,345,449
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds	0	29	0
	30 Paid-in or capital surplus, or land, building or equipment fund	0	30	0
	31 Retained earnings, endowment, accumulated income, or other funds	0	31	0
32 Total net assets or fund balances	2,583,686,301	32	2,356,958,453	
33 Total liabilities and net assets/fund balances	4,112,924,251	33	3,830,046,034	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,055,168,392
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,763,944,652
3	Revenue less expenses. Subtract line 2 from line 1	3	291,223,740
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,583,686,301
5	Net unrealized gains (losses) on investments	5	-393,355,129
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-124,596,459
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	2,356,958,453

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		No
2b	Yes	
2c	Yes	
3a	Yes	
3b	Yes	

Additional Data

Software ID: 21014044

Software Version: 2021v4.2

EIN: 59-0747311

Name: Southern Baptist Hospital of Florida Inc

Form 990 (2021)

Form 990, Part III, Line 4a:

Southern Baptist Hospital of Florida, Inc. (SBHF) is a subsidiary of Baptist Health System, Inc. (Baptist Health), a tax-exempt parent company located in Jacksonville, Florida. SBHF is a tax-exempt organization that operates two acute care hospitals, Baptist Medical Center (Baptist Jacksonville) and Baptist Medical Center South (Baptist South), and four emergency departments: Baptist Emergency Center Clay, Baptist Emergency Town Center, Baptist Emergency Center North, and Baptist Emergency Center Oakleaf. The two hospitals have 762 and 357 licensed beds, respectively. Baptist Jacksonville is a full-service, magnet-designated tertiary care hospital representing nearly all major specialties. This flagship hospital is also home to the Baptist Heart Hospital, offering comprehensive, high-quality cardiovascular care, and Wolfson Children's Hospital (WCH), the only full-service tertiary hospital for children in the region, serving North Florida, South Georgia, and beyond. WCH is a pediatric trauma referral center and is recognized year after year as one of America's best children's hospitals by U.S. News World Report. WCH serves as the main teaching facility for the University of Florida College of Medicine's Pediatric Residency Training Program. For fiscal year 2022, SBHF had 73,248 admissions accounting for 326,081 inpatient observation days, 316,407 emergency room visits, and 40,793 surgeries. SBHF's primary focus is addressing unmet health needs, particularly among vulnerable populations who have limited health resources and access to health care. SBHF's community health efforts are guided by the community health committee, which is comprised of selected Baptist Health board members from across our health system. A cornerstone of SBHF's commitment to the community is caring for the health of vulnerable, uninsured and underserved people among us. During fiscal year 2022, SBHF provided the following uncompensated care and community benefit; (1) charity care - \$38.8 million, (2) unreimbursed Medicaid costs - \$78.8 million, (3) unreimbursed Medicare costs - \$121.5 million, and (4) specific community programs - \$22.7 million, for a total of \$261.8 million of uncompensated care and community benefits. MD Anderson Cancer Center and Baptist Health have united to create Baptist MD Anderson Cancer Center. This partnership brings together MD Anderson's world-renowned cancer expertise and Baptist Health's comprehensive health system to create an unprecedented range of options for adult cancer patients in our region. The goal of the partnership is to provide the same high-level, multidisciplinary cancer care to patients in Northeast Florida that is available to MD Anderson patients in Houston. This includes all aspects along the continuum of cancer care -- patient care, research, education and prevention. The following are some of the awards and honors received by Baptist Jacksonville and Baptist South: (1) recipient of American Heart Association's Get with the Guidelines Stroke Quality achievement award. (Baptist Jacksonville Baptist South), (2) ranked by U.S. News World Report's Best Hospitals in two pediatric specialties - neurology and neurosurgery at Wolfson Children's Hospital during 2022. (3) U.S. News World Report recognized the Neurology and Neurosurgery programs at Baptist Jacksonville and South as "High Performing" in their annual best hospitals list. In addition, the two hospitals ranked No. 2 in the metro Jacksonville region, and 11th best hospital in Florida (4) Leapfrog A and B safety grades (Baptist South - A-rating and Baptist Jacksonville - B rating), (5) Leapfrog named Wolfson Children's Hospital as a Top Children's Hospital, and (6) 2017-22 Magnet re-designation. Baptist Health is the first and only health system in North Florida to achieve Magnet recognition as a health system by the American Nurses Credentialing Center. Currently, only eight percent of the hospitals in the United States enjoy magnet designation, which is considered the gold standard for recognizing quality patient care, nursing excellence and innovations in professional nursing practice, an honor first earned in 2007. Many other awards and honors can be viewed at the organization's website www.baptistjax.com.

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Asghar A Syed Vice Chair	0.5	X		X				0	0	0
Michael A Mayo DHA President	0.5 39.5	X		X				184,673	1,172,820	47,469
Michael K Diaz Chair	0.5 0.2	X		X				0	0	0
Rev Kyle T Reese Secretary/Treasurer	0.5 0.1	X		X				0	0	0
Barbara G Jaffe Director	0.1 0	X						0	0	0
Eric Mann Director	0.1 0	X						0	0	0
Ken Babby Director	0.1 0	X						0	0	0
Kyle Etz Korn MD Director	0.1 0.1	X						0	0	0
Mark LaBorde Director	0.1 0	X						0	0	0
Marsha Oliver Director	0.1 0.1	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Matthew A Zuino Director	0.1 39.9	X						0	876,582	135,841
MC Harden III Director	0.1 0	X						0	0	0
Pam Chally RNPHD Director	0.1 0.2	X						0	0	0
Rachel Tutwiler Director	0.1 0	X						0	0	0
Richard D Glock MD Director	0.1 39.9	X						0	28	0
G Scott Baily Esq Asst. Secretary	0.3 39.7			X				0	695,986	136,761
Keith A Tickell Asst. Treasurer	0.3 39.7			X				0	896,267	27,396
Kyle M Dorsey Former Interim SVP (As of 01.03.22)	40.0 0			X				400,823	0	37,929
Nicole Thomas SVP	40.0 0			X				742,463	0	121,461
Scott M Wooten Former Asst. Treasurer (As of 12.28.21)	0.3 39.7			X				0	1,011,917	288,355

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
T Scott Finnegan Asst. Treasurer	0.3 39.7			X				0	424,589	121,812
Cicely Brooks VP, Patient Care Services, BMC	40.0 0					X		369,438	0	85,394
Darin Roark Hospital President, CLA	40.0 0					X		455,588	0	95,264
Jerry Bridgham VP, Medical Affairs - WCH	40.0 0					X		547,036	0	32,669
Savitha Puttaiah Psychiatrist - Inpatient	40.0 0					X		417,116	0	27,727
Shariq Refai Physician - Psychiatrist	40.0 0					X		501,301	0	20,602
Brett S McClung Former President/CEO (AS OF 05.01.21)	0.0 0.0						X	0	2,130,059	11,393
David V Rice MD Former SVP/CMO/CQO (As of 07.08.21)	0.0 40.0						X	0	195,589	124,291
Elizabeth R Ransom MD Former EVP/CPE (As of 08.15.21)	0.0 40.0						X	0	1,242,210	27,537
Mary Ellen Schopp Former SVP/CHRO (As of 07.08.21)	0.0 40.0						X	0	883,416	14,856

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Melanie J Husk Former SVP/CCO (As of 07.08.21)	0.0 40.0						X	0	603,477	35,171
Michael A Aubin Former SVP (As of 07.08.21)	39.5 0.5						X	1,131,137	0	37,070

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization Southern Baptist Hospital of Florida Inc	Employer identification number 59-0747311
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Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:

- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:
- 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations _____
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III.
 If the organization failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. . . .						
3 The value of services or facilities furnished by a governmental unit to the organization without charge..						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . .						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4. . .						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . . .						
9 Net income from unrelated business activities, whether or not the business is regularly carried on. . .						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). . .						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2021 (line 6, column (f) divided by line 11, column (f))	14	
15 Public support percentage for 2020 Schedule A, Part II, line 14	15	
16a 33 1/3% support test—2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b 33 1/3% support test—2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►		(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
c	Add lines 7a and 7b.						
8	Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►		(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6.						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c	Add lines 10a and 10b.						
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on.						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here.**

Section C. Computation of Public Support Percentage

15	Public support percentage for 2021 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2020 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2021 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2020 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2021. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2020. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, of Part I, complete Sections A and B. If you checked box 12b, of Part I, complete Sections A and C. If you checked box 12c, of Part I, complete Sections A, D, and E. If you checked box 12d, of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
	9b		
c	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
	10a		
b	Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).</i>		
	10b		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
b	A family member of a person described on 11a above?		
c	A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to 11a, 11b, or 11c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the officers, directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3	By reason of the relationship described in line 2 above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)		
2	Activities Test. Answer lines 2a and 2b below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b	Did the activities described on line 2a, above constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No," provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1** Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	1	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4 Amounts paid to acquire exempt-use assets	4	
5 Qualified set-aside amounts (<i>prior IRS approval required - provide details in Part VI</i>)	5	
6 Other distributions (<i>describe in Part VI</i>). See instructions	6	
7 Total annual distributions. Add lines 1 through 6.	7	
8 Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions	8	
9 Distributable amount for 2021 from Section C, line 6	9	
10 Line 8 amount divided by Line 9 amount	10	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1 Distributable amount for 2021 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2021 (reasonable cause required-- <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2021:			
a From 2016.			
b From 2017.			
c From 2018.			
d From 2019.			
e From 2020.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2021 distributable amount			
i Carryover from 2016 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2021 from Section D, line 7:			
\$			
a Applied to underdistributions of prior years			
b Applied to 2021 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2022. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2017.			
b Excess from 2018.			
c Excess from 2019.			
d Excess from 2020.			
e Excess from 2021.			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

SCHEDULE D (Form 990) Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

OMB No. 1545-0047 2021 Open to Public Inspection

Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization Southern Baptist Hospital of Florida Inc

Employer identification number 59-0747311

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and questions about donor notification.

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Form for Part II Conservation Easements. Includes checkboxes for types of easements, a table for held at the end of the year (2a-2d), and questions about monitoring and expenses.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Includes questions about reporting works of art and assets.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . . **Yes** **No**

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---|--------|
| 1c Beginning balance | |
| 1d Additions during the year | |
| 1e Distributions during the year | |
| 1f Ending balance | |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	199,176,213	169,024,389	159,298,707	148,666,240	130,883,252
b Contributions	5,930,225	9,554,851	10,350,719	10,502,965	15,629,958
c Net investment earnings, gains, and losses	-24,903,090	27,968,132	5,794,248	4,337,729	6,676,974
d Grants or scholarships	0	0	0	0	0
e Other expenditures for facilities and programs	8,389,581	7,371,159	6,419,285	4,208,227	4,523,944
f Administrative expenses	0	0	0	0	0
g End of year balance	171,813,767	199,176,213	169,024,389	159,298,707	148,666,240

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment ▶ 0.76 %
 - b** Permanent endowment ▶ 94.15 %
 - c** Term endowment ▶ 5.09 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|-----|----|
| (i) Unrelated organizations | No | |
| (ii) Related organizations | Yes | |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | Yes | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	0	35,305,967		35,305,967
b Buildings	0	1,471,307,487	552,232,031	919,075,456
c Leasehold improvements	0	8,727,893	5,485,237	3,242,656
d Equipment	0	886,622,267	695,040,739	191,581,528
e Other	0	183,255,024	5,760,245	177,494,779
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				1,326,700,386

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments - Program Related.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)		

Part IX Other Assets.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) Other assets	49,368,744
(2) Interest in net assets of Baptist Health System Foundation, Inc.	190,370,417
(3) Due From Affiliated Organizations	53,695,749
(4) Advances to Affiliated Organizations	118,005,958
(5) Excess Self Insurance Receivable	13,369,695
(6) Direct Payment Program Receivable	44,473,012
(7) Internally Developed Software	79,079,239
(8) Cloud Computing Arrangement	32,524
(9) Lease Right of Use Asset	3,529,377
(10)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)	551,924,715

Part X Other Liabilities.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	0
(2) All other liabilities	2,622,118
(3) WORKER'S COMP. SELF-INSURANCE TRUST	4,731,666
(4) ESTIMATED THIRD-PARTY SETTLEMENTS	14,521,481
(5) PENSION SERP LIABILITY	54,053,425
(6) HOSPITAL SELF-INSURANCE TRUST	71,687,255
(7) LONG TERM LEASE LIABILITY	3,333,696
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	150,949,641

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID: 21014044
Software Version: 2021v4.2
EIN: 59-0747311
Name: Southern Baptist Hospital of Florida Inc

Form 990, Schedule D, Part IX, - Other Assets

(a) Description	(b) Book value
Other assets	49,368,744
Interest in net assets of Baptist Health System Foundation, Inc.	190,370,417
Due From Affiliated Organizations	53,695,749
Advances to Affiliated Organizations	118,005,958
Excess Self Insurance Receivable	13,369,695
Direct Payment Program Receivable	44,473,012
Internally Developed Software	79,079,239
Cloud Computing Arrangement	32,524
Lease Right of Use Asset	3,529,377

Supplemental Information

Return Reference	Explanation
Schedule D, Part V, Line 4 Intended uses of endowment funds	SOUTHERN BAPTIST HOSPITAL OF FLORIDA, INC. (SBHF) ENDOWMENT FUNDS ARE HELD BY ITS RELATED AFFILIATE, BAPTIST HEALTH SYSTEM FOUNDATION, INC. (BHF). BHF'S ENDOWMENT POLICY ALLOWS ANNUALLY THAT UP TO 5% OF THE COMBINED ENDOWMENT CORPUS AND ACCUMULATED EARNINGS BECOME AVAILABLE FOR SPENDING ON CAPITAL PROJECTS OF SBHF.

Supplemental Information

Return Reference	Explanation
Schedule D, Part X, Line 2 FIN 48 (ASC 740) footnote	With few exceptions, Southern Baptist Hospital of Florida, Inc. is no longer subject to examinations by major tax jurisdictions for years ended September 30, 2018 and prior. Management does not believe there are any material uncertain positions.

SCHEDULE H (Form 990)
 Department of the Treasury
 Internal Revenue Service

Hospitals

OMB No. 1545-0047
2021
 Open to Public Inspection

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, question 20.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990EZ for instructions and the latest information.

Name of the organization
 Southern Baptist Hospital of Florida Inc

Employer identification number
 59-0747311

Part I Financial Assistance and Certain Other Community Benefits at Cost

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

Complete the following table using the worksheets provided in the Schedule H instructions. Do not submit these worksheets with the Schedule H.

7 Financial Assistance and Certain Other Community Benefits at Cost

Financial Assistance and Means-Tested Government Programs	(a) Number of activities or programs (optional)	(b) Persons served (optional)	(c) Total community benefit expense	(d) Direct offsetting revenue	(e) Net community benefit expense	(f) Percent of total expense
a Financial Assistance at cost (from Worksheet 1)			38,767,772	0	38,767,772	2.20 %
b Medicaid (from Worksheet 3, column a)			272,126,001	193,372,648	78,753,353	4.46 %
c Costs of other means-tested government programs (from Worksheet 3, column b)			0	0	0	0 %
d Total Financial Assistance and Means-Tested Government Programs	0	0	310,893,773	193,372,648	117,521,125	6.66 %
Other Benefits						
e Community health improvement services and community benefit operations (from Worksheet 4).			2,035,351	0	2,035,351	0.12 %
f Health professions education (from Worksheet 5)			3,368,077	0	3,368,077	0.19 %
g Subsidized health services (from Worksheet 6)			22,200,157	9,439,625	12,760,532	0.72 %
h Research (from Worksheet 7)			0	0	0	0 %
i Cash and in-kind contributions for community benefit (from Worksheet 8)			4,579,701	0	4,579,701	0.26 %
j Total. Other Benefits	0	0	32,183,286	9,439,625	22,743,661	1.29 %
k Total. Add lines 7d and 7j	0	0	343,077,059	202,812,273	140,264,786	7.95 %

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

	(a) Number of activities or programs (optional)	(b) Persons served (optional)	(c) Total community building expense	(d) Direct offsetting revenue	(e) Net community building expense	(f) Percent of total expense
1 Physical improvements and housing					0	0 %
2 Economic development					0	0 %
3 Community support	2				0	0 %
4 Environmental improvements					0	0 %
5 Leadership development and training for community members					0	0 %
6 Coalition building	41				0	0 %
7 Community health improvement advocacy	25				0	0 %
8 Workforce development	1				0	0 %
9 Other	2				0	0 %
10 Total	71	0	0	0	0	0 %

Part III Bad Debt, Medicare, & Collection Practices

Section A. Bad Debt Expense

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

Section B. Medicare

5 Enter total revenue received from Medicare (including DSH and IME)	5	454,104,206
6 Enter Medicare allowable costs of care relating to payments on line 5	6	575,659,608
7 Subtract line 6 from line 5. This is the surplus (or shortfall)	7	-121,555,402
8 Describe in Part VI the extent to which any shortfall reported in line 7 should be treated as community benefit. Also describe in Part VI the costing methodology or source used to determine the amount reported on line 6. Check the box that describes the method used: <input checked="" type="checkbox"/> Cost accounting system <input type="checkbox"/> Cost to charge ratio <input type="checkbox"/> Other		

Section C. Collection Practices

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

Part IV Management Companies and Joint Ventures

(a) Name of entity (owned 10% or more by officers, directors, trustees, key employees, and physicians—see instructions)	(b) Description of primary activity of entity	(c) Organization's profit % or stock ownership %	(d) Officers, directors, trustees, or key employees' profit % or stock ownership %	(e) Physicians' profit % or stock ownership %
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				

Part V Facility Information**Section A. Hospital Facilities**

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

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

2

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

	Licensed hospital	General medical & surgical	Children's hospital	Teaching hospital	Critical access hospital	Research facility	ER-24 hours	ER-other	Other (describe)	Facility reporting group
See Additional Data Table										

Part V Facility Information (continued)

Section B. Facility Policies and Practices

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

Name of hospital facility or letter of facility reporting group _____

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

		Yes	No
Community Health Needs Assessment			
1	Was the hospital facility first licensed, registered, or similarly recognized by a state as a hospital facility in the current tax year or the immediately preceding tax year?		No
2	Was the hospital facility acquired or placed into service as a tax-exempt hospital in the current tax year or the immediately preceding tax year? If "Yes," provide details of the acquisition in Section C.		No
3	During the tax year or either of the two immediately preceding tax years, did the hospital facility conduct a community health needs assessment (CHNA)? If "No," skip to line 12. If "Yes," indicate what the CHNA report describes (check all that apply):	Yes	
a	<input checked="" type="checkbox"/> A definition of the community served by the hospital facility		
b	<input checked="" type="checkbox"/> Demographics of the community		
c	<input checked="" type="checkbox"/> Existing health care facilities and resources within the community that are available to respond to the health needs of the community		
d	<input checked="" type="checkbox"/> How data was obtained		
e	<input checked="" type="checkbox"/> The significant health needs of the community		
f	<input checked="" type="checkbox"/> Primary and chronic disease needs and other health issues of uninsured persons, low-income persons, and minority groups		
g	<input checked="" type="checkbox"/> The process for identifying and prioritizing community health needs and services to meet the community health needs		
h	<input checked="" type="checkbox"/> The process for consulting with persons representing the community's interests		
i	<input checked="" type="checkbox"/> The impact of any actions taken to address the significant health needs identified in the hospital facility's prior CHNA(s)		
j	<input type="checkbox"/> Other (describe in Section C)		
4	Indicate the tax year the hospital facility last conducted a CHNA: 20 <u>21</u>		
5	In conducting its most recent CHNA, did the hospital facility take into account input from persons who represent the broad interests of the community served by the hospital facility, including those with special knowledge of or expertise in public health? If "Yes," describe in Section C how the hospital facility took into account input from persons who represent the community, and identify the persons the hospital facility consulted	Yes	
6 a	Was the hospital facility's CHNA conducted with one or more other hospital facilities? If "Yes," list the other hospital facilities in Section C	Yes	
b	Was the hospital facility's CHNA conducted with one or more organizations other than hospital facilities? If "Yes," list the other organizations in Section C.		No
7	Did the hospital facility make its CHNA report widely available to the public? If "Yes," indicate how the CHNA report was made widely available (check all that apply):	Yes	
a	<input checked="" type="checkbox"/> Hospital facility's website (list url): <u>https://www.baptistjax.com/about-us/social-responsibility/assessing-community-health-needs</u>		
b	<input checked="" type="checkbox"/> Other website (list url): <u>http://www.hpcnef.org/jacksonville-nonprofit-hospital-partnership-community-health-needs-assessment/</u>		
c	<input checked="" type="checkbox"/> Made a paper copy available for public inspection without charge at the hospital facility		
d	<input checked="" type="checkbox"/> Other (describe in Section C)		
8	Did the hospital facility adopt an implementation strategy to meet the significant community health needs identified through its most recently conducted CHNA? If "No," skip to line 11.	Yes	
9	Indicate the tax year the hospital facility last adopted an implementation strategy: 20 <u>21</u>		
10	Is the hospital facility's most recently adopted implementation strategy posted on a website? <u>https://www.baptistjax.com/about-us/social-responsibility/assessing-community-health-needs</u>	Yes	
a	If "Yes" (list url): <u>health-needs</u>		
b	If "No," is the hospital facility's most recently adopted implementation strategy attached to this return?		
11	Describe in Section C how the hospital facility is addressing the significant needs identified in its most recently conducted CHNA and any such needs that are not being addressed together with the reasons why such needs are not being addressed.		
12a	Did the organization incur an excise tax under section 4959 for the hospital facility's failure to conduct a CHNA as required by section 501(r)(3)?		No
b	If "Yes" on line 12a, did the organization file Form 4720 to report the section 4959 excise tax?		
c	If "Yes" on line 12b, what is the total amount of section 4959 excise tax the organization reported on Form 4720 for all of its hospital facilities? \$ _____		

Part V Facility Information (continued)

Financial Assistance Policy (FAP)

A

Name of hospital facility or letter of facility reporting group _____

		Yes	No
Did the hospital facility have in place during the tax year a written financial assistance policy that:			
13	Explained eligibility criteria for financial assistance, and whether such assistance included free or discounted care? If "Yes," indicate the eligibility criteria explained in the FAP:	13 Yes	
a	<input checked="" type="checkbox"/> Federal poverty guidelines (FPG), with FPG family income limit for eligibility for free care of <u>200.0</u> % and FPG family income limit for eligibility for discounted care of <u>400.0</u> %		
b	<input type="checkbox"/> Income level other than FPG (describe in Section C)		
c	<input checked="" type="checkbox"/> Asset level		
d	<input checked="" type="checkbox"/> Medical indigency		
e	<input checked="" type="checkbox"/> Insurance status		
f	<input checked="" type="checkbox"/> Underinsurance discount		
g	<input checked="" type="checkbox"/> Residency		
h	<input type="checkbox"/> Other (describe in Section C)		
14	Explained the basis for calculating amounts charged to patients?	14 Yes	
15	Explained the method for applying for financial assistance? If "Yes," indicate how the hospital facility's FAP or FAP application form (including accompanying instructions) explained the method for applying for financial assistance (check all that apply):	15 Yes	
a	<input checked="" type="checkbox"/> Described the information the hospital facility may require an individual to provide as part of his or her application		
b	<input checked="" type="checkbox"/> Described the supporting documentation the hospital facility may require an individual to submit as part of his or her application		
c	<input checked="" type="checkbox"/> Provided the contact information of hospital facility staff who can provide an individual with information about the FAP and FAP application process		
d	<input checked="" type="checkbox"/> Provided the contact information of nonprofit organizations or government agencies that may be sources of assistance with FAP applications		
e	<input type="checkbox"/> Other (describe in Section C)		
16	Was widely publicized within the community served by the hospital facility? If "Yes," indicate how the hospital facility publicized the policy (check all that apply):	16 Yes	
a	<input checked="" type="checkbox"/> The FAP was widely available on a website (list url): <u>https://www.baptistjax.com/patient-info/financial-assistance</u>		
b	<input checked="" type="checkbox"/> The FAP application form was widely available on a website (list url): <u>https://www.baptistjax.com/patient-info/financial-assistance</u>		
c	<input checked="" type="checkbox"/> A plain language summary of the FAP was widely available on a website (list url): <u>https://www.baptistjax.com/patient-info/financial-assistance</u>		
d	<input checked="" type="checkbox"/> The FAP was available upon request and without charge (in public locations in the hospital facility and by mail)		
e	<input checked="" type="checkbox"/> The FAP application form was available upon request and without charge (in public locations in the hospital facility and by mail)		
f	<input checked="" type="checkbox"/> A plain language summary of the FAP was available upon request and without charge (in public locations in the hospital facility and by mail)		
g	<input checked="" type="checkbox"/> Individuals were notified about the FAP by being offered a paper copy of the plain language summary of the FAP, by receiving a conspicuous written notice about the FAP on their billing statements, and via conspicuous public displays or other measures reasonably calculated to attract patients' attention		
h	<input checked="" type="checkbox"/> Notified members of the community who are most likely to require financial assistance about availability of the FAP		
i	<input checked="" type="checkbox"/> The FAP, FAP application form, and plain language summary of the FAP were translated into the primary language(s) spoken by LEP populations		
j	<input type="checkbox"/> Other (describe in Section C)		

Part V Facility Information (continued)

Billing and Collections

A

Name of hospital facility or letter of facility reporting group _____

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

Policy Relating to Emergency Medical Care

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

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

A

Name of hospital facility or letter of facility reporting group _____

22 Indicate how the hospital facility determined, during the tax year, the maximum amounts that can be charged to FAP-eligible individuals for emergency or other medically necessary care.

- a The hospital facility used a look-back method based on claims allowed by Medicare fee-for-service during a prior 12-month period
- b The hospital facility used a look-back method based on claims allowed by Medicare fee-for-service and all private health insurers that pay claims to the hospital facility during a prior 12-month period
- c The hospital facility used a look-back method based on claims allowed by Medicaid, either alone or in combination with Medicare fee-for-service and all private health insurers that pay claims to the hospital facility during a prior 12-month period
- d The hospital facility used a prospective Medicare or Medicaid method

23 During the tax year, did the hospital facility charge any FAP-eligible individual to whom the hospital facility provided emergency or other medically necessary services more than the amounts generally billed to individuals who had insurance covering such care?

If "Yes," explain in Section C.

24 During the tax year, did the hospital facility charge any FAP-eligible individual an amount equal to the gross charge for any service provided to that individual?

If "Yes," explain in Section C.

	Yes	No
23		No
24		No

Part V Facility Information (continued)**Section D. Other Health Care Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility**

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

How many non-hospital health care facilities did the organization operate during the tax year? 10

Name and address	Type of Facility (describe)
1 BAPTIST EMERGENCY CENTER NORTH 11250 BAPTIST HEALTH DRIVE JACKSONVILLE, FL 32218	EMERGENCY AND PRIMARY CARE, SPECIALIST PHYSICIAN OFFICES, IMAGING, AND LABS FOR ADULTS AND CHILDREN.
2 BAPTIST EMERGENCY CENTER CLAY 1771 BAPTIST CLAY DR FLEMING ISLAND, FL 32003	THE FACILITY FEATURES AN EMERGENCY CENTER WITH SEPARATE WAITING AREAS AND EXAM ROOMS FOR CHILDREN.
3 BAPTIST EMERGENCY TOWN CENTER 841 PRUDENTIAL DR STE 1802 JACKSONVILLE, FL 32207	THE FACILITY FEATURES TWO EMERGENCY CENTERS UNDER ONE ROOF; ONE FOR CHILDREN AND ONE FOR ADULTS.
4 BAPTIST EMERGENCY CENTER OAKLEAF 9868 FAMILY PLACE JACKSONVILLE, FL 32222	THE FACILITY FEATURES TWO EMERGENCY CENTERS UNDER ONE ROOF; ONE FOR CHILDREN AND ONE FOR ADULTS.
5 BAPTIST MD ANDERSON CANCER CENTER 1301 PALM AVENUE JACKSONVILLE, FL 32207	The facility offers cutting-edge research and serves as a hub for all cancer care needs.
6 BAPTIST BEHAVIORAL HEALTH 800 PRUDENTIAL DR JACKSONVILLE, FL 32207	COMPREHENSIVE MENTAL HEALTH SERVICES AT BAPTIST MEDICAL CENTER JACKSONVILLE'S HOSPITAL CAMPUS.
7 Baptist BEHAVIORAL HEALTH 1350 13TH AVE SOUTH Jacksonville BEACH, FL 32250	COMPREHENSIVE MENTAL HEALTH SERVICES AT BAPTIST MEDICAL CENTER BEACHES HOSPITAL CAMPUS.
8 Baptist BEHAVIORAL HEALTH 1250 SOUTH 18TH STREET FERNANDINA BEACH, FL 32034	COMPREHENSIVE MENTAL HEALTH SERVICES AT BAPTIST MEDICAL CENTER NASSAU'S HOSPITAL CAMPUS.
9 BAPTIST BEHAVIORAL HEALTH 14550 Old St Augustine Road JACKSONVILLE, FL 32258	COMPREHENSIVE MENTAL HEALTH SERVICES AT BAPTIST MEDICAL CENTER SOUTH'S HOSPITAL CAMPUS.
10 BAPTIST BEHAVIORAL HEALTH 800 PRUDENTIAL DR JACKSONVILLE, FL 32207	COMPREHENSIVE MENTAL HEALTH SERVICES AT WOLFSON CHILDREN'S HOSPITAL CAMPUS.

Part VI Supplemental Information

Provide the following information.

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

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part II, Line 3 Community Support	Tipping the Scale - Youth Mentoring Program: Twenty-two Baptist Health employees volunteered their time to provide one-to-one mentoring for 35 high school students every other week. The students who participate in the program are from our most vulnerable communities and low-income families. In this career guidance mentoring program, mentors introduce students to various careers in healthcare. In addition, they serve as supporters and encouragers for teens as they navigate the challenges of adolescence. Tipping the Scale - Summer Employment Experience: New employment opportunities are provided to teenagers 16-18 years old after successful completion of an eight-week job readiness training program. Teens are provided exposure to the scope of practice for one of their top three areas of career interest at our flagship hospital system. This exposure to real-life careers motivates them to prepare appropriately for their life after high school. Session topics included how to be successful on the job, resume writing, the interview and hiring process, money management, accountability and consequences, and interpersonal skills. Sixty teenagers participated in the job readiness training, but only 21 were a part of and completed the summer sessions with 18 at Baptist Medical Center Jacksonville.

Form and Line Reference	Explanation
Schedule H, Part II, Line 6 Coalition Building	<p>Baker County School Health Advisory Council - THE PLAYERS Center for Child Health participates in the Baker County School District's advisory council. The advisory council supports the school district's efforts to assess and design programs to help children develop the knowledge, skills, and attitudes they need to become healthy, productive citizens. Child Protection Team Child Death Review Committee - Reviews infant deaths to develop a community plan to reduce infant deaths. Wolfson Children's Hospital is an active member of the committee which review for all Northeast Florida surrounding counties: Baker, Clay, Duval, Nassau, and St. Johns. Clay County Community Health Improvement Plan Workgroups aim to improve health in Clay County, so that adults, children, and families are healthy participants living in their communities. Current workgroups focus on disease prevention and lifestyle behaviors; and behavioral health (to include mental health, mental health resources, and substance misuse). Clay County Community Partnership School - The Community Partnership School model is a community school in which four core community partners (a school district; a university/college; a non-profit; healthcare provider) commit to a long-term partnership (25 years) to establish, develop, and sustain the Community Partnership School. In this model, the school becomes a hub for the community where services are brought directly to the campus. Baptist Health has agreed to be the healthcare partner for the Community Partnership School at Wilkinson Junior High School in Clay County. The other partners are Aza Health, Clay County District Schools, Children's Home Society and St. Johns River State College. After a needs assessment is conducted and a strategic action plan is developed, Baptist Health will play the lead role in coordinating resources and other healthcare organizations to provide needed services onto the campus for students and the community. Clay County Department of Health Minority Health Equity Taskforce analyzes data and resources, coordinates existing efforts, and establishes collaborative initiatives to increase health equity within Clay County. The group addresses upstream factors to achieve this. Clay County School Health Advisory Council offers recommendations and advice to the Clay County School Board and Clay County Public Schools Administration on issues that relate to the health of children and their families. In accordance with the Centers for Disease Control Coordinated School Health Model, including, but not limited to matters pertaining to Health Education, Physical Education, Health Services, Nutrition Services, Counseling and Psychological Services, Healthy School Environment, Health Promotion for Staff, Family/Community Involvement, the Safe and Drug Free Schools Program and the Wellness Policy. Wolfson Children's Hospital is an active member of the Council. Clay, Duval, and St. Johns Counties Traffic Safety Teams consists of advocates who are committed to solving traffic safety problems through a comprehensive, multi-jurisdictional, multidisciplinary approach. Members include city, county, state, private industry, citizens, and Wolfson Children's Hospital. The goal is to reduce the number and severity of traffic crashes within their community. Clay Safety Net Alliance is a network of Clay County nonprofit, faith-based and local government agencies which bring support to the county's 200,000 residents. The group works to share resources and avoid duplication of services to Clay residents. Community-Based Crime Reduction (CBCR) Program was formed to address three main goals: reduce crime, increase mutual trust between police and neighborhood residents, and improve community safety. It is responsible for devising and recommending strategies to be implemented, along with being involved in the on-going work of making the focus area neighborhoods of Grand Park, New Town, Durkeville, and LaVilla safer. These target locations were chosen due to their now high crime and distressed neighborhoods. The program includes, but is not limited to, the following partners: Baptist Health, CareerSource of Northeast Florida, Citizen Planning Advisory Committee District (CPACD) 1 - Urban Core, CPACD 5 - Northwest Jacksonville, City of Jacksonville (COJ) Kids Hope Alliance, COJ Neighborhoods, COJ Parks, Recreation Social Services, COJ Public Works, Cultural Council of Greater Jacksonville, Edward Waters College, Emmanuel Missionary Baptist Church, Family Support Services, Florida Department of Health, Florida Department of Juvenile Justice, Florida State College at Jacksonville, Jacksonville Area Legal Aid, the Jacksonville Re-Entry Center, Jacksonville Sheriff's Office, LISC, Northwest Behavioral Health, Public Defender's Office, UF Health, United States Attorney's Office, and other churches and faith based organizations. Duval and St. Johns Child Abuse Death Review Committee - The local child abuse death review committee</p>

Form and Line Reference	Explanation
Schedule H, Part II, Line 6 Coalition Building	<p>ittee is a community group, which is sanctioned by the Governor's office and reviews all child deaths received by the Department of Children and Families. The CADR group uses the data from meetings to determine trends based on the numbers and causes of the deaths occurring in the respective counties, which are then used to determine and develop prevention in initiative/activities which are implemented to help prevent other child deaths. Duval County Community Health Improvement Plan Committee was developed to oversee implementation and monitoring of the CHIP action plans. IT is made up of community partners that are subject-matter experts in one or more of the fields associated with the CHIP's goals. Meetings are held to review the status of each objective and progress made to date, as well as to identify strategies to overcome barriers to reaching strategic objectives. Duval County Public Schools Behavioral Health Subcommittee - This committee collaborates to enhance the behavioral health of students within the Duval County Public Schools system. Processes are enhanced and streamlined to better coordinate available resources. Duval County Public Schools Health Education Committee - The purpose of the Health Education Committee (HEC) is to review programs, organizations, and speakers who would like to present in Duval County Public Schools on health topics. The committee is comprised of Duval County Public Schools staff, teachers, and community organization staff. Duval County School Health Advisory Council offers recommendations and advice to the Duval County School Board and Duval County Public Schools Administration on issues that relate to the health of children and their families. in accordance with the Centers for Disease Control Coordinated School Health Model, including, but not limited to matters pertaining to Health Education, Physical Education, Health Services, Nutrition Services, Counseling and Psychological Services, Healthy School Environment, Health Promotion for Staff, Family/Community Involvement, the Safe and Drug Free Schools Program and the Wellness Policy. Wolfson Children's Hospital is an active member of the Council. Episcopal Children's Services Health Services Advisory Council for Baker, Clay, Duval and Nassau counties provides a network of community connections to support Head Start and Early Head Start programs with integrated, comprehensive health services. Wolfson Children's Hospital representatives are active members in these councils and provide services to Head Start and Early Head Start centers such as health education and access to healthcare. Fetal Infant Mortality Review Committee aims to reduce infant mortality by gathering and reviewing detailed information to gain a better understanding of fetal and infant deaths in Northeast Florida. The project examines cases with the worst outcomes to identify gaps in maternal and infant services and to promote future improvements. Wolfson Children's Hospital and Baptist Health representatives are active members of the Committee. Florida Asthma Coalition's goal is to reduce the overall burden of asthma, focusing on minimizing the disproportionate impact of asthma in racial/ethnic and low-income populations, by promoting asthma awareness and disease prevention at the community level and expanding and improving the quality of asthma education, management, and services through system and policy changes. Wolfson Children's Hospital is an active member of the Asthma Coalition. Florida Mental Health Advocacy Coalition, through the local Nation Alliance on Mental Illness, is a non-profit, non-partisan coalition of organizations that advocate for policy changes to improve the quality of life for those who live with a mental illness and/or substance use disorder in the state of Florida.</p>

Form and Line Reference	Explanation
<p>Schedule H, Part II, Line 6 Coalition Building</p>	<p>Florida Occupant Protection Coalition - The Florida Occupant Protection Coalition (FOPC) was formed to identify and prioritize Florida's most pressing occupant protection issues. The Coalition reviews proven strategies and discusses promising new practices. The FOPC is developing a strategic plan that will serve as the blueprint for legislation, program, and funding strategies to maximize Florida's ability to reduce unrestrained motor vehicle occupant crashes. The FOPC is responsible for overseeing the implementation of the Occupant Protection Strategic Plan. Wolfson Children's Hospital is active on the coalition, providing a child passenger safety technician support. Florida PedBike SRC - The Florida Pedestrian and Bicycling Safety Resource Center coordinates the statewide bicycle helmet distribution program. The PedBike SRC also provides helmet fitter certification training, as well as provides free education materials and resources to address the many causes of pedestrian and bicycle crashes, injuries, and fatalities. Florida Teen Safe Driving Coalition is a coalition of more than 47 organizations committed to helping teens leverage the proven principles of Graduated Driver Licensing (GDL). The Florida Teen Safe Driving Coalition is affiliated with state and local government, law enforcement and public health agencies, traffic safety and injury prevention organizations, academia, and business. Full Service Schools Oversight Committee directs and guides the operation of Full Service Schools of Jacksonville led by United Way of Northeast Florida. Through Full Service Schools nearly 3,500 students and families are connected to a critical range of therapeutic, health and social services and address non-academic barriers to success in school. Each Full Service Schools site strives to meet the specific needs of the neighborhood in which it is based by providing several free services. Wolfson Children's Hospital is an active member of the Full Service Schools Oversight Committee. Healing Hands Community Advisory Council provides support to Healing Hands efforts to provide access to crisis intervention, case coordination, and medical services for at-risk children in Jacksonville and surrounding areas. The organization brings together physicians, psychologists, nurses, and other medical professionals who diagnose cases of childhood physical and sexual abuse. Wolfson Children's Hospital is an active member of the Healing Hands Advisory Council. Hope Healing Jax brings together those already working in Jacksonville to address unresolved trauma and Positive Adverse Childhood Experiences (PACEs) to promote healing and build resilience in children, families, individuals, and the community. Hope Healing Jax networks within Jacksonville to strengthen and grow existing efforts. Wolfson Children's Hospital is an active member on the Hope Healing Jax Steering Committee. Impact Clay helps the Clay County community meet the crucial social service needs of families, individuals, and children through collaborative projects. The organization links the private, public, nonprofit, and faith-based sectors to proactively improve the community. Infant Mortality Task Force Duval County - Baptist Health and Wolfson Children's Hospital are active members of the Duval County Infant Mortality Task Force. With the goal of reducing infant mortality, the task force reviews and addresses maternal and infant health issues specific to Duval County. Jacksonville Nonprofit Hospital Partnership came together to develop a multi-hospital system collaborative community health needs assessment. The Partnership is a network of five health systems that are a shared voice to improve population health by eliminating the gaps that prevent quality, integrated health care and to improve access to resources that support a healthier lifestyle. During FY 2016, the Partnership initiated, and continues today, a collaboration to reduce stigma and crises related to mental illness through a community implementation of Mental Health First Aid, a best-practices program recognized by the Substance Abuse and Mental Health Services Administration. Jacksonville System of Care Initiative is a collaboration of governmental agencies and community-based organizations to develop a system of mental health care for Jacksonville's children. Baptist Health is an active member of the Initiative. Lutheran Family Services Health Adversity Board - THE PLAYERS Center Child Health at Wolfson Children's Hospital attends quarterly health adversity board meeting which focuses on health care challenges in the head start population. THE PLAYERS Center also has a MOU with Lutheran Family Services which allows us the opportunity to assist Lutheran Family Services families with access to health care by offering application assistance with Medicaid or KidCare applications. Mayor's Council On Fitness and Well-Being is dedicated to improving the health and well-being of all residents by the promotion</p>

Form and Line Reference	Explanation
Schedule H, Part II, Line 6 Coalition Building	<p>on of lifelong physical activity and healthy lifestyles through education, promotion, programs, resources, materials and events. The council seeks to help people understand the benefits of physical activity and provide opportunities for all citizens to participate in safe and effective exercise. Nemours Children's Health pulmonologists collaborate with the Community Asthma Partnership at Wolfson (CAP-W) to provide continued care for asthmatic pediatric patients at Wolfson Children's Hospital. The New Town Success Zone is a group of community stakeholders who work to provide a place-based continuum of services from prenatal to college, the military, or some form of secondary training for the children and their families living in the neighborhood. Leaders from Baptist Health, UF Health Jacksonville, Mayo, St. Vincent's, and Florida Blue serve as a coalition to provide programs and resources in the New Town Children's Success Zone in a coordinated effort to address some of the health care disparities such as asthma, diabetes, nutrition in addition to Florida KidCare enrollment. Baptist partnered with the neighborhood elementary and middle school to provide asthma training for children with asthma, faculty, and parents. Baptist Health along with the rest of the coalition worked with families to get children enrolled in Florida KidCare insurance programs. Northeast Florida Coalition for Access to Healthcare will address COVID-19 and Testing, Cancer Control, Telemedicine, services to the undocumented individuals. The overarching goal of the coalition is to ensure that local providers and other healthcare partners work collaboratively and identify available local resources to address issues related to healthcare. A Community Partnership Coordinator from Wolfson Children's Hospital sits on the Coalition. Northeast Florida Healthy Start Coalition leads a cooperative community effort to reduce infant mortality and improve the health of children, childbearing women, and their families in Northeast Florida. Wolfson Children's Hospital is an active member of the Northeast Florida Healthy Start Coalition. Northeast Florida Healthy Start Community Action Group - The Community Action Group works to implement the Fetal and Infant Mortality Review (FIMR) recommendations to reduce infant mortality in Northeast Florida. Wolfson Children's Hospital is an active member. The Partnership for Child Health develops and implements programs and services to improve the health and well-being of all children and youth in Northeast Florida by collaborating with community partners in major child-serving organizations. Wolfson Children's Hospital is an active member of The Partnership which is focused on providing a medical home for children with complex medical conditions, mental, behavioral and addiction health disorders, developmental disabilities, access to dental care, family violence and dysfunction, poverty, child trafficking, and other marginalized children and families. Safe Kids Northeast Florida is a local coalition of Safe Kids Worldwide and led by THE PLAYERS Center for Child Health at Wolfson Children's Hospital, was founded in 2003. Funding is provided by Wolfson Children's Hospital, along with grants from Safe Kids Worldwide, and public and private contributors. Safe Kids brings together local organizations to promote pediatric injury prevention and offer programs to prevent accidental injuries to children ages 19 and under. St. Johns School Health and Wellness Advisory Committee - THE PLAYERS Center for Child Health at Wolfson Children's Hospital has supported the SHWAC by offering curriculum programs at multiple VPK/Elementary School locations within St. John's County.</p>

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part II, Line 7 Community Health Improvement Advocacy	<p>CHNA Priority Access to Care: Baptist Health partnered with Community Health Outreach, Muslim American Social Services, Sulzbacher Center, Volunteers in Medicine, The Way Free Medical Clinic, and We Care Jacksonville to provide access to primary and specialty care. The YMCA and Jewish Community Alliance also assisted in ensuring targeted health care needs are met for the vulnerable clients within their organizations. Access to vision services for children and adults was provided through United Way Full Service Schools and Vision Is Priceless. Wolfson Children's Hospital, through THE PLAYERS Center for Child Health, worked with community partners to identify and help families complete Florida KidCare applications. In addition, outreach educators trained and educated the community on varying health topics. CHNA Priority Mental and Behavioral Health: Baptist Health partnered with the National Council for Mental Wellbeing to provide Mental Health First Aid training. Mental Health First Aid teaches participants a five-step action plan to assess a situation, select and implement interventions, and secure appropriate care for an individual showing signs of mental illness or substance abuse disorders. Baptist Health also partnered with Gateway Community Services to increase access to mental health treatment for individuals identified with substance use disorders. Baptist provided funding and referrals for ED patients to receive services with appropriate permission. Baptist Health also held a Behavioral Health Conference to address health and well-being in Northeast Florida. CHNA Priority Maternal and Child Health: In addition to supporting access to care for adults without insurance, Baptist Health partnered with the Northeast Florida Healthy Start Coalition to research infant mortality and implement solutions such as home visits by nurses and community health workers. In partnership with Florida Blue, UF Health, and Northeast Florida Healthy Start Coalition, Baptist also developed the WELLcome Home visiting program which focuses on newborn and maternal education for families that is being replicated at other Baptist facilities. CHNA Priority Social Determinants of Health: For support services and bridging gaps in care, Baptist Health partnered with CareerSource for workforce recruitment in area with low life expectancies. Regarding access to food, Meals on Wings and Pie in the Sky, provided meals to seniors and low-income residents. Family Links, JaxCareConnect, and MASS also helped identify food insecurity and provided means to support individuals and families. LiftJax is also working to enhance green space usage by renovating local parks and supporting community programming. To increase health education and information, Baptist Health partners with the Health Planning Council of Northeast Florida and the Museum of Science and History.</p>

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part II, Line 8 Workforce Development	Southern Baptist Hospitals also provided Clinical Education and Training to undergraduate and graduate student interns procuring degrees in nursing, pharmacy, physical therapy, and other health care professional provided by Baptist Health clinicians. In fiscal year 2022, Southern Baptist Hospitals provided 2,856 (2,538 in FY21, 2,413 in FY20 and 3,099 in FY19) students with 72,655 hours of clinical education supervision.

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part II, Line 9 Other	Mental Health First Aid: Baptist Health provided 8-hour certification training in Mental Health First Aid, Youth and Adult, to 803 (1,107 in FY21, 1,114 in FY20 and 2,517 in FY19) community members. Baptist Health provided 8 health education sessions on various topics to on average 33 attendees during fiscal year 2022.

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part VI, Line 7 State Filing Requirements	Baptist Health System, Inc. (BHS), parent company of the filing organization, is located within the northeast Florida quadrant. There are no requirements for state filing in Florida of the annual community benefit report. However, BHS does publish the report and it is available upon request or at the www.baptistjax.com website or at https://www.baptistjax.com/about-us/social-responsibility/assessing-community-health-needs .

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part II, Line 6 Coalition Building	<p>WaterSmart Florida Drowning Prevention Task Force - WaterSmart Florida is a state-wide coalition led by the Florida Department of Health and key partners Safe Kids Northeast Florida and YMCA. Members represent local drowning prevention task forces and many regions and counties in our state, all working together to decrease fatal and non-fatal drowning in Florida's children through awareness, education, and swimming lessons. Wolfson Children's Health Center Community Advisory Council consists of community partners that meet quarterly to discuss the data and operations of the Health Center. Zero Preventable Infant Deaths Leadership Council was formed as a result of the 2018 Fetal Infant Mortality Review that investigated and studied every infant death that occurred in 2018 in Northeast Florida. The Northeast Florida Healthy Start Coalition has developed a plan to achieve Zero preventable deaths and Zero disparities in 32208, 32209, 32210, and 32211 zip codes. The Coalition will also regularly monitor for additional tipping points in the five-county region and include strategies in those areas. The plan includes structural improvement including policy changes, community engagement through education and advocacy, and programming to address the social issues that kill our babies at the individual and community levels. This Leadership Council guide the Coalition's efforts to implement the plan to achieve Zero preventable infant deaths and Zero disparities. Including monitoring progress, supporting plan implementation, and developing course corrections. Wolfson Children's Hospital is an active member of the leadership council.</p>

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part I, Line 6a Community benefit report prepared by related organization	Baptist Health System, Inc.

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part I, Line 7g Subsidized Health Services	THERE WERE NO PHYSICIAN CLINIC COSTS INCLUDED IN THE SUBSIDIZED HEALTH SERVICES COSTS.

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part I, Line 7 Bad Debt Expense excluded from financial assistance calculation	0

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part I, Line 7 Costing Methodology used to calculate financial assistance	WE OBTAINED OUR COST USING OUR CCA ACCOUNTING SYSTEM TO DEVELOP PAYOR-LEVEL RCC'S WHICH WERE APPLIED TO PAYOR CHARGES TO CALCULATE COST.

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part III, Line 2 Bad debt expense - methodology used to estimate amount	<p>PATIENT SERVICE REVENUES ARE REPORTED AT ESTIMATED NET REALIZABLE AMOUNTS FOR SERVICES RENDERED. BHS RECOGNIZES PATIENT SERVICE REVENUES ASSOCIATED WITH PATIENTS WHO HAVE THIRD-PARTY PAYOR COVERAGE ON THE BASIS OF CONTRACTUAL RATES FOR THE SERVICES RENDERED. FOR UNINSURED PATIENTS THAT DO NOT QUALIFY FOR CHARITY CARE, REVENUE IS RECOGNIZED ON THE BASIS OF DISCOUNTED RATES IN ACCORDANCE WITH BHS' POLICY. PATIENT SERVICE REVENUES ARE REDUCED BY THE PROVISION FOR BAD DEBTS AND ACCOUNTS RECEIVABLE ARE REDUCED BY AN ALLOWANCE FOR UNCOLLECTIBLE ACCOUNTS. THESE AMOUNTS ARE BASED ON MANAGEMENT'S ASSESSMENT OF HISTORICAL AND EXPECTED NET COLLECTIONS FOR EACH MAJOR PAYOR SOURCE, CONSIDERING BUSINESS AND ECONOMIC CONDITIONS, TRENDS IN HEALTH CARE COVERAGE AND OTHER COLLECTION INDICATORS. MANAGEMENT REGULARLY REVIEWS COLLECTIONS DATA BY MAJOR PAYOR SOURCES IN EVALUATING THE SUFFICIENCY OF THE ALLOWANCE FOR UNCOLLECTIBLE ACCOUNTS. ON THE BASIS OF HISTORICAL EXPERIENCE, A SIGNIFICANT PORTION OF BHS' SELF-PAY PATIENTS WILL BE UNABLE OR UNWILLING TO PAY FOR THE SERVICES PROVIDED. THUS, BHS RECORDS A SIGNIFICANT PROVISION FOR BAD DEBTS IN THE PERIOD SERVICES ARE PROVIDED RELATED TO SELF-PAY PATIENTS. FOR RECEIVABLES ASSOCIATED WITH PATIENTS WHO HAVE THIRD-PARTY COVERAGE, BHS ANALYZES CONTRACTUALLY DUE AMOUNTS AND PROVIDES AN ALLOWANCE FOR UNCOLLECTIBLE ACCOUNTS AND A PROVISION FOR BAD DEBTS, IF NECESSARY. ACCOUNTS RECEIVABLE ARE WRITTEN OFF AFTER COLLECTION EFFORTS HAVE BEEN FOLLOWED IN ACCORDANCE WITH BHS' POLICIES.</p>

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part III, Line 3 Bad Debt Expense Methodology	THE ENTIRE PROVISION FOR BAD DEBTS IS RECORDED AS A DEDUCTION FROM PATIENT SERVICE REVENUES. NONE OF THE PROVISION IS INCLUDED IN THE EXPENSES OF THE FORM 990 INCLUDING SCHEDULE H AND THE CALCULATION OF COMMUNITY BENEFIT.

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part III, Line 4 Bad debt expense - financial statement footnote	Baptist Health System, Inc. and Subsidiaries Notes to Consolidated Financial Statements Footnote 2, Significant Accounting Policies, Page 16.

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part III, Line 8 Community benefit methodology for determining medicare costs	Medicare allowable costs of care based on the organization's cost accounting system which is used to determine the amount reported on Line 6. None of the shortfall reported on Line 7 is included in Schedule H, Part I. The shortfall reported on Line 7 should be treated as community benefit because the revenue received from Medicare reimbursements does not exceed the cost of providing Medicare services. The organization will continue to provide excellent patient care to the Medicare patient population in our community.

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part III, Line 9b Collection practices for patients eligible for financial assistance	YES, THE ORGANIZATION DOES HAVE A WRITTEN DEBT COLLECTION POLICY. THE POLICY DOES NOT SPECIFICALLY ADDRESS THOSE PATIENTS WHO ARE KNOWN TO QUALIFY OR HAVE APPLIED FOR CHARITY CARE AS THE ORGANIZATION DOES NOT BILL THESE PATIENTS. THE ORGANIZATION'S COST ACCOUNTING SYSTEM IDENTIFIES ALL PATIENTS WHO HAVE A PENDING OR APPROVED CHARITY APPLICATION. THE ORGANIZATION WOULD ONLY BILL THE PATIENT IF, AFTER MULTIPLE ATTEMPTS TO OBTAIN ANY NEEDED DOCUMENTATION FROM THE PATIENT TO COMPLETE THE CHARITY APPROVAL PROCESS, THE PATIENT WAS NONCOMPLIANT.

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 16a FAP website	A - Baptist Medical Center: Line 16a URL: https://www.baptistjax.com/patient-info/financial-assistance;

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 16b FAP Application website	A - Baptist Medical Center: Line 16b URL: https://www.baptistjax.com/patient-info/financial-assistance;

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 16c FAP plain language summary website	A - Baptist Medical Center: Line 16c URL: https://www.baptistjax.com/patient-info/financial-assistance;

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part VI, Line 2 Needs assessment	<p>Baptist Health System Inc. (BHS), parent company of the filing organization, is a member of the Jacksonville Community Benefit Partnership that is a collaborative of 5 hospitals who work together to access and address important community health needs. Data is gathered from the Florida Health Community Health Assessment Resource Tool Set (CHARTS) website which serves as a source of population data and health statistics about Florida and its counties. Queries, reports, and individual indicators are available for Baker, Clay, Duval, Nassau, and St. Johns counties. In addition, with the implementation of the Epic EMR, Baptist Health is developing reports to improve identification of healthcare and social needs of patients and the communities they live in.</p>

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part VI, Line 3 Patient education of eligibility for assistance	<p>AT PATIENT Access POINTs, "GUIDELINES FOR CHARITY CARE ELIGIBILITY" CARDS ARE PROVIDED THAT CONTAIN FINANCIAL DISCOUNT AND CHARITY CARE INFORMATION. THIS INCLUDES A GENERAL CHART OF ELIGIBLE INCOME LEVELS AND ENCOURAGES PATIENTS TO SPEAK WITH ONE OF OUR PATIENT FINANCIAL ADVOCATES TO ARRANGE A FINANCIAL EVALUATION. Signs are also posted in the emergency room and patient admission areas informing everyone that charity care is available with contact information. All bills sent to patients conspicuously show the web address and contact information of our patient financial services office to assist with financial assistance. A copy of the plain language summary is also mailed out to patients with a copy of their bill. Baptist Health also has the Financial Assistance policy, Plain language summary, application, contact information, and translations into different languages available on its website and free of charge at all hospital locations. Baptist Health makes a reasonable effort to ensure that a copy of the plain language summary is provided to patients and that patients know there is assistance if they need it. In the event that a patient has not submitted all information needed to apply for financial assistance, Baptist Health will contact the patient to request the remaining information to help complete the application process.</p>

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
<p>Schedule H, Part VI, Line 4 Community information</p>	<p>Baptist Medical Center Jacksonville's service area is Duval County and all its associated zip codes with a total land area of 918 square miles. The population residing in the county is 1,022,909. The racial makeup is 59.53% White, 29.65% Black or African American, 5.33% Asian, 0.51% Native American, 0.10% Pacific Islander, 5.43% from other race, and 9.46% from two or more races. Hispanic or Latino of any race is 13.18% of the population. The population's age groups are 22.61% under 18, 8.47% from 18-24, 29.1% from 25- 44, 23.84% from 45-64, and 15.98% who are 65+. The median age is 37.5 years. The median and average household incomes are \$65,578 and \$89,561, respectively. The percentage of families below the poverty line is 10.36% and 7.55% for families with children. The hospital's patients include 8.8% uninsured and 8.9% Medicaid recipients. There are 8 other hospitals serving the area community, and there are 4 Federally Designated Medically Underserved Areas present in the service area. Baptist Medical Center South's service area includes south Duval, and north St. Johns counties which includes the following zip codes: 32081, 32092, 32095, 32223, 32256, 32257, 32258, and 32259. The total land area is 374.39 square miles, and the resident population is 331,355. The racial makeup of the service area is 68.66% White, 8.53% Black Or African American, 7.24% Asian, 0.37% Native American, 0.08% Pacific Islander, 3.91% from other race, and 11.21% from two or more races. Hispanic or Latino of any race is 12.52% of the population. The population's age groups are 22.68% under 18, 7.97% from 18-24, 25.93% from 25-44, 26.74% from 45-64, and 16.68% who are 65+. The median age is 40.0 years. The median household income is \$95,932. The percentage of families below the poverty line is 4.64% and 2.81 % for families with children. The hospital's patients include 6.4% uninsured and 6.8% Medicaid recipients. There is 1 other hospital serving the area and there are no Federally Designated Medically Underserved Areas present in the service area. Wolfson Children's Hospital's service area includes Baker, Clay, Duval, Nassau, and St. Johns counties. It has a total land area of 3202.3 square miles, and the resident population is 1,677,079. The racial makeup of area is 59.79% White, 21.63% Black or African American, 4.45% Asian, 0.49% Native American, 0.10% Pacific Islander, 4.3% from other race, and 9.24% from two or more races. Hispanic or Latino of any race is 11.72% of the population. The population's age groups are 5.97% from 0- 4, 6.10% from 5-9, 6.20% from 10-14, 3.69% from 15-17, and 3.64% from 18-20. The median household income is \$73,016. The percentage of families below the poverty line is 8.51% and 6.08% for families with children. The hospital's patients include 4.0% Uninsured and 46.6% Medicaid recipients. There are 14 other Hospitals serving the area, and there are 7 Federally Designated Medically Underserved Areas present in the service area.</p>

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part VI, Line 5 Promotion of community health	<p>Baptist Health System, Inc. (BHS) continues to maintain an open medical staff. A designated Social Responsibility Community Health Board Committee is established to provide direction to the community health work based on the community need within the five county area served by BHS. In FY22, BHS provided over \$44 Million in charity care to people who where under/un-insured, over \$19 million in community benefit, and over \$4 Million in direct cash to the community to support nonprofit organizations that provide health services to the underserved and low income community. Some of the nonprofit organizations provide primary care for the uninsured and the underinsured. Some provide behavioral health services to families who would not otherwise have access while others provide health services and transportation for the frail elderly.</p>

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part VI, Line 6 Affiliated health care system	<p>Baptist Health System, Inc. (BHS) is the parent affiliate of Southern Baptist Hospital of Florida, Inc. (SBHF). The Social Responsibility and Community Health team at BHS coordinates the funding of nonprofit partners for SBHF and works with our employees in facilitating volunteer opportunities across our community. Members of the SBHF board of directors serve on the Social Responsibility and Community Health Committee. SBHF works closely with a number of nonprofit partners to meet the health needs in our community.</p>

Additional Data

Software ID: 21014044

Software Version: 2021v4.2

EIN: 59-0747311

Name: Southern Baptist Hospital of Florida Inc

Form 990 Schedule H, Part V Section A. Hospital Facilities

Section A. Hospital Facilities		Licensed hospital	General medical & surgical	Children's hospital	Teaching hospital	Critical access hospital	Research facility	ER-24 hours	ER-other	Other (Describe)	Facility reporting group
(list in order of size from largest to smallest—see instructions) How many hospital facilities did the organization operate during the tax year? 2											
Name, address, primary website address, and state license number											
1	Baptist Medical Center 800 Prudential Dr Jacksonville, FL 32207 www.baptistjax.com 4448	X	X	X	X		X	X		Children's Hospital is Wolfson Children's Hospital	A
2	BAPTIST MEDICAL CENTER SOUTH 144550 OLD ST AUGUSTINE RD JACKSONVILLE, FL 32258 www.baptistjax.com 4448	X	X					X			A

Form 990 Part V Section C Supplemental Information for Part V, Section B.

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 3E	The significant health needs of the community are identified on our CHNA. The methodology to determine the significance of the community health needs and prioritization of the health needs are also described in our CHNA.

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 5 Facility A, 1	<p>Facility A, 1 - Southern Baptist Hospital of Florida, Inc.. The Community Health Needs Assessment was conducted to identify priority health needs within each community served by each hospital and to inform development of implementation strategies to address the identified needs selected by each hospital based on their ability to impact them. Additionally, the Partnership focuses collaborative efforts to include the five-county service area of Baker, Clay, Duval, Nassau, and St. Johns. The CHNAs were conducted to respond to federal regulatory requirements and sought to identify significant health needs for geographic areas and populations by focusing on the following questions: * Who in the community is most vulnerable in terms of health status or access to care? * What are the unique health status and/or access needs for these populations? * Where do these people live in the community? * Why are these problems present? * How are disparities based on racial and ethnic inequities affecting health? * What social determinants of health can the health systems significantly address? Primary Data Significant changes from traditional methods of community engagement to virtual engagement platforms were necessary due to the nature of the COVID-19 pandemic. Primary data gathered from various segments of the community with special knowledge and expertise in public health included residents, stakeholder organizations, and hospital staff. The Health Planning Council collected data through (1) virtual key stakeholder interviews, (2) virtual focus groups, and (3) a community survey, in English and Spanish, distributed throughout the service area through online and paper submissions. Around 660 community members contributed their input on the community's health and health-related needs, barriers, and opportunities for Baptist Medical Center Jacksonville's service area, around 865 contributed their input for Baptist Medical Center South, and around 1,390 contributed their input for Wolfson Children's Hospital. The Partnership aimed to solicit input from members of or representatives of vulnerable and underserved populations through key informant interviews and focus group discussions. Baptist Medical Center Jacksonville - Key informant interviews were conducted with 15 community experts who either served or represented underserved communities (such as low-income individuals and groups experiencing disparities in health outcomes or health access). Baptist Medical Center South - Key informant interviews were conducted with 20 community experts who either served or represented underserved communities. Wolfson Children's Hospital - Key informant interviews were conducted with 31 community experts who either served or represented underserved communities. For the focus groups, efforts were made to recruit participants who represent minority, low-income, veterans and medically underserved populations most at risk for health disparities and those experiencing challenges.</p>

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 5 Facility A, 1	<p>n accessing healthcare. Secondary Data Secondary data used for this assessment were collected and analyzed through universal measures recommended by Healthy People 2030 to evaluate the health status of communities and populations served by the Partnership. Data was obtained from the Behavioral Risk Factor Surveillance System, County Health Rankings and Roadmaps, Florida CHARTS, Florida Department of Health, Local Community Health Assessments, Hospital Utilization Reports, U.S. Census, and the Youth Risk Behavior Surveillance System. Indicators were used to evaluate areas of health and quality of life in the following areas through an equity lens: * Accessing Healthcare Services/Resources * Adolescent Health * Asthma * Cancer * Children's Health * Hospitalization and Incidence Ranking * COVID-19 * Diabetes * Disabilities * Fatal Injury * Health Outcomes * Health Factors * Healthcare Utilization * Healthcare Access * Heart Disease and Stroke * Household Income * Infectious Disease * Leading Causes of Death * Life Expectancy * Maternal and Infant Health * Mental Health * Pediatric Health * Poverty Indicators * Substance Abuse * Veterans' Health * Transportation Indicator values for Baker, Clay, Duval, Nassau, and St. Johns counties were compared to other Florida counties and other U.S. counties to identify relative need. Other considerations in weighing relative areas of need included comparisons to Florida state values and national values. Based on these comparisons in conjunction with primary data, health needs were identified and ranked from high to low need.</p>

Form 990 Part V Section C Supplemental Information for Part V, Section B.

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 6a Facility A, 1	Facility A, 1 - Southern Baptist Hospital of Florida, Inc.. 12 hospitals: (Baptist Medical Center Jacksonville, Baptist Medical Center South, Wolfson Children's Hospital, Baptist Medical Center of the Beaches, Inc., Baptist Medical Center of Nassau, Inc., Ascension St. Vincent's Medical Center Clay, Ascension St. Vincent's Medical Center Riverside, Ascension St. Vincent's Medical Center Southside, Brooks Rehabilitation Hospital Bartram, Brooks Rehabilitation Hospital University, Mayo Clinic Jacksonville, UF Health Jacksonville, and UF Health North)

Form 990 Part V Section C Supplemental Information for Part V, Section B.

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 7 Facility A, 1	Facility A, 1 - Southern Baptist Hospital of Florida, Inc.. Public release was held May 26, 2022 with all health system CEOs presenting the assessment methodology, the needs identified in the assessment and the needs prioritized by each hospital. The public release was attended by approximately 50 people including media representatives. Newspaper articles and radio and television stories reported on the assessment and informed community members where they could find each hospital's assessment and implementation plans. Link to story in the Florida Times-Union - https://www.jacksonville.com/story/news/healthcare/2022/05/30/jacksonville-area-hospitals-release-report-community-health-issues/9905670002/

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 1	<p>Facility A, 1 - Southern Baptist Hospital of Florida, Inc. (dba Baptist Medical Center Jacksonville). Although Baptist Jacksonville can play a direct role in addressing many health-related priorities, others will require the development of strategic partnerships with community service partners or involve the expertise of the hospital's staff in the development of new and effective efforts that will be administered by other local community organizations. Regardless of the role Baptist Jacksonville will play in meeting needs, Baptist remains committed to leading and supporting efforts that increase access to care and engage our patients in improving health and community wellbeing, especially through a health equity lens. All Community Health Plan efforts implemented by Baptist Jacksonville must be measurable, achievable, and financially feasible. This report reflects the goals and strategic objectives identified to address community priorities within Baptist Jacksonville's influence and scope of service. Access to Care The significant health need of access refers to access issues across the spectrum of both health and quality of life topic areas, including access to health services, transportation, housing, and nutritious food. Access issues were compiled due to their inextricable nature in impacting health behaviors and health outcomes. As access issues for Jacksonville residents continue to increase, the focus on this priority will occur during the 2022-2024 CHNA cycle Key Issues Identified in the Assessment: * Factors contributing to chronic disease include food deserts, level of access to physical activity, and air quality. - Lack of access to proper nutrition in some areas - food desert designation in Atlantic Beach * Transportation is identified as a need - 91% of survey respondents from zip code 32218 (Duval) indicated they do not have access to public transportation * Duval County 2018-2020 age-adjusted rates of chronic disease: - Asthma: The hospitalization rate was 3.36x higher for Black patients than White patients - Congestive heart failure: The hospitalization rate was 1.95x higher for Black patients than White patients - Diabetes: The hospitalization rate was 2.52x higher for Black patients than White patients - Stroke: The death rate was 1.36x higher for Black people than White people * Cancer is the leading cause of death in the region followed by heart disease. * The three leading cancer incidences are: breast cancer (females), lung cancer (females males) and prostate cancer (males) - Duval County 2018-2020 age-adjusted death rates: Breast cancer: The death rate was 1.55x higher for Black females than White females. Prostate cancer: The death rate was 2.13x higher for Black males than White males and 3.48x higher for non-Hispanic males than Hispanic males Goals: * Increase access to health services for un- and under-insured people in the BMCJ service area. * Increase knowledge of chronic diseases and where to access services. Strat</p>

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 1	<p>egies: * Continue partnering with organizations that provide access to care for Duval resi dents who do not have health insurance. * Support JaxCareConnect in collaborative efforts to increase access to care, access to interpretive services, and marketing and awareness o f services * Continue partnering with organizations to provide referrals for and increase access to smoking cessation classes and assistive medication. * Continue providing screeni ngs and health coaching through Y Healthy Living Centers and JCA Health Connexions. * Prov ide education and prevention programming in the community. * Implement a falls prevention initiative for Duval seniors Metrics/What we are measuring: * Number of people served * Pe rcentage of people receiving preventative services * Evaluate health outcomes and wellness of participants in diabetes, hypertension and mental health * Evaluate health and wellnes s of participants * Number of people referred to programs * Percentage of people referred who are participating in classes * Percentage of people completing classes * Number of peo ple receiving screening * Number of people receiving coaching * Evaluate health outcomes * Number of people educated * Evaluation of program satisfaction and health outcomes * Numb er of seniors participating in education sessions * Number of reported falls by participan ts before and after sessions. * Death rate from falls for seniors in the county Potential Partnering/External Organizations: * Agape Health * Community Health Outreach (CHO) * Miss ion House * Muslim American Social Services (MASS) * Sulzbacher Center * Volunteers in Med icine (VIM) * We Care Jacksonville * JaxCareConnect * Agency Health Education Center * Flo rida's First Coast YMCA * Jewish Community Alliance * Faith Partners Results: Year 1 (Octo ber 1, 2021 - September 30, 2022) * Community Health Outreach, MASS, Sulzbacher Downtown, We Care, and Volunteers in Medicine collectively served 5,269 un- and under-insured patien ts 895 diabetic patients were served, of which 548 were seen at least twice during the 12- month period, and of those, 66% reported reaching within normal levels (HbA1c less than 7% or 8%) 1,739 hypertensive patients were served, of which 1,200 were seen at least twice d uring the 12-month period, and of those, 54.3% measured less than 140/90 1,042 patients we re seen at least one time with a previous or new diagnosis of mental health, of which 594 patients scored a 10 or greater on the PHQ9. 435 were referred for treatment, and 373 (85. 7%) participated in treatment Year 1 (October 1, 2021 - September 30, 2022) * Baptist Heal th funded a facilitator to help the free clinics and FQHCs develop a model to create JaxCa reConnect, a system of care led by WeCare Jacksonville As of September 31, 2021, 1,052 ref errals for care were received from emergency department social workers, 649 (62%) moved fo rward successfully towards next steps and of those, 528 (81%) have appointments with a pri mary care provider within the</p>

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 1	<p>Duval Safety Net Collaborative clinics. 127 (23%) of active or successfully served clients have been enrolled, or have pending appointments, in private or city sponsored healthcare through the UF Health City Contract Program or the Affordable Care Act Year 1 (October 1, 2021 - September 30, 2022) * 81 patients were referred to AHEC for a tobacco cessation program 32 patients enrolled and 20 (24.7%) of these patients participated in the classes 20 participants (100%) completed the course Year 1 (October 1, 2021 - September 30, 2022) Health Partnerships with the YMCA and JCA served 5,745 lives * 579 patients with biometric screenings * 1,288 1:1 health coaching sessions * Health outcome data is being refined for future comprehensive reporting Year 1 (October 1, 2021 - September 30, 2022) * Health education series Total attendance: 236 January: Dementia Cognition February: Heart Health March: Colorectal Cancer May: Stroke Awareness July: Diabetes August: Nutrition September: Mental Health 96.3% agreed or strongly agreed that the webinars delivered the information they expected to receive 92.5% agreed or strongly agreed that because of the webinar, they gained new knowledge that will help them with their well-being 95.3% agreed or strongly agreed that they plan to apply what they learned Year 1 (October 1, 2021 - September 30, 2022) * Falls Prevention Webinar, June 15 Total attendance: 30 * Age-Adjusted Death Rate from Falls, Ages 65+ (2021), per 100,000 Population Baker: 7.5 Clay: 10.6 Duval: 12.3 Nassau: 10.1 St. Johns: 13.7</p>

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 2	<p>Facility A, 2 - Southern Baptist Hospital of Florida, Inc. (dba Baptist Medical Center Jacksonville). Mental and Behavioral Health: Mental health is an integral and essential component of health. It is a state of well-being in which individuals realize their abilities, cope with the everyday stresses of life, work productively, and contribute to their community. Baptist Health has made behavioral health services a priority, providing comprehensive inpatient and outpatient services to both children and adults. Mental Health was a priority health need addressed by Baptist Medical Center Jacksonville in the last three-year CHNA cycle, and the focus on this health need continues into this CHNA cycle as behavioral health needs of Jacksonville residents continue to increase. Key Issues Identified in the Assessment * Mental Health was one of the most mentioned health concerns. * Priority issues identified involving mental health include lack of providers; cost; stigma; youth mental health; telehealth; suicide; LGBTQ mental health</p> <p>The 2020 Duval County age-adjusted rates per 100,000 persons for opioid overdose deaths and drug overdose deaths were highest in Northeast Florida at 51.0 and 58.0, respectively, and higher than the state's rates of 29.9 and 36.0. Goals: * A healthy community with easy and timely access to high quality services when needed: 24-hour support and timely appointments (2 weeks - counseling, 4 weeks - psychiatry) More providers delivering the most advanced care Strong care continuum (enough of the right type of care) Seamless transitions along the care continuum Mental illness decriminalized Stigma eliminated and crises prevented Community advocating improvement Non-medical needs addressed (social determinants of health) * Decrease isolation of seniors Strategies: * Continue offering Mental Health First Aid, a proven best practice to reduce stigma of mental illness which increases the likelihood that people will access care. * Convene a leadership task force of providers, elected leaders and people with lived experience to prioritize identified opportunities and develop a plan for action * Host community-wide conferences on mental health to reduce stigma and barriers to care. * Provide education and prevention programming in the community. * Implement support groups for LGBT+ populations to address addictions, mental health, advocacy, community resources, etc. * Participate in Project Save Lives to provide access to peer support for ED patients with mental health and substance use disorder for the purpose of getting them into treatment. * Friendly callers - seniors developing phone friendships with seniors Metrics/What we are measuring: * 1,500 people trained by 2024 * Evaluate participant satisfaction * Evaluate the impact of each initiative according to its focus * Crisis calls (schools, EMT, police) * Rate of behavioral health ED visits * Number of people attending the conference * Satisfaction surveys * Number of people partici</p>

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 2	<p>participating in programs * Evaluate impact of programming on participants * Number of people participating in support groups * Evaluation of quality and outcomes of support groups * Percentage of identified people who met with peer specialist * Percentage of people who enter treatment * Percentage of people who did or didn't consent to services and are readmitted into ED * Number of volunteers in program * Number of seniors in program * Number of phone calls * Total time invested in calls * Quality of phone calls (reported by volunteers) Potential Partnering/External Organizations: * Florida's First Coast YMCA * National Council for Behavioral Health * Hope Street Inc. * Karyn Purvis Institute of Child Development at TCU * Community mental health providers * Faith organizations * Universities * Faith Partners * JASMYN * PFLAG * University of North Florida * AgeWell and Baptist Primary Care * Baptist Health Auxiliary Results: Year 1 (October 1, 2021 - September 30, 2022) * 50 Adult MHFA classes were offered in which 624 participants were trained * 83% of participants rated the course as helpful and informative * 13 Youth MHFA classes were offered in which 179 participants were trained Year 1 (October 1, 2021 - September 30, 2022) * Hope Healing JAX: Building a Trauma Responsive Jacksonville was created in partnership with Hope Street, Inc. and the Karyn Purvis Institute of Child Development at Texas Christian University as a Jacksonville city-wide initiative to: (1) foster awareness and culture change; (2) prevent and reduce ACEs and trauma; (3) nurture learning committees. Wolfson Children's Hospital is represented with a member on a Hope Healing JAX Steering Committee to implement these objectives. Year 1 (October 1, 2021 - September 30, 2022) * The 2022 Mental Health Conference - Access and Advocacy: A Community Conversation, was hosted on April 27, 2022, with 191 individuals in attendance. The keynote address and presentation materials were posted on the Baptist Health Social Responsibility website 100% of survey respondents (n=34) rated the conference quality as excellent or good Year 1 (October 1, 2021 - September 30, 2022) * Health education series Total attendance: 75 January: Dementia Cognition September: Mental Health 97.1% agreed or strongly agreed that the webinars delivered the information they expected to receive 94.1% agreed or strongly agreed that because of the webinar, they gained new knowledge that will help them with their well-being 97.1% agreed or strongly agreed that they plan to apply what they learned Year 1 (October 1, 2021 - September 30, 2022) * Discussions were initiated with Baptist Pride ERG to implement a support group type program. Progress was put on hold due to the transition to the new Epic EHR. Year 1 (October 1, 2021 - September 30, 2022) * There were 726 patient encounters, of which 359 (49.45%) led to a consent to services and 61 (8.4%) led to patients entering treatment (BMC-Downtown /BMC-North) * Readmission count</p>

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 2	ts are currently unavailable due to the transition to the new Epic HER Year 1 (October 1, 2021 - September 30, 2022) * 27 volunteers (2 for BMC Beaches, 9 for BMC Jacksonville, 4 f or BMC Clay/South, and 12 team members) * 36 community members * 928 phone calls * 473.1 h ours invested in calls * Quality of phone calls (reported by volunteers) - 703 phones call s rated Excellent: 87.34% (614) Pretty Good: 9.82% (69) OK: 1.71% (12) Weak: 0.57% (4) Poo r: 0.57% (4)

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 3	<p>Facility A, 3 - Southern Baptist Hospital of Florida, Inc. (dba Baptist Medical Center Jacksonville). Maternal and Child Health In 2020 17,920 babies were born in Northeast Florida with 12,490 born in Duval County and Baptist Medical Center Jacksonville delivering over 1,900 of these babies. Maternal health refers to the health of women during pregnancy, childbirth, and the postnatal period. Each stage should be a positive experience, ensuring women and their babies reach their full potential for health and well-being. Children's health is the extent to which individual children or groups of children are able or enabled to develop and realize their potential, satisfy their needs, and develop the capacities that allow them to interact successfully with their biological, physical, and social environments. Child health is the foundation to adult health and overall well-being. At Baptist Health, we are committed to providing quality care through every stage of life. Key Issues Identified in the Assessment: * The neonatal mortality rate per 1,000 live births in Duval is almost three-times higher among Black babies than White babies. * The infant mortality rate per 1,000 live births in Duval is over two-times higher among Black babies than White babies. * The child mortality rate in Duval (38.3 per 100,000 population aged 5-19) is the highest in Northeast Florida and above the state rate of 26.0. * The Duval County age-adjusted rate for all deaths ages 1-5 is 26.6, higher than the state rate of 24.4 * The rate of children in foster care in Duval is 234.8, higher than the state rate of 220.4. Goals: * Zero preventable deaths. Zero health disparities. * Support parents with perinatal mood disorders. * All children can see Strategies: * Partner with the Northeast Florida Healthy Start Coalition to address needs of moms and babies. * Expand WELLCome Home initiative to Baptist in 2023 * Offer classes focused on increasing awareness of safe sleep practices. * Continue partnering with Duval County Public Schools to provide safe sex education through health curriculum * Provide a continuum of care including psychology and psychiatry support on an inpatient and outpatient basis. * Provide education on perinatal mood disorder (PMD) to clinicians. * Provide support groups to new mothers experiencing PMD. * Provide access to screenings, exams and glasses for children in need Metrics/What we are measuring: * Infant mortality * Pre-term births * Low Birth-weight babies * Number of moms connected through phone and/or in-home support * Number of participants in class * Number of students participating in classes * Number of participants * Number of people trained * Number of people participating in support groups * Number of screenings, exams and glasses provided * Percentage of students who failed a vision screening, who received an eye exam, and who received prescription glasses * Number and percent of students who fail vision screenings multiple years. Potential</p>

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 3	<p>ial Partnering/External Organizations: * Northeast Florida Healthy Start Coalition * Home visiting programs * Florida Department of Health * Duval County Public Schools * University of North Florida * Private OBGYN Practices * Postpartum Support International * Florida's First Coast YMCA * Departments of Health in NEFL * School districts in NEFL * Vision is Priceless Results: Year 1 (October 1, 2021 - September 30, 2022) * 140 mothers referred to Northeast Florida Healthy Start Coalition WELLcome Home visiting nurse 110 mothers consented and participated to the WELLcome Home nurse visit and education (78.6% completion) 110 mothers educated on safe sleep practices and 73 mothers educated on infant and/or maternal nutrition * Northeast Florida Healthy Start Coalition community health workers targeted zip codes 32209 and 32210 as a Fetal Infant Mortality Review action plan to decrease infant mortality. 182 initial intakes completed by the community health workers with pregnant women Community health workers referred 111 mothers to maternal and child health home visiting programs More than 100 cases were connected to a home visiting program from an initial intake * 2021 Infant mortality rates Florida: 5.9/1,000 live births Duval: 6.7/1,000 live births 32209: 12.5/1,000 live births 32210: 6.6/1,000 live births * 2021 Preterm births Florida: 23,179 (10.85%) Duval: 1,518 (12.24%) 32209: 92 (16.64%) 32210: 110 (12.57%) * 2021 Low birth weight babies Florida: 19,211 (8.99%) Duval: 1,306 (10.53%) 32209: 94 (17%) 32210: 123 (14.06%) Year 1 (October 1, 2021 - September 30, 2022) * 1311 mothers called after discharge delivery, and 758 mothers participated in the WELLcome Home call back education program. * 132 mothers referred to Northeast Florida Healthy Start Coalition * 71 mothers referred to lactation consultation services * 10 mothers connected to maternal mental health services * Expanded WELLcome Home to include Baptist Medical Center Beaches Year 1 (October 1, 2021 - September 30, 2022) * A total of 456 adults were provided with safe sleep education. * Participated in 8 community events and 8 classes offering safe sleep practices and education * 532,207 total media impressions covering safe sleep education Year 1 (October 1, 2021 - September 30, 2022) * Wolfson Children's Hospital team members assisted with condom demonstration for 6 school classes education a total of 252 students * Duval County Public Schools discontinued the condom demonstration sexual health education for FY22 Year 1 (October 1, 2021 - September 30, 2022) * From November 2021 through September 2022, 45 participants attended PMAD lectures. Year 1 (October 1, 2021 - September 30, 2022) * 30 clinicians were trained by Baptist Maternal Mental Health Year 1 (October 1, 2021 - September 30, 2022) * 24 New Moms Support Group classes offered virtually for new mothers occurring every other week * 92 mothers participated in New Moms Support Group Year 1 (October 1, 2021 - September 30, 2022)</p>

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 3) * 30,495 children received vision screenings for the early detection of vision issues * 1,265 (4.15%) of students failed the screening and received comprehensive eye exams while at school * 1,075 (84.98%) of students who were examined, received prescription glasses

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Form and Line Reference	Explanation
<p>Schedule H, Part V, Section B, Line 11 Facility A, 4</p>	<p>Facility A, 4 - Southern Baptist Hospital of Florida, Inc. (dba Baptist Medical Center Jacksonville). Social Determinants of Health While the traditional role of health care is to treat patients' physical symptoms and medical conditions, clinical care accounts for only about 20 percent of an individual's health outcomes. An individual's habits and behaviors account for about 30 percent of that person's quality and length of life. The social, economic, and environmental factors, also known as the Social Determinants of Health (SDOH) determine 50% of an individual's health outcomes, and they affect an individual's ability to stay healthy and recover from illness, manage chronic conditions, and maintain overall well-being. The Healthy People Initiative organized SDOH around five key domains: Economic stability; Education, access, and quality; Health care access and quality; Neighborhood and built environment; and Social and community context. Key Issues Identified in the Assessment: * Cost of care (copays, prescriptions) was commonly cited as an inhibiting factor for individuals who have difficulty accessing medical and dental services. * Top economic issues affecting health also include lack of a living wage and lack of affordable healthcare and insurance in Duval County. * CHNA survey respondents and interviewees indicated a community-wide concern regarding the lack of affordable and safe housing in Duval County. Goals: * Address social needs that prevent people from achieving optimal health Strategies: * Increase employment opportunities * Increase access to healthy food * Ensure parks are safe places for children and adults * Ensure seniors have access to in-home and other supports for health and wellbeing including foods * Research opportunities to address housing and transportation * Implement findhelp (Aunt Bertha) referral system for patients and community members Metrics/What we are measuring: * Percentage of people hired in low life expectancy zip codes * Percentage of identified FQHC and free clinic patients screened for food insecurity * Percentage of patients connected with food assistance programs * Number of home-delivered food boxes or meals * Evaluate community response and engagement at targeted park improvements * Evaluate level of programming at targeted parks * Number of meals provided * Percentage of seniors who need food assistance and are receiving meals * Percentage of seniors needing in-home medical services and receiving them * Evaluate organization's ability to address these social determinants * Number of organizations receiving referrals through findhelp Potential Partnering/External Organizations: * CareerSource * Family Links * JaxCareConnect * MASS * City of Jacksonville Parks and Recreation * Jaguars * Lift Jax * Blue Zones Jacksonville * Pie in the Sky * Meals on Wings * Healthcare Anchor Network * Community-based organizations addressing social needs Results: Year 1 (October 1, 2021 - September 30, 2022) * A partn</p>

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 4	<p>ership was created with CareerSource to provide job fairs in identified zip codes. Due to unforeseen circumstances with Hurricane Ian, the initiative was postponed to Q2 2023. Year 1 (October 1, 2021 - September 30, 2022) * 1274 families assisted with Supplemental Nutrition Assistance Program (SNAP) * Family Links at THE PLAYERS Center for Child Health at Wolfson Children's Hospital provided emergency food bags to 49 families with identified food insecurity needs * Muslim American Social Services 1,000 out of 1,130 patients (88.5%) screened for food insecurity 353 of non-chronic patients received at least one food packet/voucher (35.3%) 300 chronic care patients were enrolled in the Food as Medicine Program (30%) * JaxCareConnect 1,428 (100%) of clients were screened for food insecurity Of 624 eligible and active clients, 74 (11.86%) referrals were made to food stamps, food pantries, or for transportation to access food Year 1 (October 1, 2021 - September 30, 2022) * Lift Jax is focusing on Flossie Brunson and A. Philip Randolph Parks by upgrading equipment and amenities. Because construction has not finished, the community's response has not been evaluated. * A programmer position is being drafted with the aim of addressing park engagement. Ideally it will align with Blue Zones efforts. Year 1 (October 1, 2021 - September 30, 2022) * Pie in the Sky served 525 low-income seniors to provide fresh, healthy produce. This was 97.2% of identified seniors (540) who needed assistance. * Meals on Wings provided 4,820 meals to Jacksonville patients, and 8,980 meals to around 250 seniors systemwide. About 37,000 meals have been provided to Duval patients since October 2018. Year 1 (October 1, 2021 - September 30, 2022) * Through Blue Zones Jacksonville and the Health Anchor Network, Baptist Health is assessing its ability to play a role in affecting change by reviewing resources that address healthy and affordable housing and economic disparities resulting in limited transportation options. Year 1 (October 1, 2021 - September 30, 2022) * * Implementation of findhelp slowly occurred through the summer as the Epic EMR was being setup for a late July start. Thirty-six organizations received 46 referrals between them from May to September.</p>

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 5	<p>Facility A, 5 - Southern Baptist Hospital of Florida, Inc. (dba Baptist Medical Center Jacksonville). Needs Baptist Medical Center Jacksonville Will Not Address No entity can address all the health needs present in its community. Baptist Jacksonville is committed to serving the community by adhering to its mission, using its skills and capabilities, and remaining a strong organization so that it can continue to provide a wide range of community benefits. This plan does not include specific strategies to address the following health priorities that were identified in the 2021 Community Health Needs Assessment; however, each of these health needs will continue to be addressed through partnerships and ongoing initiatives: Areas of Poverty - This need is being addressed by other entities in Northeast Florida, including United Way of Northeast Florida, which is supported by Baptist Health. In addition, Baptist Health's Vice President of Community Investment and Impact actively participates in a community effort that includes businesses, city government and funders to end poverty in Jacksonville. Baptist Jacksonville does not anticipate implementing additional initiatives to address poverty. The hospital does not have sufficient resources to effectuate a significant change in this area and will focus resources on other significant community health needs. Chronic Disease - Baptist Jacksonville through Baptist Health operates 8 Weeks to Healthy Living, a nutrition and physical activity program, in partnership with faith organizations and the YMCA. Baptist Health also operates Healthy Living Centers in YMCA locations in the Baptist Jacksonville service area. Community members, regardless of membership with the YMCA, receive screenings and health coaching through the centers. Also, JaxCareConnect, a collaboration created by the local nonprofit safety net of free charitable clinics to assist uninsured adult Duval County residents find a primary care medical home, is better suited to connect residents with a primary care doctor and navigate community resources to address chronic disease concerns. Last, Baptist Health is a leader and significant sponsor of Blue Zones Jacksonville to increase the health and well-being of Jacksonville residents. The project does not specifically address chronic diseases but does focus on systems level factors to improve the places and spaces people live, work, and play. The prevalence of chronic disease may potentially be impacted by this initiative. Given these long-term investments, the hospital will focus on other significant community health needs, and Baptist Jacksonville does not anticipate implementing additional initiatives to address chronic disease. Transportation - The Jacksonville Transportation Authority, United Way, and other Northeast Florida organizations that Baptist Health collaborates with provide transportation options for residents. In addition, Blue Zones Jacksonville seeks to increase the health and safety</p>

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 5	y of environments to enable residents to enjoy healthier lives. A key component of the Blue Zones work is to address transportation safety. Given this significant investment, Baptist Jacksonville does not have additional resources to commit to transportation needs. The hospital is committed to addressing other social determinants of health. Housing - Baptist Health partners with Habijax to help address housing needs. Baptist Health is committed to addressing social determinants of health and will advocate for ways to ensure residents have the means to a healthy life. Cancer - Baptist MD Anderson Cancer Center is part of the Baptist Jacksonville services and participates in outreach and educational activities throughout Northeast Florida. Given this significant investment in cancer care and education in the Baptist Jacksonville service area, the hospital will focus on other significant community health needs.

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 6	<p>Facility A, 6 - Southern Baptist Hospital of Florida, Inc. (dba Baptist Medical Center South). Although Baptist South can play a direct role in addressing many health-related priorities, others will require the development of strategic partnerships with community service partners or involve the expertise of the hospital's staff in the development of new and effective efforts that will be administered by other local community organizations. Regardless of the role Baptist South will play in meeting needs, Baptist remains committed to leading and supporting efforts that increase access to care and engage our patients in improving health and community wellbeing, especially through a health equity lens. All Community Health Plan efforts implemented by Baptist South must be measurable, achievable, and financially feasible. This report reflects the goals and strategic objectives identified to address community priorities within Baptist South's influence and scope of service. Access to Care The significant health need of access refers to access issues across the spectrum of both health and quality of life topic areas, including access to health services, transportation, housing, and nutritious food. Access issues were compiled due to their inextricable nature in impacting health behaviors and health outcomes. During the last three-year CHNA cycle, Access to Care was a priority health need addressed by Baptist Medical Center South. As access issues for Duval and St. Johns residents continue to increase, the focus on this priority will continue into the 2022-2024 CHNA cycle Key Issues Identified in the Assessment: *</p> <p>Transportation is identified as a need - 91% of respondents from zip code 32218 (Duval) 74% from zip code 32086 (St. Johns) indicated they do not have access to public transportation. * Factors contributing to chronic disease incidence are many and inclusive of the presence of food deserts, level of access to physical activity, and indoor/outdoor air quality. * Duval County 2018-2020 age-adjusted rates of chronic disease: - Congestive heart failure: The hospitalization rate was 1.95x higher for Black patients than White patients - Diabetes: The hospitalization rate was 2.52x higher for Black patients than White patients * St. Johns County 2018-2020 age-adjusted rate of chronic disease: - Congestive heart failure: The hospitalization rate was 2.06x higher for Black patients than White patients - Congestive heart failure: The hospitalization rate was 1.59x higher for non-Hispanic patients than Hispanic patients - Diabetes: The hospitalization rate was 3.24x higher for Black patients than White patients - Stroke: The death rate was 1.16x higher for White people than Black people - Stroke: The death rate was 1.22x higher for non-Hispanic people than Hispanic people * Cancer is the leading cause of death in the region, followed by heart disease. The three leading cancer death incidences are: breast cancer deaths (female s), lung cancer deaths (female</p>

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 6	<p>s males) and prostate cancer deaths (males). - Duval County 2018-2020 age-adjusted death rates: Breast cancer: The death rate was 1.55x higher for Black females than White females. Prostate cancer: The death rate was 2.13x higher for Black males than White males and 3.48x higher for non-Hispanic males than Hispanic males - St. Johns County 2018-2020 age-adjusted death rates: Breast cancer: The death rate was 2.16x higher for Black females than White females Breast cancer: The death rate was 1.27x higher for non-Hispanic females than Hispanic females</p>

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 7	<p>Facility A, 7 - Southern Baptist Hospital of Florida, Inc. (dba Baptist Medical Center South). Access to Care: Goals: * Increase access to health services for un- and under-insured people in the BMCS service area and Every Child in Northeast Florida has Health Care insured people in the BMCS service area. * Increase knowledge of chronic diseases and management and where to access services. Strategies: * Continue partnering with organizations who provide access to care for Duval and St. Johns residents who do not have health insurance. * Support JaxCareConnect to increase access to care. * Continue providing screenings and health coaching through Y Healthy Living Centers and JCA Health Connexions. * Provide education and prevention programming in the community. Metrics/What are we measuring: * Number of people served * Percentage of people receiving preventative services * Evaluate health outcomes and wellness of participants in diabetes, hypertension and mental health * Number of people receiving screening * Number of people receiving coaching * Evaluate health outcomes * Number of people educated * Number of people accessing care Potential Partnering/ External Organizations: * Muslim American Social Services (MASS) * Sulzbacher Center * Volunteers in Medicine * The Way * We Care Jacksonville * JaxCareConnect * Florida's First Coast YMCA * Jewish Community Alliance * Faith Partners Results: Year 1 (October 1, 2021 - September 30, 2022) * Community Health Outreach, MASS, Sulzbacher Downtown, We Care, and Volunteers in Medicine collectively served 5,269 un- and under-insured patients 895 diabetic patients were served, of which 548 were seen at least twice during the 12-month period, and of those, 66% reported reaching within normal levels (HbA1c less than 7% or 8%) * 1,739 hypertensive patients were served, of which 1,200 were seen at least twice during the 12-month period, and of those, 54.3% measured less than 140/90 * 1,042 patients were seen at least one time with a previous or new diagnosis of mental health, of which 594 patients scored a 10 or greater on the PHQ9. 435 were referred for treatment, and 373 (85.7%) participated in treatment Year 1 (October 1, 2021 - September 30, 2022) * Baptist Health funded a facilitator to help the free clinics and FQHCs develop a model to create JaxCareConnect, a system of care led by WeCare Jacksonville As of September 31, 2021, 1,052 referrals for care were received and received from emergency department social workers, 649 (62%) moved forward successfully towards next steps and of those, 528 (81%) have appointments with a primary care provider within the Duval Safety Net Collaborative clinics. 127 (23%) of active or successfully served clients have been enrolled, or have pending appointments, in private or city sponsored healthcare through the UF Health City Contract Program or the Affordable Care Act. Year 1 (October 1, 2021 - September 30, 2022) Health Partnerships with the YMCA and JCA served 5,745 live</p>

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 7	<p>s * 579 patients with biometric screenings * 1,288 1:1 health coaching sessions * Health outcome data is being refined for future comprehensive reporting Year 1 (October 1, 2021 - September 30, 2022) * Health education series Total attendance: 236 January: Dementia Cognition February: Heart Health March: Colorectal Cancer May: Stroke Awareness July: Diabetes August: Nutrition September: Mental Health 96.3% agreed or strongly agreed that the webinars delivered the information they expected to receive 92.5% agreed or strongly agreed that because of the webinar, they gained new knowledge that will help them with their well-being 95.3% agreed or strongly agreed that they plan to apply what they learned</p>

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 8	<p>Facility A, 8 - Southern Baptist Hospital of Florida, Inc. (dba Baptist Medical Center South). Mental and Behavioral Health Mental health is an integral and essential component of health. It is a state of well-being in which individuals realize their abilities, cope with the everyday stresses of life, work productively, and contribute to their community. Baptist Health has made behavioral health services a priority, providing comprehensive inpatient and outpatient services to both children and adults. Mental Health was a priority health need addressed by Baptist Medical Center South in the last three-year CHNA cycle, and the focus on this health need continues into this CHNA cycle as behavioral health needs of Jacksonville residents continue to increase. Key Issues Identified in the Assessment</p> <ul style="list-style-type: none"> * Mental Health was one of the most mentioned health concerns. * Priority issues identified involving mental health include lack of providers; cost; stigma; youth mental health; telehealth; suicide; LGBTQ mental health * Duval County: <ul style="list-style-type: none"> o The 2020 age-adjusted rates per 100,000 persons for opioid overdose deaths and drug overdose deaths are highest in Northeast Florida, at 51.0 and 58.0, respectively. * St. Johns County: <ul style="list-style-type: none"> o The 2020 age-adjusted rate per 100,000 for opioid deaths was 14.3 and drug overdose deaths was 18.3, lower than the state's rates of 29.9 and 36.0 respectively. o The 2018-2020 age-adjusted rate of suicide deaths for White and non-Hispanic populations is higher than state rate overall, with White individuals experiencing the highest rate. <p>Goals: A healthy community with easy and timely access to high quality services when needed:</p> <ul style="list-style-type: none"> * 24-hour support and timely appointments (2 weeks - counseling, 4 weeks - psychiatry) * More providers delivering the most advanced care * Strong care continuum (enough of the right type of care) * Seamless transitions along the care continuum * Mental illness decriminalized * Stigma eliminated and crises prevented * Community advocating improvement * Non-medical needs addressed (social determinants of health) <p>Decrease isolation of seniors</p> <p>Strategies:</p> <ul style="list-style-type: none"> * Continue offering Mental Health First Aid, a proven best practice to reduce stigma of mental illness which increases the likelihood that people will access care. * Convene a leadership task force of providers, elected leaders and people with lived experience to prioritize identified opportunities and develop a plan for action * Provide education and prevention programming in the community. * Host community-wide conferences on mental health to reduce stigma and barriers to care. * Beginning in 2022, participate in Project Save Lives to provide access to peer support for ED patients with mental health and substance use disorder for the purpose of getting them into treatment. * Friendly callers - seniors developing phone friendships with seniors * Check in on seniors through healthy food distributions <p>Metrics/What we are measuring:</p> <ul style="list-style-type: none"> * 1,500 people trained by 2024 * Eva

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 8	<p> luate participant satisfaction * Measure crisis calls (schools, EMT, police) * Evaluate th e impact of each initiative according to its focus * Rate of behavioral health ED visits * Number of people participating in programs * Evaluate impact of programming on participan ts * Number of people attending the conference * Satisfaction surveys * Percentage of iden tified people who met with peer specialist * Percentage of people who enter treatment * Pe rcentage of people who did or didn't consent to services and are readmitted into ED * Numb er of volunteers in program * Number of seniors in program * Number of phone calls * Total time invested in calls * Quality of phone calls (reported by volunteers) * Number of seni ors receiving food deliveries Potential Partnering/External Organizations: * Florida's Fir st Coast YMCA * National Council for Behavioral Health * Hope Street Inc. * Karyn Purvis I nstitute of Child Development at TCU * Faith organizations * Community mental health provi ders * Universities * City of Jacksonville * Gateway Services * AgeWell and Baptist Primar y Care * Baptist Health Auxiliary * Meals on Wheels * Pie in the Sky Results: Year 1 (Octo ber 1, 2021 - September 30, 2022) * 50 Adult MHFA classes were offered in which 624 partic ipants were trained * 83% of participants rated the course as helpful and informative * 13 Youth MHFA classes were offered in which 179 participants were trained Year 1 (October 1, 2021 - September 30, 2022) * Hope Healing JAX: Building a Trauma Responsive Jacksonville was created in partnership with Hope Street, Inc. and the Karyn Purvis Institute of Child Development at Texas Christian University as a Jacksonville city-wide initiative to: (1) f oster awareness and culture change; (2) prevent and reduce ACEs and trauma; (3) nurture le arning committees. Wolfson Children's Hospital is represented with a member on a Hope Heal ing JAX Steering Committee to implement these objectives. Year 1 (October 1, 2021 - Septem ber 30, 2022) * Health education series Total attendance: 75 January: Dementia Cognition S eptember: Mental Health 97.1% agreed or strongly agreed that the webinars delivered the in formation they expected to receive 94.1% agreed or strongly agreed that because of the web inar, they gained new knowledge that will help them with their well-being 97.1% agreed or strongly agreed that they plan to apply what they learned Year 1 (October 1, 2021 - Septem ber 30, 2022) * The 2022 Mental Health Conference - Access and Advocacy: A Community Conve rsation, was hosted on April 27, 2022, with 191 individuals in attendance. * The keynote a ddress and presentation materials were posted on the Baptist Health Social Responsibility website * 100% of survey respondents (n=34) rated the conference quality as excellent or g ood Year 1 (October 1, 2021 - September 30, 2022) * There were 726 patient encounters, of which 359 (49.45%) led to a consent to services and 61 (8.4%) led to patients entering tre atment (BMC-Downtown/BMC-North </p>

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 8	<p>) * Readmission counts are currently unavailable due to the transition to the new Epic HER Year 1 (October 1, 2021 - September 30, 2022) * 27 volunteers (2 for BMC Beaches, 9 for BMC Jacksonville, 4 for BMC Clay/South, and 12 team members) * 36 community members * 928 phone calls * 473.1 hours invested in calls * Quality of phone calls (reported by volunteers) - 703 phone calls rated Excellent: 87.34% (614) Pretty Good: 9.82% (69) OK: 1.71% (12) Weak: 0.57% (4) Poor: 0.57% (4) Year 1 (October 1, 2021 - September 30, 2022) * Pie in the Sky served 525 low-income seniors to provide fresh, healthy produce. This was 97.2% of identified seniors (540) who needed assistance. * Meals on Wings provided 3,551 meals to South patients, and 8,980 meals to around 250 seniors systemwide. About 37,000 meals have been provided to Duval patients since October 2018</p>

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Form and Line Reference	Explanation
<p>Schedule H, Part V, Section B, Line 11 Facility A, 9</p>	<p>Facility A, 9 - Southern Baptist Hospital of Florida, Inc. (dba Baptist Medical Center South). Maternal and Child Health In 2020 17,920 babies were born in Northeast Florida with 1,249 born in Duval County, 2,148 born in St. Johns County, and Baptist Medical Center South delivering over 2,450 of these babies. Maternal health refers to the health of women during pregnancy, childbirth, and the postnatal period. Each stage should be a positive experience, ensuring women and their babies reach their full potential for health and well-being. Children's health is the extent to which individual children or groups of children are able or enabled to develop and realize their potential, satisfy their needs, and develop the capacities that allow them to interact successfully with their biological, physical, and social environments. Child health is the foundation to adult health and overall well-being. At Baptist Health, we are committed to providing quality care through every stage of life. Key Issues Identified in the Assessment: * The neonatal mortality rate per 1,000 live births is almost three-times higher among Black babies than White babies in Duval. * The infant mortality rate per 1,000 live births is over two-times higher among Black babies than White babies in Duval. * The child mortality rate in Duval (38.3 per 100,000 population aged 5-19) is the highest in Northeast Florida and well over the state rate of 26.0. * The Duval age-adjusted rate for all deaths ages 1-5 is 26.6, higher than the state rate of 24.4 * The rate of children in foster care in Duval County is 234.8, higher than the state rate of 220.4. Goals: * Zero preventable deaths. Zero health disparities. * Support parents with perinatal mood disorders. * All children can see Strategies: * Partner with the Northeast Florida Healthy Start Coalition to address needs of moms and babies. * Expand WELL Come Home initiative to Baptist South in 2023 * Offer classes increasing awareness of safe sleep practices. * Continue partnering with Duval County Public Schools to provide sex education through health curriculum. * Address SDoH in doctors' offices * Explore offering infant CPR training for new parents * Provide a continuum of care including psychology and psychiatry support on an inpatient and outpatient basis. * Provide education on perinatal mood disorder (PMD) to clinicians. * Provide support groups to new mothers experiencing PMD. * Provide access to screenings, exams and glasses for children in need Metrics/What we are measuring: * Infant mortality * Pre-term births * Low Birth-weight babies * Number of moms connected through phone and/or in-home support * Number of participants to class * Number of students participating in classes * Number of physicians participating * Number of patients served * Number of participants trained * Number of people participating in support groups * Number of screenings, exams and glasses provided * Percentage of students who failed a vision screening</p>

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 9	<p>g, who received an eye exam, and who received prescription glasses * Number and percent of students who fail vision screenings multiple years. Potential Partnering/External Organizations: * Northeast Florida Healthy Start Coalition * Home visiting programs * Florida Department of Health * Duval County Public Schools * University of North Florida * AHA * Safe Kids Northeast Florida * Private OBGYN Practices * Postpartum Support International * Florida's First Coast YMCA * Departments of Health in NEFL * School districts in NEFL * Vision is Priceless Results: Year 1 (October 1, 2021 - September 30, 2022) * 140 mothers referred to Northeast Florida Healthy Start Coalition WELLcome Home visiting nurse 110 mothers consented and participated to the WELLcome Home nurse visit and education (78.6% completion) 110 mothers educated on safe sleep practices and 73 mothers educated on infant and/or maternal nutrition * Northeast Florida Healthy Start Coalition community health workers targeted zip codes 32209 and 32210 as a Fetal Infant Mortality Review action plan to decrease infant mortality. 182 initial intakes completed by the community health workers with pregnant women Community health workers referred 111 mothers to maternal and child health home visiting programs More than 100 cases were connected to a home visiting program from an initial intake * 2021 Infant mortality rates Florida: 5.9/1,000 live births Duval: 6.7/1,000 live births 32209: 12.5/1,000 live births 32210: 6.6/1,000 live births St. Johns: 7.2/1,000 live births * 2021 Preterm births Florida: 23,179 (10.85%) Duval: 1,518 (12.24%) 32209: 92 (16.64%) 32210: 110 (12.57%) St. Johns: 210 (8.91%) * 2021 Low birth weight babies Florida: 19,211 (8.99%) Duval: 1,306 (10.53%) 32209: 94 (17%) 32210: 123 (14.06%) St. Johns: 174 (7.38%) Year 1 (October 1, 2021 - September 30, 2022) * 1311 mothers called after discharge delivery, and 758 mothers participated in the WELLcome Home call back education program. * 132 mothers referred to Northeast Florida Healthy Start Coalition * 71 mothers referred to lactation consultation services * 10 mothers connected to maternal mental health services * Expanded WELLcome Home to include Baptist Medical Center Beaches Year 1 (October 1, 2021 - September 30, 2022) * A total of 456 adults were provided with safe sleep education. * Participated in 8 community events and 8 classes offering safe sleep practices and education * 532,207 total media impressions covering safe sleep education Year 1 (October 1, 2021 - September 30, 2022) * Wolfson Children's Hospital team members assisted with condom demonstration for 6 school classes education a total of 252 students * Duval County Public Schools discontinued the condom demonstration sexual health education for FY22 Year 1 (October 1, 2021 - September 30, 2022) * Initial conversations occurred to implement the SDOH System of Care screening pilot at a local OB-GYN's office that services Medicaid and uninsured patients. Due to ch</p>

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 9	<p>anges in office staff, implementation was put on hold until further discussion can occur. Year 1 (October 1, 2021 - September 30, 2022) * "First Year Baby Safety Essentials" virtual classes included demonstration of infant/child CPR and addressed choking, first aid, and unintentional injury prevention. There were 8 classes offered to a total of 92 participants. Year 1 (October 1, 2021 - September 30, 2022) * From November 2021 through September 2022, 45 participants attended PMAD lectures. Year 1 (October 1, 2021 - September 30, 2022) * 30 clinicians were trained by Baptist Maternal Mental Health Year 1 (October 1, 2021 - September 30, 2022) * 24 New Moms Support Group classes offered virtually for new mothers occurring every other week * 92 mothers participated in New Moms Support Group Year 1 (October 1, 2021 - September 30, 2022) * 30,495 children received vision screenings for the early detection of vision issues * 1,265 (4.15%) of students failed the screening and received comprehensive eye exams while at school * 1,075 (84.98%) of students who were examined, received prescription glasses</p>

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 10	<p>Facility A, 10 - Southern Baptist Hospital of Florida, Inc. (dba Baptist Medical Center South). Social Determinants of Health While the traditional role of health care is to treat patients' physical symptoms and medical conditions, clinical care accounts for only about 20% of an individual's health outcomes. An individual's habits and behaviors account for about 30% of quality and length of life. The social, economic, and environmental factors, also known as Social Determinants of Health (SDOH), determine 50% of an individual's health outcomes, and they affect an individual's ability to stay healthy and recover from illnesses, manage chronic conditions, and maintain overall well-being. The Healthy People Initiative organized SDOH around 5 key domains: Economic stability; Education access and quality; Health care access and quality; Neighborhood and built environment; and Social and community context. Key Issues Identified in the Assessment: * Cost of care (copays, prescriptions) was commonly cited as an inhibiting factor for individuals who have difficulty accessing medical and dental services. * Top economic issues affecting health also include lack of a living wage and lack of affordable healthcare and insurance in Duval County. * CHNA survey respondents and interviewees indicated a community-wide concern regarding the lack of affordable and safe housing in St. Johns and Duval counties. Goals: * Address social needs that prevent people from achieving optimal health Strategies: * Increase employment opportunities * Increase access to healthy food * Ensure seniors have access to in-home and other supports for health and wellbeing including foods * Implement findhelp (Aunt Bertha) referral system for patients and community members Metrics/What we are measuring: * Percentage of people hired in low life expectancy zip codes * Percentage of identified FQHC and free clinic patients screened for food insecurity * Percentage of patients connected with food assistance programs * Number of home-delivered food boxes or meals * Number of seniors receiving in-home support * Number of organizations receiving referrals through Find Help Potential Partnering/External Organizations: * CareerSource * Family Links * JaxCareConnect * MASS * Pie in the Sky * UNF Meals on Wings * Community-based organizations addressing social needs Results: Year 1 (October 1, 2021 - September 30, 2022) * A partnership was created with CareerSource to provide job fairs in identified zip codes. Due to unforeseen circumstances with Hurricane Ian, the initiative was postponed to March 2023. Year 1 (October 1, 2021 - September 30, 2022) * 1274 families assisted with Supplemental Nutrition Assistance Program (SNAP) * Family Links at THE PLAYERS Center for Child Health at Wolfson Children's Hospital provided emergency food bags to 49 families with identified food insecurity needs * Muslim American Social Services 1,000 out of 1,130 patients (88.5%) screened for food insecurity 353 of non-chro</p>

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 10	<p>nic patients received at least one food packet/voucher (35.3%) 300 chronic care patients were enrolled in the Food as Medicine Program (30%) * WeCare 1,428 (100%) of clients were screened for food insecurity Of 624 eligible and active clients, 74 (11.86%) referrals were made to food stamps, food pantries, or for transportation to access food Year 1 (October 1, 2021 - September 30, 2022) * Pie in the Sky served 525 low-income seniors to provide fresh, healthy produce. This was 97.2% of identified seniors (540) who needed assistance. * Meals on Wings provided 3,551 meals to South patients, and 8,980 meals to around 250 seniors systemwide. About 37,000 meals have been provided to Duval patients since October 2018. Year 1 (October 1, 2021 - September 30, 2022) * Implementation of findhelp slowly occurred through the summer as the Epic EMR was being setup for a late July start. Thirty-six organizations received 46 referrals between them from May to September.</p>

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 11	<p>Facility A, 11 - Southern Baptist Hospital of Florida, Inc. (dba Baptist Medical Center South). Needs Baptist Medical Center South Will Not Address No entity can address all the health needs present in its community. Baptist South is committed to serving the community by adhering to its mission, using its skills and capabilities, and remaining a strong organization so that it can continue to provide a wide range of community benefits. This plan does not include specific strategies to address the following health priorities that were identified in the 2021 Community Health Needs Assessment; however, each of these health needs will continue to be addressed through partnerships and ongoing initiatives: Areas of Poverty - This need is being addressed by other entities in Northeast Florida, including United Way of Northeast Florida, which is supported by Baptist Health. In addition, Baptist Health's Vice President of Community Investment and Impact actively participates in a community effort that includes businesses, city government and funders to end poverty in Duval County. Baptist South does not anticipate implementing additional initiatives to address poverty. The hospital does not have sufficient resources to effectuate a significant change in this area and will focus its resources on other significant community health needs. Chronic Disease - Baptist South through Baptist Health operates 8 Weeks to Healthy Living, a nutrition and physical activity program, in partnership with faith organizations and the YMCA. Baptist Health also operates Healthy Living Centers in YMCA locations in the Baptist South service area. Community members, regardless of membership with the YMCA, receive screenings and health coaching through the centers. Also, JaxCareConnect, a collaboration created by the local nonprofit safety net of free charitable clinics to assist uninsured adult Duval County residents find a primary care medical home, is better suited to connect residents with a primary care doctor and navigate community resources to address chronic disease concerns. Last, Baptist Health is a leader and significant sponsor of Blue Zones Jacksonville to increase the health and well-being of Jacksonville residents. The project does not specifically address chronic diseases but does focus on systems level factors to improve the places and spaces people live, work, and play. The prevalence of chronic disease may potentially be impacted by this initiative. Given these long-term investments, the hospital will focus on other significant community health needs, and Baptist South does not anticipate implementing additional initiatives to address chronic disease. Transportation - The Jacksonville Transportation Authority, United Way, and other Northeast Florida organizations that Baptist Health collaborates with provide transportation options for residents. In addition, Baptist Health seeks to increase the health and safety of environments to enable residents to enjoy health.</p>

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 11	<p>ier lives. A key component of the Blue Zones work is to address transportation safety. Given this significant investment, Baptist South does not have additional resources to commit to transportation needs. The hospital is committed to addressing other social determinants of health. Housing - Baptist Health partners with Habijax and St. Johns Habitat for Humanity to help address housing needs. Baptist Health is committed to addressing social determinants of health and will advocate for ways to ensure residents have the means to a healthy life. Cancer - Baptist MD Anderson Cancer Center is part of the Baptist South services and participates in outreach and educational activities throughout Northeast Florida. Given this significant investment in cancer care and education in the Baptist South service area, the hospital will focus on other significant community health needs.</p>

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 12	<p>Facility A, 12 - Southern Baptist Hospital of Florida, Inc. (dba Wolfson Children's Hospital). Although Wolfson Children's can play a direct role in addressing many health-related priorities, others will require the development of strategic partnerships with community service partners or involve the expertise of the hospital's staff in the development of new and effective efforts that will be administered by other local community organizations. Regardless of the role Wolfson Children's will play in meeting needs, Baptist remains committed to leading and supporting efforts that increase access to care and engage our patients in improving health and community wellbeing. All Community Health Plan efforts implemented by Wolfson Children's must be measurable, achievable, and financially feasible. This report reflects the goals and strategic objectives identified to address community priorities within the hospital's influence and scope of service. Access to Care The significant health need of access refers to access issues across the spectrum of both health and quality of life topic areas, including access to health services, transportation, housing, and nutritious food. By improving access and increasing utilization of primary care services, Baptist Health and Wolfson Children's Hospital can improve health outcomes and reduce preventable ED visits and hospitalizations. Wolfson Children's aims to partner with community organizations in order to ensure that every child in Northeast Florida has healthcare.</p> <p>Key Issues Identified in the Assessment: * Access issues were the most mentioned barriers to healthcare in the following: - Mental healthcare - Healthcare clinics and specialists - Public transportation * Across all 5 Northeast Florida counties, lack of access to public transportation was a challenge for 62% of survey respondents. * Lack of access also consists of inclusive community clinics that accept Medicaid. * Florida has the second most uninsured children in the United States. - Approximately 55,000 children under the age of 19 lost health insurance between 2016-2019. * Social determinants such as economic instability, poor neighborhoods, and lack of access to quality food and healthcare threaten the health and well-being of a significant portion of our most vulnerable populations and disproportionately affect minorities. - There are few nutritious food stores in certain zip codes, while cheap fast-food options are prevalent and convenient. Goals: * Every Child in Northeast Florida has Health Care * All children can see Strategies: * Continue operating health centers in schools in the Ribault and Raines feeder pattern in Duval County. * Provide enrollment assistance to children eligible for Florida KidCare. * Provide asthma education to children diagnosed with the chronic disease. * Partner with Children's Home Society, Clay Public Schools and Aza Health to support health services in the Clay County Community Schools and developing a plan if dete</p>

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 12	<p>rmined to be feasible. * Provide access to screenings, exams and glasses for children in need Metrics/What we are measuring: * Number of visits * Student health as measured through surveys * Number of children enrolled in Florida KidCare * Pre and post-test for knowledge gains * Number of children/adults educated * Feasibility of offering health services * Number of screenings, exams and glasses provided * Percentage of students who failed a vision screening, then received an eye exam and percentage of students who received prescription glasses * Number and percent of students who fail vision screenings multiple years. * Qualitative information about the impact of vision clinics in classroom behavior and confidence in school Potential Partnering/External Organizations: * Department of Health - Duval * Duval County Public Schools * UF Health Jacksonville * Full Service Schools * Hazel Health * Vision is Priceless * St. Vincent's Mobile Health outreach * Lutheran Services Florida Head Start * Clay County Public Schools * The Way Clinic * Northeast Florida Healthy Start Coalition * St. Johns County Head Start * Duval County Charter Schools * Children's Home Society Buckner Division * Aza Health * School districts in NEFL * Departments of Health in NEFL Results: Year 1 (October 1, 2021 - September 30, 2022) * Provided a total of 196 appointments at the Wolfson Children's @ School Ribault Family Resource Center * 151 sports physicals were conducted for students at the Wolfson Children's @ School Ribault Family Resource Center * R.A.W. (Ribault Access and Wellness) student advisory committee for Wolfson Children's @ School had 26 students participate in activities during the 2021-2022 school year and 33 students participate in the 2022-2023 school year. * 8 events and activit ies held in the community promoting the health center and student advisory committee, R.A. W. Year 1 (October 1, 2021 - September 30, 2022) * Provided application assistance to 1,651 individuals * Participated in 92 health fairs and events, providing health insurance education to 7,276 individuals * Florida KidCare messaging had a reach of 29,760 total media impressions * Florida KidCare PSA messaging on AM, FM, and Satellite Radio had a total of 1,667 PSA spots from 12/14/2021-06/29/2022 on 16 radio stations and an estimated reach of 338,800 listeners Year 1 (October 1, 2021 - September 30, 2022) * 1513 patients and their families provided with asthma management education * 34 high- risk patients receiving bedside education and direction care coordination Year 1 (October 1, 2021 - September 30, 2022) * Wilkinson Jr. High opened a new Aza Telehealth Clinic on campus for students as well as adults who are in the school. * 58 individual appointments made at the health clinic on campus Year 1 (October 1, 2021 - September 30, 2022) * 30,495 children received vision screenings for the early detection of vision issues * 1,265 (4.15%) of students failed the screening and received comprehensi</p>

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 12	ve eye exams while at school * 1,075 (84.98%) of students who were examined, received prescription glasses

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 13	<p>Facility A, 13 - Southern Baptist Hospital of Florida, Inc. (dba Wolfson Children's Hospital). Mental and Behavioral Health Baptist Health has made behavioral health services a priority providing comprehensive inpatient and outpatient services to children. Mental Health was a priority health need addressed by Wolfson Children's Hospital in the last three-year CHNA cycle, and the focus on this health need continues into this CHNA cycle as behavioral health needs of children and youth in the hospital's service area continue to increase. Key Issues Identified in the Assessment: * Mental health services were frequently identified as a priority need. * Priority issues identified involving mental health include lack of providers; youth mental health; telehealth; suicide; LGBTQ mental health * The rate of children ages 1-5 receiving mental health treatment services in all 5 area counties is higher than the state of Florida rate. * About 1 in 16 students in Northeast Florida "seriously considered" suicide in 2019. - Approximately 8% of Northeast Florida high school students reported attempting suicide one or more times during the past year. - Female students and Black students attempted suicide more than other groups of students. Goals: * A healthy community with easy and timely access to high quality services when needed: 24-hour support and timely appointments (2 weeks - counseling, 4 weeks - psychiatry) More providers delivering the most advanced care Strong care continuum (enough of the right type of care) Seamless transitions along the care continuum Mental illness decriminalized Stigma eliminated and crises prevented Community advocating improvement Strategies: * Continue offering Mental Health First Aid, a proven best practice to reduce stigma of mental illness which increases the likelihood that people will access care. * Convene a leadership task force of providers, elected leaders and people with lived experience to prioritize identified opportunities and develop a plan for action * Support implementation of Calm Classroom in Northeast Florida. * Host community-wide conferences on mental health to reduce stigma and barriers to care. * Support implementation of On Our Sleeves to provide free, easy-to-use educational tools and resources to help parents and caregivers start conversations, boost mental well-being, and break stigmas associated with children's mental health. Metrics/What we are measuring: * 1,500 people trained by 2024 * Evaluate participant satisfaction * Evaluate the impact of each initiative according to its focus * Crisis calls (schools, EMT, police) * Rate of behavioral health ED visits * Number of schools and organizations participating in Calm Classroom * Evaluation of implementation and results * Number of people attending the conference * Satisfaction surveys * Number of community partners joining initiative through awareness campaign, employee presentations, and/or support * Number of individual subscriptions to the On Our</p>

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
<p>Schedule H, Part V, Section B, Line 11 Facility A, 13</p>	<p>Sleeves monthly newsletter Potential Partnering/External Organizations: * Florida's First Coast YMCA * National Council for Behavioral Health * Partnership for Child Health * Duval County Public Schools * Clay County Public Schools * Hope Street Inc. * Karyn Purvis Institute of Child Development at TCU * Calm Classroom * Early learning centers * Early Learning Coalitions * Public School systems * Private/charter schools * Community mental health providers * Faith organizations * Universities * Community organizations addressing stigma and mental health * Pediatric healthcare providers Results: Year 1 (October 1, 2021 - September 30, 2022) * Wolfson Children's Hospital offered 13 classes for Youth Mental Health First Aid. * 179 adults were trained in Youth Mental Health First Aid, with participants rating high satisfaction with the training quality. Year 1 (October 1, 2021 - September 30, 2022) * Hope Healing JAX: Building a Trauma Responsive Jacksonville was created in partnership with Hope Street, Inc. and the Karyn Purvis Institute of Child Development at TCU as a Jacksonville city-wide initiative to: (1) foster awareness and culture change; (2) prevent and reduce ACEs and trauma; (3) nurture learning committees. * Wolfson Children's Hospital is represented with a member on a Hope Healing JAX Steering Committee and Action Groups to implement these objectives. Year 1 (October 1, 2021 - September 30, 2022) * Calm Classroom implemented within 106 schools in Duval County * 92% of teachers lead or participate in Calm Classroom techniques 1 or more times per day * Of 440 educators surveyed from 24 schools, 90% of teachers report "students seem calmer and more peaceful after practicing Calm Classroom." * Of 440 educators surveyed from 24 schools, 85% of teachers report "students are more engaged and ready to learn after practicing Calm Classroom." * Of 440 educators surveyed from 24 schools, 87% of teachers report Calm Classroom has helped teachers understand the importance of self-care Year 1 (October 1, 2021 - September 30, 2022) * The 2022 Mental Health Conference - Access and Advocacy: A Community Conversation, was hosted on April 27, 2022, with 191 individuals in attendance. The keynote address and presentation materials were posted on the Baptist Health Social Responsibility website * 100% of survey respondents (n=34) rated the conference quality as excellent or good Year 1 (October 1, 2021 - September 30, 2022) * On Our Sleeves participated in a total of 40 events throughout the community providing awareness for the stigma campaign as well as offered free educational resources promoting children's mental wellness. * On Our Sleeves had a total of 677 subscribers to the On Our Sleeves monthly e-mail newsletter including mental wellness resources and guides for families and children.</p>

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
<p>Schedule H, Part V, Section B, Line 11 Facility A, 14</p>	<p>Facility A, 14 - Southern Baptist Hospital of Florida, Inc. (dba Wolfson Children's Hospital). Maternal and Child Health Each year, approximately 17,500 babies are born in Northeast Florida and 2,000 babies are delivered at Baptist Medical Center Jacksonville. The health and wellbeing of the mothers, fathers and their babies is important to Baptist Health and Wolfson Children's Hospital. This health need continues to be a focus for Wolfson Children's due to the significant number of adverse outcomes in the hospital's service area Key Issues Identified in the Assessment: * Neonatal mortality, infant mortality, post neonatal mortality, and maternal mortality rates in Duval County are all higher than Florida's rates. * The neonatal mortality rate (per 1,000 live births) is almost 3 times higher among Black babies than white babies in Duval County. * The infant mortality rate (per 1,000 live births) is over 2 times higher among Black babies than white babies in Duval County * The child mortality rate in Duval (38.3 per 100,000 population aged 5-19) is the highest in Northeast Florida and above the state rate of 26.0. Goals: * Zero preventable deaths. Zero health disparities. * Support parents with perinatal mood disorders (PMADs). Strategies: * Partner with the Northeast Florida Healthy Start Coalition to address needs of moms and babies. * Expand WELLCome Home initiative to additional Baptist hospitals * Achieve Cribs for Kids National Safe Sleep Hospital Certification, designated to hospitals that model and teach infant safe sleep best practices. * Offer classes focused on increasing awareness of safe sleep practices to mothers. * Continue partnering with Duval County Public Schools to provide safe sex education through health curriculum * Provide a continuum of care including psychology and psychiatry support on an inpatient and outpatient basis. * Provide education on perinatal or postpartum mood and anxiety disorder (PMADs) to clinicians. * Provide support groups to new mothers experiencing PMADs. Metrics/What we are measuring: * Infant mortality * Pre-term births * Low Birth-weight babies * Number of moms connected through phone and/or in-home support * Number of sleep sacks distributed to mothers delivering at all Baptist campuses * Number of caregivers trained in safe sleep education * Number of participants in class * Number of students participating in classes * Number of participants * Number of people trained * Number of people participating in support groups Potential Partnering/External Organizations: * Northeast Florida Healthy Start Coalition * Home visiting programs * Cribs for Kids * Florida Department of Health * The Magnolia Project * Duval County Public Schools * University of North Florida * OBGYN Practices * Postpartum Support International * Florida's First Coast YMCA Results: Year 1 (October 1, 2021 - September 30, 2022) * 140 mothers referred to Northeast Florida Healthy Start Coalition WELLCome Home visiting nurse 110 mothers</p>

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
<p>Schedule H, Part V, Section B, Line 11 Facility A, 14</p>	<p>rs consented and participated to the WELLcome Home nurse visit and education (78.6% completion) 110 mothers educated on safe sleep practices and 73 mothers educated on infant and/or maternal nutrition * Northeast Florida Healthy Start Coalition community health workers targeted zip codes 32209 and 32210 as a Fetal Infant Mortality Review action plan to decrease infant mortality. 182 initial intakes completed by the community health workers with pregnant women Community health workers referred 111 mothers to maternal and child health home visiting programs More than 100 cases were connected to a home visiting program from a initial intake * 2021 Infant mortality rates Florida: 5.9/1,000 live births Baker: 0.0/1,000 live births Clay: 5.4/1,000 live births Duval: 6.7/1,000 live births 32209: 12.5/1,000 live births 32210: 6.6/1,000 live births Nassau: 2.4/1,000 live births St. Johns: 7.2/1,000 live births * 2021 Preterm births Florida: 23,179 (10.85%) Baker: 28 (8.75%) Clay: 268 (12.21%) Duval: 1,518 (12.24%) 32209: 92 (16.64%) 32210: 110 (12.57%) Nassau: 95 (11.46%) St. Johns: 210 (8.91%) * 2021 Low birth weight babies Florida: 19,211 (8.99%) Baker: 26 (8.13%) Clay: 196 (8.93%) Duval: 1,306 (10.53%) 32209: 94 (17%) 32210: 123 (14.06%) Nassau: 62 (7.48%) St. Johns: 174 (7.38%) Year 1 (October 1, 2021 - September 30, 2022) * 1311 mothers called after discharge delivery, and 758 mothers participated in the WELLcome Home call back education program. * 132 mothers referred to Northeast Florida Healthy Start Coalition * 71 mothers referred to lactation consultation services * 10 mothers connected to maternal mental health services * Expanded WELLcome Home to include Baptist Medical Center Beaches Year 1 (October 1, 2021 - September 30, 2022) * A total of 456 adults were provided with safe sleep education. * Participated in 8 community events and 8 classes offering safe sleep practices and education * Distributed a total of 7 Pack N Plays Year 1 (October 1, 2021 - September 30, 2022) * A total of 456 adults were provided with safe sleep education. * Participated in 8 community events and 8 classes offering safe sleep practices and education * 532,207 total media impressions covering safe sleep education Year 1 (October 1, 2021 - September 30, 2022) * Wolfson Children's Hospital team members assisted with condom demonstration for 6 school classes education a total of 252 students * Duval County Public Schools discontinued the condom demonstration sexual health education for FY22 Year 1 (October 1, 2021 - September 30, 2022) * From November 2021 through September 2022, 45 participants attended PMAD lectures. Year 1 (October 1, 2021 - September 30, 2022) * 30 clinicians were trained by Baptist Maternal Mental Health Year 1 (October 1, 2021 - September 30, 2022) * 24 New Moms Support Group classes offered virtually for new mothers occurring every other week * 92 mothers participated in New Moms Support Group</p>

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
<p>Schedule H, Part V, Section B, Line 11 Facility A, 15</p>	<p>Facility A, 15 - Southern Baptist Hospital of Florida, Inc. (dba Wolfson Children's Hospital). Social Determinants of Health While the traditional role of health care is to treat patients' physical symptoms and medical conditions, clinical care accounts for only about 20% of an individual's health outcomes. An individual's habits and behaviors account for about 30% of quality and length of life. The social, economic, and environmental factors, also known as Social Determinants of Health (SDOH), determine 50% of an individual's health outcomes, and they affect an individual's ability to stay healthy and recover from illness, manage chronic conditions, and maintain overall well-being. The Healthy People Initiative organized SDOH around 5 key domains: Economic stability; Education access and quality; Health care access and quality; Neighborhood and built environment; and Social and community context. Key Issues Identified in the Assessment: * Cost of care (copays, prescriptions) was a commonly cited concern for medical, dental, and mental health services. * Top economic issues affecting health also include lack of a living wage and lack of affordable healthcare and insurance. * Across all 5 counties, those with access to public transportation reported it can be difficult to navigate or prohibitive due to the length of time it takes to get places. * CHNA survey respondents and interviewees indicated a community-wide concern regarding the lack of affordable and safe housing. * Factors contributing to chronic disease include food deserts, level of access to physical activity, and air quality. * Pedestrian and bicycle safety were also cited as environmental health concerns by respondents. Goals: * Address social needs that keep people sick Strategies: * Increase employment opportunities * Increase access to healthy food * Ensure parks are safe places for children and adults * Research opportunities to address housing and transportation * Implement Find Help (Aunt Bertha) referral system for patients and community members Metrics/What we are measuring: * Percentage of people hired in low life expectancy zip codes * Percentage of identified FQHC and free clinic patients screened for food insecurity * Percentage of patients connected with food assistance programs * Number of home-delivered food boxes or meals * Evaluate community response and engagement at targeted park improvements * Evaluate level of programming at targeted parks * Evaluate organization's ability to address these social determinants * Number of organizations receiving referrals through Find Help Potential Partnering/External Organizations: * CareerSource * Boys and Girls Club * Feeding Northeast Florida * JTA - Door to Store * Lift Jax - Deb Store * Meals on Wings * Blue Zones Jacksonville * City of Jacksonville Parks and Recreation * Jaguars * Lift Jax * Ability Housing * Jacksonville Transportation Authority * JWB * LISC * Community-based organizations addressing social needs Results: Y</p>

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 15	<p>Year 1 (October 1, 2021 - September 30, 2022) * A partnership was created with CareerSource to provide job fairs in identified zip codes. Due to unforeseen circumstances with Hurricane Ian, the initiative was postponed to March 2023. Year 1 (October 1, 2021 - September 30, 2022) * 1274 families assisted with Supplemental Nutrition Assistance Program (SNAP) * Family Links at THE PLAYERS Center for Child Health at Wolfson Children's Hospital provided emergency food bags to 49 families with identified food insecurity needs Year 1 (October 1, 2021 - September 30, 2022) * Lift Jax is focusing on Flossie Brunson and A. Philip Randolph Parks by upgrading equipment and amenities. Because construction has not finished, the community's response has not been evaluated. * A programmer position is being drafted with the aim of addressing park engagement. Ideally it will align with Blue Zones efforts. Year 1 (October 1, 2021 - September 30, 2022) * Family Links at THE PLAYERS Center for Health at Wolfson Children's Hospital assisted 15 families with housing needs, such as rent/utilities assistance * 29 public transit bus passes provide to families in need of transportation through Family Links at THE PLAYERS Center for Child Health at Wolfson Children's Hospital * Through the Health Anchor Network, Baptist Health is assessing its ability to play a role in affecting change by reviewing resources that address healthy and affordable housing and economic disparities resulting in limited transportation options. Year 1 (October 1, 2021 - September 30, 2022) * Implementation of findhelp slowly occurred through the summer as the Epic EMR was being setup for a late July start. Thirty-six organizations received 46 referrals between them from May to September.</p>

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 16	<p>Facility A, 16 - Southern Baptist Hospital of Florida, Inc. (dba Wolfson Children's Hospital). Needs Wolfson Children's Hospital Will Not Address No entity can address all the health needs present in its community. Wolfson Children's is committed to serving the community by adhering to its mission, using its skills and capabilities, and remaining a strong organization so that it can continue to provide a wide range of community benefits. This plan does not include specific strategies to address the following health priorities that were identified in the 2021 Community Health Needs Assessment; however, each of these health needs will continue to be addressed through partnerships and ongoing initiatives: Areas of Poverty - This need is being addressed by other entities in Northeast Florida, including United Way of Northeast Florida, which is supported by Baptist Health and Wolfson Children's. In addition, Baptist Health's Vice President of Community Investment and Impact actively participates in a community effort that includes businesses, city government and funders to end poverty in Jacksonville. Wolfson Children's does not anticipate implementing additional initiatives to address poverty. The hospital does not have sufficient resources to effectuate a significant change in this area and will focus resources on other significant community health needs. Chronic Disease - Wolfson Children's through THE PLAYERS Center for Child Health provides developmentally and age-appropriate nutrition education to children in classroom and community-based settings. In addition, Wolfson Children's provides support for the local Play 60 program, the NFL initiative that encourages 6th grade students to get 60 minutes of physical activity a day. To decrease hospital admissions, the Community Asthma Partnership teaches families of children with asthma how to successfully manage the disease. The program also provides other health services, wellness education, and resources for children, families, educators, and health professionals throughout Northeast Florida. Also, JaxCareConnect, a collaboration created by the local nonprofit safety net of free charitable clinics to assist uninsured adult Duval County residents find a primary care medical home, is better suited to connect residents with a primary care doctor and navigate community resources to address chronic disease concerns. Last, Wolfson Children's, through Baptist Health is a leader and significant sponsor for Blue Zones Jacksonville which will be working with schools in Duval County to change their environments to increase physical activity and health eating, and decrease obesity, which are causes of chronic diseases. Given these long-term investments, the hospital will focus on other significant community health needs, and Wolfson Children's does not anticipate implementing additional initiatives to address chronic disease. Transportation - The Jacksonville Transportation Authority, United Way, and other North</p>

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 16	<p>east Florida organizations that Baptist Health collaborates with provide transportation options for residents. In addition, Blue Zones Jacksonville seeks to increase the health and safety of environments to enable residents to enjoy healthier lives. A key component of the Blue Zones work is to address transportation safety. Given this significant investment, Wolfson Children's does not have additional resources to commit to transportation needs. The hospital is committed to addressing other social determinants of health. Housing - Habitat for Humanity affiliates, United Way, and other organizations in Northeast Florida are better positioned to assist residents with housing needs. Wolfson Children's also partners with Jacksonville Area Legal Aid through the Northeast Florida Medical Legal Partnership to address civil legal problems adversely affecting the health of pediatric patients, including affordable housing, safe living conditions, and housing discrimination. Baptist Health is committed to addressing social determinants of health and will advocate for ways to ensure residents have the means to a healthy life. Drug Abuse - While mental health is being addressed by Wolfson Children's, drug abuse is not a specific priority that the hospital has the resources to significantly impact. Baptist Health is an active participant in the System of Care Initiative which coordinates services for children and youth with mental illness and substance use disorder. There are many organizations and addiction treatment centers in Northeast Florida that Baptist Health works with that can provide the support systems the community needs. Cancer - Baptist MD Anderson Cancer Center is part of the Wolfson Children's services and participates in outreach and educational activities throughout Northeast Florida. Wolfson Children's also partners with Nemours Children's Specialty Care to provide top-rated cancer care to children in the hospital's service area. Given these investments, partnerships, and limited resources, Wolfson Children's has determined it is best to use its resources to address the prioritized health needs of Access to Care, Behavioral Health and Maternal, Fetal and Infant Health.</p>

Form 990 Part V Section C Supplemental Information for Part V, Section B.

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 20 Facility A, 1	Facility A, 1 - Facility A. Charity or Discounted Care posters are located in the Emergency Rooms and Patient Admission areas to inform patients of financial assistance and who to contact regarding financial assistance. AT PATIENT ACCESS POINTS, "GUIDELINES FOR CHARITY CARE ELIGIBILITY" CARDS ARE PROVIDED THAT CONTAIN FINANCIAL DISCOUNT AND CHARITY CARE INFORMATION. THIS INCLUDES A GENERAL CHART OF ELIGIBLE INCOME LEVELS AND ENCOURAGES PATIENTS TO SPEAK WITH OUR PATIENT FINANCIAL ADVOCATES TO ARRANGE A FINANCIAL EVALUATION. All billing statements conspicuously display the phone number, address, and website which directs patients to our financial assistance advocates and contains all financial assistance information. ALL APPLICANTS FOR FINANCIAL ASSISTANCE ARE MAINTAINED WHETHER OR NOT THE PATIENT QUALIFIES. All attempts to contact the patient are exhausted before sending to collections. All patients are sent through a system that analyses the financial position of the individual. All patients who are scored a certain number in accordance with our policy and who have not already applied for financial assistance are automatically deemed eligible for financial assistance.

Note: To capture the full content of this document as Filed, please select landscape mode (11" x 8.5") when printing.

Schedule I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.

Name of the organization Southern Baptist Hospital of Florida Inc

Employer identification number 59-0747311

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance...
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000.

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC section (if applicable), (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation (book, FMV, appraisal, other), (g) Description of noncash assistance, (h) Purpose of grant or assistance. Rows 1-12.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 41
3 Enter total number of other organizations listed in the line 1 table 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) THE ORGANIZATION PROVIDED SCHOLARSHIPS DURING THE TAX YEAR FOR APPROXIMATELY 4 RECIPIENTS WHO ARE QUALIFIED NURSING/MEDICAL STUDENTS, STUDENT APPLICANTS, CURRENT NURSES, OR MEDICAL PROFESSIONALS IN THE NORTHEAST FLORIDA REGION.	4	6,400			
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
Schedule I, Part I, Line 2 Procedures for monitoring use of grant funds.	OUR COMMUNITY HEALTH EFFORTS ARE GUIDED BY THE ORGANIZATION'S COMMUNITY HEALTH COMMITTEE, COMPRISED OF SELECTED BAPTIST HEALTH SYSTEM, INC. (BHS) BOARD MEMBERS (BHS IS THE PARENT AFFILIATE OF THE ORGANIZATION). THE COMMITTEE PROVIDES STRATEGIC DIRECTION RELATED TO OUR COMMUNITY HEALTH ACTIVITIES AND ENSURES WE FOCUS ON KEY PRIORITIES THAT ALIGN WITH OUR MISSION.

Additional Data

Software ID: 21014044
Software Version: 2021v4.2
EIN: 59-0747311
Name: Southern Baptist Hospital of Florida Inc

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Florida Essential Healthcare Partnerships Foundation 401 W 15TH STREET AUSTIN, TX 78701	85-3682775	501(c)(3)	4,710,116				To promote health and the relief of the poor and distressed by improving access, availability and efficiency in the delivery of healthcare services to low-income residents in Florida.
Blue Zones LLC 323 N Washington Ave 2nd Fl Minneapolis, MN 55401	27-1603327		350,659				To empower everyone, everywhere to live longer, better.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Northeast FL Healthy Start Coalition Inc 751 Oak St 610 Jacksonville, FL 32204	59-3139801	501(c)(3)	333,500				To establish and maintain a community-based prenatal and infant health care coalition that is comprised of persons representing the public, private sector, state and local government, providers, community alliances and maternal and child health organizations.
IM Sulzbacher Center for the Homeless Inc 611 East Adam Street Jacksonville, FL 32202	59-3229898	501(c)(3)	222,037				TO EMPOWER HOMELESS AND AT RISK WOMEN, CHILDREN AND MEN THROUGH HEALTH, HOUSING AND INCOME SERVICES THEREBY RESTORING HOPE AND SELF-SUFFICIENCY.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
United Way of NE FL Inc 40 E Adams St 200 Jacksonville, FL 32202	59-0637825	501(c)(3)	213,500				To solve the community's toughest challenges by connecting people, resources and ideas.
Volunteers In Medicine Jacksonville Inc 41 E Duval St Jacksonville, FL 32202	75-3002172	501(c)(3)	150,000				To improve the health of the NE Florida community by providing free primary and limited specialty care to the working poor, who cannot afford health insurance or healthcare for themselves and their families.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Art with a heart in Healthcare Inc 841 Prudential Drive Jacksonville, FL 32207	26-1313805	501(c)(3)	150,000				TO PROVIDE PERSONALIZED FINE ART EXPERIENCES THAT ENHANCE THE HEALING PROCESS FOR PATIENTS AND THEIR FAMILIES.
VISION IS PRICELESS COUNCIL 4615 Phillips Hwy Jacksonville, FL 32207	59-3386495	501(c)(3)	150,000				To assess, sustain, and improve the visual health of children and adults in Northeast Florida through education, vision screenings, treatment and referrals.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Lift Jax 40 East Adams St Jacksonville, FL 32202	85-0819002	501(c)(3)	100,000				TO SUPPORT THE VISION OF RESIDENT LEADERS WHO LEAD AND CHAMPION WORK IN THE HISTORIC EASTSIDE NEIGHBORHOOD.
RONALD MCDONALD HOUSE 824 Childrens Way Jacksonville, FL 32207	59-2625008	501(c)(3)	100,000				To support THE HEALTH AND WELL-BEING OF CHILDREN BY PROVIDING LODGING, MEALS, TRANSPORTATION AND A COMMUNITY OF CARE TO CRITICALLY ILL CHILDREN AND THEIR FAMILIES WHO NEED TO BE NEAR A HOSPITAL FOR TREATMENT.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Gateway Community Services Inc 555 Stockton Street Jacksonville, FL 32204	59-1881828	501(c)(3)	76,004				To provide rehabilitation services to individuals and their families who are suffering from alcoholism drug abuse, regardless of their ability to pay.
Jacksonville Sports Medicine Program Inc 3563 Philips Hwy Jacksonville, FL 32207	59-2997510	501(c)(3)	75,500				To support the youth safety program dedicated to youth sports injury prevention.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNF Brooks College of Health 1 UNF Dr Hicks Hall 2900 Jacksonville, FL 32224	23-7167701	501(c)(3)	74,000				TO PROVIDE FINANCIAL SUPPORT TO THE STUDENTS AND PROGRAMS OF THE UNF.
TOM COUGHLIN JAY FUND PO Box 50798 Jacksonville Beach, FL 32240	59-3426937	501(c)(3)	70,000				TO HELP FAMILIES TACKLE CHILDHOOD CANCER BY PROVIDING COMPREHENSIVE FINANCIAL, EMOTIONAL AND PRACTICAL SUPPORT.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MUSLIM AMERICAN SOCIAL SERVICES 2251 ST JOHNS BLUFF RD S JACKSONVILLE, FL 32246	46-5096772	501(c)(3)	65,000				TO PROVIDE FREE, VOLUNTEER BASED CARE MANAGEMENT TO THE UNINSURED POPULATION OF DUVAL COUNTY.
The Way Free Clinic 479 Houston St Green Cove Springs, FL 32043	76-0820154	501(c)(3)	65,000				To provide 100% free medical care for uninsured, low-income residents of Clay County, FL.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JASMYN 929 Peninsular Place Jacksonville, FL 32204	59-3284175	501(c)(3)	63,764				To support and empower LGBTQ+ young people by creating safe space, providing health and wholeness services, and offering youth development opportunities, while bringing people and resources together to promote equality and human rights. Our vision: LGBTQ young people are affirmed in their identities, confident in their futures, and are a valued asset in the Northeast Florida community
Youth Crisis Center Inc 3015 Parental Home Rd Jacksonville, FL 32216	59-2176287	501(c)(3)	60,000				To build a healthier community by empowering young people and families to rise above adversity.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
STARTING POINT BEHAVIORAL HEALTHCARE 463142 State Rd 200 YULEE, FL 32097	59-3029469	501(c)(3)	52,083				To promote emotional wellness through psychiatric, mental health and substance use disorder treatment services and community education and awareness.
WE CARE JACKSONVILLE INC 4080 WOODCOCK DR JACKSONVILLE, FL 32207	59-3431724	501(c)(3)	50,000				TO IMPROVE ACCESS TO SPECIALTY HEALTH CARE FOR LOW-INCOME AND UNINSURED PATIENTS.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Women's Center of Jacksonville Inc 5644 Colcord Ave Jacksonville, FL 32211	23-7437216	501(c)(3)	49,194				To improve the lives of women through advocacy, support and education and to provide services for individuals of all genders in Duval, Baker and Nassau Counties.
Children's Home Society of Florida 3027 San Diego Rd Jacksonville, FL 32207	59-0192430	501(c)(3)	46,130				To build bridges to success for children.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Community Health Outreach 5126 Timuquana Rd Jacksonville, FL 32210	59-3038067	501(c)(3)	40,000				To administer an outreach program designed to provide a variety of services and tangible items for consumption to people who are living in temporary or permanent poverty situations.
NAMI Jacksonville PO Box 600857 Jacksonville, FL 32260	59-2931035	501(c)(3)	35,000				To support and improve the quality of life for family members and those living with mental illness.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Boggy Creek Summer Camp 30500 Brantley Branch Rd Eustis, FL 32736	59-3012889	501(c)(3)	25,000				A PLACE WHERE CHILDREN FACING THE CHALLENGES OF LIVING WITH CHRONIC OR LIFE-THREATENING ILLNESS CAN BE SURROUNDED BY OTHER CHILDREN.
Pine Castle 4911 Spring Park Rd Jacksonville, FL 32207	59-0704733	501(c)(3)	25,000				To empower adults with intellectual and developmental differences through opportunities to learn, work and connect.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Duval County Health Dept 921 North Davis St Bldg A Jacksonville, FL 32209	59-3502843		21,108				TO protect, promote, and improve the heal of all people in Florida through integrated state, county and community efforts.
Bridge the Gap 561 West 25th St Jacksonville, FL 32206	85-1437188	501(c)(3)	18,101				To mobilize volunteers and entities-government, faith, health, business and the community at large to partner with us in filling the gaps that exists in the delivery of fundamental social services to the elderly and disabled citizens.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Planned Parenthood 5978 Powers Ave Jacksonville, FL 32217	13-1644147	501(c)(3)	15,000				To ensure all people have access to the care and resources they need to make informed decisions about their bodies, their lives, and their futures.
Pie in the Sky Community Alliance Inc PO Box 600887 Jacksonville, FL 32260	27-0616592	501(c)(3)	15,000				To connect seniors with resources and facilitate long-term solutions that affect the lives of the elderly, the poor, the historically underserved, and the disenfranchised people in the community.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
2nd Mile Ministries Inc 4003 N Pearl St Jacksonville, FL 32206	43-1523426	501(c)(3)	14,500				Seek to see the gospel renew lives and communities so they are transformed in every way.
Boys and Girls Club of NE FL Inc 555 W 25th St Jacksonville, FL 32206	59-6167630	501(c)(3)	13,448				To inspire and enable all young people, especially those who need us most, to realize their full potential as productive, responsible and caring citizens.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHRIST STARFISH FOUNDATION 11750 Coastal Lane West Jacksonville, FL 32258	20-8704866	501(c)(3)	12,600				To help hurting children with non-cancer illnesses and their families
Habitat for Humanity of St Augustine 7 Hopkins St St Augustine, FL 32084	59-3129794	501(c)(3)	10,500				TO live in a world where everyone has a healthy, affordable place to call home.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SHADES OF AUTISM PARENT NETWORK INC 2736 University Blvd Jacksonville, FL 32217	84-4585841	501(c)(3)	10,000				To provide peer support to diverse communities with children on the Autism spectrum.
YOGA 4 CHANGE INC 4453 Windmere St Jacksonville, FL 32210	46-4993274	501(c)(3)	10,000				To foster holistic wellbeing, resilience, and transformation for individuals and communities through evidence-based trauma-informed curricula.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Community Hospice of Northeast Florida Inc 4266 Sunbeam Road Jacksonville, FL 32257	59-1940256	501(c)(3)	6,000				To support the improvement of quality of life for patients and families.
Hart Felt Ministries 7235 Bonneval Rd Jacksonville, FL 32256	59-3712163	501(c)(3)	5,000				To honor God by enriching the lives of seniors and enabling them to age in a place with dignity and grace.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Icare 2650 Park St Jacksonville, FL 32204	59-3332540	501(c)(3)	5,000				To powerfully address citywide concerns related to issues of justice and fairness.
Jacksonville University 2800 University Blvd N Jacksonville, FL 32211	59-0624412	501(c)(3)	5,000				To prepare students for life-long success in learning, achieving, leading, and serving. We accomplish this mission in a small, comprehensive, independent University community located within a vibrant metropolitan setting.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NORTHSIDE COMMUNITY INVOLVEMENT 4736 Avenue B Jacksonville, FL 32209	59-3390714	501(c)(3)	5,000				To give children and families a vision and a chance to improve their lives by becoming a vital part of their community
PROJECT CHANCE INC 23525 Bahama Point Fernandina Beach, FL 32034	56-2403830	501(c)(3)	5,000				To train service dogs with a specific skill set needed to aid each child diagnosed with autism and other developmental disabilities

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALLISON BRUNDICK HARAMIS FOUNDATION INC 2905 Corinthian Ave Jacksonville, FL 32210	27-4599048	501(c)(3)	5,000				To honor the legacy of Allison's joyous spirit by alleviating the financial burden of funeral costs associated with the loss of a child.

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization
Southern Baptist Hospital of Florida Inc

Employer identification number
59-0747311

Part I Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		
	<input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax idemnification and gross-up payments <input type="checkbox"/> Discretionary spending account <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
b	If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?	2	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.		
	<input type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations <input type="checkbox"/> Written employment contract <input type="checkbox"/> Compensation survey or study <input type="checkbox"/> Approval by the board or compensation committee		
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:		
a	Receive a severance payment or change-of-control payment?	4a	Yes
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes
c	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	4c	No
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a	The organization?	5a	No
b	Any related organization? If "Yes," on line 5a or 5b, describe in Part III.	5b	No
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a	The organization?	6a	No
b	Any related organization? If "Yes," on line 6a or 6b, describe in Part III.	6b	No
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.	7	No
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.	8	No
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
Schedule J, Part I, Line 3 Arrangement used to establish the top management official's compensation	<p>IN ACCORDANCE WITH THE EXECUTIVE COMPENSATION POLICY OF BAPTIST HEALTH SYSTEM, INC. (BHS), THE ORGANIZATION'S SOLE MEMBER, THE LEADERSHIP COMPENSATION COMMITTEE (THE COMMITTEE) OF BHS (MADE UP OF INDEPENDENT DIRECTORS OF BHS) ANNUALLY ENGAGES A THIRD PARTY EXECUTIVE COMPENSATION CONSULTANT WHO PROVIDES COMPARABLES FOR EXECUTIVE COMPENSATION BASED ON CURRENT DATA REGARDING COMPENSATION PAID TO SIMILAR EXECUTIVES AT SIMILARLY-SITUATED TAX EXEMPT HEALTH SYSTEMS IN THE U.S. SUCH CONSULTANT USES THESE COMPARABLE HEALTH SYSTEMS , WHICH ARE GENERALLY THE SAME SIZE AS BHS (CONSIDERING REVENUE AND OTHER APPROPRIATE INDICATORS), TO ESTABLISH AN APPROPRIATE MARKET. WHEN THE COMMITTEE MEETS WITH SUCH CONSULTANT, THE CONSULTANT PROVIDES TO COMMITTEE MEMBERS EXECUTIVE COMPENSATION TARGET LEVELS THAT ARE COMPETITIVE WITH THE MARKET. GENERALLY, THE MEDIAN OF THE MARKET IS TARGETED. THE ACTUAL AMOUNT THAT BHS EXECUTIVES RECEIVE AS COMPENSATION MAY BE HIGHER OR LOWER THAN THE MEDIAN, DEPENDING ON BHS'S AND THE INDIVIDUAL'S PERFORMANCE. ONE OBJECTIVE OF THE COMMITTEE IS TO HAVE A STRONG LINK BETWEEN BHS AND INDIVIDUAL PERFORMANCE AND EXECUTIVE COMPENSATION SUCH THAT IF BHS AND THE INDIVIDUAL PERFORM AT AN OPTIMAL LEVEL, HIS OR HER COMPENSATION IS IN THE HIGHER RANGE OF THE MARKET. CONVERSELY, IF EITHER BHS OR INDIVIDUAL PERFORMANCE IS BELOW EXPECTATION, COMPENSATION MAY BE IN THE LOWER RANGE OF THE MARKET. OTHER FACTORS THAT INFLUENCE EXECUTIVE COMPENSATION RELATIVE TO THE MARKET INCLUDE THE EXECUTIVE'S EXPERIENCE AND BHS'S NEED TO ATTRACT AND RETAIN TOP EXECUTIVE TALENT. MINUTES OF THIS ANNUAL COMPENSATION REVIEW BY THE COMMITTEE ARE RECORDED BY SUCH CONSULTANT AND ARE APPROVED PROMPTLY BY THE CHAIR OF THE COMMITTEE.</p>

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
Schedule J, Part I, Line 4a Severance or change-of-control payment	The following individuals received severance payments during calendar year 2021: Brett McClung \$731,000, Mary Ellen Shopp \$311,976 and Elizabeth Ransom \$285,000. These amounts are included on Schedule J, part II, column b(iii).

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
Schedule J, Part I, Line 4b Supplemental nonqualified retirement plan	<p>Baptist Health System, Inc. (BHS) parent affiliate of Southern Baptist Hospital of Florida, Inc., has three supplemental nonqualified retirement plans (SERPs). One is a SERP for certain executives, another is a defined benefit SERP for vice presidents, and the third is a defined contribution SERP for senior management. These SERPs are plans described in IRS Section 457(f). The benefits under these plans accrue during each executive's term of employment. These benefits are unvested and subject to forfeiture until the covered employee reaches retirement age or the five-year anniversary of the contribution date. The following individuals accrued unvested benefits under these plans during calendar year 2021: Nicole Thomas \$92,150, Scott Wooten \$266,254, G. Scott Baity \$77,781, Cicely Brooks \$23,060, Matthew Zuino \$107,438, T. Scott Finnegan \$60,538, Kyle Dorsey \$18,252 and Darin Roark \$63,385. These accrued benefits are unvested and subject to forfeiture unless the named employee remains employed with BHS until the covered employee reaches retirement age or the five-year anniversary of the contribution date. This amount is included on Schedule J, part II, column (c). Brett McClung has vested his SERP benefit during 2021. In addition to Mr. McClung's yearly compensation of \$1,712,899 (\$1,705,668 taxable compensation and deferred compensation with non-taxable benefits of \$7,231), the total amount of the taxable SERP was also included in his W-2, Box 5 in the amount of \$428,553, per IRS guidelines. The taxable SERP compensation was paid to Mr. McClung as a one-time lump sum amount. The SERP amount is reported on Schedule J, Part II, Column (B)(iii) "Other Reportable Compensation and on Form 990, Part VII. Any amounts already reported as deferred compensation on a prior Form 990 are reported on Schedule J, Part II, Column (F) "Compensation in Column (B) Reported as Deferred on Prior Form 990." Keith Tickell has fully vested his SERP benefit during 2021. In addition to Mr. Tickell's yearly compensation of \$502,661 (\$489,040 taxable compensation and deferred compensation with non-taxable benefits of \$13,621), the total amount of the taxable SERP was also included in his W-2, Box 5 in the amount of \$421,002, per IRS guidelines. The taxable SERP compensation was paid to Mr. Tickell as a one-time lump sum amount. The SERP amount is reported on Schedule J, Part II, Column (B)(iii) "Other Reportable Compensation and on Form 990, Part VII. Any amounts already reported as deferred compensation on a prior Form 990 are reported on Schedule J, Part II, Column (F) "Compensation in Column (B) Reported as Deferred on Prior Form 990."</p>

Additional Data

Software ID: 21014044
Software Version: 2021v4.2
EIN: 59-0747311
Name: Southern Baptist Hospital of Florida Inc

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2, 1099-MISC compensation, and/or 1099-NEC			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 Michael A Mayo DHA President	(i)	167,937	0	16,736	0	0	184,673	0
	(ii)	671,606	382,042	119,172	16,675	30,794	1,220,289	0
1 Matthew A Zuino Director	(i)	0	0	0	0	0	0	0
	(ii)	623,366	248,103	5,113	119,038	16,803	1,012,423	0
2 Brett S McClung Former President/CEO (AS OF 05.01.21)	(i)	0	0	0	0	0	0	0
	(ii)	382,564	451,083	1,296,412	4,162	7,231	2,141,452	87,981
3 Elizabeth R Ransom MD Former EVP/CPE (As of 08.15.21)	(i)	0	0	0	0	0	0	0
	(ii)	491,813	204,750	545,647	11,600	15,937	1,269,747	4,327
4 Michael A Aubin Former SVP (As of 07.08.21)	(i)	610,987	472,760	47,390	16,675	20,395	1,168,207	0
	(ii)	0	0	0	0	0	0	0
5 Mary Ellen Schopp Former SVP/CHRO (As of 07.08.21)	(i)	0	0	0	0	0	0	0
	(ii)	209,597	94,633	579,186	5,075	9,781	898,272	2,674
6 Melanie J Husk Former SVP/CCO (As of 07.08.21)	(i)	0	0	0	0	0	0	0
	(ii)	380,459	201,863	21,155	19,575	15,596	638,648	0
7 David V Rice MD Former SVP/CMO/CQO (As of 07.08.21)	(i)	0	0	0	0	0	0	0
	(ii)	51,992	0	143,597	121,905	2,386	319,880	0
8 Scott M Wooten Former Asst. Treasurer (As of 12.28.21)	(i)	0	0	0	0	0	0	0
	(ii)	698,428	275,167	38,322	280,029	8,326	1,300,272	0
9 Keith A Tickell Asst. Treasurer	(i)	0	0	0	0	0	0	0
	(ii)	372,276	102,893	421,098	13,775	13,621	923,663	370,787
10 Nicole Thomas SVP	(i)	488,103	193,268	61,092	108,825	12,636	863,924	0
	(ii)	0	0	0	0	0	0	0
11 G Scott Baity Esq Asst. Secretary	(i)	0	0	0	0	0	0	0
	(ii)	490,140	170,943	34,903	124,500	12,261	832,747	0
12 T Scott Finnegan Asst. Treasurer	(i)	0	0	0	0	0	0	0
	(ii)	311,981	88,202	24,406	109,408	12,404	546,401	0
13 Kyle M Dorsey Former Interim SVP (As of 01.03.22)	(i)	295,250	75,571	30,002	32,027	5,902	438,752	0
	(ii)	0	0	0	0	0	0	0
14 Jerry Bridgham VP, Medical Affairs - WCH	(i)	390,749	142,831	13,456	19,575	13,094	579,705	0
	(ii)	0	0	0	0	0	0	0
15 Darin Roark Hospital President, CLA	(i)	353,461	79,917	22,210	77,160	18,104	550,852	0
	(ii)	0	0	0	0	0	0	0
16 Shariq Refai Physician - Psychiatrist	(i)	298,135	0	203,166	13,775	6,827	521,903	0
	(ii)	0	0	0	0	0	0	0
17 Cicely Brooks VP, Patient Care Services, BMC	(i)	283,289	64,682	21,467	64,517	20,877	454,832	0
	(ii)	0	0	0	0	0	0	0
18 Savitha Puttaiah Psychiatrist - Inpatient	(i)	317,357	0	99,759	11,600	16,127	444,843	0
	(ii)	0	0	0	0	0	0	0

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule K (Form 990)

Supplemental Information on Tax-Exempt Bonds

OMB No. 1545-0047

2021

Open to Public Inspection

Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury Internal Revenue Service

Name of the organization Southern Baptist Hospital of Florida Inc

Employer identification number 59-0747311

Part I Bond Issues

Table with columns (a) Issuer name, (b) Issuer EIN, (c) CUSIP #, (d) Date issued, (e) Issue price, (f) Description of purpose, (g) Defeased (Yes/No), (h) On behalf of issuer (Yes/No), (i) Pool financing (Yes/No). Rows include Jacksonville Health Facilities Authority Series 2007B, 2012D, City of Jacksonville Florida Series 2017, and 2019A.

Part II Proceeds

Table with columns A, B, C, D for rows 1-13. Rows 14-17 include questions about bond issuance and record keeping.

Part III Private Business Use

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X		X		X		X
2 Are there any lease arrangements that may result in private business use of bond-financed property?		X		X		X		X
3a Are there any management or service contracts that may result in private business use of bond-financed property?	X		X		X		X	
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?	X		X		X		X	
c Are there any research agreements that may result in private business use of bond-financed property?		X		X		X		X
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶	0.01 %		0.01 %		0.01 %		0.01 %	
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶	0 %		0 %		0 %		0 %	
6 Total of lines 4 and 5	0.01 %		0.01 %		0.01 %		0.01 %	
7 Does the bond issue meet the private security or payment test?	X		X		X		X	
8a Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X		X		X		X
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of.								
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	X		X		X		X	

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X		X		X		X
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		X		X		X		X
b Exception to rebate?		X		X		X		X
c No rebate due?		X		X		X		X
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3 Is the bond issue a variable rate issue?	X		X			X		X

Part IV Arbitrage (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?	X			X		X		X
b Name of provider	WELLS FARGO							
c Term of hedge	1090 %							
d Was the hedge superintegrated?		X						
e Was the hedge terminated?	X							
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X		X		X
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		X		X		X		X
7 Has the organization established written procedures to monitor the requirements of section 148?	X		X		X		X	

Part V Procedures To Undertake Corrective Action

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	X		X		X		X	

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K. (See instructions).

Return Reference	Explanation
Schedule K, Part I, Column (c) Series 2019 BCDE	CUSIP #'s: 2019B: 469400DX0 2019C: 469400DY8 2019D: 469400DZ5 2019E: 469400EA9

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

**Schedule K
(Form 990)**

Supplemental Information on Tax-Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Name of the organization
Southern Baptist Hospital of Florida Inc

Employer identification number

59-0747311

Part I Bond Issues

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A City of Jacksonville Florida Series 2019BCDE	59-6000344	STATEMENT	04-25-2019	197,910,000	Revenue Refunding Bonds to refund prior issue 12/01/2011 03/28/2011		X		X		X
B CITY OF JACKSONVILLE FLORIDA SERIES 2021AB	59-6000344	000000000	05-19-2021	150,000,000	HOSPITAL CAPITAL IMPROVEMENTS		X		X		X
C CITY OF JACKSONVILLE FLORIDA SERIES 2022ABC	59-6000344	000000000	07-18-2022	189,000,000	HOSPITAL CAPITAL IMPROVEMENTS		X		X		X

Part II Proceeds

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Amount of bonds retired			25,415,000	0			0	
2 Amount of bonds legally defeased			0	0			0	
3 Total proceeds of issue			197,910,000	150,000,000			189,000,000	
4 Gross proceeds in reserve funds			0	0			0	
5 Capitalized interest from proceeds			0	0			0	
6 Proceeds in refunding escrows			0	0			0	
7 Issuance costs from proceeds			0	0			0	
8 Credit enhancement from proceeds			0	0			0	
9 Working capital expenditures from proceeds			0	0			0	
10 Capital expenditures from proceeds			0	150,000,000			77,000,000	
11 Other spent proceeds			0	0			0	
12 Other unspent proceeds			0	0			112,000,000	
13 Year of substantial completion	2012		2022		2023			
	Yes	No	Yes	No	Yes	No	Yes	No
14 Were the bonds issued as part of a current refunding issue of tax-exempt bonds (or, if issued prior to 2020, a current refunding issue)?	X			X		X		
15 Were the bonds issued as part of an advance refunding issue of taxable bonds (or, if issued prior to 2020, an advance refunding issue)?		X		X		X		
16 Has the final allocation of proceeds been made?	X		X			X		
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X			

Part III Private Business Use

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X		X		X		
2 Are there any lease arrangements that may result in private business use of bond-financed property?		X		X		X		
3a Are there any management or service contracts that may result in private business use of bond-financed property?	X		X		X			
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?	X		X		X			
c Are there any research agreements that may result in private business use of bond-financed property?		X		X		X		
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶	0.01 %		0.01 %		0.01 %			
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶	0 %		0 %		0 %			
6 Total of lines 4 and 5	0.01 %		0.01 %		0.01 %			
7 Does the bond issue meet the private security or payment test?	X		X		X			
8a Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X		X		X		
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of.								
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	X		X		X			

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X		X		X		
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		X		X		X		
b Exception to rebate?		X		X		X		
c No rebate due?		X		X		X		
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3 Is the bond issue a variable rate issue?	X		X		X			

Part IV Arbitrage (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X		X		
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X		X		
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		X		X		X		
7 Has the organization established written procedures to monitor the requirements of section 148?	X		X		X			

Part V Procedures To Undertake Corrective Action

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	X		X		X			

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K. (See instructions).

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2021

▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
 ▶ **Attach to Form 990.**
 ▶ **Go to www.irs.gov/Form990 for the latest information.**

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
Southern Baptist Hospital of Florida Inc

Employer identification number
59-0747311

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (<u>PROFESSIONAL SERVICES</u>)	X	1	500,000	Market value
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** 0

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		No
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		No
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
Schedule M, Part I Explanations of reporting method for number of contributions	Other - PROFESSIONAL SERVICES NUMBER OF CONTRIBUTIONS

SCHEDULE O
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021**Open to Public
Inspection**Name of the organization
Southern Baptist Hospital of Florida Inc

Employer identification number

59-0747311

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 6 Classes of members or stockholders	The organization has a sole corporate member, Baptist Health System, Inc.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 7a Members or stockholders electing members of governing body	The Board of Directors of Baptist Health System, Inc., the sole corporate member, of the organization, elects the members of the governing body of the organization.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 7b Decisions requiring approval by members or stockholders	The Board of Directors of Baptist Health System, Inc., the sole corporate member of the filing organization, has the right to remove Directors of the Organization and must approve any amendments to the governing documents of the Organization.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 11b Review of form 990 by governing body	Form 990 and accompanying schedules are prepared internally and then provided to Baptist Health System, Inc. who is the sole corporate member of Southern Baptist Hospital of Florida, Inc. The board of directors of Baptist Health System, Inc. are provided a copy of the form 990 and all accompanying schedules prior to filing with the internal revenue service center.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 12c Conflict of interest policy	THE BOARD OF DIRECTORS OF THE ORGANIZATION'S SOLE MEMBER, BAPTIST HEALTH SYSTEM, INC., HAS APPOINTED A CONFLICTS OF INTEREST COMMITTEE WHICH REGULARLY REVIEWS THE REQUIRED DISCLOSURES OF POTENTIAL CONFLICTS OF INTEREST BY THE DIRECTORS AND OFFICERS OF THE ORGANIZATION AND ITS AFFILIATES AND RECOMMENDS ANY ACTION TO BE TAKEN WITH REGARD TO SUCH DISCLOSURES. IN ACCORDANCE WITH THE CONFLICTS OF INTEREST POLICY, DURING MEETINGS OF THE ORGANIZATION'S GOVERNING BODY, A DIRECTOR WHO MAY HAVE A CONFLICT OF INTEREST IS EXCUSED FROM DISCUSSION BY THE GOVERNING BODY ABOUT ANY TRANSACTION OR MATTER THAT MAY HAVE GIVEN RISE TO THE DIRECTOR'S ACTUAL OR POTENTIAL CONFLICT OF INTEREST.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 15a Process to establish compensation of top management official	IN ACCORDANCE WITH THE EXECUTIVE COMPENSATION POLICY OF BAPTIST HEALTH SYSTEM, INC. (BHS), THE ORGANIZATION'S SOLE MEMBER, THE LEADERSHIP COMPENSATION COMMITTEE (THE COMMITTEE) OF BHS (MADE UP OF INDEPENDENT DIRECTORS OF BHS) ANNUALLY ENGAGES A THIRD PARTY EXECUTIVE COMPENSATION CONSULTANT WHO PROVIDES COMPARABLES FOR EXECUTIVE COMPENSATION BASED ON CURRENT DATA REGARDING COMPENSATION PAID TO SIMILAR EXECUTIVES AT SIMILARLY-SITUATED TAX EXEMPT HEALTH SYSTEMS IN THE U.S. SUCH CONSULTANT USES THESE COMPARABLE HEALTH SYSTEMS , WHICH ARE GENERALLY THE SAME SIZE AS BHS (CONSIDERING REVENUE AND OTHER APPROPRIATE INDICATORS), TO ESTABLISH AN APPROPRIATE MARKET. WHEN THE COMMITTEE MEETS WITH SUCH CONSULTANT, THE CONSULTANT PROVIDES TO COMMITTEE MEMBERS EXECUTIVE COMPENSATION TARGET LEVELS THAT ARE COMPETITIVE WITH THE MARKET. GENERALLY, THE MEDIAN OF THE MARKET IS TARGETED. THE ACTUAL AMOUNT THAT BHS EXECUTIVES RECEIVE AS COMPENSATION MAY BE HIGHER OR LOWER THAN THE MEDIAN, DEPENDING ON BHS'S AND THE INDIVIDUAL'S PERFORMANCE. ONE OBJECTIVE OF THE COMMITTEE IS TO HAVE A STRONG LINK BETWEEN BHS AND INDIVIDUAL PERFORMANCE AND EXECUTIVE COMPENSATION SUCH THAT IF BHS AND THE INDIVIDUAL PERFORM AT AN OPTIMAL LEVEL, HIS OR HER COMPENSATION IS IN THE HIGHER RANGE OF THE MARKET. CONVERSELY, IF EITHER BHS OR INDIVIDUAL PERFORMANCE IS BELOW EXPECTATION, COMPENSATION MAY BE IN THE LOWER RANGE OF THE MARKET. OTHER FACTORS THAT INFLUENCE EXECUTIVE COMPENSATION RELATIVE TO THE MARKET INCLUDE THE EXECUTIVE'S EXPERIENCE AND BHS'S NEED TO ATTRACT AND RETAIN TOP EXECUTIVE TALENT. MINUTES OF THIS ANNUAL COMPENSATION REVIEW BY THE COMMITTEE ARE RECORDED BY SUCH CONSULTANT AND ARE APPROVED PROMPTLY BY THE CHAIR OF THE COMMITTEE.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 15b Process to establish compensation of other employees	All officers and key employees of the organization were included in the Executive Compensation policy described on Form 990, Part VI, Line 15a. This process is used to establish compensation for these individuals for each calendar year.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 19 Required documents available to the public	The organization makes its governing documents, conflict of interest policy, financial statements, and three most recent forms 990 available to the public upon request.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part XI, Line 9 Other changes in net assets or fund balances	Transfers FROM affiliated organizations - -124596459;

990 Schedule O, Supplemental Information

Return Reference	Explanation
Schedule K, Part II, Line 12 CITY OF JACKSONVILLE, FLORIDA SERIES 2022ABC	DURING JULY 2022. THE OBLIGATED GROUP ISSUED THREE \$63,000,000 TAX-EXEMPT CITY OF JACKSONVILLE, FLORIDA HEALTH CARE FACILITIES REVENUES BONDS, KNOWN AS THE SERIES 2022A, SERIES 2022B AND SERIES 2022C, RESPECTIVELY. THE BONDS WERE AUTHORIZED AS PART OF AN INTER-LOCAL AGREEMENT BETWEEN THE CITY OF JACKSONVILLE, CLAY COUNTY, ST. JOHNS COUNTY AND NASSAU COUNTY, FLORIDA TO FINANCE, REIMBURSE, OR REFINANCE MULTIPLE PROJECTS, NOTABLY THE CONSTRUCTION OF THE BAPTIST CLAY MEDICAL CAMPUS, THE WOLFSON CHILDREN'S HOSPITAL CRITICAL CARE TOWER, AND THE FREE STANDING EMERGENCY ROOM FACILITIES IN ST. JOHNS COUNTY AND NASSAU COUNTY. AS OF SEPTEMBER 30, 2022, \$63,000,000, \$5,000,000 AND \$9,000,000 WERE DRAWN ON THESE ISSUANCES FOR THE SERIES 2022A, SERIES 2022B AND SERIES 2022C, RESPECTIVELY.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Page 1, Line C Doing Business as Name	Baptist Medical Center South, Baptist Medical Center Clay, Baptist Medical Center Jacksonville, Baptist MD Anderson Cancer Center, Baptist Emergency Town Center, Baptist Emergency Center North, Baptist Emergency Center Oakleaf, Baptist Emergency Center Clay, Wolfson Children's Hospital

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization
Southern Baptist Hospital of Florida Inc

Employer identification number
59-0747311

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) Baptist Behavioral Health LLC 841 Prudential Dr Ste 1601 Jacksonville, FL 32207 46-4629700	Provide medical and healthcare services	FL	-4,626,409	2,365,552	Southern Baptist Hospital of Florida Inc

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512 (b)(13) controlled entity?	
						Yes	No
(1) BAPTIST MEDICAL CENTER OF THE BEACHES INC 1350 13TH AVE S JACKSONVILLE BEACH, FL 32250 59-2980620	HOSPITAL	FL	501(c)(3)	3	BAPTIST HEALTH SYSTEM INC		No
(2) BAPTIST MEDICAL CENTER OF NASSAU INC 1250 S 18TH ST FERNANDINA BEACH, FL 32034 59-3234721	HOSPITAL	FL	501(c)(3)	3	BAPTIST HEALTH SYSTEM INC		No
(3) BAPTIST HEALTH SYSTEM INC 841 PRUDENTIAL DR STE 1602 JACKSONVILLE, FL 32207 59-2487136	Financial/management assistance for health system	FL	501(c)(3)	Type II	Coastal Community Health Inc		No
(4) BAPTIST HEALTH SYSTEM FOUNDATION INC 841 PRUDENTIAL DR 13TH FLR JACKSONVILLE, FL 32207 59-2487135	FUNDRAISING FOR tax-exempt entities controlled by BHS	FL	501(c)(3)	7	BAPTIST HEALTH SYSTEM INC		No
(5) BAPTIST HEALTH PROPERTIES INC 1660 Prudential Dr Ste 101 JACKSONVILLE, FL 32207 59-2487133	Owns/manages real estate properties for health system	FL	501(c)(3)	Type I	BAPTIST HEALTH SYSTEM INC		No
(6) BAPTIST HEALTH AMBULATORY SERVICES INC 1660 Prudential Dr Ste 203 JACKSONVILLE, FL 32207 59-3410739	Medical Research and Education	FL	501(c)(3)	Type I	BAPTIST HEALTH SYSTEM INC		No
(7) Coastal Community Health Inc 841 Prudential Dr Ste 1450 Jacksonville, FL 32207 47-1322041	Regional affiliation of BHS with 1 other 501(c)(3) healthcare system	FL	501(c)(3)	Type I	na		No

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) Corporate Health LLC 841 Prudential Dr Ste 1602 Jacksonville, FL 32207 82-0790996	Development/ operation of a medically-based wellness program for the northeast Florida community	FL	Baptist Health Ambulatory Services Inc	N/A								
(2) BAYBAP LLC 3563 PHILIPS HIGHWAY STE 202 JACKSONVILLE, FL 32207 85-3852455	HOME HEALTH	FL	PAVILION HEALTH SERVICES INC	N/A								

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No
(1) PAVILION HEALTH SERVICES INC 1660 Prudential Dr STE 203 JACKSONVILLE, FL 32207 59-2059710	PHYSICIAN PRACTICES	FL	BAPTIST HEALTH SYSTEM INC	C Corporation					No
(2) Baptist Specialty Physicians Inc 1660 Prudential Dr Ste 203 Jacksonville, FL 32207 86-1126946	Physician Practices	FL	Southern Baptist Hospital of Florida Inc	C Corporation	-11,545,000	4,829,000	100 %	Yes	

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		No
b Gift, grant, or capital contribution to related organization(s)		No
c Gift, grant, or capital contribution from related organization(s)	Yes	
d Loans or loan guarantees to or for related organization(s)		No
e Loans or loan guarantees by related organization(s)		No
f Dividends from related organization(s)		No
g Sale of assets to related organization(s)		No
h Purchase of assets from related organization(s)		No
i Exchange of assets with related organization(s)		No
j Lease of facilities, equipment, or other assets to related organization(s)		No
k Lease of facilities, equipment, or other assets from related organization(s)	Yes	
l Performance of services or membership or fundraising solicitations for related organization(s)		No
m Performance of services or membership or fundraising solicitations by related organization(s)	Yes	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	Yes	
o Sharing of paid employees with related organization(s)	Yes	
p Reimbursement paid to related organization(s) for expenses	Yes	
q Reimbursement paid by related organization(s) for expenses	Yes	
r Other transfer of cash or property to related organization(s)	Yes	
s Other transfer of cash or property from related organization(s)	Yes	

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R. See instructions.

Return Reference	Explanation