In 2019, our Community Benefit contribution totaled $1.16 billion.

Cleveland Clinic is a nonprofit, multispecialty academic medical center with a proud history of serving the needs of our surrounding communities and the nation.

We were founded in 1921 as a nonprofit group practice with a tripartite mission to care for the sick and to improve patient care through research and education. And we remain a community asset with no owners, investors or stockholders. Any and all extra funds from operations are invested back into the health system to fund new research and education initiatives and to continue our long-standing charitable efforts.

Cleveland Clinic has a tradition of addressing health service needs and providing benefits to the populations we serve. We continue to prioritize the health and well-being of our communities through our triennial Community Health Needs Assessments.

The Community Benefit provided by Cleveland Clinic is far-reaching, from making healthcare available for all community residents, to educating the next generation of healthcare professionals and funding medical research that leads to advanced treatments and cures.

Community Benefit includes activities or programs that improve access to health services, enhance public health, advance generalizable knowledge and relieve government burden. The primary categories for assessing Community Benefit include Financial Assistance, Medicaid Shortfall, Subsidized Health Services, Outreach Programs, Education and Research.

**FINANCIAL ASSISTANCE**

$166.3 MILLION

Financial assistance is the amount of free or discounted medically necessary care provided to those patients unable to pay some or all of their bills. Cleveland Clinic’s financial assistance policy provides free or discounted care to patients with incomes up to 400% of the federal poverty level and covers both hospital care and our employed physician services. Financial assistance reported here does not include “bad debt,” which is the amount of unpaid bills to the health system by patients who have the ability to pay. Information about our policies for each of our regional hospitals is available onsite at registration and at clevelandclinic.org.

**MEDICAID SHORTFALL**

$538.9 MILLION

Cleveland Clinic is a leading provider of Medicaid services in Ohio. The Medicaid program, which provides healthcare coverage for low-income families and individuals, is funded by state and federal governments. In many states, including Ohio, Medicaid payments have not been sufficient to cover the costs of treating Medicaid beneficiaries. Offset by net receipts of $5.1 million from Ohio’s Hospital Care Assurance Program (HCAP), our Medicaid shortfall was $538.9 million.

**SUBSIDIZED HEALTH SERVICES**

$24.8 MILLION

Subsidized health services are clinical services that are provided to meet the needs of the community despite creating a financial loss. Subsidized health services within Cleveland Clinic include pediatric programs, psychiatric/behavioral health programs, obstetrics services, chronic disease management and outpatient clinics. Excluding financial assistance costs and Medicaid shortfalls, Cleveland Clinic provided subsidized health services in 2019 at a cost of $24.8 million.
OUTREACH PROGRAMS

$40.5 MILLION

The Cleveland Clinic health system is actively engaged in a broad array of outreach programs, many of which are designed to serve the most vulnerable and at-risk populations. Our programs range from free wellness initiatives, health screenings, clinical services and education, to enrollment assistance for government-funded health programs. Outreach programs address documented health needs as identified in our comprehensive Community Health Needs Assessments.

2019 Outreach Programs highlights include:

- Wellness initiatives in the areas of disease/injury prevention and behavioral change, including tobacco cessation, nutrition improvement, exercise, substance abuse, child safety, teen parenting and domestic violence. Programs were provided to schools, faith-based organizations, community centers, and collaborating cities and counties.
- Health fairs provided thousands of people with free health screenings. The Cleveland Clinic Minority Men’s Health Fair, Celebrating Sisterhood, Tu Familia, Victory in Pink and neighborhood fairs educated community members on the benefits of preventive healthcare.
- Cleveland Clinic provided no-cost clinical and wellness services to under- and uninsured families at community sites, including Langston Hughes Health & Education Center and our pediatric mobile unit. Laboratory and vision services were donated to Cleveland-area organizations.
- Collaborative initiatives with community nonprofit organizations and local governments addressed critical population health issues, including the opioid epidemic and infant mortality.

EDUCATION

$303.6 MILLION

Cleveland Clinic is committed to education, taking pride in a wide range of high-quality medical education that includes accredited training programs for residents, physicians, nurses and allied health professionals. By educating medical professionals, we ensure that the public is receiving the highest standard of medical care and will have highly trained health professionals to care for them in the future. For 2019, Cleveland Clinic’s total expenditure in support of education was $308.8 million, partially offset by $5.2 million in grants and other external funding, resulting in a net cost of $303.6 million.

RESEARCH

$88.8 MILLION

Research into diseases and their cures is an investment in people’s long-term health. From a community benefit standpoint, research includes basic, clinical and community health research, as well as studies on healthcare delivery. With 2,488 active research projects in 2019, Lerner Research Institute is one of the largest research institutes in the nation. For 2019, Cleveland Clinic’s total expenditure in support of research was $258.1 million, offset by $169.3 million in grants and other external funding, resulting in a net cost of $88.8 million.

Note – The 2019 Community Benefit Report reflects those activities and programs provided prior to the emergence of the COVID-19 pandemic.