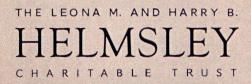
ASPIRING TO IMPROVE LIVES THROUGH ACCESS TO AFFORDABLE HEALTHCARE

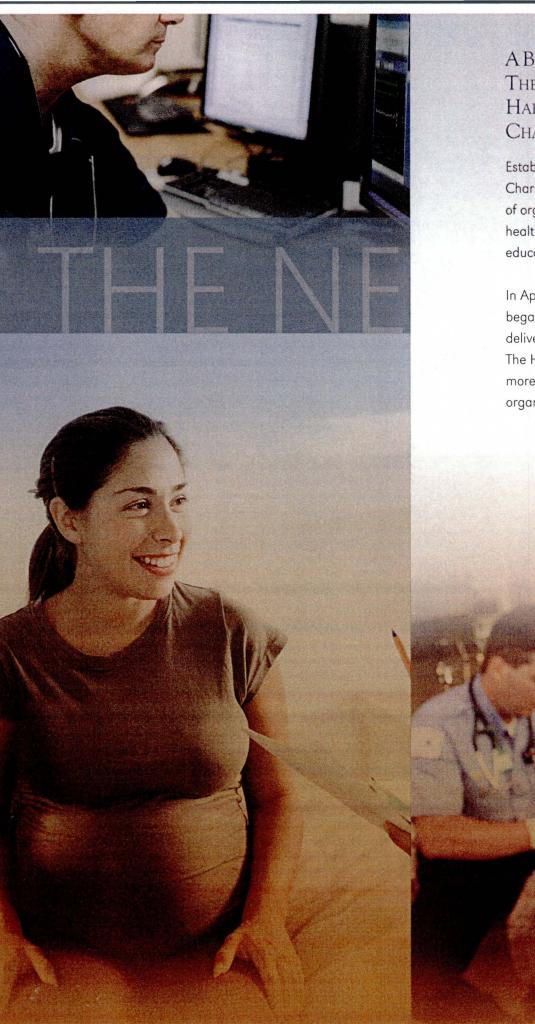


RURAL HEALTHCARE PROGRAM

THE NEED FOR RURAL HEALTHCARE

While many Americans grapple with access to affordable healthcare, the obstacles faced by healthcare providers and patients in rural areas differ from those in urban areas. Because of low average incomes, geographic isolation and a severe shortage of qualified healthcare providers, rural Americans often face challenges in accessing quality healthcare.

The Rural Healthcare Program of The Leona M. and Harry B. Helmsley Charitable Trust aims to meet the needs of rural Americans in the upper Midwest by funding programs that deliver rural healthcare. The upper Midwest was specifically chosen for its gaps in healthcare access and relative lack of private funding. Providing funding to rural healthcare also presents a unique opportunity to develop healthcare innovations and service models that may be replicated nationwide.



ABOUT The Leona M. and Harry B. Helmsley Charitable Trust

Established in 1999, The Helmsley Charitable Trust supports a diverse range of organizations with a major focus on health and medical research, human services, education and conservation.

In April 2009, The Helmsley Charitable Trust began awarding grants for rural healthcare delivery in the upper Midwest. By June 2010, The Helmsley Charitable Trust awarded more than \$65 million in grants to nonprofit organizations in the upper Midwest.

STRATEGIES FOR AWARDING GRANTS

Rural populations in the upper Midwest (western Minnesota and Iowa, Nebraska, North Dakota, South Dakota and Wyoming) are underserved in healthcare grant funding. In 2007, the upper Midwest received \$65.3 million in private foundation donations in healthcare, which is only 1.3 percent of healthcare dollars allocated nationwide that year.

Even within the upper Midwest, healthcare grants are not distributed evenly. South Dakota, for example, received less than 1 percent of the total healthcare grant dollars given to the upper Midwest in 2007. For this reason, The Helmsley Charitable Trust awards grants in areas with the most need.

The Rural Healthcare Program awards grants to organizations in the upper Midwest that do the following:

- Use information technology to connect patients to specialty care in communities where basic healthcare facilities exist but whose population cannot support specialty practices.
- Make advanced therapies available to help people balance home life, work and treatments.

PRINCIPLES OF GRANTMAKING

The Rural Healthcare Program aims to:

- Strengthen healthcare institutions in rural communities, including hospitals, assisted-living facilities, skilled nursing centers and ambulatory care services.
- Foster incentives for physicians to train and serve in rural areas.
- Support the development and training of healthcare personnel.
- Increase use of computers and information technology to train rural healthcare providers and allow for long-distance specialty consultation.
- Provide multiyear support for funded projects.
- Collaborate with other foundations to meet community needs.

What It Means to Partner With The Trust

An Invitation to Join

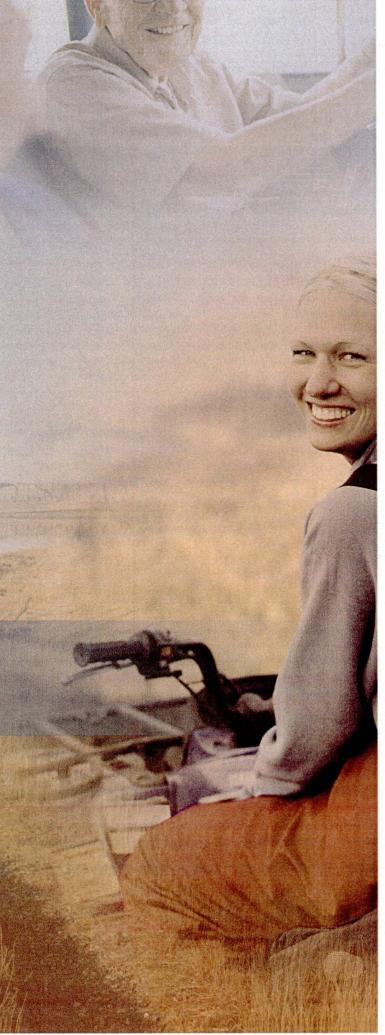
The Rural Healthcare Program staff invite nonprofit organizations to partner with them to provide much needed health care services in rural locations. The Helmsley Charitable Trust funds programs that provide rural health care delivery, with a specific focus on emergency services and technological improvements for hospital and ambulatory care.

The Rural Healthcare Program awards grants to nonprofit organizations in western Minnesota and Iowa, Nebraska, North Dakota, South Dakota and Wyoming.

The Next Step

Once a partnership is established, partners work with The Helmsley Charitable Trust's program director to fully develop the project. Staff members work closely with the project's coordinators to establish and refine the program, and evaluate and disseminate the project's results.





THE LEONA M. AND HARRY B. HELMSLEY CHARITABLE TRUST RURAL HEALTHCARE PROGRAM

CURRENT PROJECTS

Cancer Screening and Care

- Funds equipment upgrades from analog to digital mammography
- Provides new technology for cancer treatment, such as brachytherapy and electron beam therapy

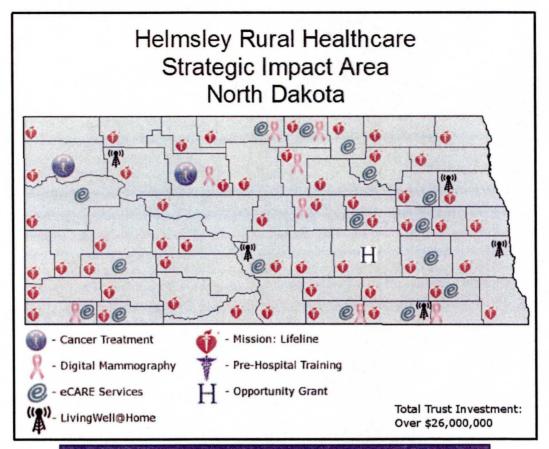
Pre-hospital Training and Care

- Trains hospital, clinic and emergency response personnel to provide optimal care for trauma and emergency cases while transporting patients over long distances
- Creates a comprehensive system of care for heart attack patients that will place 12-lead ECGs in all ambulances in North and South Dakota. The technology transmits directly to six hospitals capable of performing life-saving angioplasty to reduce mortality and disability rates.

Health Technology Delivery for Hospitals and Other Healthcare Facilities

- *e*Care Provides rural hospitals 24-hour access to specialty care physicians and pharmacists.
 - *e*ICU links rural ICUs to an around-the-clock care team lead by an intensivist.
 - *e*Emergency links two-way video equipment in local emergency departments to emergency departments in tertiarycare and trauma centers. This supports rural physicians, who often are the lone care providers in their communities.
 - *e*Pharmacy gives rural hospitals around-the-clock access to pharmacist to ensure prescription review and approval prior to administration to a patient. *e*Pharmacy means few medication errors.
- Sensor technology and telemedicine for seniors keeps them in their homes longer and prevents acute conditions that require hospitalization. Motion detectors, bed sensors and impact sensors at the senior's home record vital signs and movement, which are monitored by a nurse case manager in another location.





North Dakota Grants	Amount		Project
American Heart Assn. ND Mission Lifeline	\$	4,439,198	Pre-Hospital Training & Care
Farm Rescue, Jamestown	\$	90,000	Help for ill farmers
Towner County Med Center, Cando	\$	311,394	eEmergency
Presentation Medical Center, Rolla	\$	356,449	eEmergency
MedCenter One, Bismark	\$	2,430,597	elCU
St. Andrew's Medical Center, Bottineau	\$	336,872	eEmergency
McKenzie County, Watford City	\$	860,264	e-Emergency & e-Pharmacy
Catholic Health Initiatives Grant			eEmergency
*Lisbon Health Services, Lisbon	\$	300,867	
*Mercy Hospital, Devils Lake	\$	300,867	
*Mercy Hospital, Valley City	\$	300,867	
*Carrington Health Center, Carrington	\$	300,867	
*St. Joseph Hospital, Dickinson	\$	300,867	
Avera e-Emergency (*One Grant, 2 sites)	\$	452,733	eEmergency
*Oakes Community Hospital, Oakes			
*Wishek Community Hospital, Wishek			
Nelson County Health System, McVille	\$	275,009	eEmergency
Southwest Healthcare Services, Bowman	\$	269,798	eEmergency
West River Health Services, Hettinger	\$	306,933	eEmergency
Cooperstown Medical Center, Cooperstown	\$	292,313	eEmergency
St. Aloisius Medical Center, Harvey	\$	332,175	Mammography
St. Andrew's Medical Center, Bottineau	\$	357,260	Mammography
Presentation Medical Center, Rolla	\$	488,046	Mammography
Ashley Medical Center	\$	343,740	Mammography
Oakes Community Hospital, Oakes	\$	493,171	Mammography
Heart of American Health Center, Rugby	\$	432,052	Mammography
Southwest Healthcare Services, Bowman	\$	345,284	Mammography
Trinity Health Care, Minot	\$	6,571,500	Cancer Treatment
Mercy Medical Foundation, Williston	\$	4,038,550	Cancer Treatment
Good Samaritian Society			
LivingWell@Home (5 Sites)	\$	994,510	Elder Care in their home
tal \$ 26,322,181			9