We know our community’s support has been the key ingredient in our success. We thank each and every person who has invested their time, philanthropic support and guidance, and those who have given us the great privilege of allowing us to care for you. Together, we can accomplish incredible things and grow even stronger.

Norm Deschene, Chief Executive Officer
A LETTER FROM THE CHIEF EXECUTIVE OFFICER

Dear Friends,

I am pleased to present the annual report for Circle Health. 2015 was an exciting year, as we worked to strengthen and grow our health system and improve connections between our providers to best meet the needs of those we serve. This collaboration helped us make great progress on Circle Health’s strategic imperatives of Continuum of Care, Population Health, Alignment, Value, and Scale. The stories in this report highlight just some of the important ways we have brought these strategies to life in the past year. With new offerings like Circle Care, we are able to better coordinate care and health needs for patients with chronic disease and illness or those at high risk for repeat hospitalization. With the continued expansion of programs and services at Lowell Community Health Center, Lowell General Hospital and Circle Home, teams across all our Circle Health affiliates are working together with powerful results for our patients and their families.

As we look forward, a focus on “systemness” will help guide much of our work in the year ahead. Systemness has been defined by some as: the state, quality, or condition of a complex system, that is, of a set of interconnected elements that behave as, or appear to be, a whole, exhibiting behavior distinct from the behavior of the parts.

At Circle Health, we see systemness as the best way to help us deliver Complete connected care and excellent outcomes for our patients every time, every day, and during every interaction. We believe that by working together with our affiliated physicians and providers, we can leverage our collective strengths and achieve greater success than would be possible working alone.

It is especially appropriate that Lowell General Hospital is embracing the theme Growing Stronger Together in 2016 as the hospital celebrates its 125th anniversary. Founded by passionate and dedicated members of our community who shared the belief that all residents deserved the best possible care close to home, Lowell General Hospital’s growth and transformation is truly a testament to the strength and importance of this collaborative relationship between the community and one of its most important assets. I hope you will join me in celebrating Lowell General Hospital’s anniversary and congratulating the hospital team for this incredible accomplishment.

On behalf of the entire Circle Health team, I thank you for all you do to help support individuals and families in the Merrimack Valley. Together, we will truly grow stronger and realize our vision to be one of the best integrated health systems in America.

In good health,

Normand E. Deschene
Chief Executive Officer of Circle Health and Lowell General Hospital
# Circle Health Leadership

## Officers

**Chairman**  
Rick W. Hanson  
**Vice Chairman**  
Daniel J. Mansur  
**President / CEO**  
Normand E. Deschene  
**Treasurer / CFO**  
Susan Green  
**Clerk**  
Raymond Anstiss, Jr.

## Circle Health Board

Raymond Anstiss, Jr.  
Gary Campbell  
John Carson  
Jack Clancy  
Normand E. Deschene  
Gopala Dwarakanath, MD  
William Galvin, III, MD  
Rick W. Hanson  
Daniel J. Mansur  
Jacqueline Moloney  
Kimberly Oberhauser  
Jack O’Connor  
Margaret A. Palm  
Tushar Patel, MD  
Bruce Robinson  
Andrew Treinis  
David Wallace

## Trustee Emeritus

Clementine F. Alexis  
Arthur C. Anton, Sr.  
Michael Athanasoulas, DDS  
Robert J. Audet  
Edith W. Burger  
Robert A. Donovan  
George L. Duncan  
Abdul Ghaffar, MD  
Terry T. Howard, MD  
John C. Hughes, MD  
Charlotte LaPierre  
F. Bailey Laughlin, Jr.  
Jean R. McCaffery  
Lincoln N. Pinsky, MD  
Kendall M. Wallace  
Stuart G. Weisfeldt, MD

## Board of Governors

Arthur C. Anton, Jr.  
David Berman, MD  
Richard E. Bolton, Jr.  
John P. Chemaly  
Mark S. Cochran  
Carole A. Cowan, Ed.D.  
Shanmukha V. Dahod, MD  
Michael P. Dubuque  
Karen Fortune, MD  
Mark G. Glickman, MD  
Eric P. Hanson  
Rick D. Hess  
James B. Hogan  
Nancy Donahue Johnca  
George B. Leahey  
Robert H. Leighton, Jr.  
Bopha Malone  
Shortie McKinney  
Martin T. Meehan  
Carrie Meikle  
James L. Milinazzo  
Steven Normandin  
Nels A. Palm  
Susan Pasanen  
Ginger B. Pearson  
John H. Pearson, Jr.  
Luis M. Pedroso  
Kathleen M. Plath  
John Power  
Naomi M. Prendergast  
Michael S. Reilly  
Peter D. Roman, MD  
James C. Shannon, III  
Scott A. Sigman, MD  
Neelam Sihag, MD  
Brian Stafford  
John C. Thibault  
Drew Weber

## Senior Leaders

**Normand Deschene**  
President and CEO, Circle Health;  
CEO, Lowell General Hospital  
**Joseph White**  
President, Lowell General Hospital  
**Amy Hoey**  
Executive Vice President and  
COO, Circle Health and Lowell General Hospital  
**Susan Green**  
Executive Vice President and Chief  
Financial Officer, Circle Health and  
Lowell General Hospital  
**Geraldine Vaughan**  
Senior Vice President of Network  
Integration, Circle Health; Executive  
Director, Lowell General Physician  
Hospital Organization  
**Sabrina Granville**  
Senior Vice President and  
Chief Human Resources Officer,  
Lowell General Hospital  
**Michelle Davis**  
Vice President, External Affairs,  
Lowell General Hospital  
**Cecelia Lynch**  
Vice President, Patient Care  
Services and Chief Nurse  
Executive, Lowell General Hospital  
**David Pickul, MD**  
Chief Medical Officer, Circle Health  
**Brian Sandager**  
Chief Information Officer,  
Lowell General Hospital  
**William Wyman**  
Vice President, Revenue Services,  
Lowell General Hospital  
**Dorcas Grigg-Saito**  
CEO, Lowell Community  
Health Center  
**Rachel Chaddock**  
Executive Director, Circle Home, Inc.
Circle Health Continuum of Care Imperative

Develop coordinated, comprehensive and integrated programs of patient-centered care in partnership with physicians and other providers to provide patients with convenient access to the entire continuum of care. We are working to bridge gaps in care and live by our promise that every patient’s care is seamless and well-coordinated.

PROMISING HEALING Together
PROVIDING COMFORTABLE, CONVENIENT CARE IS CIRCLE HOME’S SPECIALTY

After injury or illness forces a hospital stay, most patients agree, “There’s no place like home.”

Those words are echoed by Sandra MacMillan, who is recovering in her own Billerica home with two of her sons after a series of health complications over the past year. Despite the setbacks, which have limited her sight and her mobility, Sandra says she feels very lucky. She attributes that good fortune to her ability to have her family with her every day, thanks to all the support she receives from the expert staff and services provided by Circle Home.

“The staff at Circle Home is just so incredibly wonderful,” she says. “They know what to do, and at the right time. They make you feel comfortable, ask all the right questions... anything possible to help you.”

For many patients like Sandra, a smooth transition out of the hospital or rehabilitation facility and back into the home setting can be crucial to that patient’s recovery.

By providing rehabilitation, nursing and home health aide services in the home setting, Circle Home follows through on a vital component of Circle Health’s Continuum of Care imperative – providing the right care, in the right setting, at the right time.

These services proved to be a vital link for Sandra after coping with eye surgery, as well as diabetes and congestive heart failure, in the past year.

After receiving what she called “awesome” care from Dr. Kirk MacNaught at Lowell General Hospital’s Heart and Vascular Center, she had a stay at a rehabilitation hospital and was discharged after four weeks.

Circle Home’s support of her transition home started well before she arrived.

“Once the decision has been made that the patient is going home and will receive Circle Home services, our liaison steps in, working collaboratively with the facility to ensure a smooth transition,” says Circle Home Executive Director Rachel Chaddock. “The liaison works with the patient, caregiver and Circle Home to ensure they are set up to receive appropriate services and equipment.”

Once Sandra returned home, a visiting nurse came to monitor her health and check on her several times a week.

But Sandra also needed to get moving again. The most important place she needed to navigate was her home, so therapists visited each week.

“When I got home, I had a hard time even walking,” Sandra says. “The therapists came to my home and Physical Therapy and Occupational Therapy got me on my feet.”

The services have continued through her recovery, with a home health aide now visiting twice a week to help her with personal care and light housekeeping.

Circle Home’s commitment to Complete connected care continues on through its Telehealth Program, which monitors Sandra’s health daily. Through this program, she has equipment that wirelessly sends information about her weight, blood pressure and other vital signs to her nurse.

If there are changes to her status, her Circle Home nurse can call to check on her or send a caregiver to her door.

“They’re trying to keep me out of the hospital, and that makes me very happy,” she says. “They’re always there if I need them.”
The concept of population health is redefining the role of health care providers. Hospitals are now just one part of a health care system committed to keeping patients healthy before the need for more serious care arises.

The goal is two-fold – to keep individuals healthier, while saving health care dollars for everyone.

This year, Circle Health brought that outreach to our region’s most vulnerable populations – those suffering with chronic medical and/or behavioral conditions who find themselves being admitted to the hospital time and again.

To treat this population more proactively and efficiently, with better outcomes, Circle Health created a new division – it’s called Circle Care. The goal of the program is to reduce hospital and Emergency Department readmissions by supporting and coordinating these patients’ care.

Circle Care accomplishes this using a team of doctors, social workers, community health workers, nurses and a pharmacist to better understand each patient’s individual needs and address any gaps in their continuum of care. Patients are identified by the frequency of visits to the inpatient floors or the Emergency Department.

“Circle Care doesn’t administer care; we connect and support a patient’s care,” Circle Care Medical Director Wendy Mitchell says. “It could be something as simple as a review of a patient’s prescriptions or getting them a ride to a doctor’s appointment, or as complex as finding help for an addiction or behavioral health issue.”

Circle Care’s High Risk Medical Team was launched in November of 2015, and a Behavioral Health Program launched in January of 2016. The goal for the first year was to connect with 500 patients, but less than six months into the program, nearly 1,000 individual patients were contacted by the Circle Care program.

“Circle Care is about bridging this health care gap for patients and the community,” Mitchell says. “The more people we can reach, the more we can help.”

Circle Health is a statewide leader in this field, thanks in part to a pair of grants totaling several million dollars awarded in 2014 by the state’s Health Policy Commission (HPC) as part of its Community Hospital Acceleration, Revitalization, & Transformation (CHART) Investment Program.

At a joint press conference with HPC leaders in December, Norm Deschene, CEO of Lowell General Hospital and Circle Health, said, “This grant provides resources to help us transform how we deliver care to members of the community who need it most.”
Arthur Noble says he’s not afraid of dying. “I don’t want to,” he says, “but I’m not afraid to. It’s something where you have to face reality. You can’t say it’s not going to happen. At some point or another, we’re all going to die.”

For most of his life, Arthur, of Westford, was very active. But then his daily 18-hole walks on a golf course suddenly dwindled to three before he became winded, and soon the trip from his living room to his bedroom was exhausting.

He was diagnosed with Stage IV COPD, a chronic lung disease, but he didn’t need a doctor to tell him his lungs were beginning to fail. But thanks to a new outpatient service at Lowell General, he was referred to a team of caregivers that could help him prepare for what such a diagnosis might mean.

Funded in part by a grant from the state’s Health Policy Commission in 2015, Lowell General started an outpatient Palliative Care program that bridges the gap in care for patients who are diagnosed with a serious illness but don’t need immediate Hospice Care, in an effort to improve quality of life during this challenging time.

The Palliative Care team aims to relieve some of the stress and symptoms a patient may be facing, while also helping them understand the end of life process and the decisions that may come with it, many of which can be addressed ahead of time.

“Palliative Care at Lowell General is a valuable resource not only to patients but also physician practices,” says Cheryle DeMaria, Director of Transition Services. “Some of those physicians may initiate the conversation, but now they have the option of referring a patient to Palliative Care services to provide a deeper look into real issues the patient may be facing, not just from a physical point of view, but an emotional and spiritual perspective as well.”

Arthur was one of the first to take advantage of the outpatient service, though reluctantly at first. On that first visit, he sat down with Dr. Ramya Prabhakar, Lowell General’s medical director of Palliative Care, and a member of her team. He brought with him a lot of questions.

“Some may have sounded dumb to some people, but they were things I wanted to know,” he says. Arthur wanted to better understand what end of life care looked like and what he could take care of ahead of time, so his wife wouldn’t be burdened.

“As far as I’m concerned, they were fantastic,” Arthur says. “Now I know exactly what’s going to happen.”

After two meetings with the Palliative Care team, Arthur settled several difficult decisions about his final wishes, from his health care to his finances. He even went to pay for his funeral and casket expenses so his wife wouldn’t be burdened.

The conversations weren’t easy, but Arthur says they have given him peace of mind.

“In the very end,” he says, “I can feel I did the right thing, the right way.”
PROMISING EXPERTISE
Together
OUR COMMUNITY OF PHYSICIANS

Addiction Medicine
Hung Do, MD
Wayne Pasanen, MD
Shorta Yuasa, MD

Allergy/Immunology
Angela Ahuja, MD
Pryal Amin, DO
Leonard Kaplan, MD
Li Liang, MD
Ami Mehra, MD
Julian Melamed, MD
Curtis Moody, MD
Sara Narayan, MD
Martin Ostro, MD
Frank Twagirwa, MD

Anesthesiology
Marcia Bergen, DO
Vijayasisham Channamsetty, MD
Stuart Dunbar, MD
Fouad Farm, MD
Joseph Grajo, DO
Rizwan Haque, MD
Shamee Marie, MD
Vikram Narayan, MD
Jose Osa Concha, MD
Vahilla Pamidimukkala, MD
Han Park, MD
Barbara Pathak, MD
Claudia Perez-Martinez, MD
Yakov Reyblat, DO
Suyan Sheikh, MD
Wolfgang Steudel, MD
Harohalli Vijayakumar, MD
Olga Volfson, MD
Vladimir Volfson, MD

Cardiology
Omar Ali, MD
Richard Birkhead, MD
Jose Carrion, MD
Brian Cullingford, MD
Eric Ewald, MD
Brian Cullingford, MD
Jose Carrion, MD
Richard Birkhead, MD
Omar Ali, MD
Cardiology

Critical Care Medicine
Essam Al-Ansari, MD
Christina Anderlin, MD
MarieAnne Barry, MD
Havel Cheweich, MD
Prema Mota, MD

Dermatology
Stuart Arbesfeld, MD
Steven Franks, MD
David Geist, MD
Samuel Goos, MD
Christine Hayes, MD
Abby Hochberg, MD
Kathleen Joyce, MD
Seth Kates, MD
Khaliullah Khatri, MD
Katalin Kovalszki, MD
Michael Krathen, MD
Jeffrey Mailhot, MD
Peter Muz, MD
Helen Raynham, MD
Michael Rosenbaum, MD
Anna Ryan, MD
David Simkin, MD
Benjamin Solky, MD
Jennifer Toyohara, MD
Janice Washburn, MD
Christy Williams, MD

Director of Medical Education
Byron Roseman, MD

Emergency Medicine
Susan Brough, MD
Paul Calher, MD
Christopher Clingen, MD
Francesco Core, MD
Jonathan Drake, MD
Marcia Dummit, MD
Sarah Gilbert, MD
Laura Hapogian, MD
Christopher Keareores, DO
Susan Ly, MD
Richard Lyons, MD
Nathan Macdonald, MD
Chandra Manuelpillai, MD
Lucia Modest, MD
Kimberly Morton, MD
Sean Mosharo, MD
Ravi Murthy, MD
Meaghan Nitaka, MD
Jonathan Oppenheim, MD
Marc Roy, MD
Brian Sanders, MD
David Sciacca, MD
Jansen Tengson, MD
Katja Von Tiesenhausen, MD
Diana Vaskinoyik, MD
Derek Wayman, MD
Rothsoann Yong, MD

Endocrinology
Saud Alothmani, MD
Miguel Arza, MD
Anca Staii, MD
Hayward Zwelling, MD

Family Medicine
Lourdes Ada, MD
Ghazala Alam, MD
Linda Brown, MD
Jeffrey Byrne, MD
Cindy Cheng, MD
Kimberly Clemente, MD
Deirdre Connolly, MD
Sara Diaz, MD
Joseph Dulac, MD
Shawn Farrarher, MD
Paulina Fernandes, MD
Damian Folch, MD
Christen Fragala, MD
Mariana Gayanilo, MD
Nasim Ghaflar, MD
K. Opal Goff, MD
Sai Gollapudi, MD
John Grieve, MD
Paul Harcourt, MD
Carolyn Haskell, DO
James Kuin, MD
Nida Lai, MD
Roberto Laros, MD
Amy Lee, MD
Raymond Lewis, Jr, MD
Alice Lin, MD
Shu Wei Liu, MD
Silvia Los, MD
Zinaub Maxwell, MD
Donald Miller, MD
Margaret Mills, MD
Emelyn Molato, MD
Ariadne Mueller, MD
Danh Nguyen, MD
Kwesi Nifforo, MD
Austin O'Brien, MD
Frank Osborn, MD
Sangita Pillai, MD
Katherine Powers, MD
Melinda Raboin, MD
John Ragucci, MD
Janis Recto, MD
Yahaida Rimola-Dejesus, DO
Eric Romanowsky, MD
Mark Romanowsky, MD
Tricia Scott, MD
Chon So, DO
Anna Spires, MD
Eugenia Szekely, MD

Gastroenterology
Geetanjali Akerkar, MD
Doree Barton, MD
Daniel Betuk, MD
Paul Gillmore, MD
Michael Huang, MD
Allen Hwang, MD
Nitin Kumar, MD
Franklin Marinelli, MD
Supriya Rao, MD
James Reichfeld, MD
Michael Roberts, MD
PhthiVeenaSri sivan, MD
Richard Tilson, MD
Win Travassos, MD

Gynecology
Norno-Marie Estella, MD
Tanaz Ferzandi, MD
George Flesch, MD
John Hughes, MD
Kathryn Olson, MD
Danielle Patterson, MD
Purwima Sangal, MD

Infectious Disease
David Sidebottom, MD
Adam Weston, MD

Internal Medicine
Michael Abate, MD
Muneer Ahmad, MD
Zaheer Ahmed, MD
Margaret Allard, MD
Alexandra Argasinski, MD
Naveed Aslam, MD
Marisela Bejarano Varas, MD
Laide Bello, MD
Michael Bertos, MD
Anum Bilal, MD
Judy Blank, MD
Peter Bradshaw, MD
Louis Bresnick, MD
Mary Brown, MD
Jack Chang, MD
Saqib Chaudhary, MD
Mariana Chomay, MD
Gautam Chhajed, MD
Prrovi Chordia, MD
Sara Clay, MD
James Clement, MD
John Copanos, MD
Shamir Dahod, MD
Hamid Danesh, MD
Karen Dasilva, MD
Richard DeAmicis, MD
Karen Del Rio, MD
Kablan Dharmanaran, MD
Milton Drake, MD
Brock Drapkin, MD
Circle of Expertise – The Power of Community Physicians

From primary care to advanced cancer treatments, area residents have access to some of the best medical experts in the region — right here in our community.

Maternal and Fetal Medicine
Dorothy Beazley, DO
Michael House, MD

Neonatology
Geoffrey Binney, Jr., MD
Mario Cordova, MD
Jonathan Davis, MD
Karen Harvey-Wilkes, MD
Anjali Iyengar, MD
Hasene Kasaroglu, MD
Peter Murray, MD
Sumita Pereira, MD
Raja Senguttuvan, MD

Nephrology
Alexander Goldfarb-Rumyantsev, MD
Ashish Mahajan, MD
Roy Maletz, MD
Manish Masi, MD
Douglas Miesler, MD
Joseph Rossacci, MD
Sebastian Sepulveda, MD
Florian Toegel, MD, PhD

Obstetrics and Gynecology
Harold Bass, MD
Otilia Braescu, MD
Michelle Cochran, MD
Maureen Cook, MD
Minerva, Domingos, MD
Elizabeth Emberley, DO
Melissa Ethier, MD
Karen Fortune, MD
William Galvin, III, MD
Terry Howard, MD
Ibrahim Joulak, MD
Panna Kapadia, MD
Peter Kuhlmann, MD
Edward Lipman, MD
Carlos Madrid, Jr., MD
David Merens, MD
Neil O’Regan, MD
Navin Popat, MD
Pranav Prakash, MD
Kirin Raju, DO
Fernando Roca, MD
Vijayalakshmi Swamy, MD
Katherine Van Savage, MD
Stuart Weisfeldt, MD
Theodore Yurkosky, MD

Neurology
Arya Farahmand, MD
Vladan Milosavljevic, MD
Jonathan Moray, MD
Jason Viereck, MD
Min Zhu, MD, PhD

Neurophysiology
Elizabeth Garcia-Lopez de Victoria, MD
Stuart Hoffman, DO
Sujit Nath, MD
Ziva Stauber, MD

Occupational Medicine
Martha Lipchitz, MD
* It is with sadness that we observe the death of the noted physician in our community. We are honored to recognize her dedication to patient care. This physician passed away in 2015.
Since the Lowell Community Health Center first opened its doors in 1970, it has adapted and expanded its services with a goal of increasing access to care to the neediest populations in Lowell.

Today, the Health Center continues to expand that access, treating 26,585 patients last year under one rapidly expanding roof.

In 2012, the Health Center completed a $41 million project which renovated the old Adden Furniture mill, creating a 100,000 square-foot, state-of-the-art medical facility on Jackson Street. Beginning in 2016, another 30,000 square feet is being renovated to make more room for patients and new services.

Despite all of the changes, the mission of the Lowell Community Health Center remains: to provide high quality, affordable health care to children and adults of all ages – regardless of their ability to pay.

Before the new facility was completed in 2012, some patients could wait as long as six months for a new appointment. Now on an average day, the Health Center’s call center can receive over 1,000 calls and as many as 800 patients pass through the facility.

“The demand has always been there,” Chief Operating Officer Henry Och says. “Now we have the resources to provide that care.” Through its many services, the Health Center saw 178,198 patient encounters in 2015.

To care for its population in this gateway city, the staff at the Health Center must be prepared to interpret 28 languages, and adapt to many different cultures.

“If we have expanded access to care, with no barriers to seeing a doctor, ultimately we are going to see higher patient engagement,” Och says.

Now, the Health Center provides services to one out of every two Lowell residents each year under one roof. Its services include a pharmacy, a clinic for same-day sick visits, family planning and OB/GYN services, family medicine, integrated behavioral health, pediatrics and adult medicine. Ultrasound and lab services are provided by Lowell General Hospital. The Health Center will be expanding Lowell General Hospital services to include radiology and mammography later in 2016. The center also includes specialty programs like HIV services and an office based opioid treatment program.

The additional 50,000 square feet, which should be open by 2018, will house new services such as a dental clinic, vision services and a specialty services department which will include ophthalmology, dermatology, podiatry and neurology. The center will also expand its Adult Medicine, Family Medicine and Community Health Promotion departments as part of this project.

What value does that add to the community? It makes this region a healthier place to live and lowers health care costs for everyone. It also adds jobs – including an additional 100 as part of the Health Center’s planned expansion – and makes an estimated $51 million annual economic impact on Greater Lowell.

But the Health Center’s impact goes far beyond statistics. “What makes this place special is the people,” Och says, “and the efforts they make to care for this community.”
At Circle Health, we are fortunate to be a part of a vibrant and diverse community. Our members, providers and affiliated organizations take our responsibilities seriously – not only to meet the unique health care needs of area residents today, but to ensure our health system is well prepared to anticipate and meet these needs in the future.

“As the health needs of our community continue to evolve and grow, Circle Health and our members, affiliates and providers must also evolve and grow to support these needs,” says Norm Deschene, Chief Executive Officer of Circle Health.

In 2015, this growth came in the form of not only expanded programs and services, but also in the recruitment and addition of new staff and providers in key areas of most benefit to local residents. An additional 50 physicians have joined Circle Health in the past year, for a combined total of over 710 highly trained and skilled physicians now practicing at Lowell General Hospital, Lowell Community Health Center or one of the 129 Circle Health affiliated community-based practices throughout our 23-town primary and secondary service area. Circle Health also added 100 more employees to its staff, with more than 4,100 employees now serving our patients and providing important support services across our member organizations.

While teamwork among our staff and providers has been key, Circle Health leaders and providers have also worked to strengthen collaboration and integration as a member of Wellforce, a health system created by Circle Health and Tufts Medical Center in late 2014. “We are very focused on strengthening existing relationships and building new ones – all with a goal to ensure people in our community are receiving both a seamless health care experience and connections to additional resources that may not be considered part of a traditional health care delivery model,” says Dr. David Pickul, Chief Medical Officer of Circle Health and a practicing internal medicine physician. “These relationships are so critical to ensuring our patients receive the best possible care, in the most appropriate setting, and have what they need to be the healthiest they can be.”

Looking ahead, Circle Health will continue to explore the addition of new providers, programs and services in locations that help make the health care experience more accessible, affordable and convenient for those we serve. Next on the radar is Circle Health Billerica, a new outpatient facility at Treble Cove Plaza in North Billerica. Scheduled for opening in fall 2016, Circle Health Billerica will bring Circle Health Urgent Care, a Lowell General Hospital Patient Service Center and a primary care practice to the residents of Billerica.

Circle Health at a Glance
- Members and Affiliated Organizations: Lowell General Hospital, Circle Home, and Lowell Community Health Center
- Physicians – 712
- Employees – 4,133
- Nurses – 1,082
- Volunteers – 558
- Volunteer Hours – 56,720
In 2016, Lowell General Hospital attains an incredible milestone, celebrating 125 years of caring for the people of Lowell and the Merrimack Valley. The hospital’s anniversary on March 9, 2016 is a celebration of the visionary and generous people in our community who came together to create an organization rooted in the belief that all people living in our area deserve high quality health care and services close to home. From our humble beginnings as a small hospital on the Samuel Fay estate on Varnum Avenue in the Pawtucketville section of Lowell, to a multi-campus hospital system with more than a dozen facilities throughout the cities and towns we serve, Lowell General has truly evolved and transformed just as our city and the community itself has grown and transformed.

“Our relationship with this community is truly symbiotic – not only does Lowell General Hospital care for and serve the community, our community truly cares for and serves Lowell General Hospital,” says Joseph (Jody) White, President of Lowell General Hospital. “Our community is invested in making sure that its community hospital is the best it can be.”

While Lowell, Massachusetts may be best known for its iconic textile mills and its role in the Industrial Revolution, the city’s rich history also includes health care as one of its lasting and transformative industries. While the city previously housed three hospitals, today Lowell General Hospital leverages that same powerful legacy of commitment to compassionate, high quality health care.

“We are so proud to be a part of this strong history of health care in Lowell,” says Amy Hoey, Executive Vice President and Chief Operating Officer for Circle Health and Lowell General Hospital. “Our organization has been built on this powerful foundation, and we have been fortunate to have the support of not only our passionate and dedicated staff, physicians, volunteers and board members, but most importantly the support of the patients and families who entrust us with their care. This support has been key to our success for the past 125 years and will be key to our success in the future.”

Today, Lowell General Hospital is regionally and nationally recognized for both the quality of care we provide and our work environment. In the past 25 years alone, Lowell General Hospital has dramatically transformed to meet the needs of our community. Whether it is expanding and strengthening our capabilities and services in areas like cardiovascular, cancer, surgical or emergency care, or investing in cutting-edge facilities and technology to provide the best possible experience for our patients and our community, Lowell General Hospital stands poised for an exciting future. As Lowell’s largest employer, our 3,600 employees and more than 700 physicians not only provide great care, they have firmly established Lowell General Hospital as a top employer of choice in the Merrimack Valley.

Our dedicated team’s commitment will ensure our legacy of caring continues for the next 125 years and beyond.

We know our community’s support has been the key ingredient in Lowell General Hospital’s success. We thank each and every person who has invested their time, philanthropic support and guidance, and those who have given us the great privilege of allowing us to care for you. Together, we can accomplish incredible things and grow even stronger.

Norm Deschene, Chief Executive Officer
About Lowell General Hospital

Lowell General Hospital is an independent, not-for-profit, community hospital serving the Greater Lowell area and surrounding communities. With two primary campuses located in Lowell, Massachusetts, the hospital offers the latest state-of-the-art technology and a full range of medical and surgical services for patients, from newborns to seniors.

Financials

<table>
<thead>
<tr>
<th>Balance Sheet</th>
<th>FY15</th>
<th>FY14</th>
</tr>
</thead>
<tbody>
<tr>
<td>ASSETS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash and equivalents</td>
<td>$47,264,230</td>
<td>$48,738,759</td>
</tr>
<tr>
<td>Investments at market value</td>
<td>$86,503,698</td>
<td>$88,089,312</td>
</tr>
<tr>
<td>Patient accounts receivable</td>
<td>$45,575,445</td>
<td>$47,684,478</td>
</tr>
<tr>
<td>Property, plant, equipment</td>
<td>$230,469,802</td>
<td>$231,761,402</td>
</tr>
<tr>
<td>Due from affiliates</td>
<td>$8,043,613</td>
<td>$6,337,490</td>
</tr>
<tr>
<td>Other assets</td>
<td>$51,574,896</td>
<td>$50,647,087</td>
</tr>
<tr>
<td>Total assets</td>
<td>$469,431,684</td>
<td>$473,258,528</td>
</tr>
<tr>
<td>LIABILITIES AND NET ASSETS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accounts payable and accrued expenses</td>
<td>$71,863,210</td>
<td>$79,064,371</td>
</tr>
<tr>
<td>Due to third parties</td>
<td>$6,183,090</td>
<td>$3,269,408</td>
</tr>
<tr>
<td>Due to affiliates</td>
<td>$5,524,392</td>
<td>$4,769,498</td>
</tr>
<tr>
<td>Long-term debt</td>
<td>$166,480,007</td>
<td>$168,402,069</td>
</tr>
<tr>
<td>Other liabilities</td>
<td>$60,929,648</td>
<td>$50,645,830</td>
</tr>
<tr>
<td>Total net assets</td>
<td>$158,451,337</td>
<td>$167,107,352</td>
</tr>
<tr>
<td>Total liabilities and net assets</td>
<td>$469,431,684</td>
<td>$473,258,528</td>
</tr>
</tbody>
</table>

STATEMENT OF OPERATIONS

<table>
<thead>
<tr>
<th></th>
<th>FY15</th>
<th>FY14</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operating revenues</td>
<td>$430,220,391</td>
<td>$415,630,458</td>
</tr>
<tr>
<td>Operating expenses</td>
<td>$416,657,067</td>
<td>$409,224,792</td>
</tr>
<tr>
<td>Operating income</td>
<td>$13,563,324</td>
<td>$6,405,666</td>
</tr>
</tbody>
</table>

UNCOMPENSATED CARE COSTS

<table>
<thead>
<tr>
<th></th>
<th>FY15</th>
<th>FY14</th>
</tr>
</thead>
<tbody>
<tr>
<td>Net charity care</td>
<td>$7,389,656</td>
<td>$11,208,733</td>
</tr>
</tbody>
</table>

Patient Highlights at a Glance

<table>
<thead>
<tr>
<th></th>
<th>FY15</th>
<th>FY14</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inpatient discharges</td>
<td>21,953</td>
<td>21,750</td>
</tr>
<tr>
<td>Observation discharges</td>
<td>4,109</td>
<td>4,146</td>
</tr>
<tr>
<td>Total patient discharges</td>
<td>26,062</td>
<td>25,896</td>
</tr>
<tr>
<td>Patient days of care provided</td>
<td>88,337</td>
<td>82,975</td>
</tr>
<tr>
<td>Average length of stay (in days)</td>
<td>4.02</td>
<td>3.81</td>
</tr>
<tr>
<td>Births</td>
<td>2,348</td>
<td>2,323</td>
</tr>
<tr>
<td>Diagnostic imaging procedures</td>
<td>267,793</td>
<td>255,756</td>
</tr>
<tr>
<td>Laboratory procedures</td>
<td>1,923,761</td>
<td>1,924,672</td>
</tr>
<tr>
<td>Surgical procedures</td>
<td>14,932</td>
<td>14,597</td>
</tr>
<tr>
<td>Radiation therapy procedures</td>
<td>12,312</td>
<td>11,350</td>
</tr>
<tr>
<td>Emergency services</td>
<td>99,911</td>
<td>100,729</td>
</tr>
<tr>
<td>Outpatient clinic visits</td>
<td>73,851</td>
<td>69,715</td>
</tr>
</tbody>
</table>

Recognition

[Images of recognitions and awards]