

HEALTHCARE EQUALITY INDEX 2017

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Celebrating a Decade of Promoting Equitable and Inclusive Care for Lesbian, Gay, Bisexual, Transgender and Queer Patients and Their Families

Novant Health Forsyth Medical Center Winston-Salem, NC 4 year HEI participant Leader in LGBTQ Healthcare Equality Child Star



Keck Medical Center of USC Los Angeles, CA 2 Year HEI Participant Top Performer



VA Pacific Islands Healthcare System Honolulu, HI 4 Year HEI Participant Leader in LGBTQ Healthcare Equality

VA Lexington Medical Center

Lexington, KY

Top Performer

3 Year HEI Participant

University of New Mexico Hospitals Albuquerque, NM 5 Year HEI Participant Top Performer

Saint Luke's Hospital of Kansas City Kansas City, MO 3 Year HEI Participant Leader in LGBTQ Healthcare Equality

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Why the HEI? To help LGBTQ patients find LGBTQ friendly healthcare facilities

In addition to being a valuable tool and resource for healthcare facilities, the HEI is used by LGBTQ patients and their loved ones to find facilities that provide equitable and inclusive care. The ratings for each participating

facility are published in the annual HEI report, available on our website and promoted to HRC's more than 2 million supporters.

Consumers can easily search our interactive map to see how facilities near them rate – giving patients the ability to choose where they would like to receive care in their time of need.

To search the interactive map, go to: hrc.im/HEI-Map

Why Participate?

- Take advantage of free online, ondemand staff training from expert sources that includes CME/CEU credits
- Enhance patient satisfaction ratings
- Learn best practices for LGBTQ equity and inclusion
- Provide patient-centered care to a long-overlooked group
- Ensure compliance with legal, CMS and The Joint Commission requirements
- Improve quality and safety
- Reduce risk of litigation, complaints and negative publicity
- Reach out to a highly loyal market segment
- Enjoy recognition for commitment to equity, inclusion & diversity from the nation's largest LGBTQ civil rights organization

How to Participate

What Organizations are Eligible?

The HEI is primarily intended for **inpatient facilities** that provide general medical and surgical care. However, specialty hospitals and **certain outpatient healthcare facilities** may request to participate in the HEI. Typically a facility or organization must have **at least 100 employees to be eligible to participate**.

Clinic organizations with multiple locations such as FQHCs (and FQHC look alikes), Planned Parenthood Affiliates and other similarly structured organizations are eligible to participate - however, they have special guidelines and criteria.

To Register to Participate: hrc.org/hei/participation-request

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From the Human Rights Campaign Foundation President

SINCE THE LAUNCH OF THE HUMAN RIGHTS

Campaign Foundation's Healthcare Equality Index a decade ago, this benchmarking tool has helped transform hospitals and healthcare facilities into more welcoming and inclusive places for lesbian, gay, bisexual, transgender and queer patients, visitors and employees.

This progress has been dramatically illustrated by the growing number of active participants in the HEI. This year, the HEI reached a record 590 participating hospitals and healthcare facilities – with more than 98 percent of these facilities demonstrating that they have fully LGBTQ-inclusive patient and employment non-discrimination policies and equal visitation policies. Many of our nation's healthcare facilities have also made tremendous commitments to go beyond these essential policies by adopting higherlevel best practices in the areas of LGBTQ patient care and support, employee benefits and policies and LGBTQ patient and community engagement.

In 2015, we announced that the HEI was raising the bar by shifting to a more comprehensive and demanding survey that would score facilities on their LGBTQ-inclusive policies and practices. This year's HEI tells a powerful story of hospitals and healthcare facilities throughout the U.S. working to meet that higher bar. In this first year of scoring, a remarkable 302 facilities earned a perfect score of 100 and the designation of Leader in LGBTQ Healthcare Equality.

While our nation has made enormous progress on LGBTQ equality over the past decade, we have also faced a backlash. In 2016 the LGBTQ community was subject to unprecedented attacks from lawmakers at every level of government, with anti-LGBTQ lawmakers introducing more than 200 bills attacking our community across 34 states. When HRC stepped up to fight these bills, we were joined by the institutions that most impact people's everyday lives – the places where they work, go to school, worship and receive their healthcare. Corporate champions, including many healthcare systems, joined faith leaders, educators and social service professionals in speaking out against these hateful bills.

In addition to speaking out, our allies also doubled down on their commitment to equality by moving forward with LGBTQ-inclusive policies and practices because they know that it is the right thing to do. Nowhere was this more evident than in North Carolina where, despite the passage of the vile anti-LGBTQ law HB2, a record 28 of the state's hospitals participated in the 2017 HEI -- and 22 of them earned the Leader in LGBTQ Healthcare Equality designation. North Carolina now ranks third in the number of Leader facilities, behind only California and New York.

This year, our HEI report highlights the growing need for comprehensive multidisciplinary clinical care programs to treat transgender children and adolescents, and the facilities that are stepping up to the challenge. Dr. Ximena Lopez and Dr. Deanna Adkins are two shining examples of dedicated, caring clinicians who have created clinics that are providing vital medical and mental healthcare services to transgender youth. We commend them and all of the healthcare providers working to improve the lives of transgender children.

The 2017 HEI reminds us again that though we have made tremendous gains over the past decade, there is still much more work left for us to do. With some of our biggest battles still ahead of us, it is crucial that institutions continue to demonstrate that the march toward full equality is not slowing down. The 590 participants in this year's HEI continue this march in partnership with the LGBTQ community. For the past decade, the HEI has been the roadmap to closing the gap in ensuring equal care to LGBTQ patients and their families, and we urge every healthcare facility to join us in this continuing effort to provide inclusive care to all.

Chad Griffin HRC Foundation President



THE HUMAN RIGHTS CAMPAIGN

Foundation developed the Healthcare Equality Index to meet a deep and urgent need on the part of lesbian, gay, bisexual, transgender and queer Americans: the need for equitable, knowledgeable, sensitive and welcoming healthcare, free from discrimination. No one facing health concerns should also have to worry about receiving inequitable or substandard care because of their LGBTQ status.

Yet it is clear that many LGBTQ Americans experience these concerns when seeking healthcare, which can intensify whatever worries they may have about their health. In Lambda Legal's landmark study, *When Health Care Isn't Caring*, 73% of transgender respondents and 29% of lesbian, gay and bisexual respondents reported that they believed they would be treated differently by medical personnel because of their LGBTQ status. Equally disturbing, 52% of transgender respondents and 9% of lesbian, gay and bisexual respondents reported that they believed they would actually be refused medical services because of their LGBTQ status.*

When asked why they had such concerns, more than half of all respondents reported that they had experienced at least one of the following types of discrimination from healthcare providers: refusing to provide needed care, refusing to touch them or using excessive precautions, using harsh or abusive language, blaming them for their health status, or being physically rough or abusive. Transgender and gendernonconforming people are particularly vulnerable: 70% of transgender and gender-nonconforming respondents reported at least one of these experiences. Almost 56% of lesbian, gay or bisexual respondents reported at least one of these experiences.

The HEI exists because the HRC Foundation believes that the majority of American healthcare facilities do not want LGBTQ individuals in their communities to have – or to worry about having – these kinds of experiences. But facilities are often unsure how to protect their LGBTQ patients from discrimination, provide them with optimal care and extend a warm welcome to allay their concerns.

The HEI was developed to give healthcare facilities the information and resources they need to ensure that LGBTQ people have access to truly patient-centered care. HRC also uses this report to applaud the facilities that have shown their commitment to LGBTQ patient-centered care by taking

* When Health Care Isn't Caring: Lambda Legal's Survey of Discrimination Against LGBT People and People with HIV. New York: Lambda Legal, 2010. Available at: <u>http://www.lambdalegal.org/publications/when-health-care-isnt-caring</u>

Why the HEI? To prevent patient experiences like these...

"I couldn't believe it! As I walked back to see my partner and our newborn, an employee stopped me and asked who I was. When I said 'the other mom,' she rolled her eyes and walked away saying, 'I don't believe this."

 A lesbian mother after the birth of her first child "When I walked toward the women's bathroom in the waiting area, the receptionist jumped up and told me to use a McDonald's restroom down the street. I felt like leaving and never going back."

 A transgender woman waiting for her first physical in years

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of transgender or gender non-conforming patients surveyed have experienced some type of discrimination in healthcare

the HEI survey, and awards those facilities that receive the top score in the survey the coveted designation of "Leader in LGBTQ

During the last few years, the HEI has become even more relevant and useful. In 2011, The Joint Commission issued a standard that required accredited facilities to include sexual orientation and gender identity in their non-discrimination policies, thus extending vital protection to LGBTQ patients.** In another giant step toward LGBTQ equality in healthcare, both The Joint Commission and the federal Centers for Medicare and Medicaid Services now require that facilities allow visitation without regard to sexual orientation or gender identity.*** Additionally, Section 1557 of the Affordable Care Act prohibits sex discrimination in any hospital or health program that receives federal funds. The

Healthcare Equality."

court system and the U.S. Department of Health & Human Services' Office for Civil Rights have indicated that this prohibition extends to claims of discrimination based on gender identity and sex stereotyping.

The HEI offers healthcare facilities a powerful way to affirm that they comply with these requirements and are committed to LGBTQ patient-centered care. The HEI also urges facilities to extend non-discrimination protections to their LGBTQ employees, who play a key role in ensuring sensitive, knowledgeable LGBTQ care.

Equally important, the HEI offers all participating facilities expert training in LGBTQ healthcare needs, recognizing that staff education is critical to the success of any policy. Facilities may enroll as many staff as they would like in free online training that has been widely hailed as

groundbreaking and invaluable.

6% of lesbian, gay or bisexual

patients surveyed have experienced some

type of discrimination in healthcare

In short, the HEI offers healthcare facilities unique and powerful resources for providing the care everyone deserves to a longoverlooked group of patients, while also complying with new regulatory requirements and receiving access to high-quality staff training.

If you are affiliated with an HEIparticipating facility, the HRC Foundation extends its deepest thanks for your commitment to LGBTQ patient-centered care. And if you are affiliated with or know of healthcare facilities not yet engaged with the HEI, we hope you will bring this report to their attention. We are confident that they will thank you for informing them about this vital resource for ensuring highquality healthcare for LGBTQ Americans.

** See RI.01.01.01 EP 29, Comprehensive Accreditation Manual for Hospitals, Update 1, January 2011 and Comprehensive Accreditation Manual for Critical Access Hospitals, Update 1, January 2011. ***See RI.01.01.01 EP 28, Joint Commission manuals referenced above and Code of Federal Regulations 42 C.F.R. § 482.13(h) (for hospitals) and 42 C.F.R. § 485.635(f) (for critical access hospitals).

"I went to the ER because I fell and broke a rib. Once the doctor found out I was transgender he wanted to do a genital exam on me. When I refused, they refused to treat me."

- A transgender woman seeking treatment for a broken rib

"I transitioned ten years ago and have a full beard. But after learning I was born female, the doctor kept calling me 'she' in front of all the staff and other patients, no matter how many times I corrected him - and kept asking when I'd be having 'the surgery."

- A transgender man seeking care for a dislocated shoulder **"After I mentioned that** my husband would be visiting me, the staff, who had been very friendly, turned very cool – and I saw a lot less of them, even when I really needed help."

- A gay man hospitalized for a lung condition

Executive Summary

IN THE 10TH EDITION OF THE HUMAN

Rights Campaign's Healthcare Equality Index, we reflect on a decade of progress in LGBTQ healthcare. That progress includes significant growth in the HEI and the number of healthcare facilities that embrace LGBTQ inclusion and patient-centered care. A record 590 healthcare facilities actively participated in the HEI 2017 survey.

The HEI began transforming healthcare for LGBTQ people in 2007 when the first report contained 10 recommendations for healthcare facilities to be more welcoming and inclusive of LGBTQ patients and families. Those recommendations included

four foundational elements of LGBTQ patient-centered care: an LGBTQ-inclusive patient non-discrimination policy, an LGBTQ-inclusive visitation policy, an LGBTQ-inclusive employment nondiscrimination policy and staff training in LGBTQ patient-centered care. In 2016, HEIparticipating facilities began demonstrating near-perfect levels of adoption of the first three foundational elements, which continued this year. In addition, 85% of this year's participants met our staff training requirement. The HEI recorded more than 43,000 hours of training in LGBTQ patient-centered care provided to the staff at HEI-participating facilities.

In addition to active survey participants, the HRC Foundation proactively researched the key policies at more than 900 non-participating hospitals. Unfortunately, the adoption rate at these researched hospitals stands in stark contrast to the near-perfect adoption by active participants. Among the researched hospitals in which we were able to find or obtain enumerated patient non-discrimination policies, only 61% have policies that include both "sexual orientation" and "gender identity," and only 52% were found to have an LGBTQ-inclusive employment nondiscrimination policy. The equal visitation

By the Numbers HEI Participants at a Glance

590 Participants 302 Leaders

8 E Healthcare Equality Index 2017

policy, at 95%, is the only one that comes close to matching the rate of the participating facilities.

This year marks the first time that HEI participants are given a score based on how many LGBTQ-inclusive policies and practices they have in place in four different criteria. The first criteria consists of the aforementioned foundational elements of LGBTQ patient-centered care. The three remaining criteria are Patient Services and Support, Employee Benefits and Policies, and Patient and Community Engagement. An impressive **302 facilities earned HRC's coveted**

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38 22

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11 10 "Leader in LGBTQ Healthcare Equality" designation given to facilities that receive a score of 100 points. Another 145 facilities earned the "Top Performer" designation for scoring from 80 to 95 points. With 76% of participating facilities scoring 80 points or more, it is clear that healthcare facilities are going beyond the basics when it comes to adopting policies and practices in LGBTQ care.

As this overview of the HEI 2017 indicates, diverse healthcare facilities across the U.S. are making tremendous strides toward LGBTQ patient-centered care. In unprecedented numbers, they are changing key policies, implementing best practices and training their staff. We heartily applaud all the facilities that participate in the HEI and make a commitment to LGBTQ patient-centered care. We also encourage healthcare facilities that have yet to participate in the HEI to use this unique and invaluable resource to enhance LGBTQ care and signal their commitment to LGBTQ equity and inclusion. The HRC Foundation looks forward to welcoming them to the HEI in future years – and helping them extend a warm welcome to LGBTQ Americans.

	Facilities from more than					
	<u>110</u> different non-profit, for-profit and public health systems.					
	Systems with 10 or more participar	nts:				
_	Veterans Health Administration					
	Kaiser Permanente		Pai	rticip	ants by	
	NYC Health + Hospitals Corporation		Be	d Siz	2e	
-	Sutter Health	1-99	82	14%		
	Bon Secours Health System	100-299	214	36 %		
	Northwell Health	300-499	121	21%		
	Novant Health	500+ Outpatient Only	114 59	19% 10%		
	University Hospitals of Cleveland		590			
	Saint Luke's Health System					
148	Teaching Hospitals		in the equa hosp 13 of	e HEI, in Il balanc pitals (le	f all sizes participate ncluding a roughly ce of 12 of the smallest ess than 25 beds) and gest hospitals s).	
27	Pediatric Hospitals					
27	Religiously-Affiliated Hos	pitals				

A Decade of Progress

DURING THE PAST DECADE, WE HAVE SEEN TREMENDOUS

progress toward LGBTQ equality in every sector of society. Some of this progress has come from federal legislation, including the Matthew Shepard and James Byrd, Jr., Hate Crimes Prevention Act and the repeal of Don't Ask, Don't Tell. Some of this progress has come from major Supreme Court rulings, such as the overturning of the Defense of Marriage Act and the decision in Obergefell v. Hodges that gave same-sex couples nationwide the right to marry. Numerous states and cities also contributed to this progress by passing non-discrimination ordinances to protect their

HEI Milestones

	Fall 2007	Fall 2008	Summer 2009	Fall 2010	Fall 2011
	The first HEI report includes aggregate responses from 78 hospitals on questions related to 10 recommended policies and practices, including LGBTQ-inclusive patient, visitation and employment non-discrimination policies.	The second HEI report lists selected responses by facility name.	The HEI increases its scrutiny and requires documentation to validate LGBTQ- inclusive policies.	Jackson Memorial and other hospitals from the Jackson Health System participate in the HEI survey as part of their commitment to improving LGBTQ policies and practices. In subsequent years, these hospitals would all earn the "Leader in LGBT Healthcare Equality" designation.	HRC launches the "Leader in LGBT Healthcare Equality" designation for top performing facilities that participate in the HEI.
нел				HEALTHCARE INDEX 2010	HEALTHCARE EQUALITY INDEX 2011

External Milestones

June 2008

Lambda Legal files suit against Jackson Memorial Hospital on behalf of Janice Langbehn for failure to allow her to visit her dying partner.

March 2010

Congress passes the Affordable Care Act, which contains Section 1557, a nondiscrimination provision that makes it the first federal civil rights law to prohibit discrimination on the basis of sex in healthcare.

April 2010

Inspired by the Langbehn case, President Barack Obama directs the Secretary of Health and Human Services to address hospital visitation and other healthcare issues affecting LGBTQ families.

January 2011

New federal regulations regarding hospital visitation rights go into effect.

March 2011

The Institute of Medicine releases a historic report on the status of LGBT health: *The Health of Lesbian, Gay, Bisexual, and Transgender People: Building a Foundation for Better Understanding.*

July 2011

The Joint

Commission standard that requires accredited facilities to prohibit discrimination based on sexual orientation and gender identity goes into effect.

LGBTQ residents since there are no federal non-discrimination protections for LGBTQ citizens.

And finally, this progress has come from the institutions that most impact people's everyday lives — the places where they work, go to school, worship and receive their healthcare. As documented each year in **HRC's Corporate Equality Index**, many of our nation's leading corporations have embraced sexual orientation and gender identity employment protections and provided LGBTQ-inclusive benefits to millions of employees. Many schools

have embraced and protected their LGBTQ students. And many faith communities aren't simply engaging in dialogue around LGBTQ equality, they're leading the conversation. The healthcare sector has experienced tremendous progress on LGBTQ equality as well. Since we launched the Healthcare Equality Index a decade ago, we have seen incredible growth in the number of healthcare institutions that embrace LGBTQ-inclusive policies and practices. The timeline below highlights HEI milestones and external events that have impacted the policies and practices promoted by the HEI.

Early 2012

In partnership with the American Health Lawyers Association, HRC publishes *Revisiting Your Hospital's Visitation Policies* to help hospitals implement the new federal visitation regulations.

Spring 2012

HRC begins offering webinars to help facilities meet the requirement to provide training in LGBTQ patientcentered care.

Fall 2014

The HEI 2014 report is the first to include research on how non-participating hospitals are meeting the three key policies.

March 2016

The HEI 2016 report is the first in which nearly 100% of participants have LGBTQ-inclusive patient, visitation and employment non-discrimination policies.

March 2017

The HEI 2017 report is the first to report scores for healthcare facilities.









November 2011

The Joint Commission issues a field guide to help hospitals create a welcome, safe and inclusive environment for LGBT patients and their families.

April 2013

The revised National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care includes sexual orientation and gender identity in its broader definition of culture.

July 2015

The Department of Health & Human Services' Office for Civil Rights reaches a landmark voluntary settlement with The Brooklyn Hospital Center to resolve allegations that it violated Section 1557 of the ACA in a case regarding the treatment of a transgender patient.



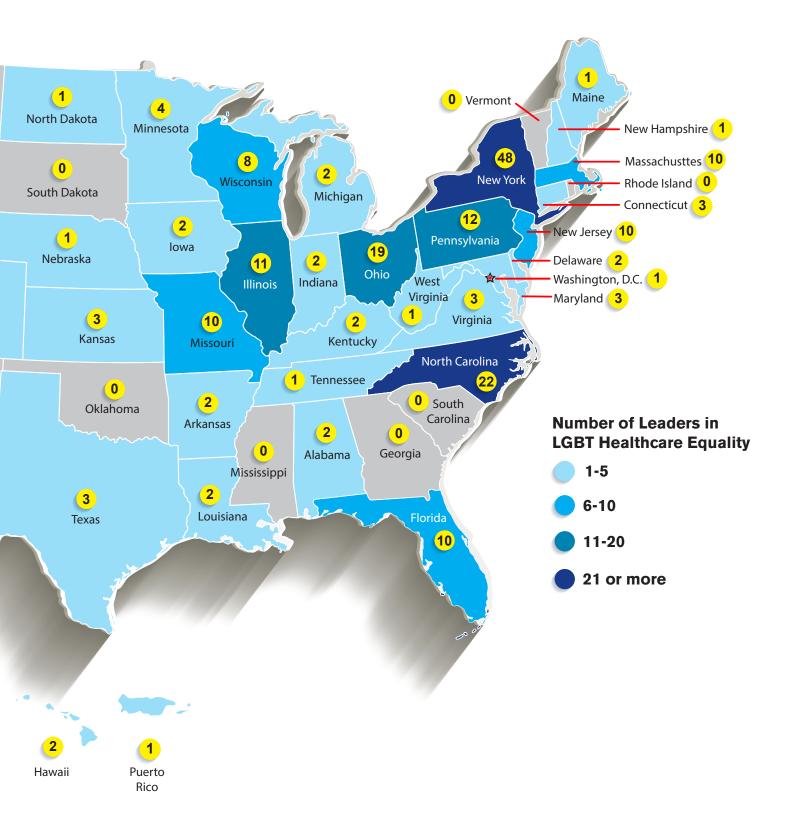
HEI 2017 Leaders in LGBTQ Healthcare Equality

THE HEALTHCARE EQUALITY INDEX 2017 IMPLEMENTS

new criteria that raise the bar on what it takes to earn HRC's "Leader in LGBTQ Healthcare Equality" designation. For the first time ever, HEI participants are given scores in four criteria that represent how many policies and best practices from each section they have implemented. Participants that receive the maximum score in each section and a total score of 100 points earn the coveted status of "2017 Leader in LGBTQ Healthcare Equality." In this year's report, 51% of participants meet the more challenging criteria and earn this designation.

This list features the 302 HEI 2017 Leaders in LGBTQ Healthcare Equality. In addition to being celebrated in the HEI report, Leaders in LGBTQ Healthcare Equality receive a special logo and a toolkit of resources for outreach to LGBTQ residents in their service area.







Organization Official Name	City	
ALABAMA		
University of Alabama Hospital	Birmingham	
VA Birmingham Medical Center	Birmingham	
ARIZONA		
El Rio Community Health Center	Tucson	
ARKANSAS	F U U	
VA Health Care System of the Ozarks CALIFORNIA	Fayetteville	
Kaiser Permanente, Orange County Anaheim Medical Center	Anaheim	
Kaiser Permanente, Antioch Medical Center	Antioch	
Sutter Delta Medical Center	Antioch	
Sutter Auburn Faith Hospital	Auburn	
Kaiser Permanente, Baldwin Park Medical Center	Baldwin Park	
University Health Services (Tang Center)	Berkeley	
Mills-Peninsula Health Services	Burlingame	
Eden Medical Center	Castro Valley	
Sutter Coast Hospital	Crescent City	
Sutter Davis Hospital	Davis	
Kaiser Permanente, Downey Medical Center	Downey	
City of Hope's National Medical Center	Duarte	
Kaiser Permanente, Fontana Medical Center	Fontana	
Kaiser Permanente, Fremont Medical Center	Fremont	
Kaiser Permanente, Fresno Medical Center	Fresno	
Kaiser Permanente, South Bay Medical Center	Harbor City	
Kaiser Permanente, Irvine Medical Center	Irvine	
Sutter Amador Hospital	Jackson	
Sutter Lakeside Hospital	Lakeport	
St. Mary's Medical Center - Long Beach	Long Beach	
Kaiser Permanente, Los Angeles Medical Center	Los Angeles	
Kaiser Permanente, West Los Angeles Medical Center	Los Angeles	
LAC-USC Medical Center	Los Angeles	
Los Angeles LGBT Center	Los Angeles	
Mattel Children's Hospital UCLA	Los Angeles	
Resnick Neuropsychiatric Hospital at UCLA	Los Angeles	2
Ronald Reagan UCLA Medical Center	Los Angeles	12
Memorial Hospital Los Banos	Los Banos	
Kaiser Permanente, Manteca Medical Center	Manteca	ė
Contra Costa Behavioral Health Division	Martinez	
Contra Costa Regional Medical Center	Martinez	
Kaiser Permanente, Modesto Medical Center	Modesto	

University of Alabama Hospital 2 Year HEI Participant

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www.hrc.org/hei

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Organization Official Name

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Memorial Medical Center
Kaiser Permanente, Moreno Valley Medical Center
El Camino Hospital
Sutter Novato Community Hospital
Alta Bates Summit Medical Center
Kaiser Permanente, Oakland Medical Center
Kaiser Permanente, Ontario Medical Center
Desert Regional Medical Center
Stanford Health Care
VA Palo Alto Health Care System

City

Modesto
Moreno Valley
Mountain View
Novato
Oakland
Oakland
Ontario
Palm Springs
Palo Alto
Palo Alto

NGAY WEIS



Organization Official Name

Kaiser Permanente, Panorama City Medical Center **Eisenhower Medical Center** Kaiser Permanente, Redwood City Medical Center Kaiser Permanente, Richmond Medical Center Kaiser Permanente, Riverside Medical Center Kaiser Permanente, Roseville Medical Center Sutter Roseville Medical Center Kaiser Permanente, Sacramento Medical Center Kaiser Permanente, South Sacramento Medical Center Sutter Medical Center, Sacramento Sutter Medical Foundation UC Davis Medical Center Kaiser Permanente, San Diego Medical Center UC San Diego Health System VA San Diego Healthcare System Kaiser Permanente, San Francisco Medical Center Sutter California Pacific Medical Center **UCSF** Medical Center Kaiser Permanente, San Jose Medical Center Santa Clara Valley Medical Center Kaiser Permanente, San Leandro Medical Center Kaiser Permanente, San Rafael Medical Center Kaiser Permanente, Santa Clara Medical Center Palo Alto Medical Foundation Sutter Maternity and Surgery Center of Santa Cruz Santa Monica-UCLA Medical Center and Orthopaedic Hospital Kaiser Permanente, Santa Rosa Medical Center Sutter Santa Rosa Regional Hospital Kaiser Permanente, South San Francisco Medical Center Sutter Tracy Community Hospital Kaiser Permanente, Vacaville Medical Center Kaiser Permanente, Vallejo Medical Center Sutter Solano Medical Center Kaiser Permanente, Walnut Creek Medical Center Kaiser Permanente, Woodland Hills Medical Center COLORADO Denver Health Medical Center CONNECTICUT Middlesex Hospital

Reproductive Medicine Associates of Connecticut

City

Panorama City Rancho Mirage Redwood City Richmond Riverside Roseville Roseville Sacramento Sacramento Sacramento Sacramento Sacramento San Diego San Diego San Diego San Francisco San Francisco San Francisco San Jose San Jose San Leandro San Rafael Santa Clara Santa Cruz Santa Cruz Santa Monica Santa Rosa Santa Rosa South San Francisco Tracy Vacaville Vallejo Vallejo Walnut Creek Woodland Hills Denver

Middletown Norwalk

Kaiser Permanente, Orange County Anaheim Medical Center 10 Year HEI Participant

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Organization Official Name	City	
VA Connecticut Health Care System	West Haven	
DELAWARE		
Christiana Care - Christiana Hospital	Newark	
Christiana Care - Wilmington Hospital	Wilmington	
DISTRICT OF COLUMBIA		
Whitman-Walker Health	Washington	
FLORIDA		
VA Bay Pines Healthcare System	Bay Pines	
Florida Medical Center - A Campus of North Shore	Fort Lauderdale	Y.
Care Resource	Miami	
University of Miami Hospital	Miami	Harris Harris
VA Miami Healthcare System	Miami	- DECORD
VA Orlando Medical Center	Orlando	and a start and a start
St. Petersburg General Hospital	Saint Petersburg	Control of the second
H. Lee Moffitt Cancer Center and Research Institute	Tampa	Will structure and
VA James A. Haley Veterans Hospital	Tampa	
Cleveland Clinic Florida	Weston	
HAWAII	Weston	
Kaiser Permanente, Moanalua Medical Center	Honolulu	
VA Pacific Islands Health Care System	Honolulu	
ILLINOIS		
Advocate Illinois Masonic Medical Center	Chicago	
Ann & Robert H. Lurie Children's Hospital of Chicago	Chicago	
Howard Brown Health Center	Chicago	
Northwestern Memorial Hospital	Chicago	
Rush University Medical Center	Chicago	
University of Chicago Medical Center	Chicago	
University of Illinois Hospital & Health Sciences System	Chicago	
VA Jesse Brown Medical Center		
	Chicago	
VA Illiana Health Care System	Danville	
Northwestern Medicine Lake Forest Hospital	Lake Forest	
Rush Oak Park Hospital	Oak Park	
VA Richard L. Roudebush Medical Center	Indianapolis	
Indiana University Health Ball Memorial Hospital	Muncie	
IOWA	Jama City	
University of Iowa Hospitals and Clinics	Iowa City	
VA Iowa City Health Care System	lowa City	-
KANSAS	Corrett	-
Anderson County Hospital	Garnett	
Saint Luke's Cushing Hospital	Leavenworth	University of Miami Hospital

2 Year HEI Participant



Saint Luke's South Hospital Overland Park KENTUCKY University of Kentucky Albert B. Chandler Hospital Lexington VA Robley Rex Medical Center Colusivation CrescentCare New Orleans VA Southeast Louisiana Healthcare System MAINE CrescentCare New Orleans MAINE Penobscot Community Health Care MARYLAND Chase Breaton Health Services Planned Parenthood of Maryland University Health Center Juniversity of Maryland College Park MASSACHUSETTS Health Quarters Beth Israel Deaconess Medical Center Beston Health Services Beston Holding System Beston Health Services Beston Health Center Juniversity of Maryland Beston College Park MASSACHUSETTS Health Quarters Beston Health Services Beston Health Services Beston Health Center Juniversity of Maryland Beston Medical Center Beston Health Center Setter Beston Health Service Beston Health Center Setter Beston Health Center Setter Beston Health Center Beston Beston Health Center Beston Beston Health Center Beston Health Center Beston Health Center Beston Beston Health Center	Organization Official Name	City
KENTUCKYLexingtonUniversity of Kentucky Albert B. Chandler HospitalLexingtonVA Robley Rex Medical CenterLouisvilleLOUISIANACrescentCareVA Southeast Louisiana Healthcare SystemNew OrleansMAINEPenobscot Community Health CareBangorMARYLANDCollege ParkChase Brexton Health ServicesBaltimorePlanned Parenthood of MarylandBaltimoreUniversity Health Center - University of MarylandCollege ParkMASSCHUSETTSEverlyHealth QuartersBostonBoston Children's HospitalBostonBoston Children's HospitalBostonBoston Medical CenterBostonBoston Children's HospitalBostonColege Dickinson HospitalBostonColey Dickinson HospitalBostonColey Dickinson HospitalBostonColey Dickinson HospitalBostonColey Dickinson HospitalBostonColey Dickinson HospitalBostonVA Battle Creek Medical CenterWorcesterMINESOTAHennepin County Medical CenterVA Battle Creek Medical CenterMinneapolisVA St. Cloud Health Care SystemSt. CloudVA St. Cloud Health Care SystemSt. CloudVA St. Cloud Health Care SystemSt. CloudVA Inneapolis Health Care SystemSt. CloudVA Inneapolis Health Care SystemSt. CloudVA Minneapolis Health Care SystemSt. CloudVA Harry S. Truman MemorialColumbiaChildren's Meroy Kansas City <td>Saint Luke's South Hospital</td> <td>Overland Park</td>	Saint Luke's South Hospital	Overland Park
VA Robley Rex Medical CenterLouisvilleLOUISIANA		
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Saint Luke's North Hospital - Barry Road Kansas City	Saint Luke's Hospital of Kansas City	
Saint Luke's East Hospital Lee's Summit	Saint Luke's East Hospital	Lee's Summit
Saint Luke's North Hospital - Smithville Smithville		



Organization Official Name	City
VA St. Louis Health Care System	St. Louis
Wright Memorial Hospital	Trenton
NEBRASKA	
VA Omaha-Nebraska-Western Iowa Health Care System	Omaha
NEVADA	
Veterans Affairs Southern Nevada Healthcare System	North Las Vegas
VA Sierra Nevada Health Care System	Reno
NEW HAMPSHIRE	
VA Manchester Medical Center	Manchester
NEW JERSEY	
AtlantiCare Regional Medical Center	Atlantic City
VA New Jersey Health Care System	East Orange
Hackensack University Medical Center	Hackensack
Jersey City Medical Center	Jersey City

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Organization Official Name	City	
Goryeb Children's Hospital	Morristown	
Morristown Medical Center	Morristown	
Robert Wood Johnson University Hospital	New Brunswick	
Newton Medical Center	Newton	
Chilton Medical Center	Pompton Plains	
Overlook Medical Center	Summit	
NEW YORK		
VA Bath Medical Center	Bath	and the second sec
Montefiore Medical Center	Bronx	All and the second second
NYC Health and Hospitals - Belvis, a Gotham Health Center	Bronx	
NYC Health and Hospitals - Jacobi	Bronx	
NYC Health and Hospitals - Lincoln	Bronx	
NYC Health and Hospitals - Morrisania, a Gotham Health Center	Bronx	
VA James J. Peters Medical Center	Bronx	
NYC Health and Hospitals - Coney Island	Brooklyn	
NYC Health and Hospitals - Cumberland, a Gotham Health Center	Brooklyn	Children Children Starting
NYC Health and Hospitals - East New York, a Gotham Health Center	Brooklyn	
NYC Health and Hospitals - Kings	Brooklyn	N / SOME TO AND
NYC Health and Hospitals - McKinney	Brooklyn	E CANTANTAN
NYC Health and Hospitals - Woodhull	Brooklyn	
Buffalo General Medical Center	Buffalo	TANK
Evergreen Health Services	Buffalo	
Women & Children's Hospital of Buffalo	Buffalo	and the second se
NYC Health and Hospitals - Elmhurst	Elmhurst	
NYC Health and Hospitals - Queens	Jamaica	and the second s
Mount Sinai Queens	Long Island City	Contract Contract of Contract of Contract
Long Island Jewish Medical Center	New Hyde Park	Manus and the second
Callen-Lorde Community Health Center	New York	a manufactor
Hospital for Special Surgery	New York	North Market Market Contraction
Lenox Hill Hospital	New York	
Memorial Sloan-Kettering Cancer Center	New York	RINGER PROVIDE
Mount Sinai Beth Israel	New York	
Mount Sinai Hospital	New York	
Mount Sinai St. Luke's	New York	
Mount Sinai West	New York	
New York Eye and Ear Infirmary of Mount Sinai	New York	
New York-Presbyterian Hospital/Weill Cornell Medical Center	New York	
New York-Presbyterian/Columbia University Medical Center	New York	
NYC Health and Hospitals - Bellevue	New York	Callen-Lorde Community
		6 Year HEL Participant

Callen-Lorde Community Health Center 6 Year HEI Participant

	Organization Official Name	City	
	NYC Health and Hospitals - Carter	New York	
	NYC Health and Hospitals - Coler	New York	
	NYC Health and Hospitals - Gouverneur Skilled Nursing Facility	New York	
	NYC Health and Hospitals - Gouverneur, a Gotham Health Center	New York	
	NYC Health and Hospitals - Harlem	New York	
	NYC Health and Hospitals - Metropolitan	New York	
	NYC Health and Hospitals - Renaissance, a Gotham Health Center	New York	
	NYU Langone Medical Center	New York	
	Reproductive Medicine Associates of New York	New York	
	DeGraff Memorial Hospital	North Tonawanda	
	A.O. Fox Memorial Hospital	Oneonta	
	Strong Memorial Hospital of the University of Rochester	Rochester	
	Trillium Health	Rochester	
	Sea View Hospital Rehabilitation Center and Home	Staten Island	
	Staten Island University Hospital	Staten Island	
	Millard Fillmore Suburban Hospital	Williamsville	1 - Atter
322	NORTH CAROLINA		
¥	Novant Health Brunswick Medical Center	Bolivia	G
	Alamance Regional Medical Center	Burlington	
	Novant Health Charlotte Orthopaedic Hospital	Charlotte	
	Novant Health Hemby Children's Hospital	Charlotte	
	Novant Health Presbyterian Medical Center	Charlotte	
	Duke Regional Hospital	Durham	
	Duke University Hospital	Durham	
	Cone Health Behavioral Health Hospital	Greensboro	
	Moses H. Cone Memorial Hospital	Greensboro	LDUKE UN
	Wesley Long Hospital	Greensboro	
	Women's Hospital of Greensboro	Greensboro	the second states and second s
	Novant Health Huntersville Medical Center	Huntersville	A A A A A A A A A A A A A A A A A A A
	Novant Health Kernersville Medical Center	Kernersville	
	Novant Health Matthews Medical Center	Matthews	
	Duke Raleigh Hospital	Raleigh	
	Annie Penn Hospital	Reidsville	
	Novant Health Rowan Medical Center	Salisbury	
	W. G. (Bill) Hefner Veterans Affairs Medical Center	Salisbury	
	Novant Health Thomasville Medical Center	Thomasville	THE PROPERTY AND THE PROPERTY OF THE
	Novant Health Forsyth Medical Center	Winston-Salem	
	Novant Health Medical Park Hospital	Winston-Salem	Duke Universtiy Hospital

Duke Universtiy Hospital 8 Year HEI Participant



Organization Official Name	City	
Wake Forest Baptist Medical Center	Winston-Salem	
NORTH DAKOTA	Earga	
VA Fargo Health Care System оніо	Fargo	1
Cincinnati Children's Hospital Medical Center	Cincinnati	
VA Cincinnati Medical Center	Cincinnati	
Cleveland Clinic (Main Campus)	Cleveland	
Fairview Hospital	Cleveland	
Hillcrest Hospital	Cleveland	
Lutheran Hospital	Cleveland	
MetroHealth Medical Center	Cleveland	
VA Louis Stokes Cleveland Medical Center	Cleveland	
Columbus Public Health Department	Columbus	
Equitas Health	Columbus	
James Cancer Hospital and Solove Research Institute	Columbus	
Nationwide Children's Hospital	Columbus	
The Ohio State University Wexner Medical Center	Columbus	
VA Dayton Medical Center	Dayton	
Euclid Hospital	Euclid	- TTO
Marymount Hospital	Garfield Heights	
Medina Hospital	Medina	1 - White marine
The University of Toledo Medical Center	Toledo	Themille
South Pointe Hospital	Warrensville Heights	VIII VIII
OREGON		1172 1 - T T T T T T T T T T T T T T T T T T
Kaiser Permanente, Sunnyside Medical Center	Clackamas	-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
Legacy Mount Hood Medical Center	Gresham	
Kaiser Foundation Hospital Westside Medical Center	Hillsboro	with the first the first state in the
Legacy Emanuel Medical Center	Portland	The The Arter and And
Legacy Good Samaritan Hospital and Medical Center	Portland	The La La la
Randall Children's Hospital at Legacy Emanuel	Portland	A WA THE RUCENCE THERE
VA Portland Medical Center	Portland	
Legacy Meridian Park Medical Center	Tualatin	1 1 Martin La 1 1 Martin
PENNSYLVANIA		
VA Coatesville Medical Center	Coatesville	
Einstein Medical Center Montgomery	East Norriton	그는 것이 같아요. 이렇는 것 같은 것을 했다.
Einstein Medical Center Elkins Park	Elkins Park	
Moss Rehab	Elkins Park	
The Abramson Center for Jewish Life	North Wales	
Children's Hospital of Philadelphia	Philadelphia	Einstein Medical Center Elkins Park
Einstein Medical Conter Philadelphia	Philadalphia	

Philadelphia

3 Year HEI Participant

Einstein Medical Center Philadelphia

	Organization Official Name	City
	Mazzoni Center	Philadelphia
	Willowcrest Skilled Nursing and Rehabilitation Center	Philadelphia
	Children's Hospital of Pittsburgh of UPMC	Pittsburgh
	VA Pittsburgh Healthcare System	Pittsburgh
	Western Psychiatric Institute and Clinic of UPMC	Pittsburgh
	PUERTO RICO	
	VA Caribbean Healthcare System	San Juan
	TENNESSEE	
	Vanderbilt Hospital and Clinics	Nashville
	TEXAS	
	Project Vida Health Center	El Paso
	Metropolitan Methodist Hospital	San Antonio
	VA South Texas Health Care System	San Antonio
	UTAH	
	VA Salt Lake City Health Care System	Salt Lake City
	VIRGINIA	
	VA Hampton Medical Center	Hampton
-	Novant Health UVA Health System Haymarket Medical Center	Haymarket
-	Novant Health UVA Health System Prince William Medical Center	Manassas
1. ST	WASHINGTON	
	Jefferson Healthcare	Port Townsend
-	UW Medicine/Valley Medical Center	Renton
-		Seattle
enter 1-	Seattle Children's Hospital	Seattle
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	University of Washington Medical Center	Seattle
	University of Washington Medical Center UW Medicine/Harborview Medical Center	Seattle Seattle
	University of Washington Medical Center UW Medicine/Harborview Medical Center UW Medicine/Northwest Hospital & Medical Center	Seattle Seattle Seattle
	University of Washington Medical Center UW Medicine/Harborview Medical Center UW Medicine/Northwest Hospital & Medical Center Legacy Salmon Creek Medical Center	Seattle Seattle Seattle Vancouver
	University of Washington Medical Center UW Medicine/Harborview Medical Center UW Medicine/Northwest Hospital & Medical Center Legacy Salmon Creek Medical Center Cedar River Clinics	Seattle Seattle Seattle Vancouver
	University of Washington Medical Center UW Medicine/Harborview Medical Center UW Medicine/Northwest Hospital & Medical Center Legacy Salmon Creek Medical Center Cedar River Clinics WEST VIRGINIA	Seattle Seattle Seattle Vancouver Yakima
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	University of Washington Medical Center UW Medicine/Harborview Medical Center UW Medicine/Northwest Hospital & Medical Center Legacy Salmon Creek Medical Center Cedar River Clinics WEST VIRGINIA VA Martinsburg Medical Center WISCONSIN NorthLakes Community Clinic American Family Children's Hospital University of Wisconsin Hospital and Clinics UW Health at the American Center VA William S. Middleton Memorial Veterans Hospital	 Seattle Seattle Seattle Vancouver Yakima Yakima Martinsburg Iron River Madison Madison Madison Madison Madison
	University of Washington Medical Center UW Medicine/Harborview Medical Center UW Medicine/Northwest Hospital & Medical Center Legacy Salmon Creek Medical Center Cedar River Clinics WEST VIRGINIA VA Martinsburg Medical Center WISCONSIN NorthLakes Community Clinic American Family Children's Hospital University of Wisconsin Hospital and Clinics UW Health at the American Center VA William S. Middleton Memorial Veterans Hospital AIDS Resource Center of Wisconsin	Seattle Seattle Seattle Vancouver Yakima Yakima Martinsburg Iron River Madison Madison Madison Madison Madison
	University of Washington Medical Center UW Medicine/Harborview Medical Center UW Medicine/Northwest Hospital & Medical Center Legacy Salmon Creek Medical Center Cedar River Clinics WEST VIRGINIA VA Martinsburg Medical Center WISCONSIN NorthLakes Community Clinic American Family Children's Hospital University of Wisconsin Hospital and Clinics UW Health at the American Center VA William S. Middleton Memorial Veterans Hospital	 Seattle Seattle Seattle Vancouver Yakima Yakima Martinsburg Iron River Madison Madison Madison Madison Madison

North Carolina Hospitals Stand Up for LGBTQ Equality

WE HAVE SEEN TREMENDOUS PROGRESS

toward LGBTQ equality over the past decade, yet LGBTQ Americans still lack federal civil rights protections. Without these protections, we are left with a patchwork of state and municipal laws that leave many LGBTQ people vulnerable to discrimination in their workplaces, healthcare facilities, schools and communities. This is why the HRC Foundation produces programs like the HEI that promote LGBTQ-inclusive policies and practices in the institutions that impact people's everyday lives. This work is most important in states and communities that lack non-discrimination protections for their LGBTQ citizens and those that have passed anti-LGBTQ legislation that seeks to take away rights and legislate discrimination.

Last year, North Carolina's legislature and former Governor Pat McCrory passed a reckless and extreme law known as House Bill 2 (HB2) that thrust the state into the epicenter of the debate surrounding LGBTQ non-discrimination protections. HB2 eliminated all existing municipal non-discrimination protections for LGBTQ people and banned any communities from passing such provisions in the future. The most well-known provision of the law prevents all transgender people – children and adults – from using restrooms and other facilities consistent with their gender identity in any government-owned buildings.

North Carolina is facing enormous backlash from its citizens and advocates nationwide for rescinding protections for LGBTQ people and attacking the rights of transgender people. The passage of HB2 caused significant damage to North Carolina's reputation and economy: Companies scrapped plans to expand in the state, promoters cancelled or moved major conventions, professional sports leagues and artists pulled games and concerts out of the state, and tourism dropped. More than 200 major CEOs and business leaders, including many from North Carolina's largest employers, signed an open letter calling for repeal of HB2.

Hospitals and healthcare systems in North Carolina fought back. Many reassured their employees of their commitment to LGBTQ diversity and inclusion, and some spoke out publicly against HB2. Duke University, a longtime participant in the HEI and a Leader in LGBTQ Healthcare Equality, called for repeal (see accompanying statement). Throughout this controversy, several hospitals in North Carolina made a commitment to LGBTQ inclusion by participating in the HEI for the first time, and many of them achieved the Leader in LGBTQ Healthcare Equality designation. This year, 28 hospitals in North Carolina participated in the HEI, and 22 of them earned the Leader designation, placing North Carolina third nationwide in the number of Leaders, behind California and New York.

There is still much work to do in North Carolina to repeal HB2 and advance LGBTQ equality, but thanks to these hospitals, many more LGBTQ North Carolinians have a safe place to seek hospital care when they need it.



Duke University is committed to fostering an open, welcoming, inclusive community that respects each individual. We remain steadfast in our policies of nondiscrimination and inclusion for all of our students, faculty, staff, alumni, patients, fans and visitors.

We deplore in the strongest possible terms the new state law, HB2, that prevents municipalities from establishing laws that protect members of the LGBTQ+ community and others from discrimination and eliminates some economic advancement opportunities for underrepresented communities.

As a result of this law, North Carolina has already suffered damage to its national and international reputation as a leader in the fair treatment of its citizens. The economic and material impact is being felt across the state in many ways, including at universities. Scholars from states and municipalities that have imposed bans on government travel to North Carolina have been unable to travel to Duke to continue vital ongoing research partnerships or attend academic conferences. Prospective students, faculty and staff, as well as Duke alumni planning visits to campus, have voiced concerns about whether they will find a hospitable environment in North Carolina. These developments have the potential to limit the value that Duke and other colleges and universities contribute to the state, namely producing trained graduates and expanding the frontiers of knowledge.

We extend our concern and support to those who have been most directly affected — the members of Duke's LGBTQ+ community. We encourage anyone needing assistance to turn to the many support services that Duke offers.

In spirit and in letter, this new law runs counter to the ideals of Duke University — and, we believe, to those of our great state. We urge a full repeal of HB2.

Richard Brodhead President

Sally Kornbluth Provost

A. Eugene Washington Chancellor for Health Affairs President and CEO, Duke University Health System

Comprehensive Clinics Care for Transgender Children and Adolescents

OVER THE PAST FEW YEARS, MORE OF US have heard stories of transgender children, and many people know a child in their community who may be transgender. Similarly, healthcare providers across various specialties have seen an increase in children recognizing that their sex assigned at birth does not match the gender they know themselves to be. Acknowledging this increasing trend, clinicians are recognizing the medical and psychological needs of transgender and gender-nonconforming children and adolescents and are seeking ways to care for them and their families.

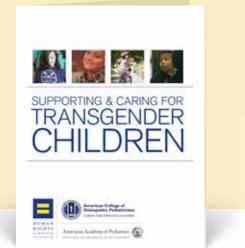
Comprehensive multidisciplinary clinical care programs have emerged over the past decade to care for transgender youth. The first clinic of this kind in the United States was started at Boston Children's Hospital in 2007 by Dr. Norman Spack. These clinics typically combine providers from different specialties to meet the varied medical and mental health needs of transgender youth and offer or connect them with an array of other services, such as support groups, play groups and legal services.

In early 2015, HRC created an online map of these programs as part of a collection of resources for transgender and gender-expansive youth and their families. We originally charted 32 clinics in the United States, and this number has grown significantly over the past two years as the demand for these services has led more and more specialized clinics to open. Not surprisingly, the overwhelming majority of these clinical programs are located at facilities that participate in the HEI and are Leaders in LGBTQ Healthcare Equality.

The map at right shows the locations of comprehensive multidisciplinary clinical care programs for transgender youth that we currently track. For information about each of these clinics, as well as new clinics as they are added, please visit our online map at *www.hrc.im/youthclinics.*



Learn more about how families and healthcare professionals can help transgender children thrive by reading our groundbreaking resource, Supporting & Caring for Transgender Children. This guide was produced in partnership between the Human Rights Campaign Foundation, the American Academy of Pediatrics and the American College of Osteopathic Pediatricians. It reflects the experiences of expert clinicians, including pediatricians and mental health professionals, and features families of transgender children from across the United States. Download this guide at *www.hrc.im/supportingtranschildren*.







Deanna Adkins, M.D. Center for Child and Adolescent Gender Care at Duke Children's Hospital

Duke Gender Care Center Fights Discriminatory Bathroom Bill

WHEN DR. DEANNA ADKINS OPENED THE

Center for Child and Adolescent Gender Care at Duke Children's Hospital in the middle of 2015, little did she know that less than a year later her state would become the epicenter of the debate surrounding LGBTQ non-discrimination protections, particularly transgender people's rights to use the restroom aligned with their gender identity. North Carolina's legislature and former Governor Pat McCrory would pass a reckless and extreme law known as House Bill 2 that would harm Dr. Adkins' patients and bring increased attention to the important work that her clinic does.

Like many clinics of its kind, the Center for Child and Adolescent Gender Care evolved from Dr. Adkins' experience treating transgender children and adolescents. Dr. Adkins initially referred patients to clinics in Boston and Toronto, but under guidance from a colleague, she agreed to treat a local patient. That led to more referrals, and she realized that there was a need for a dedicated, comprehensive gender center.

The once-a-week clinic, which is the first of its kind in North Carolina and only one of a few located in the Southeast, is staffed by providers from Duke in an array of disciplines, including endocrinology, social work, urology, pediatric surgery, child and adolescent medicine, psychiatry, psychology and pastoral care. They work together to provide holistic, evidencebased, patient- and family-centered care. Patients come from throughout North Carolina, from several neighboring states and from as far away as Florida. The clinic served 127 patients during its first year, and administrators anticipate nearly doubling that number next year.

HB2 passed during the clinic's first year. While transgender children and adolescents in North Carolina had this wonderful new resource to provide them with the lifesaving medical care that they needed, their lives were also under direct attack by their state government. "Since HB2 passed, our patients are more anxious and afraid. They are immediately targets for harassment and bullying when they use a public restroom. More and more withdraw from school and society," said Dr. Adkins. "I am really concerned because this self-isolation escalates their depression, which increases their risk of suicide even more."

To protect her patients, Dr. Adkins has been outspoken about her opposition to HB2 and has provided expert testimony in a federal lawsuit regarding the bill. While efforts to overturn HB2 move forward, Dr. Adkins will continue to speak out for her patients. Most importantly, she will continue to grow the clinic where she provides the medical care that they need and deserve to live healthy and authentic lives.

Hear from Dr. Adkins and other healthcare providers speak out about working with transgender children and youth in this moving video. www.hrc.im/DoctorsSpeakOut

Children's Health in Dallas Serves Transgender Youth and Their Families

IN FEBRUARY OF 2012, DR. XIMENA

Lopez, a pediatric endocrinologist in Dallas, received a referral for a 9-yearold who had been assigned female at birth but identified as a boy. Dr. Lopez had no experience treating transgender patients, but she had been exposed to the pioneering work of Dr. Norman Spack while doing her pediatric endocrinology fellowship in Boston. She accepted the referral and saw the patient and his family.

During the first visit, Dr. Lopez was incredibly moved by the desperation of the parents. For many years, they denied their son's gender identity and attempted to help him "fit in his own body," but he struggled with depression and enrolled in psychotherapy. When he was seven, they finally accepted him as a boy, allowed him to socially transition and renamed him Evan.

Evan began feeling better living as a boy, but at age nine he started developing breasts that he wanted to cut off and was thinking about dying. His mother learned about medication that could delay puberty. She called at least 100 endocrinologists to ask them to treat her son with the pubertyblocking medication, but they all turned her away until she reached Dr. Lopez. Moved by their story, Dr. Lopez offered to refer the family to Dr. Spack in Boston since she had not previously treated a transgender child, but traveling back and forth to Boston was not financially viable for the family. Evan's mother told Dr. Lopez, "I will do anything for the mental health of my child, and I don't mind if this is the first patient that you treat."

Dr. Lopez began searching for a mental health provider who would collaborate with her. She was surprised to find that there were no local psychologists or psychiatrists with experience seeing transgender children and adolescents, so she sent Evan to a psychiatrist four hours away. Evan's parents referred other families to Dr. Lopez, and the number of transgender children she treated began to grow. Dr. Lopez realized that there was a tremendous need for medical, mental and social healthcare for these patients and their families, so she started thinking about building a multidisciplinary program.

Dr. Lopez's boss and the hospital administration at Children's Medical Center Dallas (now Children's Health) supported the idea, and she found passionate staff who wanted to join the program. A group of providers travelled to Boston to receive direct training from Dr. Spack's team. In the fall of 2013, they started seeing patients and officially opened a clinic a year later. The GENder Education and Care, Interdisciplinary Support program, known as GENECIS, brings together endocrinologists, adolescent medicine specialists, psychologists, psychiatrists Ximena Lopez, M.D. Children's Medical Center Dallas

and social workers to provide access to gender-affirming medical care and to meet the psychological health and emotional needs of the children and adolescents they serve. The clinic that Evan inspired now serves more than 400 patients and is the only multidisciplinary center of its kind in the Southwest.

Dr. Lopez is glad that she agreed to see Evan. "Having the opportunity to help our gender non-conforming patients grow up to be themselves has been the most gratifying experience I've had as a medical provider and has made me a better human being," she said.



Findings

The Healthcare Equality Index 2017 asked participants a series of questions about LGBTQinclusive policies and practices. Those questions are divided into four criteria outlined in more detail beginning on page 52. Responses to the criteria below are reported in aggregate in the following pages to indicate national trends and facilitate benchmarking.

For individual facility scores for these criteria, see Appendix B beginning on page 56.

Criteria 1 – Non-Discrimination and Staff Training

- Patient Non-Discrimination
- Visitation Non-Discrimination
- Employment Non-Discrimination
- Staff Training

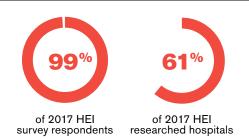
Criteria 2 – Patient Services and Support

- LGBTQ Patient Services and Support
- Transgender Patient Services and Support
- Patient Self-Identification
- Medical Decision-Making

Criteria 3 – Employee Benefits and Policies

Criteria 4 – Patient and Community Engagement





THE FIRST SECTION OF THE HEI NON-DISCRIMINATION AND STAFF TRAINING CRITERIA CALLS FOR A WRITTEN patient non-discrimination policy (or patients' bill of rights) that includes both "sexual orientation" and "gender identity." Lesbian, gay, bisexual and transgender people continue to face discrimination in healthcare because of their sexual orientation and/or gender identity, creating a need for explicit non-discrimination policies.

99% of HEI 2017 survey participants (585 of 590 respondents) documented that they include both "sexual orientation" and "gender identity" in their patient non-discrimination policy.

Since The Joint Commission issued a standard in 2011 requiring hospitals to prohibit discrimination based on sexual orientation and gender identity, the percentage of HEI survey participants that have adopted fully inclusive written patient non-discrimination protections has steadily grown from 60% to this record level.

A patient non-discrimination policy is only effective if patients and staff know about it. Thus, the HEI requires survey participants to document not only that they have an LGBTQ-inclusive non-discrimination policy but that they also make it readily accessible to patients and communicate it to their staff.

96% of survey participants documented that their patient non-discrimination policy is readily accessible and communicated to patients in at least two different ways.

Healthcare facilities most frequently communicated this policy to patients in these ways:

- Posted on facility website (92%)
- Included in materials given to patients at admitting/registration or at other time(s) (74%)
- Posted or displayed in patient waiting area(s) (68%)

93% of survey participants documented that their patient non-discrimination policy is readily accessible and communicated to staff in at least one way.

Healthcare facilities most frequently communicated this policy to patients in these ways:

- Posted on facility intranet site (88%)
- Reviewed in employee training (either in-person or online) (72%)
- Included in materials routinely given to employees at orientation (70%)

In addition to the facilities that actively participated in the HEI 2017 survey, the HRC Foundation proactively researched the non-discrimination policies at more than 900 hospitals. Unfortunately, we were unable to find the patient non-discrimination policies for all of the hospitals we researched because many facilities choose not to include a non-discrimination statement or their patient bill of rights on their hospital website and did not respond to invitations to submit their policies to us. Of the 901 hospitals researched, we found or obtained the patient non-discrimination policies for 787 hospitals. **Of those hospitals that published or provided a policy, only 478 or 61%** were found to have a patient non-discrimination policy that includes both "sexual orientation" and "gender identity."

For more information about this criterion, visit: hrc.org/patient-non-discrimination

In 2011, The Joint Commission issued a standard that requires hospitals to prohibit discrimination based on sexual orientation and gender identity. Learn more at *www.jointcommission.org/lgbt*

Visitation Non-Discrimination



THE SECOND SECTION OF THE HEI NON-DISCRIMINATION AND STAFF TRAINING CRITERIA CALLS FOR A WRITTEN

visitation non-discrimination policy or an equal visitation policy. Across the U.S., same-sex couples, same-sex parents and other LGBTQ people fear that they could be prevented from visiting their loved ones in healthcare settings because of bias or discomfort on the part of hospital employees regarding same-sex relationships and LGBTQ people. In 2010, after learning of a tragic incident in which a lesbian was denied visitation to her dying partner, President Barack Obama directed the United States Secretary of Health and Human Services to develop regulations protecting the visitation rights of all patients. These regulations, known as the Conditions of Participation, are now in effect at all hospitals that accept Medicare or Medicaid payments—the vast majority of facilities.

100% OF THE HEI 2017 SURVEY RESPONDENTS FOR WHICH THIS QUESTION WAS APPLICABLE documented that they have explicitly LGBTQ-inclusive visitation policies.

Since the Conditions of Participation went into effect in 2011, the percentage of HEI survey participants that have adopted equal visitation policies has steadily grown from 53% to this record level. An equal visitation policy is only effective if patients and staff know about it. Thus, the HEI requires survey participants to document not only that they have an equal visitation policy but that they also make it readily accessible to patients and communicate it to their staff.

96% of survey participants documented that their equal visitation policy is readily accessible and communicated to patients in at least two different ways.

Healthcare facilities most frequently communicated this policy to patients in these ways:

- Posted on facility website (95%)
- Included in materials given to patients at admitting/registration or at other time(s) (77%)
- Posted or displayed in patient waiting area(s) (57%)

95% of survey participants documented that their equal visitation policy is readily accessible and communicated to staff in at least one way.

Healthcare facilities most frequently communicated this policy to staff in these ways:

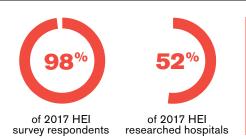
- Posted on facility intranet site (90%)
- Reviewed in employee training (either in-person or online) (77%)
- Included in materials routinely given to employees at orientation (60%)

In addition to the facilities that actively participated in the HEI 2017 survey, the HRC Foundation proactively researched the visitation policies at more than 900 hospitals. Unfortunately, we were unable to find a visitation policy for all of the hospitals that we researched because many facilities choose not to include a statement on their hospital website about who can visit patients and did not respond to invitations to submit their policies to us. Of the 901 hospitals researched, we found or obtained the visitation policies for 689 hospitals. **Of those hospitals that published or provided a policy, 653 or 95% were found to have an equal visitation policy in place.** While this number is quite high, given that this is required by the Conditions of Participation, it is disturbing that it is not 100%.

For more information about this criterion: *hrc.org/visitation*

Since 2011, the Conditions of Participation of the federal Centers for Medicare & Medicaid Services have required hospitals to permit patients to designate visitors of their choosing and to prohibit discrimination in visitation based on sexual orientation and gender identity.

Employment Non-Discrimination



THE THIRD SECTION OF THE HEI NON-DISCRIMINATION AND STAFF TRAINING CRITERIA CALLS FOR AN

employment non-discrimination policy (or an equal employment opportunity policy) that includes both "sexual orientation" and "gender identity." Such a policy typically covers all conditions of employment, including hiring, promotion, termination and compensation. Federal law does not protect employees from discrimination based on real or perceived sexual orientation or gender identity. Furthermore, fewer than half of states have passed laws prohibiting discrimination on the basis of sexual orientation or gender identity. Only 21 states and the District of Columbia provide workplace protections on the basis of sexual orientation, and only 19 states and the District of Columbia do so on the basis of gender identity. This criterion calls on healthcare facilities to protect their LGBTQ employees from discrimination regardless of state non-discrimination laws. LGBTQ staff members not only deserve a discrimination-free workplace but they also informally educate co-workers, provide valuable guidance to facility leadership and serve as ambassadors for LGBTQ communities.

98% of HEI 2017 survey participants (580 of 590 respondents) documented that they include both "sexual orientation" and "gender identity" in their employment non-discrimination policy.

* James, S. E.; Herman, J. L.; Rankin, S.; Keisling, M.; Mottet, L.; and Anafi, M. (2016). The Report of the 2015 U.S. Transgender Survey. Washington, D.C.: National Center for Transgender Equality.

This total represents a continued and welcome increase over past years. Notably, HEI survey participants have closed the gap between policies that provided protections for "sexual orientation" but not "gender identity," and now almost all participants include protections for both populations in their employment non-discrimination policies. These protections are critical for transgender employees: In a national survey of transgender Americans, 30% of respondents who were employed in the past year had either been fired, denied a promotion or experienced some other form of mistreatment related to their gender identity or expression in the workplace.*

To fully meet this criterion, participants are required to demonstrate that they made the public and potential applicants aware of their LGBTQ-inclusive employment non-discrimination policy.

96% of survey participants documented that their employment non-discrimination policy is readily accessible and communicated to the public and potential applicants in at least one way.

Healthcare facilities most frequently communicated this policy in these ways:

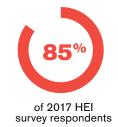
- Posted on employment page of website (88%)
- Included on job applications or in the job application system (64%)
- Included on job announcements (60%)

In addition to the facilities that actively participated in the HEI 2017 survey, the HRC Foundation proactively researched the employment non-discrimination policies at more than 900 hospitals. Unfortunately, we were unable to find an employment non-discrimination policy or statement for all of the hospitals we researched because many facilities choose not to include an employment non-discrimination policy or statement on their hospital website and did not respond to invitations to submit their policies to us. Of the 901 hospitals researched, we found or obtained the employment non-discrimination policies for 753 hospitals. **Of those hospitals that published or provided a policy or non-discrimination statement, only 391 or 52% were found to have an LGBTQ-inclusive employment non-discrimination policy in place.**

For more information about this criterion: hrc.org/employment-non-discrimination.

HRC's Corporate Equality Index (CEI) evaluates LGBTQ inclusion at the nation's largest employers. For more information about this unique and comprehensive resource for LGBTQ workplace equity, visit *hrc.org/cei*

Staff Training in LGBTQ Patient-Centered Care



THE FOURTH SECTION OF THE HEI NON-DISCRIMINATION AND

Staff Training criteria calls for key facility employees to receive expert training in LGBTQ patient-centered care. This criterion recognizes that training is critical for policies to be successful and for LGBTQ patients to feel welcome. Training programs should offer all incoming and current staff the information and skills they need to provide culturally competent care and services to their LGBTQ patients.

The HEI training requirements vary by facility and are based upon the facility's previous HEI training participation. During the first year of participation in the HEI training, a facility must have a core group of executive-level staff members participate in online training that covers systemic strategies for delivering LGBTQ-accessible and -affirming healthcare. In subsequent years, facilities must demonstrate that they have provided a minimum number of hours of HEI-approved training to any of their staff in LGBTQ patient-centered care.

85% of HEI 2017 respondents met the requirement to provide their employees with training in LGBTQ patient-centered care

To assist facilities in meeting this HEI criteria and ensure highquality training, the HRC Foundation partnered with the National LGBT Health Education Center, The Center for Affiliated Learning and the Veterans Health Administration. The HRC Foundation and its partners offer more than 60 online and ondemand training options that include both interactive eLearning courses and recorded webinars. Topics range from the basics of LGBTO Patient-Centered Care to more specialized topics for clinicians. All of these training options are free to staff of HEIparticipating facilities and offer CME/CEU credit. In addition, with pre-approval, participating facilities can receive ongoing training credit for their own course(s) on LGBTO culturally competent care and/or specific LGBTO health topics.

More than **43,000** hours of training in LGBTQ patient-centered care was provided to the staff at HEI-participating facilities.

For more information about this criterion, visit hrc.org/hei/ training-in-LGBTQ-patient-centered-care "This was one of the best online learning resources I have encountered. This training was well organized and provided information that ranged from basic to substantial. I appreciated learning about how to structure hiring policies to be more inclusive of LGBTQ communities."

Kelly Wesp, PhD

Director of Quality and Evaluation Equitas Health

"We really appreciated the ease of use and the quality of the information included. We live in a very rural state and we believe we are making a difference by connecting our employees with these resources. Thanks! We are very proud of our partnership with HEI!"

Jonna Brenton, RN

Women Veteran Program Manager VA Montana Healthcare System

"This education was among the best online training I have taken. It was very clear, and I felt I learned a great deal ... some things I already knew and some I did not. Very good courses!"

Kathy Evans, CPHRM

Director, Risk Management Abrazo Scottsdale Campus

LGBTQ Patient Services and Support

THE FIRST SECTION OF THE HEI PATIENT SERVICES AND SUPPORT CRITERIA ASKS ABOUT KEY BEST practices in support of LGBTQ patients as a group. This section includes best practices from The Joint Commission and other sources to enhance care for LGBTQ patients.

Planning to Serve LGBTQ Populations **54%** of participating facilities have an official plan for reducing health disparities that specifically includes LGBTQ patients in addition to race, ethnicity and linguistic concerns.

48 of HEI participants have reviewed their clinical services to identify possible LGBTQ-related gaps.

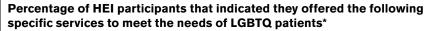
In 2013, the Office of Minority Health of the U.S. Department of Health & Human Services updated the National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care (the National CLAS Standards), a blueprint for individuals and healthcare organizations to implement culturally and linguistically appropriate services. As a nationally recognized and utilized tool for culturally competent healthcare, the CLAS Standards are intended to advance health equity, improve quality and help eliminate health care disparities.

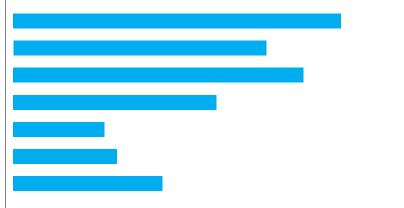
The updated CLAS standards fully incorporate the concerns of LGBTQ people into the framework of culturally and linguistically appropriate care and specifically include sexual orientation and gender identity in their broader definition of culture. OMH's accompanying publication, "A Blueprint for Advancing and Sustaining CLAS Policy and Practice," shares examples of health disparities experienced by LGBTQ people and includes specific reference to LGBTQ health in many of the standards. One of the standards encourages healthcare organizations to conduct ongoing assessments of the organization's CLAS-related activities and integrate CLAS-related measures into continuous quality improvement activities. The HEI 2017 survey found that 75% of participants reported that they have an official plan, strategy or goals for reducing health disparities among their patients and/or providing culturally and linguistically appropriate services to their patient population, and 73% of those participants indicated that they include LGBTQ populations in this plan.

Serving LGBTQ Populations

37% of HEI participants inform interested patients of LGBTQ-knowledgeable and -friendly providers.

One of the ways that hospitals can help ease the fears of LGBTQ patients who need to choose a provider is to inform interested patients of LGBTQ-knowledgeable and -friendly providers. Among HEI participants, 37% indicated that they do this in some way. Of those who make LGBTQ-friendly providers known, 48% post a list externally, 42% display "tags" in an online "find a provider" system and 25% include them in a community listing.







67	%0
UJ	VO of HEI participants indicated that they have an LGBTQ-focused
office, poin	t-person, patient advocate or ombudsman.

LGBTO-focused programs can provide a wide variety of services to improve LGBTO patient-centered care.. For example, The Penn Medicine Program for Lesbian, Gay, Bisexual and Transgender Health focuses on five areas: patient care, research, health education, institutional climate and visibility, and community outreach. Mount Sinai Beth Israel's LGBT Health Services program offers a number of LGBTO patient services, including comprehensive transgender health services; information, referral and patient navigation for LGBTO patients and consumers; and professional education and training for providers in LGBTO healthcare topics

Communications

HIV/STD/STI testing

Provision of PrEP and/or PEP

for patients at risk for HIV

LGBTQ-focused mental

LGBTQ-focused alcohol and

Other prevention, screening,

*While we require documentation in

order to validate many of the questions

in the HEI survey, there is no way for us

LGBTQ family building assisted

substance use treatment

reproductive treatment

wellness or testing services explicitly focused

on LGBTO patients

and counseling

HIV care

and services

health services

HEI participants indicated that they communicate with their LGBTQ patients about LGBTQ-specific services and health concerns in the following ways:

- 61% provide information about LGBTQ services and/or health concerns on their public website
- 57% publish a brochure or other print material(s) designed to educate or support LGBTQ patients
- 63% offer LGBTQ health material(s) published by other organizations

Americans are likely candidates for PrEP (Pre-Exposure Prophylaxis), according to the Centers for Disease Control and Prevention. The CDC found that one in four gay and bisexual men, one in five injectable drug users, and one in 200 heterosexual adults are good candidates for PrEP and should be counseled about the HIV prevention method. When taken as prescribed by a knowledgeable healthcare provider, PrEP has been shown to be safe and reduce the likelihood of HIV acquisition by more than 90%.

79%

61%

70%

49%

22%

25%

36%

While 79% of HEI participants indicated that they provide HIV testing and counseling, only 61% indicated that they provide PrEP for patients who are at risk of contracting HIV. HEI participants can close this gap and do their part to meet the CDC's recommendations by adding education and counseling about PrEP to their existing HIV testing and counseling programs.

Transgender Patient Services and Support

TRANSGENDER PATIENTS ARE PARTICULARLY VULNERABLE IN HEALTHCARE SETTINGS. A LARGE SURVEY BY

Lambda Legal revealed that 70% of transgender respondents had experienced serious discrimination in healthcare at some point in their lives.* They can face long waits for care, pointing and laughter, negative comments, violations of confidentiality, inappropriate questions and examinations, denial of (or challenges to) bathroom use and room assignments that reflect the sex assigned to them at birth rather than their actual gender identity. In a 2015 survey of more than 27,000 transgender Americans, 33% of respondents who had seen a provider in the past year reported one or more negative experiences due to their transgender or gender-nonconforming status and 23% of respondents reported that they avoided seeking necessary healthcare when sick or injured in the past year because of fear of being mistreated as a transgender person.**

Serving Transgender Patients

39%

of HEI participants indicated that their facility has a policy or policies that specifically outline procedures and practices aimed at eliminating bias and insensitivity, and ensuring appropriate, welcoming interactions with transgender patients.

Of the 233 facilities that indicated that they have a specific policy or policies for transgender patients, the following procedures and practices were covered:

- Recording of preferred name and pronouns in paper and/or electronic admitting/registration records 69%
- Use of preferred name and pronouns when interacting with and referring to transgender patients 89%
- Protocols for interacting with transgender patients 81%
- Guidelines for room assignments for transgender patients 74%
- Access to restrooms 86%
- Compliance with privacy laws 81%
- Access to items that assist gender presentation 44%
- Addressing potential problems with insurance/billing claims 21%

* When Health Care Isn't Caring: Lambda Legal's Survey on Discrimination Against LGBT People and People Living with HIV. New York: Lambda Legal, 2010. The Affordable Care Act raised the importance of creating policies and procedures aimed at eliminating bias and insensitivity, and ensuring appropriate, welcoming interactions with transgender patients, and training staff on those policies. Section 1557 of the ACA prohibits sex discrimination in any hospital or health program that receives federal funds. The court system and the U.S. Department of Health & Human Services' Office for Civil Rights (OCR) have indicated that this prohibition extends to claims of discrimination based on gender identity and sex stereotyping. In 2015, the Brooklyn Hospital Center entered into a voluntary resolution agreement with OCR to ensure that transgender patients at its hospital receive appropriate and equitable care and treatment. The agreement resolved a complaint filed by a transgender patient alleging discrimination under Section 1557 on the basis of sex in the assignment of patient rooms. Under the terms of the two-year settlement, the hospital agreed to adopt new policies and procedures tailored to transgender patients and to train its employees on those policies.

** James, S. E.; Herman, J. L.; Rankin, S.; Keisling, M.; Mottet, L.; and Anafi, M. (2016). The Report of the 2015 U.S. Transgender Survey. Washington, D.C.: National Center for Transgender Equality. For more information about best practices for care of transgender patients see the publication, *Creating Equal Access to Quality Health Care for Transgender Patients: Transgender-Affirming Hospital Policies*, from HRC Foundation, Lambda Legal, and the LGBT Rights Committee of the New York City Bar Association.

This publication is available for download at: *hrc.org/transgender-affirming-hospital-policies*



Percentage of HEI participants that indicated they offered the following specific services to meet the needs of transgender patients*



More facilities are beginning to offer comprehensive multidisciplinary clinical care programs for transgender patients. See our feature on these clinics designed to serve transgender and gender expansive youth on page 26.

27% of HEI participants indicated that they do not provide any transgender specific services.

While more people have access to transgender-inclusive healthcare insurance coverage, there are not enough providers or healthcare facilities that offer transgender-specific services.

47% of HEI participants indicated that they have trained and clearly designated at

ALL-GENDER RESTROOM

86% of HEI participants indicated that they have gender-neutral bathrooms in their facility.

least one employee at an appropriate level of skill, knowledge and influence to serve as an ombudsman/navigator for transgender patients and/or to coordinate a peer

accompaniment program for transgender patients.

Patients whose appearances might not conform to gender stereotypes may feel more comfortable and safe in a single-stall or all-gender restroom. Single-stall or family restrooms can also serve other patients, including parents caring for different-sex children, disabled people accompanied by different-sex caregivers, and any other patients wishing to use them. Although providing an allgender restroom is an important signal of acceptance, facilities should also adopt policies that allow patients to be permitted to use restrooms that comport with their gender identity.

Trans-affirming gynecological care, including cervical cancer screening and pelvic exams

> Hormone therapy and monitoring

Psychological, physical, and psychiatric evaluations Gender confirming

surgeries

Referrals for gender confirming surgeries

Preoperative and postoperative care for gender confirming surgeries

*While we require documentation in order to validate many of the questions in the HEI survey, there is no way for us to verify that these services are offered or that they are transgender specific or affirmative.

Patient Self-Identification

MANY HEALTHCARE AUTHORITIES SUCH AS THE INSTITUTE OF MEDICINE AND THE JOINT COMMISSION HAVE recommended the routine collection of sexual orientation and gender identity data in healthcare settings. These critical data provide hospitals with information on the potential cultural needs of each patient, as well as an opportunity to monitor and analyze health disparities at the population level.

17%

Collecting Information About Sexual Orientation and Gender Identity

of HEI participants indicated that their organization's electronic health records offer an explicit way to capture a patient's sexual orientation.

Another 70% of participants indicated that this information may be captured in free-form notes, while 14% of participants are not capturing this information at all in their patients' health records. Only 13% of HEI participants provide employees training on how to collect and record sexual orientation data.

29%

of HEI participants indicated that their organization's electronic health records offer an explicit way to capture that a patient's current gender identity differs from the sex they were assigned at birth and/or the sex shown on any identification, insurance or other documents used in admitting/registration.

Another 55% of participants indicated that this information may be captured in free-form notes, while 16% of participants are not capturing this information at all in their patients' health records. Only 28% of HEI participants provide employees training on how to collect and record gender identity data.

23% of HEI participants use a two-question process to collect data on gender identity (i.e. first asking current gender identity and then asking sex assigned at birth).

Documentation of both current gender identity and sex assigned at birth is critical for delivering appropriate care to transgender patients. Some transgender people may not identify as transgender, but only as male or female. In these cases, sex assigned at birth can indicate that the individual is transgender, which allows providers to offer the full range of care – such as anatomically appropriate preventive screenings – that meets the individual's needs. Therefore, the current recommended best practice involves asking both current gender identity and sex assigned at birth. Current gender identity and name and pronouns currently used should be documented and used for communications with the patient as well as for things like name bands and room assignments.

The HRC Foundation strongly encourages healthcare providers to begin collecting this data in an explicit way in order to begin to close the gaps in LGBTQ health disparities and to best serve LGBTQ patients. The low percentage of HEI participants that have developed explicit ways to capture this information is in part due to limitations posed by electronic health records. However, technology and best practices regarding patient admitting/registration records are rapidly evolving. In 2016, the U.S. Department of Health & Human Services took a landmark step in addressing disparities affecting LGBTQ people in healthcare by including sexual orientation and gender identity data in requirements for Electronic Health Records certified under the Meaningful Use program. The final rules, from the Centers for Medicare & Medicaid Services and the Office of the National Coordinator for Health Information Technology, require all EHR systems certified under Stage 3 of Meaningful Use to allow users to record, change and access structured data on sexual orientation and gender identity data to the 2015 Edition "demographics" certification criterion and adds sexual orientation and gender identity data to the 2015 Edition Base EHR definition, which is a part of the definition of Certified EHR Technology. The new requirements are slated to take effect in 2018.

While the ONC rule applies to vendors who are building certified EHR systems and to health institutions and practices that are using these systems as part of their participation in the Meaningful Use program, it does not require providers to collect sexual orientation and gender identity information. For the reasons outlined above, the HRC Foundation strongly encourages hospitals and health systems to develop processes and policies for the collection of sexual orientation and gender identity data.

For more information and the most current practices and recommendations regarding collecting sexual orientation and gender identity data, see the website, *Do Ask, Do Tell: A Toolkit for Collecting Sexual Orientation and Gender Identity Information in Clinical Settings* at: *www.doaskdotell.org*

40% of HEI participating facilities provide employees with training explicitly reminding them that LGBTQ status is confidential patient information.

This training should be in addition to standard HIPAA training or appear as a special module within training. Transgender patients especially are often the victims of privacy breaches, in which staff or providers feel the need to "warn" the patient's roommate about the patient's transgender status or invite other staff or providers to come see the patient. These privacy violations are not only unethical and illegal, they add to the high levels of discrimination transgender people already face in accessing healthcare and discourage them from continuing or returning to seek care.

Health Records That are Inclusive of All Families

19%

of HEI participants that saw pediatric patients indicated that their organization's electronic health records include explicit options for pediatric patients' parents beyond "mother" and "father" (e.g., "parent/guardian 1, parent/guardian 2, parent/guardian 3"), to be inclusive of same-sex parents and other diverse families.

Another 36% of participants indicated that this information may be captured in free-form notes, while 14% of participants are not capturing this information at all in their patient's health records.

R1%

• of HEI-participating facilities that record a patient's marital or relationship status offer a way to record non-marital relationships by offering choices such as "domestic or life partner" or "significant other."

There are many kinds of family structures in our community today, and hospital records should provide ways to record these relationships. This is a practice that will help provide a welcoming environment for all patients.

Medical Decision-Making

92% of HEI-participating facilities explicitly inform patients of their right to designate a person of their choice, including a same-sex partner, as medical decision-maker.

Although 92% indicated that they explicitly inform patients of their right to designate a same-sex partner as medical decision-maker, only 36% include LGBTQ-specific information in employee training about patient decision-making.

Healthcare organizations have sometimes failed to honor LGBTQ patients' rights to designate the person of their choice, including a same-sex partner, to make medical decisions on their behalf should they become incapacitated even when legally valid medical decision-making documents have been presented. To prevent these failures, it is critical that healthcare organizations are aware that the Centers for Medicare & Medicaid Services issued guidance in 2011 to support enforcement of the right of patients to designate the person of their choice, including a same-sex partner, to make medical decisions on their behalf should they become incapacitated. In addition, employee training related to medical decision-making should affirm that LGBTQ people have the same medical decision-making rights as other patients.



Employee Benefits and Policies

LGBTQ EMPLOYEES OF HEALTHCARE ORGANIZATIONS PLAY A VITAL ROLE IN ENSURING LGBTQ PATIENTcentered care by informally educating co-workers about patient concerns, offering feedback about

organizational policies and practices, and conveying to the local community the organization's commitment to equality and inclusion. It is critical that LGBTQ employees, like LGBTQ patients, receive equal treatment, particularly regarding health-related benefits and policies.

Equal Benefits

Competitive employer-provided benefits packages are critical to attracting and retaining talent. Providing LGBTQ employees and their families with inclusive benefits, from healthcare coverage to retirement investments and more, is a low-cost, high-return proposition for businesses. In addition, equitable benefits reflect the principle of equal compensation for equal work. Apart from actual wages paid, benefits account for approximately 30% on average of employees' overall compensation. Therefore, employers should ensure that this valuable bundle of benefits is equitably extended to their workforce, irrespective of sexual orientation and gender identity. When denied equal benefits coverage, the cost to LGBTQ workers and their families is profound.

In 2015, the Supreme Court determined in Obergefell v. Hodges that same-sex couples have a constitutional right to marry nationwide. Any business that provides benefits based on marriage to an employee's different-sex spouse must also provide marital benefits to an employee's same-sex spouse.

Almost all of the HEI participants provide healthcare benefits to spouses of benefits-eligible employees.

Among those that do provide this coverage:

- 96% require the same documentation for same-sex and different-sex couples
- 87% maintain definitions of spouse and 96% of those definitions include same-sex couples this may include "legal spouse"

The HRC Foundation urges employers that require different documentation for same-sex and different-sex couples and those that maintain definitions of spouse that do not include same-sex spouses to adjust these requirements in order to provide equal and inclusive benefits to same-sex spouses.

Only 50%

ONING of HEI participants provide medical and comprehensive health benefits, such as dental, vision, dependent medical and COBRA-equivalent continuation coverage, to domestic partners of benefits-eligible employees.

Percentages of HEI participants that indicated they offer the following soft benefits to both spouses and domestic partners of benefits-eligible employees:

43% 45% 43% 43% 43% 42%

COBRA-equivalent benefits

FMLA leave or equivalent to care for a domestic partner or their child

Employer provided life insurance for spouse/partner

Bereavement leave in case of spouse/partner's death

Discounts for spouse (e.g. transportation, gym membership)

Employee Benefits and Policies



The Case for Retaining Domestic Partner Benefits

FOLLOWING THE OBERGEFELL MARRIAGE DECISION, HRC URGED EMPLOYERS TO MAINTAIN domestic partner benefits for their workers as a sign of sustained commitment to family diversity and to protect LGBTQ employees whose rights outside the workplace are not guaranteed by law in many states. Domestic partner benefits ensure that all employees will be treated equally. In the absence of full, explicit non-discrimination protections nationwide, the Supreme Court's decision on marriage equality does not erase the uncertainty that couples who decide to marry face in states without LGBTQ non-discrimination protections. That is why HRC is fighting for a federal LGBTQ nondiscrimination bill that will address discrimination in credit, education, employment, federal funding, housing, jury service and public accommodations. HRC encourages employers to recognize the complexity of American families by committing to best practices and maintaining domestic partner benefits for their employees.

Consider this situation:

Because of the 2015 Supreme Court decision in Obergefell, a healthcare system headquartered in Maryland decides to eliminate their same-sex domestic partner benefits program nationwide. An employee in one of their South Carolina hospitals is compelled to marry in order to access healthcare benefits for her partner.

After obtaining their marriage license, a document of public record, and uploading their wedding photos to Facebook, the employee's partner is legally fired from her job because of her sexual orientation. A week later, the couple is evicted from their rental home with no legal recourse.

Marriage equality leaves LGBTQ employees open to risks and vulnerabilities that their non-LGBTQ counterparts do not face given current laws prohibiting discrimination based on race, color, religion, sex, national origin, disability or age. Without complete non-discrimination protections on the basis of sexual orientation and gender identity nationwide, same-sex couples can be denied credit, housing and public accommodation once they have been "outed" by their marriage license, which is a public document and a matter of public record.

Employers may inadvertently expose employees and their families to risks and vulnerabilities by only offering spousal benefits and requiring marriage in order to access benefits. While there is no legal obligation to provide domestic partner benefits, employers should retain their domestic partner benefits policies and expand them (where applicable) to include all couples-samesex and different-sex-and their families as a matter of inclusion, fairness, equal compensation and good business.

Other Support for LGBTQ Employees

59% of HEI participants have an officially recognized LGBTQ employee resource group.

Many large employers have formally recognized employee resource groups (also known as employee networks, business resource or affinity groups) for diverse populations of their workforce, including women, people of color, people of varied abilities and LGBTO/allied people.

The purpose of these groups is two-fold:

- To foster a sense of community and visibility for these diverse populations within a business
- To leverage each unique populations' networks and skills to help accomplish business goals, such as market innovation, recruitment and retention of talent

Employee resource groups are great platforms for leadership opportunities for LGBTQ and allied employees to better their own work environments. In addition, the reach of many employee resource groups extends beyond the everyday affairs of an employer to policymaking, representing the employer at professional events and external activities, participating in prospective employee recruitment efforts, mentoring and other retention-focused programming.

Employers usually provide these groups with a budget and access to resources such as meeting rooms and e-mail networks. The groups provide a clear line of communication between employees and management. LGBTQ/allied employee resource groups empower employees as change agents and provide a sense of safety and acceptance for LGBTQ employees within the workplace.

Percentages of HEI participants that indicated the following types of support for LGBTQ employees:



Include LGBTQ demographic measures on anonymous employee surveys

Include questions about LGBTQ concerns on employee surveys

Commemorate an "LGBTQ holiday"

Have hiring efforts that are explicitly LGBTQ-inclusive

Employee Benefits and Policies

Benefits and Policies Impacting Transgender Employees **47%** of HEI participants provide to all employees at least one health plan that explicitly covers medically necessary health services for transgender people, including gender transition-related treatment.

These benefits are critical for the health and well-being of transgender people. While this number is a welcome increase over previous years, healthcare facilities still lag well behind their corporate counterparts when it comes to providing this important and necessary benefit. See our feature on page 48 for more information on these important benefits.

27% of HEI participants have written gender transition guidelines documenting supportive policies and practices on issues pertinent to a workplace gender transition.

Having easily understandable and accessible guidelines on the gender transition process is a best practice in setting forth some structure to support a respectful and successful workplace transition. To meet everyone's goal of a respectful transition process that retains the employee and individual engagement, the guidelines establish common reference points and expectations for all involved, including the transitioning employee, human resources, management and work groups. From suggestions on how to have respectful and informative conversations about transgender inclusion in the workplace to the administrative changes to one's personnel and workplace documents, these guidelines clearly delineate responsibilities and expectations of transitioning employees, their supervisors, colleagues and other staff.

Hospitals participating in the HEI Corporations participating in the CEI

27% 39%

The HRC Foundation's "*Transgender Inclusion in the Workplace: A Toolkit for Employers*" provides a comprehensive resource to guide employer transgender inclusion. The toolkit includes HRC's best practice advice for implementing transgender inclusive policies and practices (including sample policies) as well as guidance for implementing transgender-inclusive healthcare benefits.

Find this toolkit at www.hrc.org/transtoolkit



The Importance of Providing Transgender-Inclusive Health Coverage

TRANSGENDER INDIVIDUALS OFTEN face a significant number of discriminatory barriers in many aspects of life. While progress has been made in advancing workplace non-discrimination protections for transgender people working in healthcare facilities, one of the most important workplace benefits, healthcare coverage, has not kept pace.

Historically, many U.S. employerbased healthcare plans have explicitly contained "transgender exclusions." These blanket exclusions prohibit coverage for medical care related to gender transition, known as transitionrelated healthcare. Transition-related healthcare encompasses mental healthcare, hormone therapy, genderaffirming surgeries and other medically necessary care. These discriminatory exclusions persist despite that the nation's top professional health associations - including the American Medical Association and the American Psychological Association - have affirmed that transition-related care is medically necessary for the health and wellbeing of many transgender people. Denying this medically necessary care is detrimental to transgender individual's health and well-being as well as their ability to contribute in the workplace. If the intention of employer-provided healthcare is to promote a healthy and productive workforce, then providing healthcare coverage that removes these exclusions and provides affirmative transition-related care helps achieve the goal of promoting health and wellness across a diverse workforce.

A Trend Towards Inclusive Benefits

A growing number of employers are eliminating transgender exclusions and affirmatively offering transition-related healthcare coverage. The Human Rights Campaign Foundation's Corporate Equality Index (CEI), which assesses corporate policies and practices, tracks the number of major American private employers that offer transgender-inclusive healthcare benefits. In the CEI 2017, 73% of rated businesses offer this important benefit. Unfortunately, hospitals lag behind their corporate counterparts when it comes to the provision of this benefit: Only

47% offer transgender-inclusive healthcare benefits.

Many large corporations have successfully negotiated with their carriers to remove transgender exclusions from their health insurance policies and replace them with affirmed benefits that provide a base level of coverage for transgender medical care, including mental health counseling, hormone therapy, medical visits and surgical procedures. These efforts are particularly successful when employers provide comprehensive information to their carrier in the process.

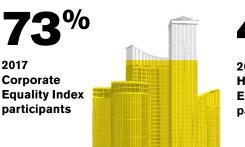
Costs

One of the most common reasons cited for not offering this coverage is misperceptions about cost. Studies have consistently shown that the cost of providing transgender inclusive health coverage is negligible. According to a study by The Williams Institute, 85% of responding employers who provide transgender-inclusive benefits report no cost at all.* There is a misconception that gender-affirming treatments are expensive. Like many healthcare

* Jody L. Herman, Costs and Benefits of Providing Transition-related Health Care Coverage in Employee Health Benefits Plans: Findings from a Survey of Employers, The Williams Institute, 2013.

Transgender Inclusive Healthcare Insurance

Percentage of participants providing transgender inclusive healthcare insurance coverage





2017 Healthcare Equality Index participants



treatments, these treatments can be prohibitively expensive for an individual, but the annualized cost to an employer's health plan is low. This is due to extremely low utilization rates. Since such a small percentage of people undergo transition-related medical care, distributed costs are nominal or nonexistent.

Benefits

Providing transgender-inclusive health coverage is not just the right thing to do. Inclusive health coverage also brings many invaluable benefits. The Williams Institute study asked employers who provide transitionrelated health coverage about the benefits they receive as a result. A majority of responding employers, 60%, stated that providing inclusive health coverage makes them more competitive and improves recruitment and retention. Furthermore, 60% reported that providing transgenderinclusive benefits demonstrates and effectively communicates their commitment to fairness and equality. Moreover, employers noted that offering inclusive healthcare benefits increases employee satisfaction and morale, helps attract a diverse workforce and puts them on the "leading edge."

HEI Criteria Requirement for Transgender-Inclusive Health Insurance Coverage

Beginning with the HEI 2019 (survey year 2018), participants will be required to have at least one firm-wide health insurance plan that affirmatively provides transgender-inclusive coverage in order to receive a perfect score in the HEI and obtain the "Leader in LGBTQ Healthcare Equality" designation.

The plan must meet the following baseline criteria:

- Insurance contract must explicitly affirm coverage and contain no blanket exclusions for coverage.
- Plan documentation must be readily available to employees and must clearly communicate inclusive insurance options to employees and their eligible dependents.
- Benefits available to other employees must extend to transgender individuals. Where available for other employees, the following benefits should extend to transgender individuals, including for services related to gender transition (e.g., medically necessary services related to sex affirmation/reassignment):
 - O Short-term medical leave
 - O Mental health benefits
 - O Pharmaceutical coverage (e.g., for hormone replacement therapies)
 - O Coverage for medical visits or laboratory services
 - O Coverage for reconstructive surgical procedures related to sex reassignment
 - O Coverage of routine, chronic or urgent non-transition services

The plan must eliminate other barriers to coverage:

- No separate dollar maximums or deductibles limited to coverage of sex reassignment surgeries and related procedures.
- Explicit adequacy of network provisions apply. When the provider network
 has not adequate specialists (as determined by qualified area specialists),
 out-of-network providers will be covered at in-network rates, as well as
 coverage of travel and lodging to such specialists.
- No other serious limitations. On a case by case basis, other serious limitations to coverage may be deemed sufficiently counterproductive to treatment success to disqualify a plan from eligibility. Two examples: a) Limitations on the time frame for or number of surgeries per individual would eliminate a plan from consideration (e.g., no "one surgery only" or "initial surgery" limitations); b) Similarly, exclusions for reversals of sex reassignment would also be regarded as unacceptable limits to coverage.

Patient and Community Engagement

Healthcare organizations can welcome LGBTQ people in their service area by implementing community engagement initiatives like those recommended in this section.

LGBTQ Community Engagement and Marketing

85% of HEI participants took part in or supported one or more LGBTQ-related events or initiatives in their service area

The vast majority of participants displayed their support for the LGBTQ community by participating in and sponsoring local pride events. Facilities also actively engaged with LGBTQ patients, employees and local communities through a variety of events and programs, including LGBTQ health fairs, educational talks for providers and community members, and celebration of LGBTQ-recognition days such as National Coming Out Day and Transgender Day of Remembrance.



Ad campaigns and marketing publicize a hospital's values regarding LGBTQ inclusion. Increasingly, ads with authentic images of LGBTQ people appear in both LGBTQ media outlets and in the general press.

Understanding the Needs of LGBTQ Patients and Community

LGBTQ demographics on patient surveys

LGBTQ concerns on patient surveys

Needs assessment engagement with LGBTQ community

LGBTQ representation on a governing or community advisory board

Meet with local LGBTQ organization(s) Support LGBTQ healthrelated research Percentages of HEI participants that indicated how they seek to understand the needs of their LGBTQ patients and community:





Healthcare facilities can engage with the LGBTQ community in a variety of ways, such as targeted marketing or participating in or sponsoring a variety of LGBTQ related events or initiatives in their service area. Participation in community or hospital-based LGBTQ pride celebrations, is one of the most popular ways to engage with the LGBTQ community.

Appendix A: HEI 2017 Scoring Criteria

The Healthcare Equality Index 2017 uses a new scoring criteria that was announced in 2015 and implemented during the 2016 calendar year survey. Since it began, the HEI has successfully encouraged hospitals and other healthcare facilities across the nation to adopt LGBTQ-inclusive policies found in the "Core Four" Leader Criteria. To provide truly inclusive LGBTQ patient-centered care, healthcare facilities must also adopt many of the policies and practices that previously appeared in the Additional Best Practices section of the HEI survey.

The HEI 2017 implements four new core objectives:

- Ensure foundational protection for patients, visitors and staff in patient and staff policies and provide cultural competency training on LGBTQ inclusion
- Demonstrate progress toward inclusion on LGBTQ patient care and support
- Cultivate an inclusive workforce by providing LGBTQ-inclusive employee support and benefits
- Demonstrate public commitment to the LGBTQ community

Criteria 1	Non-Discrimination and Staff Training	40 Points Total
	This section encompasses what was previously considered the Core Four Leader Criteria.	
	All questions in this section are scored and must be met in order to obtain the "Leader in LGBTQ Healthcare Equality" designation.	
	Patient Non-Discrimination	
	a. LGBTQ-Inclusive Patient Non-Discrimination Policy	5 points
	 Policy must include the terms "sexual orientation" and "gender identity" b. Patient Non-Discrimination Policy is communicated to patients and staff Policy is shared with the public in two ways, typically online and in-print 	5 points
	 Policy is shared with staff in at least one way 	
-	Visitation Non-Discrimination	
	a. Equal Visitation Policy	5 points
	 Policy must allow the patient's visitor of their choice Equal Visitation Policy is communicated to patients and staff Policy is shared with the public in two ways, typically online and in-print 	5 points
	 Policy is shared with staff in at least one way 	
	Employment Non-Discrimination	
	a. LGBTQ-Inclusive Employment Non-Discrimination Policy	5 points
	 Policy must include the terms "sexual orientation" and "gender identity" b. Employment Non-Discrimination Policy is shared with the public 	5 points
	Policy is shared with the public in at least one way	o pointo
	Staff Training	
	 a. Training in LGBTQ Patient-Centered Care For first year facilities, Senior executives must complete the Executive Briefing training provided by the HEI OR Returning facilities must complete at least 25 	5 points
	hours of staff training in LGBTQ-related topics, either clinical or broader training b. HEI training options are promoted to staff	
	 Facilities must make training options available through the HEI known to staff throughout their facility 	5 points

Criteria 2	Patient Services and Support	30 Points Total
	Four sections compose this criterion: LGBTQ Patient Services and Support, Transgender Patient Services and Support, Patient Self-Identification, and Medical Decision-Making.	
	This section contains 19 scored questions. In order to receive the full 30 points, a facility must have implemented at least 10 or more of these best practices from any of the subsections. Facilities that have implemented five to nine of these best practices receive a partial score of 15 for this criterion.	
	LGBTQ Patient Services and Support	
	Planning to Serve LGBTQ Populations	10 or more
	 Have a written strategy or plan for reducing health disparities among LGBTQ patients and/or incorporate LGBTQ patients into your plan for reducing all patient disparities Review clinical services to identify LGBTQ-related gaps in addition to racial, ethnic and linguistic concerns 	initiatives = 30 points
	Serving LGBTQ Populations	
	 Make LGBTQ-knowledgeable and -friendly providers known to interested patients Provide some LGBTQ-specific clinical services Have an LGBTQ-focused office or ombudsman Provide LGBTQ-related health information on the facility's website Create a brochure or other print material that supports LGBTQ patients Make external LGBTQ health resources available to patients 	
	Transgender Patient Services and Support	
	 Have a written policy (or policies) that specifically outlines procedures and practices aimed at eliminating bias and insensitivity, and ensuring appropriate, welcoming interactions with transgender patients Offer some transgender-specific clinical services Train and clearly designate at least one employee at an appropriate level of skill to serve as a transgender patient navigator or coordinate peer accompaniment for transgender patients Create gender-neutral restrooms or update existing restrooms to be all-gender 	
	Patient Self-Identification	
	 Collecting Information About Sexual Orientation and Gender Identity Have electronic health records that offer explicit options to capture patient's current gender identity if it differs from the sex they were assigned at birth Use a two-question process to collect gender identity information (i.e., first ask current gender identity and then ask sex assigned at birth) Have electronic health records that offer explicit options for capturing patient's sexual orientation if they choose to volunteer that information Train employees to remind them that LGBTQ status is confidential patient information Have electronic health records that offer explicit options for recording 	5 to 9 initiatives = 15 points
	 Have electronic health records that other explicit options for recording parents that are inclusive of same-sex parents and other diverse families Have electronic health records that offer explicit options for recording relationship status with an unmarried partner 	
	Medical Decision-Making	
	 Explicitly inform patients of their right to designate a person of their choice, including a same-sex partner, as medical decision-maker 	

Criteria 3	Employee Benefits and Policies	20 Points Total
	This section focuses on the how a facility treats its LGBTQ employees.	
	This section contains 16 scored questions. In order to receive the	
	full 20 points, a facility must have implemented at least 6 or more of	
	these best practices. Facilities that have implemented 3 to 5 of these	
	best practices receive a partial score of 10 for this criterion.	
	a. Equal Benefits	
	 Health insurance policy's definition of spouse includes same-sex spouses 	6 or more
	• Same documentation is required for enrollment of same- and opposite-sex spouses	6 or more initiatives =
	 Healthcare benefits are provided to same-sex domestic partners 	20 points
	 COBRA-equivalent benefits are provided to same-sex domestic partners 	
	 b. Other "Soft" Benefits (These must include parity between employees with spouses and those with domestic partners in the provision of the following benefits.) FMLA leave or equivalent for partners 	
	 Bereavement leave in the event of the death of a partner or partner's dependents 	
	 Employer-provided supplemental life insurance for a partner 	
	 Discounts for employee's spouse 	
	To receive credit, a facility must offer parity of benefits between spouses and same-sex domestic partners. If you provide a benefit to spouses, you must also provide the same benefit to same-sex domestic partners. You would also receive credit if you do not provide the benefit to either spouses or domestic partners.	
	c. Benefits and Policies Impacting Transgender Employees	
	 Provide at least one health plan to all employees that explicitly 	
	covers medically necessary health services for transgender	
	people, including gender transition-related treatment	
	 Have written gender transition guidelines documenting supportive policies and practices on issues pertinent to a workplace gender transition 	
	 Train and clearly designate at least one employee at an appropriate level of skill to serve as an adviser/advocate for transgender employees, particularly those transitioning on the job 	
	d. Additional Support for LGBTQ Employees	
	 Officially recognize an LGBTQ employee resource group 	3 to 5
	 Have anonymous employee engagement or climate surveys that allow employees the option to identify as LGBTQ 	initiatives = 10 points
	 Have anonymous employee engagement or climate surveys 	
	that include question(s) related to LGBTQ concerns	
	 Commemorate an "LGBTQ Holiday" at the facility 	
	 Have explicitly LGBTQ-inclusive hiring efforts 	

Please see page 49 for an important change to Criteria 3 coming to the HEI 2019 (to be surveyed in 2018)

Criteria 4	Patient and Community Engagement	10 Points Total
1		
	This section focuses on community engagement, outreach and promotion to let the LGBTQ community around your facility know you are a welcoming and affirming facility, working toward LGBTQ inclusion.	
	This section contains 8 scored questions. In order to receive the full 10 points, a facility must have implemented at least 4 of the following best practices. Facilities that have implemented 2 or 3 of the following best practices receive a partial score of five for this criterion.	
	a. LGBTQ Community Engagement and Marketing	4 or more
	 Support one or more LGBTQ-related events or initiatives in the facility's service area 	initiatives =
	 Engage in LGBTQ-inclusive marketing or advertising to the LGBTQ community 	10 points
	b. Understand the Needs of LGBTQ Patients and Community	2 to 3
	 Have patient surveys that allow patients the option to identify as LGBTQ 	initiatives =
	 Have patient surveys that include LGBTQ-related questions 	5 points
	 Conduct an LGBTQ community needs assessment with local LGBTQ groups 	
	 Meet with local LGBTQ organizations 	
	 Include LGBTQ representation on a governing or community advisory board 	
	 Support LGBTQ health-related research 	

Criteria 5	Responsible Citizenship	-25 Points
	This section focuses on known activity that would undermine LGBTQ equality or patient care.	
	Healthcare facilities will have 25 points deducted from their score for a large-scale official or public anti-LGBTQ blemish on their recent records. These deductions are based on information that has come to the HRC Foundation's attention related to topics including but not limited to:	
	Revoking inclusive LGBTQ policies or practices	
	 Facilitating the continued practice of healthcare providers who provide or promote "conversion therapy" or other LGBTQ-related treatments or services that have been discredited by mainstream medical and mental health organizations 	
	 Engaging in proven practices that are contrary to the facility's written LGBTQ patient or employment policies 	
	 Directing charitable contributions or other public support to organizations whose primary mission includes advocacy against LGBTQ equality or care 	
	The point deduction may be reflected in a current or future score, depending on the circumstances. If applied to a current score, the HEI "Leader in LGBTO Healthcare Equality" designation may be suspended or revoked. If at any time after losing points on this articles the score facility charges courses and extinctions the HEC Foundation?	05 points
	this criterion, a healthcare facility changes course and satisfies the HRC Foundation's noted concerns, the HRC Foundation will re-evaluate the criterion for that facility.	-25 points

100

●/● Full Score | ●/● Partial Score | ○/○ No Score | ● -25 points | blank space = not applicable

					1		2	3	4		
Rank	Facility Name	City	01 Patient Stand 01 Non-Discrimination	Equal Visitation	Different Differ	0 Training in LGBTO stient Centered Care	00 Patient Services and Support	00 Employee Benefits and Policies	0 Patient & Community std Engagement	Responsible Citizenship	Grand Total (Sum)
	ALABAMA										
	Medical West	Bessemer	•	•	•	0	•	0	0		55
	Cooper Green Mercy Health Services	Birmingham	•		•	•	•	0	•		60
	University of Alabama Hospital	Birmingham	•	•	•	•	•	•	•		100
	VA Birmingham Medical Center	Birmingham	•	•	•	•	•	•	•		100
	Crestwood Medical Center	Huntsville	•	•	•	•	0	0	•		35
	VA Central Alabama Veterans Health Care System	Montgomery	•	•	•	•	•	•	0		55
	VA Tuscaloosa Medical Center	Tuscaloosa	•	•	•	0	0	•	0		50
	ALASKA										
•	VA Alaska Healthcare System	Anchorage	•		•	•	•	•	•		85
	ARIZONA										
	Abrazo Scottsdale Campus	Phoenix	•	•	•	•	0	•	•		65
	Maricopa Integrated Health System	Phoenix	•	•	•	0	0	0	0		20
•	Mayo Clinic Hospital	Phoenix	•	•	•	Ð	•	•	•		90
•	Mountain Park Health Center	Phoenix	•		•	•	•	•	•		80
	VA Northern Arizona Health Care System	Prescott	Ð	•	•	•	•	•	0		70
•	Mayo Clinic	Scottsdale	•		•	Ð	•	•	Ð		90
	El Rio Community Health Center	Tucson	•		•	•	•	•	•		100
•	VA Southern Arizona Health Care System	Tucson	•	•	•	•	•	•	0		90
	ARKANSAS										
	VA Health Care System of the Ozarks	Fayetteville	•	•	•	•	•	•	•		100
	Arkansas Children's Hospital	Little Rock	•	•	•	•	0	•	•		55
•	UAMS Medical Center	Little Rock	•	•	•	•	•	•	•		90
•	VA Central Arkansas Veterans Healthcare System	Little Rock	•	•	•	•	•	•	•		95
	CALIFORNIA										
=	Kaiser Permanente, Orange County Anaheim Medical Center	Anaheim	•	•	•	•	•	•	•		100
	Kaiser Permanente, Antioch Medical Center	Antioch	•	•	•	•	•	•	•		100
	Sutter Delta Medical Center	Antioch	•	•	•	•	•	•	•		100
	Sutter Auburn Faith Hospital	Auburn	•	•	•	•	•	•	•		100
	Kaiser Permanente, Baldwin Park Medical Center	Baldwin Park	•	•	•	•	•	•	•		100
	University Health Services (Tang Center)	Berkeley	•		•	•	•	•	•		100
=	Mills-Peninsula Health Services	Burlingame	•	•	•	•	•	•	•		100
•	Naval Hospital Camp Pendleton	Camp Pendleton	•	•	•	•	•	•	0		90
	Eden Medical Center	Castro Valley	•	•		•	•	•	•		100
	Scripps Mercy Hospital, Chula Vista campus	Chula Vista	•	•	•		•	•	•		75
	Sharp Chula Vista Medical Center	Chula Vista	•	•	•	0	0	0	0		40
	John Muir Behavioral Health Center	Concord	•	•	•		0	•	•		65
	John Muir Medical Center, Concord	Concord	•	•	•	•	0	•	•		70
	Sutter Coast Hospital	Crescent City	•				•	•	•		100

●/● Full Score | ●/● Partial Score | ○/○ No Score | ● -25 points | blank space = not applicable

					1		2	3	4		
Rank	Facility Name	City	0 Patient Non-Discrimination	Equal Visitation	Different Differ	o Training in LGBTQ ସୁ Patient Centered Care	06 Patient Services and Support	00 Employee Benefits and Policies	ot Patient & Community ସି Engagement	Responsible Citizenship	Grand Total (Sum)
	Sutter Davis Hospital	Davis	io pis				So pis	20 pis	io pis	-20 pis	100
	Kaiser Permanente, Downey Medical Center	Downey									100
-	Rancho Los Amigos National Rehabilitation Center	Downey	•	•				0			35
	City of Hope's National Medical Center	Duarte				•	•		•		100
	Scripps Memorial Hospital Encinitas	Encinitas									75
	Kaiser Permanente, Fontana Medical Center	Fontana									100
	Kaiser Permanente, Fremont Medical Center	Fremont									100
	Kaiser Permanente, Fresno Medical Center	Fresno									100
-	USC Verdugo Hills Hospital	Glendale		•	•	•					85
	Adventist Medical Center - Hanford	Hanford	0		•	0	0	•	0		40
	Central Valley General Hospital	Hanford	0	0	0	0	0		0		20
	Kaiser Permanente, South Bay Medical Center	Harbor City	•						•		100
	Kaiser Permanente, Orange County Irvine Medical Center	Irvine	•	•	•	•	•	•	•		100
	Sutter Amador Hospital	Jackson	•		•	•	•	•	•		100
	Scripps Green Hospital	La Jolla	•	•	•			•	•		75
	Scripps Memorial Hospital La Jolla	La Jolla	•	•	•			•	•		75
	Sharp Grossmont Hospital	La Mesa	•	•	•	0	0	0	0		40
	Sutter Lakeside Hospital	Lakeport	•	•	•	•	•	•	•		100
•	VA Loma Linda Healthcare System	Loma Linda	•	•	•	•	•	•	0		95
	St. Mary's Medical Center - Long Beach	Long Beach	•		•	•	•	•	•		100
	VA Long Beach Healthcare System	Long Beach	•	•	•	0			•		75
	Cedars-Sinai Medical Center	Los Angeles	•		•	•		•			75
•	Children's Hospital Los Angeles	Los Angeles	•	•	•	•	•	•	•		95
	Kaiser Permanente, Los Angeles Medical Center	Los Angeles	•	•	•	•	•	•	•		100
	Kaiser Permanente, West Los Angeles Medical Center	Los Angeles	•	•	•	•	•	•	•		100
•	Keck Medical Center of USC	Los Angeles	•	•	•	•	•	•	•		85
	LAC-USC Medical Center	Los Angeles	•	•	•	•	•	•	•		100
	Los Angeles LGBT Center	Los Angeles	•		•	•	•	•	•		100
	Mattel Children's Hospital UCLA	Los Angeles	•	•	•	•	•	•	•		100
	Orthopaedic Institute for Children	Los Angeles	•		•	0	0	•	0		45
	Resnick Neuropsychiatric Hospital at UCLA	Los Angeles	•	•	•	•	•	•	•		100
	Ronald Reagan UCLA Medical Center	Los Angeles	•	•		•	•	•	•		100
•	UCLA Arthur Ashe Student Health & Wellness Center	Los Angeles	•		•	•	•	•	•		85
	Memorial Hospital Los Banos	Los Banos	•	•	•	•	•	•	•		100
	Kaiser Permanente, Manteca Medical Center	Manteca	•	•	•	•	•	•	•		100
	Contra Costa Behavioral Health Division	Martinez	•	•	•	•	•	•	•		100
	Contra Costa Regional Medical Center	Martinez	•	•	•	•	•	•	•		100
	VA Northern California Health Care System	Mather		•	•	0	O	O	•		60
	Kaiser Permanente, Modesto Medical Center	Modesto	•			•	•	•	•		100

●/● Full Score | ●/● Partial Score | ○/○ No Score | ● -25 points | blank space = not applicable

Patient & Community Additional and a patient and	Citizenship	Grand Total (Sum)
•		100
•		
•		100
		100
		50
•		100
•		100
•		100
•		100
•		100
•		100
•		100
•		100
•		100
•		100
0		40
•		100
•		100
•		100
•		100
•		100
•		100
•		100
•		100
•		100
0		20
•		100
0		75
0		40
•		100
•		100
•		100
•		100
•		100
•		80
•		100
•		100
•		100
•		100
•		100
		. .

●/● Full Score | ●/● Partial Score | ○/ No Score | ● -25 points | blank space = not applicable

					1		2	3	4		
Rank	Facility Name	City	Definition Non-Discrimination	Equal Visitation	Employment Non-Discrimination	Training in LGBTQ Patient Centered Care	Patient Services and Support	Employee Benefits and Policies	Detient & Community Engagement	Responsible Citizenship	Grand Total (Sum)
	Palo Alto Medical Foundation	Santa Cruz	10 pts	10 pts	10 pts	10 pts	30 pts	20 pts	10 pts	-25 pts	100
	Sutter Maternity and Surgery Center of Santa Cruz	Santa Cruz		•							100
	Santa Monica-UCLA Medical Center and Orthopaedic Hospital	Santa Monica									100
	Kaiser Permanente, Santa Rosa Medical Center	Santa Rosa	•	•							100
	Sutter Santa Rosa Regional Hospital	Santa Rosa									100
	Adventist Medical Center - Selma	Selma	0			0	0		0		40
	Kaiser Permanente, South San Francisco Medical Center	South San									100
	Sutter Tracy Community Hospital	Francisco Tracy									100
	Kaiser Permanente, Vacaville Medical Center	Vacaville									100
	Kaiser Permanente, Vallejo Medical Center	Vallejo									100
	Sutter Solano Medical Center	Vallejo				•					100
	John Muir Medical Center, Walnut Creek	Walnut Creek	•				0				70
	Kaiser Permanente, Walnut Creek Medical Center	Walnut Creek									100
	Kaiser Permanente, Woodland Hills Medical Center	Woodland Hills	•		•						100
	COLORADO						-	-			
	Children's Hospital Colorado	Aurora	0		0	0	•	•	0		50
	Denver Health Medical Center	Denver	•	•	•	•	•				100
	VA Eastern Colorado Health Care System	Denver	•					0	0		65
	Craig Hospital	Englewood	•	•	•	0	0	•	0		40
	St. Anthony Summit Medical Center	Frisco	0		0		0	0	0		15
•	VA Grand Junction Medical Center	Grand Junction	•	•	•	0	•	•	•		90
	St. Anthony Hospital	Lakewood	0		0		0	0	0		20
	CONNECTICUT										
	Bridgeport Hospital	Bridgeport	•	•	•	•	•	•	0		75
	Bristol Hospital	Bristol	•		•	•	•	•	0		60
	Greenwich Hospital	Greenwich	•	•	•	•	0	0	0		65
	Middlesex Hospital	Middletown	•	•	•	•	•	•	•		100
•	Yale-New Haven Hospital	New Haven	•	•	•	•	•	•	•		95
	Reproductive Medicine Associates of Connecticut	Norwalk	•		•	•	•	•	•		100
	VA Connecticut Health Care System	West Haven	•	•	•	•	•	•	•		100
	DELAWARE										
•	Bayhealth Kent General Hospital	Dover	•	•	•	•	•	•	•		80
	Beebe Healthcare	Lewes	•	•	•	•		•	•		75
•	Bayhealth Milford Memorial Hospital	Milford	•	•	•	•	•	•	•		80
	Christiana Care - Christiana Hospital	Newark	•	•	•	•	•	•	•		100
	Nanticoke Memorial Hospital	Seaford	•	•	•	0	0		0		40
•	Alfred I. duPont Hospital for Children	Wilmington	•	•	•	•		•	•		80
	Christiana Care - Wilmington Hospital	Wilmington	•	•	•	•	•	•	•		100
	VA Wilmington Medical Center	Wilmington	•	•	•	0		•	•		75

●/● Full Score | ●/● Partial Score | ○/ No Score | ● -25 points | blank space = not applicable

					1		2	3	4		
Rank	Facility Name	City	Datient Non-Discrimination	Edual Visitation	Employment Non-Discrimination	0 Training in LGBTQ statient Centered Care	00 Patient Services and Support	00 Employee Benefits and Policies	0 Patient & Community Std 01 Engagement	Responsible Citizenship	Grand Total (Sum)
	DISTRICT OF COLUMBIA		10 pts	10 pts	TO pts	TO pts	00 pts	20 pts	TO pts	20 pts	
	Bridgepoint Hospital - Hadley Campus	Washington	Ð	0	0	0	0	0	0		25
	Howard University Hospital	Washington				0	0	0	0		30
	MedStar Georgetown University Hospital	Washington	•	•	0	0	0	0	0		35
	MedStar National Rehabilitation Hospital	Washington	•		•	•	0	0	0		50
	MedStar Washington Hospital Center	Washington	•	•	•	•	0	0	0		55
•	Sibley Memorial Hospital	Washington	•	•	•	•	•	0	•		90
•	VA Washington DC Medical Center	Washington	•	•	•	•	•	•	0		85
	Whitman-Walker Health	Washington	•		•	•	•	•	•		100
	FLORIDA										
	VA Bay Pines Healthcare System	Bay Pines	•	•	•	•	•	•	•		100
	Boca Raton Regional Hospital	Boca Raton	0	•	0	0	0	•	0		25
	Baptist Medical Center Nassau	Fernandina Beach	•	•	•	0	0	•	0		35
	Florida Medical Center - A Campus of North Shore	Fort Lauderdale	•	•	•	•	•	•	•		100
•	VA North Florida/South Georgia Veterans Healthcare System	Gainesville	•	•	•	•	•	•			95
	Baptist Medical Center Jacksonville	Jacksonville	•	•	•	0	0	•	0		35
	Baptist Medical Center South	Jacksonville	•	•		0	0		0		35
•	Mayo Clinic	Jacksonville	•		•		•	•	0		85
•	Mayo Clinic Hospital	Jacksonville	•	•	•		•	•	0		85
	Specialty Hospital Jacksonville	Jacksonville	•	•	•	0	0		0		35
	Wolfson Children's Hospital	Jacksonville	•	•	•	0	0				40
	Baptist Medical Center Beaches	Jacksonville Beach	•	•		0	0	•	0		35
	Poinciana Medical Center	Kissimmee	•	•	•	0	0		0		35
	Largo Medical Center	Largo	•	•	•	•	0	•	0		75
	Palms West Hospital	Loxahatchee	•	•	•	0	0		0		35
	Northwest Medical Center	Margate	•	•	•	0	0	•	0		35
	Care Resource	Miami	•		•	•	•	•	•		100
•	Holtz Children's Hospital & JMH Women's Services	Miami	•	•	•	•	0	•	•		85
•	Jackson Behavioral Health Hospital	Miami	•	•	•	•	0	•	•		85
•	Jackson Memorial Hospital	Miami	•	•	•	•	•	•	•		85
•	Jackson Rehabilitation Hospital	Miami	•	•	•	•	•	•	•		85
•	Jackson South Community Hospital	Miami	•	•	•	•	0	•	•		85
	North Shore Medical Center	Miami	•	•	•	0	•	•	0		65
	University of Miami Hospital	Miami	•	•	•	•	•	•	•		100
	VA Miami Healthcare System	Miami	•	•	•	•	•	•	•		100
•	Jackson North Medical Center	North Miami Beach	•	•	•	•	•	•	•		85
	Health Central Hospital	Ocoee	•	•	•	•		0	0		55
	VA Orlando Medical Center	Orlando	•	•	•	•	•	•	•		100
	Westside Regional Medical Center	Plantation	•	•	•	0	0	0	0		40

●/● Full Score | ●/● Partial Score | ○/○ No Score | ● -25 points | blank space = not applicable

					1		2	3	4		
Rank	Facility Name	City	0 Patient std 00-Discrimination	Equal Visitation	Employment Non-Discrimination	o Training in LGBTQ	06 Patient Services atd Support	50 Employee Benefits 51 and Policies	Datient & Community 54 Engagement	Responsible Citizenship	Grand Total (Sum)
	Fawcett Memorial Hospital	Port Charlotte						20 pts		-20 pts	25
	All Children's Hospital	Saint Petersburg		•	•		0		0		45
	Palms of Pasadena Hospital	Saint Petersburg	•	•	0		0		0		35
	St. Petersburg General Hospital	Saint Petersburg	•	•	•	•	•	•	•		100
	Doctors Hospital of Sarasota	Sarasota	•	•	0						25
	Edward White Hospital	St. Petersburg	•	•	0	0	0				50
	Tallahassee Memorial HealthCare	Tallahassee	0					0			50
	H. Lee Moffitt Cancer Center and Research Institute	Tampa	•								100
	VA James A. Haley Veterans Hospital	Tampa	•	•	•	•	•		•		100
	VA West Palm Beach Medical Center	West Palm Beach	0		•		•	•	0		65
	Cleveland Clinic Florida	Weston	•	•	•	•	•		•		100
	GEORGIA										
	Atlanta Medical Center	Atlanta	•	•	•	0	0		0		50
•	Emory University Hospital	Atlanta	•	•	•	•	•	•	•		85
	Emory University Hospital Midtown	Atlanta	•	•	•	0	0	•	0		35
•	Grady Memorial Hospital	Atlanta		•	•	0					90
	Piedmont Hospital	Atlanta	•	•	•	0	•	•	0		65
	AU Medical Center	Augusta	0	•	•	0		0	0		50
	VA Charlie Norwood Medical Center	Augusta	•	•	•	0		•			65
	VA Atlanta Medical Center	Decatur	0	0	0	0	0		0		10
•	VA Carl Vinson Medical Center	Dublin	•	•	•	•	•	•	0		90
	Piedmont Fayette Hospital	Fayetteville	•	•	•	0	0		0		35
	Piedmont Mountainside Hospital	Jasper	•	•	•	0	0	•	0		35
	Emory Johns Creek Hospital	Johns Creek	•	•	•	0			0		60
	Piedmont Newnan Hospital	Newnan	•	•	•	0	0	•	0		35
	Piedmont Henry Hospital	Stockbridge	•	•	•	0	0		0		35
	Emory University Orthopaedics and Spine Hospital	Tucker	•	•	•		0	•	0		55
	HAWAII										
	Kaiser Permanente, Moanalua Medical Center	Honolulu	•	•	•	•	•	•	•		100
	VA Pacific Islands Health Care System	Honolulu	•		•	•	•	•	•		100
	ILLINOIS										
	Advocate Good Shepherd Hospital	Barrington	•	•	•	0	0	•	0		40
	St. Mary's Hospital	Centralia	•	•	•	0	0	•			40
	Advocate Illinois Masonic Medical Center	Chicago	•	•	•	•	•	•	•		100
	Advocate Trinity Hospital	Chicago	•	•	•	0	0		0		50
	Ann & Robert H. Lurie Children's Hospital of Chicago	Chicago	•	•	•	•	•	•	•		100
	Howard Brown Health Center	Chicago	•		•	•	•	•	•		100
	John H. Stroger Jr. Hospital of Cook County	Chicago	•	•	•	0	0		0		35
	Methodist Hospital of Chicago	Chicago	•	•	Ð	0	Ð	•	Ð		55

●/● Full Score | ●/● Partial Score | ○/○ No Score | ● -25 points | blank space = not applicable

					1		2	3	4		
Rank	Facility Name	City	0 Patient std 00-Discrimination	Equal Visitation	0 Employment Non-Discrimination	D Training in LGBTQ	00 Patient Services and Support	00 Employee Benefits and Policies	0 Patient & Community std Engagement	Responsible Citizenship	Grand Total (Sum)
	Northwestern Memorial Hospital	Chicago	•		•	•	•	20 più		20 pt0	100
	Rush University Medical Center	Chicago	•	•	•	•	•	•	•		100
	University of Chicago Medical Center	Chicago	•		•		•				100
	University of Illinois Hospital & Health Sciences System	Chicago	•	•	•	•	•	•	•		100
	VA Jesse Brown Medical Center	Chicago	•				•	•	•		100
	VA Illiana Health Care System	Danville	•	•	•	•	•	•	•		100
	Advocate Good Samaritan Hospital	Downers Grove	•	•	•	0	0		0		40
	Advocate Sherman Hospital	Elgin	•	•	•	0	0	•	0		40
	Northwestern Medicine Delnor Hospital	Geneva	•	•	•	•	0	0	•		75
	Advocate South Suburban Hospital	Hazel Crest	•	•	•	0	0	•	0		50
•	VA Edward Hines Jr. Hospital	Hines		•	•	0	•	•	•		85
	Northwestern Medicine Lake Forest Hospital	Lake Forest	•	•	•	•	•	•	•		100
	Advocate Condell Medical Center	Libertyville	•	•	•	0	0	•	0		50
	VA Marion Medical Center	Marion	•	•	•	0	0	•	0		45
	Good Samaritan Regional Health Center	Mount Vernon	•	•	•	0	0	•			40
	Advocate BroMenn Medical Center	Normal	•	•	•	0	•	•	0		65
•	VA Captain James A. Lovell Federal Health Care Center	North Chicago	•	•	•	0	•				85
	Advocate Children's Hospital	Oak Lawn	•	•	•	0			0		65
	Advocate Christ Medical Center	Oak Lawn	•	•	•	0	•	•	0		65
	Rush Oak Park Hospital	Oak Park	•	•	•	•	•	•	•		100
	Advocate Lutheran General Hospital	Park Ridge	•	•	•	0	0	•	0		40
	Northwestern Medicine Central DuPage Hospital	Winfield	•	•	•	•	•	•	•		75
	INDIANA										
	Parkview Regional Medical Center	Fort Wayne	•	•		0	0	0	0		20
	VA Northern Indiana Health Care System	Fort Wayne	•	•	•	0	•	•	0		45
•	Eskenazi Hospital	Indianapolis	•	•	•	•	•	•	•		95
	IU Health University Hospital	Indianapolis	•	•	0		•	•	•		60
	Riley Hospital for Children at Indiana University Health	Indianapolis	0	•	0	O	•	•	•		50
	VA Richard L. Roudebush Medical Center	Indianapolis	•	•	•	•	•	•	•		100
	Indiana University Health Ball Memorial Hospital	Muncie	•	•	•	•	•	•	•		100
	Community Hospital	Munster	•	•	Ð	•	0	0	0		35
	IOWA										
•	Planned Parenthood of the Heartland	Des Moines	0		Ð	•	•	•	•		85
	UnityPoint Health - Iowa Methodist Medical Center	Des Moines	•	•	•	0	0	•	0		50
•	VA Central Iowa Health Care System	Des Moines	•	•	•		•	•			95
	University of Iowa Hospitals and Clinics	Iowa City	•	•	•	•	•	•	•		100
	VA Iowa City Health Care System	Iowa City	•	•	•		•	•	•		100
	Stewart Memorial Community Hospital	Lake City	0		0	0	0	•	0		15

●/● Full Score | ●/● Partial Score | ○/○ No Score | ● -25 points | blank space = not applicable

					1		2	3	4		
Rank	Facility Name	City	Datient Non-Discrimination	Equal Visitation	Employment Non-Discrimination	0 Training in LGBTQ Patient Centered Care	00 Patient Services and Support	00 Employee Benefits and Policies	0 Patient & Community std Engagement	tesponsible Citizenship	Grand Total (Sum)
	KANSAS										
	Anderson County Hospital	Garnett	•	•	•	•	•	•	•		100
•	The University of Kansas Hospital	Kansas City	•	•	•	•	•	•	•		85
	Lawrence Memorial Hospital	Lawrence	•	•	•	0	0	0	0		30
	Saint Luke's Cushing Hospital	Leavenworth	•	•	•	•	•	•	•		100
•	Children's Mercy South	Overland Park	•	•	•	0	•	•	•		90
	Saint Luke's South Hospital	Overland Park	•	•	•	•	•	•	•		100
	VA Eastern Kansas Health Care System	Topeka	•	•	•	0		•	0		55
	VA Robert J. Dole Medical Center	Wichita	•	•	•	0	0	•	0		45
	KENTUCKY										
	Our Lady of Bellefonte Hospital	Ashland	•	•	•		0		0		60
•	Eastern State Hospital	Lexington	•	•	•	•	•	•	•		80
	University of Kentucky Albert B. Chandler Hospital	Lexington	•	•	•	•	•	•	•		100
•	VA Lexington Medical Center	Lexington	•	•	•	•	•	0	0		85
	Norton Audubon Hospital	Louisville	•	•	•	0	0				45
	Norton Brownsboro Hospital	Louisville	•	•	•	0	0	0	•		25
	Norton Hospital	Louisville	•	•	•	0	0	0	0		20
	Norton Women's and Children's Hospital	Louisville	•	•	•	0		0	•		40
	VA Robley Rex Medical Center	Louisville	•	•	•	•	•	•	•		100
	LOUISIANA										
•	Ochsner Medical Center-Baton Rouge	Baton Rouge	•	•	•		•		•		80
•	Ochsner Medical Center West Bank Campus	Gretna	•	•	•	•	•	•	•		80
•	Ochsner Medical Center - Kenner	Kenner	•	•	•	•	•	•	•		85
	Tulane-Lakeside Hospital for Women and Children	Metairie	•	•	•	•	•	•	•		70
	CrescentCare	New Orleans	•		•	•	•	•	•		100
•	Ochsner Baptist Medical Center	New Orleans	•	•	•	•	•	•	•		85
•	Ochsner Medical Center	New Orleans	•	•		•	Ð	•	•		85
	Tulane Medical Center	New Orleans	•	•	•	•	•	•	•		70
	VA Southeast Louisiana Healthcare System	New Orleans	•		•	•	•	•	•		100
	Ochsner St. Anne Hospital	Raceland	•	•	•	•	•	•	0		75
•	Ochsner Medical Center - North Shore	Slidell	•	•	•		•	•	•		85
	MAINE										
•	VA Maine Medical Center	Augusta	•	•	•		•	•	•		90
	Penobscot Community Health Care	Bangor	•		•	•	•	•	•		100
	MARYLAND										
	Anne Arundel Medical Center	Annapolis	•		•	•		0	•		50
	Bon Secours Hospital	Baltimore	•	•	•			•	0		75
	Chase Brexton Health Services	Baltimore	•		•	•	•	•	•		100
	Greater Baltimore Medical Center	Baltimore	•	•	•	•	•	0	0		55

●/● Full Score | ●/● Partial Score | ○/○ No Score | ● -25 points | blank space = not applicable

					1		2	3	4		
Rank	Facility Name	City	Datient Non-Discrimination	Equal Visitation	Different Differ	o Training in LGBTQ ସୁ Patient Centered Care	06 Patient Services atd Support	00 Employee Benefits and Policies	ot Patient & Community ସେ Engagement	Responsible Citizenship	Grand Total (Sum)
	Johns Hopkins Bayview Medical Center	Baltimore	•	•	•	•	0		0	,	50
	Johns Hopkins Hospital	Baltimore	•	•	•	•		0		•	40
	MedStar Franklin Square Medical Center	Baltimore		•	•	0	•	•	0		65
	Planned Parenthood of Maryland	Baltimore	•		•	•	•	•	•		100
	Sinai Hospital of Baltimore	Baltimore	•	•	•	•		•	0		75
	University of Maryland Medical Center	Baltimore		•	0	0	0		•		50
	University of Maryland Medical Center Midtown Campus	Baltimore	•	•		0	0		0		35
•	VA Baltimore Medical Center - Maryland Health Care System	Baltimore	•	•	•		•	•	0		90
	Suburban Hospital	Bethesda	•	•	•	0	0	•	0		35
•	Walter Reed National Military Medical Center	Bethesda	•	•	•	•	•	•	0		90
	University Health Center - University of Maryland	College Park	•		•	•	•	•	•		100
	Howard County General Hospital	Columbia	•	•	•	•	•	0	0		60
	Northwest Hospital	Randallstown	•	•	•	•	•	•	0		75
	MASSACHUSETTS										
•	VA Edith Nourse Rogers Memorial Veterans Hospital	Bedford	•	•	•	•	•	•	0		90
	Health Quarters	Beverly	•		•		•	•	•		100
	Beth Israel Deaconess Medical Center	Boston	•	•	•	•	•	•	•		100
	Boston Children's Hospital	Boston	•	•	•	•	•	•	•		100
	Boston Medical Center	Boston	•	•	•	•	•	•	•		100
•	Brigham and Women's Faulkner Hospital	Boston	•	•	•		•	•	0		95
	Brigham and Women's Hospital	Boston	•	•	•	•	•	•	•		100
	Dana-Farber Cancer Institute	Boston	•		•	•	•	•	•		100
	Fenway Health	Boston	•		•	•	•	•	•		100
•	Massachusetts General Hospital	Boston	•	•	•	0					90
•	South End Community Health Center	Boston	•				•	•	0		80
	Tufts Medical Center	Boston	•	•		0	0		0		30
=	VA Boston Healthcare System	Boston	•	•	•	•	•	•	•		100
	Mount Auburn Hospital	Cambridge	•	•	•	•		•	•		70
	Spaulding Hospital for Continuing Medical Care Cambridge	Cambridge	0	0	0	0	0	•	•		15
	Fairview Hospital	Great Barrington	•	•	•	•	0	•	0		50
	Baystate Franklin Medical Center	Greenfield	•	•	•	0					75
•	VA Central Western Massachusetts Healthcare System	Leeds	•	•	•	•	•	•	•		85
	Newton-Wellesley Hospital	Newton Lower Falls	•	•	•	•		•	•		75
	Cooley Dickinson Hospital	Northampton	•	•	•	•	•	•	•		100
	Baystate Wing Hospital	Palmer	•	•	•	0	•				75
	Berkshire Medical Center	Pittsfield	•	•	•	•					70
	Baystate Medical Center	Springfield	•	•	•	0		•	•		70
	Baystate Mary Lane Hospital	Ware	•	•	•	0	•	•	•		75
	Baystate Noble Hospital	Westfield	•	•	•	0	Ð	•	•		75

●/● Full Score | ●/● Partial Score | ○/○ No Score | ● -25 points | blank space = not applicable

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ĩ	Facility Name	City	01 Patient std 00-Discrimination	Equal Visitation	Different Differ	ପ Training in LGBTQ ୟ Patient Centered Care	00 Patient Services and Support	00 Employee Benefits and Policies	0 Patient & Community std Engagement	Responsible Citizenship	Grand Total (Sum)
	Edward M. Kennedy Community Health Center	Worcester	•	i o pio	•	•	•	•	•	20 010	100
	MICHIGAN					-					
	University of Michigan Hospitals and Health Centers	Ann Arbor	•	•	•		0	•	0		55
•	VA Ann Arbor Healthcare System	Ann Arbor	•	•	•	•	•	•	0		90
	VA Battle Creek Medical Center	Battle Creek	•	•	•	•	•	•	•		100
•	Henry Ford Macomb Hospital	Clinton Township	•	•	•	•	0	•	•		85
	Henry Ford Hospital	Detroit	•	•	•		•	•	•		85
	VA John D. Dingell Medical Center	Detroit	0		•	•	0	0	0		45
	Spectrum Health - Butterworth Hospital	Grand Rapids	0		0	0	0		0		20
	Beaumont Hospital Grosse Pointe	Grosse Pointe	•	0	•	0	0	•	•		50
	VA Oscar G. Johnson Medical Center	Iron Mountain		•		0	0	0	0		40
	Ingham Community Health Centers	Lansing				•	•		•		100
	Sparrow Hospital	Lansing	0	0	0	0	0		0		15
	Beaumont Hospital - Royal Oak	Royal Oak	•			0	0	•	•		50
	VA Aleda E. Lutz Medical Center	Saginaw	•			•	•				95
	Beaumont Hospital - Troy	Troy	•	0	•	0	0		0		45
	Henry Ford West Bloomfield Hospital	West Bloomfield	•			•	0				80
	Henry Ford Wyandotte Hospital	Wyandotte	0		•	•	0	•			70
	MINNESOTA	,				-					
	Children's - Minneapolis	Minneapolis	0	Ð		0	0		0		40
	Hennepin County Medical Center	Minneapolis	•		•	•	•				100
	VA Minneapolis Health Care System	Minneapolis			•	•					100
	Mayo Clinic	Rochester			•	0			0		85
	Mayo Clinic Hospital	Rochester							0		85
	Park Nicollet Methodist Hospital	Saint Louis Park	•	•	•		0				60
	Regions Hospital	Saint Paul	•	•	•	0	0		0		60
	VA St. Cloud Health Care System	St. Cloud									100
3	Family Tree Clinic	St. Paul									100
	Lakeview Hospital	Stillwater	•	•	•	0					40
	MISSISSIPPI	Otinwator						U.			40
	VA Gulf Coast Veterans Health Care System	Biloxi	•	•	•	•			0		75
	University of Mississippi Medical Center	Jackson			•			0			85
	VA G.V. (Sonny) Montgomery Medical Center	Jackson	•	0	•		0				65
	MISSOURI	Juokoon		U.			v		U.		00
	SSM DePaul Health Center	Bridgeton	•	•		0					40
	Hedrick Medical Center	Chillicothe									100
		CrimioOttic		-							100
3	VA Harry S. Truman Memorial	Columbia									
	VA Harry S. Truman Memorial SSM Health St. Mary's Hospital - Jefferson City	Columbia Jefferson City	•	•				•			40

●/● Full Score | ●/● Partial Score | ○/○ No Score | ● -25 points | blank space = not applicable

					1		2	3	4		
Rank	Facility Name	City	0 Patient std 00-Discrimination	Equal Visitation	Employment Non-Discrimination	o Training in LGBTQ ଜୀ Patient Centered Care	00 Patient Services and Support	00 Employee Benefits and Policies	0 Patient & Community std Engagement	Responsible Citizenship	Grand Total (Sum)
	Saint Luke's Hospital for Kansas City's Crittenton Children's Center	Kansas City									100
	Research Medical Center	Kansas City	•	•	•	•	0	0	•		60
	Saint Luke's Hospital of Kansas City	Kansas City	•	•	•	•	•	•	•		100
	Saint Luke's North Hospital - Barry Road	Kansas City	•	•	•	•	•	•	•		100
	Truman Medical Center-Hospital Hill	Kansas City	•	•	0	0	0	•	0		30
	VA Kansas City Medical Center	Kansas City	•	•	0	0		•	0		45
	SSM St. Joseph Hospital West	Lake Saint Louis	•	•	•	0	0	•	•		40
	Saint Luke's East Hospital	Lee's Summit	•	•	•	•	•	•	•		100
	St. Francis Hospital and Health Services	Maryville	•	•	•	0	0				40
	SSM Health St. Mary's Hospital - Audrain	Mexico	•	•	•	0	0	•	•		40
•	VA John J. Pershing Medical Center	Poplar Bluff	•	•	•	•	•	•	•		95
	SSM St. Joseph Health Center	Saint Charles	•	•	•	0	0				40
	Mosaic Life Care at St. Joseph	Saint Joseph	•	•	•		•	0	0		50
•	Barnes-Jewish Hospital	Saint Louis	•	•	•	•	0	•	•		80
	SSM Cardinal Glennon Children's Medical Center	Saint Louis	•	•	•	0	0	•	•		40
	SSM St. Mary's Health Center	Saint Louis	•	•	•	0	0	•	•		40
•	St. Louis Children's Hospital	Saint Louis	•	•	•	•	•	•	•		95
	Saint Luke's North Hospital - Smithville	Smithville	•	•	•	•	•	•	•		100
	VA St. Louis Health Care System	St. Louis	•	•	•	•	•	•	•		100
	Wright Memorial Hospital	Trenton	•	•	•	•	•	•	•		100
	MONTANA										
•	Billings Clinic	Billings	•	•	•	•	•	•	•		80
•	VA Montana Health Care System	Fort Harrison	•	•	•	•	•	•	0		90
	NEBRASKA										
•	Nebraska Medical Center	Omaha	•	•	•		•	•	•		80
	OneWorld Community Health Centers	Omaha	•		•	•	•	•	0		75
	VA Omaha-Nebraska-Western Iowa Health Care System	Omaha	•	•	•	•	•	•	•		100
	NEVADA										
	Centennial Hills Hospital Medical Center	Las Vegas	•	•	•	•	0	•	•		65
	Desert Springs Hospital Medical Center	Las Vegas	•	•	•	•	0	•	•		65
	Solutions Recovery Inc.	Las Vegas	•	•	•	0	0		0		50
	Spring Valley Hospital Medical Center	Las Vegas	•	•	•	•	0	•	•		60
	Summerlin Hospital Medical Center	Las Vegas	•	Ð	•	•	•	•	•		60
	University Medical Center of Southern Nevada	Las Vegas	•	•	•		•	•	0		65
•	Valley Hospital Medical Center	Las Vegas	•	•	•	•	•	•	•		80
	Veterans Affairs Southern Nevada Healthcare System	North Las Vegas	•	•	•	•	•	•	•		100
	VA Sierra Nevada Health Care System	Reno	•	•	•	•	•	•	•		100
	NEW HAMPSHIRE										
	VA Manchester Medical Center	Manchester	•	•	•	•	•				100

●/● Full Score | ●/● Partial Score | ○/○ No Score | ● -25 points | blank space = not applicable

				•	1		2	3	4		
Rank	Facility Name	City	01 Patient Stand 01 Non-Discrimination	Equal Visitation	Direction Discrimination	0 Training in LGBTO Patient Centered Care	06 Patient Services atd Support	00 Employee Benefits and Policies	0 Patient & Community std Engagement	sta Citizenship	Grand Total (Sum)
	NEW JERSEY										
	AtlantiCare Regional Medical Center	Atlantic City	•	•	•	•	•	•	•		100
•	Reproductive Medicine Associates of New Jersey	Basking Ridge	•	•	•	•		•			80
	Cape Regional Medical Center	Cape May Court House	0	0	0	0	0	0	0		0
	VA New Jersey Health Care System	East Orange	•	•	•	•	•	•	•		100
	Hackensack University Medical Center	Hackensack	•	•	•	•	•	•	•		100
•	Bayshore Community Hospital	Holmdel	•	•	•	•	•	•	•		80
	Jersey City Medical Center	Jersey City	•	•	•	•	•	•	•		100
	Saint Barnabas Medical Center	Livingston	•	•	•		•	•	•		75
	Goryeb Children's Hospital	Morristown	•	•	•	•	•	•	•		100
	Morristown Medical Center	Morristown	•	•	•	•	•	•	•		100
•	Jersey Shore University Medical Center	Neptune	•	•	•	•	•	•	•		80
	Robert Wood Johnson University Hospital	New Brunswick	•	•	•	•	•	•	•		100
	Newark Beth Israel Medical Center	Newark	0	•	•	0	•	•	•		65
	Newton Medical Center	Newton	•	•	•	•	•	•	•		100
	Chilton Medical Center	Pompton Plains	•	•	•	•	•	•	•		100
	Shore Medical Center	Somers Point	•	•	•	•	•	0	0		70
	Overlook Medical Center	Summit	•	•	•	•	•	•	•		100
	NEW MEXICO										
•	University of New Mexico Hospitals	Albuquerque	•	•	•		•	•	•		95
•	VA New Mexico Health Care System	Albuquerque	•	•	•	•	•	•	•		95
	NEW YORK										
	Albany Medical Center	Albany	•	•	•	•	Ð	•	0		75
•	VA Albany Medical Center: Samuel S. Stratton	Albany	•	•	•		•	•	•		90
	VA Bath Medical Center	Bath	•	•	•	•	•	•	•		100
•	Southside Hospital	Bay Shore	•	•	•	0	•	•	•		80
	Montefiore Medical Center	Bronx	•	•	•	•	•	•	•		100
	NYC Health and Hospitals - Belvis, a Gotham Health Center	Bronx	•		•	•	•	•	•		100
	NYC Health and Hospitals - Jacobi	Bronx	•	•	•	•	•	•	•		100
	NYC Health and Hospitals - Lincoln	Bronx	•	•	•	•	•	•	•		100
	NYC Health and Hospitals - Morrisania, a Gotham Health Center	Bronx	•		•		•	•	•		100
•	NYC Health and Hospitals - North Central Bronx	Bronx	•	•	•	•	•	•	•		95
•	St. Barnabas Hospital	Bronx	•	•	•	•	•	•	•		80
	VA James J. Peters Medical Center	Bronx	•	•	•	•	•	•	•		100
	Maimonides Medical Center	Brooklyn	•			0		•	0		55
	Mount Sinai Brooklyn Hospital	Brooklyn	•	•	•	•	•	•	0		75
	NYC Health and Hospitals - Coney Island	Brooklyn	•	•	•		•	•	•		100
	NYC Health and Hospitals - Cumberland, a Gotham Health Center	Brooklyn	•		•	•	•	•	•		100
	NYC Health and Hospitals - East New York, a Gotham Health Center	Brooklyn	•		•	•	•	•	•		100

●/● Full Score | ●/● Partial Score | ○/○ No Score | ● -25 points | blank space = not applicable

					1		2	3	4		
Rank	Facility Name	City	Datient Station Station	Equal Visitation	Different Discrimination	0 Training in LGBTQ ad Patient Centered Care	00 Patient Services and Support	00 Employee Benefits and Policies	0 Patient & Community atd Engagement	-25 pts	Grand Total (Sum)
	NYC Health and Hospitals - Kings	Brooklyn		•	•	•	•	•	•		100
	NYC Health and Hospitals - McKinney	Brooklyn					•	•			100
	NYC Health and Hospitals - Woodhull	Brooklyn		•	•	•	•	•			100
•	NYU Lutheran Medical Center	Brooklyn	•	•	•		•	•	•		95
	VA New York Harbor Healthcare System	Brooklyn	0	•	0	0	0	0	0		30
	Buffalo General Medical Center	Buffalo	•	•	•		•	•	•		100
	Evergreen Health Services	Buffalo	•		•	•	•	•	•		100
•	VA Western New York Healthcare System	Buffalo	•	•	•		•	•	0		90
	Women & Children's Hospital of Buffalo	Buffalo	•	•	•	•	•	•	•		100
•	F. F. Thompson Hospital	Canandaigua	•	•	•	•	0	•	•		85
•	VA Canandaigua Medical Center	Canandaigua	•	•	•	•	•	•	•		95
	NYC Health and Hospitals - Elmhurst	Elmhurst	•	•	•		•	•	•		100
	New York-Presbyterian Queens	Flushing	•	•	•	•	•	0	0		70
•	Long Island Jewish - Forest Hills	Forest Hills	•	•	•		•	•	•		95
•	Glen Cove Hospital	Glen Cove	•	•	•	•	•	•	•		95
	Institute for Family Health	Harlem	0		0		0	•	0		55
	Catskill Regional Medical Center	Harris	•	•	•	0	0	0	0		30
•	Huntington Hospital	Huntington	•	•	•		•	•	•		95
	Jamaica Hospital Medical Center	Jamaica	•	•	•	0	0	•	0		30
	NYC Health and Hospitals - Queens	Jamaica	•	•	•	•	•	•	•		100
=	Mount Sinai Queens	Long Island City	•	•	•	•	•	•	•		100
•	The Feinstein Institute for Medical Research	Manhasset	•	•	•		•	•	0		90
•	North Shore University Hospital	Manhasset	•	•	•	•	•	•	0		95
•	Mountainside Residential Care Center	Margaretville	•	•	•	•	•	0	•		90
•	VA Hudson Valley Health Care System	Montrose	•	•	•		•	•	0		90
•	Northern Westchester Hospital	Mount Kisco	•	•	•	•	•	•	0		90
	Long Island Jewish Medical Center	New Hyde Park	•	•	•	•	•	•	•		100
•	Steven and Alexandra Cohen Children's Medical Center	New Hyde Park	•	•	•	•	•	•	•		90
	Woodland Pond at New Paltz	New Paltz	0	•	•	•	•	•	0		70
	Callen-Lorde Community Health Center	New York	•		•	•	•	•	•		100
=	Hospital for Special Surgery	New York	•	•	•	•	•	•	•		100
	Lenox Hill Hospital	New York	•	•	•	•	•	•	•		100
=	Memorial Sloan-Kettering Cancer Center	New York	•	•	•	•	•	•	•		100
	Mount Sinai Beth Israel	New York	•	•	•	•	•	•	•		100
	Mount Sinai Hospital	New York	•	•	•	•	•	•	•		100
	Mount Sinai St. Luke's	New York	•	•	•	•	•	•	•		100
	Mount Sinai West	New York	•	•	•	•	•	•	•		100
	New York Eye and Ear Infirmary of Mount Sinai	New York	•	•	•	•	•	•	•		100
	New York-Presbyterian Hospital/Weill Cornell Medical Center	New York	•	•	•	•	•	•	•		100

●/● Full Score | ●/● Partial Score | ○/○ No Score | ● -25 points | blank space = not applicable

					1		2	3	4		
Rank	Facility Name	City	01 Patient Stand 01 Non-Discrimination	Equal Visitation	Employment Non-Discrimination	0 Training in LGBTQ	06 Patient Services atd Support	00 Employee Benefits and Policies	0 Patient & Community std Engagement	Responsible Citizenship	Grand Total (Sum)
	New York-Presbyterian/Columbia University Medical Center	New York	io pis		io pis		00 pts	20 pts	10 pts	20 pts	100
	NYC Health and Hospitals - Bellevue	New York									100
	NYC Health and Hospitals - Carter	New York									100
	NYC Health and Hospitals - Coler	New York	•	•	•	•	•				100
	NYC Health and Hospitals - Gouverneur Skilled Nursing Facility	New York	•	•	•		•	•			100
	NYC Health and Hospitals - Gouverneur, a Gotham Health Center	New York	•		•	•	•	•	•		100
	NYC Health and Hospitals - Harlem	New York	•	•	•	•	•	•	•		100
	NYC Health and Hospitals - Metropolitan	New York	•	•	•	•	•	•	•		100
	NYC Health and Hospitals - Renaissance, a Gotham Health Center	New York	•		•		•	•	•		100
	NYU Langone Medical Center	New York	•	•	•	•	•	•	•		100
	Reproductive Medicine Associates of New York	New York	•		•		•	•	•		100
	DeGraff Memorial Hospital	North Tonawanda	•	•	•	•	•	•	•		100
	VA Northport Medical Center	Northport	•	•	•	0	0	•	0		40
	A.O. Fox Memorial Hospital	Oneonta	•	•	•	•	•	•	•		100
•	Plainview Hospital	Plainview	•	•	•	•	•	•	0		95
	Bon Secours Community Hospital	Port Jervis	•	•	•	•	0	•	0		55
•	HCR Home Care	Rochester	•		•	•	•	•	•		85
	Highland Hospital of Rochester	Rochester	0	•	•	0	•	•	0		55
	Strong Memorial Hospital of the University of Rochester	Rochester	•	•	•	•	•	•	•		100
	Trillium Health	Rochester	•		•	•	•	•	•		100
•	Saratoga Hospital	Saratoga Springs	•	•	•	•	•	•	•		85
	Phelps Memorial Hospital Center	Sleepy Hollow	•	•	•	0	•	•	0		50
•	Southampton Hospital	Southampton	•	•	•	•	0	•	•		80
	Sea View Hospital Rehabilitation Center and Home	Staten Island	•	•	•	•	•	•	•		100
	Staten Island University Hospital	Staten Island	•	•	•	•	•	•	•		100
	Good Samaritan Hospital	Suffern	•	•	•	•	0	•	0		60
•	Syosset Hospital	Syosset	•	•	•	•	•	•	•		85
•	VA Syracuse Medical Center	Syracuse	•	•	•	•	•	•	•		95
•	Long Island Jewish - Valley Stream	Valley Stream	•	•	•		•	•	•		90
	St. Anthony Community Hospital	Warwick	•	•	•		0	•	0		50
	Millard Fillmore Suburban Hospital	Williamsville	•		•	•	•	•	•		100
	NORTH CAROLINA										
	Mission Hospital	Asheville	•	•	•	0	0	•	0		45
•	VA Asheville Medical Center	Asheville	•	•	•		•	Ð	•		80
	Novant Health Brunswick Medical Center	Bolivia	•	•	•	•	•	•	•		100
	Alamance Regional Medical Center	Burlington	•	•	•	•	•	•	•		100
	UNC Hospitals	Chapel Hill	•	•	•	•	•	Ð	0		65
	Novant Health Charlotte Orthopaedic Hospital	Charlotte	•	•	•	•	•	•	•		100
	Novant Health Hemby Children's Hospital	Charlotte	•	•	•	•	•	•	•		100

●/● Full Score | ●/● Partial Score | ○/○ No Score | ● -25 points | blank space = not applicable

					1		2	3	4		
Rank	Facility Name	City	Datient Non-Discrimination	Equal Visitation	Employment Non-Discrimination	0 Training in LGBTQ stient Centered Care	00. Patient Services and Support	00 Employee Benefits and Policies	ot Patient & Community std 01 std ement	sta 52- Gitizenship	Grand Total (Sum)
	Novant Health Presbyterian Medical Center	Charlotte	io pio				00 pt0	20 pt0		20 010	100
	Duke Regional Hospital	Durham									100
	Duke University Hospital	Durham									100
•	VA Durham Medical Center	Durham							0		95
	VA Fayetteville Medical Center	Fayetteville	0		•	0	•		0		70
	Cone Health Behavioral Health Hospital	Greensboro	•	•	•		•	•	•		100
	Moses H. Cone Memorial Hospital	Greensboro	•		•	•	•		•		100
	Wesley Long Hospital	Greensboro	•	•	•	•	•	•	•		100
	Women's Hospital of Greensboro	Greensboro	•	•	•	•	•	•	•		100
	Novant Health Huntersville Medical Center	Huntersville	•			•	•	•	•		100
	Novant Health Kernersville Medical Center	Kernersville	•	•	•	•	•	•	•		100
	Novant Health Matthews Medical Center	Matthews	•	•	•	•	•	•	•		100
	Duke Raleigh Hospital	Raleigh	•	•	•	•	•	•	•		100
	Rex Healthcare	Raleigh	•	•	•	•	0	•	•		70
	WakeMed Raleigh Campus	Raleigh	•	•	•	•	0	•	0		50
	Annie Penn Hospital	Reidsville	•	•	•	•	•	•	•		100
	Novant Health Rowan Medical Center	Salisbury	•	•	•	•	•	•	•		100
	W. G. (Bill) Hefner Veterans Affairs Medical Center	Salisbury	•	•	•	•	•	•	•		100
=	Novant Health Thomasville Medical Center	Thomasville	•	•	•	•	•	•	•		100
	Novant Health Forsyth Medical Center	Winston-Salem	•	•	•	•	•	•	•		100
=	Novant Health Medical Park Hospital	Winston-Salem	•	•	•	•	•	•	•		100
	Wake Forest Baptist Medical Center	Winston-Salem	•	•	•	•	•	•	•		100
	NORTH DAKOTA										
	VA Fargo Health Care System	Fargo	•	•	•	•	•	•	•		100
	оню										
•	Summa Akron City Hospital	Akron	•	•	•		•	•			90
	UH Samaritan Medical Center	Ashland	•	•	•		•	•	•		75
•	Summa Barberton Citizens Hospital	Barberton	•	•	•		•	•	•		85
•	UH Ahuja Medical Center	Beachwood	•	•	•	•	•	•	•		80
•	UH Bedford Medical Center	Bedford	•	•	•	•	•	•	•		80
•	UH Geauga Medical Center	Chardon	•				•	•	•		80
•	VA Chillicothe Medical Center	Chillicothe	•	•	•	•	•	•	0		90
•	Bethesda North Hospital	Cincinnati	•	•	•	•	•	•	•		95
	Cincinnati Children's Hospital Medical Center	Cincinnati	•	•	•	•	•	•	•		100
•	Good Samaritan Hospital	Cincinnati	•	•	•	•	•	•	•		95
	University of Cincinnati Medical Center	Cincinnati	•	0	•	0	0	Ð	0		25
=	VA Cincinnati Medical Center	Cincinnati	•	•	•	•	•	•	•		100
	Cleveland Clinic (Main Campus)	Cleveland	•	•	•	•	•	•	•		100
	Fairview Hospital	Cleveland	•			•	•		•		100

●/● Full Score | ●/● Partial Score | ○/○ No Score | ● -25 points | blank space = not applicable

					1		2	3	4		
Rank	Facility Name	City	0 Patient std 00-Discrimination	Equal Visitation	Employment Non-Discrimination	o Training in LGBTQ	00 Patient Services and Support	5 Employee Benefits and Policies	0 Patient & Community std Engagement	Responsible Citizenship	Grand Total (Sum)
	Hillcrest Hospital	Cleveland	•		•	•	•	20 pts	•	20 010	100
	Lutheran Hospital	Cleveland	•	•	•	•	•	•	•		100
	MetroHealth Medical Center	Cleveland	•	•	•		•	•	•		100
•	UH Case Medical Center	Cleveland	•	•	•	•	0	•	•		80
	VA Louis Stokes Cleveland Medical Center	Cleveland	•		•		•	•			100
	Columbus Public Health Department	Columbus	•		•	•	•	•	•		100
	Equitas Health	Columbus	•		•		•	•	•		100
	James Cancer Hospital and Solove Research Institute	Columbus	•	•	•	•	•	•	•		100
	Nationwide Children's Hospital	Columbus	•	•	•	•	•	•	•		100
	The Ohio State University Wexner Medical Center	Columbus	•	•	•	•	•	•	•		100
•	VA Chalmers P. Wylie Ambulatory Care Center	Columbus	•		•	•	•	•	•		95
•	UH Conneaut Medical Center	Conneaut	•	•	•	•	•	•	•		80
	VA Dayton Medical Center	Dayton	•	•	•		•	•	•		100
•	UH Elyria Medical Center	Elyria	•	•	•	•	0	•	•		80
	Euclid Hospital	Euclid	•	•	•	•	•	•	•		100
	Marymount Hospital	Garfield Heights	•	•	•	•	•	•	•		100
•	UH Geneva Medical Center	Geneva	•	•	•	•	•	•	•		80
•	Lakewood Hospital	Lakewood	•	•	•	0	•	•			90
	Medina Hospital	Medina	•	•	•	•	•	•	•		100
•	UH Parma Medical Center	Parma	•	•	•	•	•	•	•		80
•	UH Portage Medical Center	Ravenna	•	•	•	•	0	•	•		80
•	UH Richmond Medical Center	Richmond Heights	•	•	•	•	•	•	•		80
	The University of Toledo Medical Center	Toledo	•	•	•	•	•	•	•		100
	South Pointe Hospital	Warrensville Heights	•	•	•	•	•	•	•		100
	OKLAHOMA										
	VA Eastern Oklahoma Medical Center	Muskogee	•	•	•	0	0	0	•		25
	OU Medical Center	Oklahoma City	•	•	•	0	0	•	0		35
	St. Anthony Hospital	Oklahoma City	•	•	•	0	0	•	•		40
	VA Oklahoma City Medical Center	Oklahoma City	•	O	•	0	•	•	0		60
	St. Anthony Shawnee Hospital	Shawnee	•	•	•	0	0				40
	OREGON										
	Kaiser Permanente, Sunnyside Medical Center	Clackamas	•	•	•	•	•	•	•		100
	Legacy Mount Hood Medical Center	Gresham	•	•	•	•	•	•	•		100
	Kaiser Permanente, Westside Medical Center	Hillsboro	•	•	•	•	•	•	•		100
	Legacy Emanuel Medical Center	Portland	•	•	•	•	•	•	•		100
	Legacy Good Samaritan Hospital and Medical Center	Portland	•	•	•	•	•	•	•		100
•	Oregon Health & Science University Hospital	Portland	•	•	•	•	•	•	•		95
	Randall Children's Hospital at Legacy Emanuel	Portland	•	•	•	•	•	•	•		100
	VA Portland Medical Center	Portland	•	•			•	•	•		100

●/● Full Score | ●/● Partial Score | ○/○ No Score | ● -25 points | blank space = not applicable

					1		2	3	4		
Rank	Facility Name	City	Patient Non-Discrimination	Equal Visitation	Employment Non-Discrimination	Training in LGBTQ Patient Centered Care	Patient Services and Support	Employee Benefits and Policies	Patient & Community Engagement	Responsible Citizenship	Grand Total (Sum)
		0.1	10 pts	10 pts	10 pts	10 pts	30 pts	20 pts	10 pts	-25 pts	
-	Legacy Silverton Medical Center	Silverton	•	•	•	0	•	•	•		95
-	Legacy Meridian Park Medical Center	Tualatin	•	•	•	•	•	•	•		100
	Abington Hospital	Abington				0	0	•	0		60
_	VA Altoona - James E. Van Zandt Medical Center	Altoona	0	0				0	0		70
	VA Coatesville Medical Center	Coatesville		•	•	•	•	•	•		100
-	Einstein Medical Center Montgomery	East Norriton				•		•	•		100
-	Einstein Medical Center Elkins Park	Elkins Park									100
	Moss Rehab	Elkins Park	•	•	•				•	_	100
	VA Erie Medical Center	Erie				0	0	0	0		55
	VA Lebanon Medical Center	Lebanon	•	•	•	•	•		•	_	95
	Steps to Recovery	Levittown	•	•	•	•		0	•		90
_	Forbes Hospital	Monroeville	•	•	•	•	0	•	0		75
	The Abramson Center for Jewish Life	North Wales	•	•	•	•	•	•	•		100
_	Belmont Center for Comprehensive Treatment	Philadelphia	•	•		0	0	•	0		35
	Children's Hospital of Philadelphia	Philadelphia	•	•	•		•	•	•		100
	Einstein Medical Center Philadelphia	Philadelphia	•	•	•	•	•	•	•		100
	Friends Hospital	Philadelphia	•	•	•	•	•	•	•		75
•	Hospital of the University of Pennsylvania	Philadelphia	•	•	•	•	•	•	•		90
	Mazzoni Center	Philadelphia	•		•	•	•	•	•		100
•	Penn Presbyterian Medical Center	Philadelphia	•	•	•	•	•	•	•		90
•	Pennsylvania Hospital	Philadelphia	•	•	•	•	•	•	•		90
	Temple University Hospital	Philadelphia	0	•	•	O	•	•	•		65
	Thomas Jefferson University Hospital	Philadelphia	•	•	•	•	0	•	Ð		55
	VA Philadelphia Medical Center	Philadelphia	•	•	•	0	•	•	0		70
	Willowcrest Skilled Nursing and Rehabilitation Center	Philadelphia	•	•	•		•	•	•		100
=	Children's Hospital of Pittsburgh of UPMC	Pittsburgh	•	•	•	•	•	•	•		100
	VA Pittsburgh Healthcare System	Pittsburgh	•	•	•		•	•	•		100
=	Western Psychiatric Institute and Clinic of UPMC	Pittsburgh	•	•			•	•	•		100
•	Chester County Hospital	West Chester	•	•	•		•	•	•		90
	Geisinger Wyoming Valley Medical Center	Wilkes Barre	•	•	•	•	0	•	•		55
	VA Wilkes-Barre Medical Center	Wilkes-Barre	•	•	0	O	0	•	0		35
	Lankenau Medical Center	Wynnewood	0	•	0	0	•		0		45
	PUERTO RICO										
=	VA Caribbean Healthcare System	San Juan	•	•	•	•	•	•	•		100
	RHODE ISLAND										
	Emma Pendleton Bradley Hospital	East Providence	•	•	•	0	•		0		55
	Newport Hospital	Newport	•	•	•	0			0		55
	Memorial Hospital of Rhode Island	Pawtucket	•	•	•	•	0	Ð	0		50

●/● Full Score | ●/● Partial Score | ○/○ No Score | ● -25 points | blank space = not applicable

	Detient & Community std 01 std 01	Responsible Citizenship	Grand Total (Sum)
Butler Hospital Providence Image: Comparison of the compari			Grand To:
Miriam HospitalProvidenceImage: Constraint of the second se		-25 pts	85
Rhode Island Hospital Providence	0		50
			60
	0		60
Women & Infants Hospital of Rhode Island Providence	0		75
Kent Hospital Warwick Image: Control of the control o	0		75
SOUTH CAROLINA			
MUSC Medical Center of Medical University of South Carolina Charleston	•		75
VA Ralph H. Johnson Medical Center Charleston	0		80
Laurens County Memorial Hospital Clinton O	•		90
VA Wm. Jennings Bryan Dorn Medical Center Columbia	0		65
Bon Secours St. Francis Downtown Greenville	0		75
Bon Secours St. Francis Eastside Greenville • • • • • •	0		75
Greenville Memorial Hospital Greenville	•		90
Patewood Memorial Hospital Greenville Greenville	•		90
Greer Memorial Hospital Greer Greer Greer	•		90
Oconee Memorial Hospital Seneca Oconee Memorial Hospital	•		90
Hillcrest Memorial Hospital Simpsonville Simpsonville	•		90
North Greenville Hospital Travelers Rest	•		90
SOUTH DAKOTA			
VA Sioux Falls Health Care System Sioux Falls	Ð		95
TENNESSEE			
Erlanger Medical Center Chattanooga 🕒 <table-cell> 🕕 💭 💭 🕕</table-cell>			40
Jackson-Madison County General Hospital Jackson	0		30
CHOICES Memphis Memphis	•		90
VA Mountain Home Medical Center/Johnson City Mountain Home 🕕 🌓 🌑 🕙 🔍	0		45
VA Tennessee Valley Healthcare System Murfreesboro Murfreesboro	•		90
Uanderbilt Hospital and Clinics Nashville	•		100
TEXAS			
VA Amarillo Health Care System Amarillo II Care System Amarillo	0		55
• RBJ Health Center Austin • • • • •	•		80
Parkland Memorial Hospital Dallas Dallas Dallas	•		95
University of Texas Southwestern Medical Center Dallas I I I I I I I I I I I I I I I I I I I	•		50
 VA North Texas Health Care System Dallas Dallas 	0		95
E Project Vida Health Center El Paso	•		100
Providence Memorial Hospital El Paso • • • • • • •	0		65
VA El Paso Health Care System El Paso • • • • • • • • • • • • • • • • • • •	0		35
University of Texas Medical Branch Hospitals Galveston Galveston Galveston	•		90
VA Texas Valley Coastal Bend Health Care System Harlingen	0		70

●/● Full Score | ●/● Partial Score | ○/○ No Score | ● -25 points | blank space = not applicable

			1			2	3	4			
Rank	Facility Name	City	0 Patient std 00-Discrimination	Equal Visitation	Employment Non-Discrimination	0 Training in LGBTQ stient Centered Care	00 Patient Services and Support	00 Employee Benefits and Policies	0 Patient & Community std Engagement	Responsible Citizenship	Grand Total (Sum)
	Valley Baptist Medical Center - Harlingen	Harlingen		•				20 pts		20 pts	40
	Houston Northwest Medical Center	Houston	0			0	0		0		40
	Texas Children's Hospital	Houston				0	0		0		35
	University of Texas M.D. Anderson Cancer Center	Houston	•	•		0	0	0			40
	VA Michael E. DeBakey Medical Center	Houston	0								90
	Metropolitan Methodist Hospital	San Antonio									100
	Reproductive Medicine Associates of Texas	San Antonio		-			0	0			45
	VA South Texas Health Care System	San Antonio					•	•			100
_	VA Central Texas Veterans Health Care System	Temple	0				0				65
	UTAH										
	VA Salt Lake City Health Care System	Salt Lake City	•	•	•		•	•	•		100
	VERMONT			-					-		
	University of Vermont Medical Center	Burlington	•	•	•	0		•	•		75
•	VA White River Junction Medical Center	White River Junction	_				•				80
	VIRGINIA										
	University of Virginia Medical Center	Charlottesville			•	0		•	Ð		60
	Dominion Hospital	Falls Church	•	•		0	0	0	0		35
	VA Hampton Medical Center	Hampton	•				•		•		100
	Novant Health UVA Health System Haymarket Medical Center	Haymarket	•	•	•	•	•	•	•		100
	Rappahannock General Hospital	Kilmarnock	•	•	•		0	•	0		75
	Novant Health UVA Health System Prince William Medical Center	Manassas	•	•	•	•	•	•	•		100
	Bon Secours Memorial Regional Medical Center	Mechanicsville	•				•	•	0		75
	Bon Secours St. Francis Medical Center	Midlothian	•	•	•	•	0	•	0		75
	Mary Immaculate Hospital	Newport News	•	•	•		0	•	0		60
	Bon Secours-DePaul Medical Center	Norfolk	•	•	•		0	•	0		55
	Bon Secours Maryview Medical Center	Portsmouth	•	•	•		0	•	0		55
•	Bon Secours St. Mary's Hospital	Richmond	•	•	•	•	0	•	•		80
	Bon Secours-Richmond Community Hospital	Richmond	•	•	•		0	•	0		75
•	VA Hunter Holmes McGuire Medical Center	Richmond	0	•	•		•	•	•		85
•	VA Salem Medical Center	Salem	•	•	•		•	•	•		80
	WASHINGTON										
•	Skagit Valley Hospital	Mount Vernon	•	•	•	•	•	•			80
	Jefferson Healthcare	Port Townsend	•	•	•	•	•	•	•		100
	UW Medicine/Valley Medical Center	Renton	•	•	•		•	•	•		100
	Seattle Cancer Care Alliance	Seattle	•	٠	•	•	0	•	•		65
	Seattle Children's Hospital	Seattle	•	•	•		•	•	•		100
	University of Washington Medical Center	Seattle	•	•	•	•	•	•	•		100
	UW Medicine/Harborview Medical Center	Seattle	•	•	•		•	•			100
	UW Medicine/Northwest Hospital & Medical Center	Seattle	•	•	•	•	•	•	•		100

●/● Full Score | ●/● Partial Score | ○/○ No Score | ● -25 points | blank space = not applicable

			1			2	3	4			
Rank	Facility Name	City	Datient Non-Discrimination	Equal Visitation	Employment Non-Discrimination	0 Training in LGBTQ patient Centered Care	00 Patient Services and Support	00 Employee Benefits and Policies	Datient & Community Std 01 Std 01	sta 25- Gitizenship	Grand Total (Sum)
	VA Puget Sound Health Care System	Seattle	•••	••••	•	•••	•••	•	0		50
	Virginia Mason Medical Center	Seattle	•						•		75
	Legacy Salmon Creek Medical Center	Vancouver	•	•	•	•	•	•	•		100
	Cedar River Clinics	Yakima	•		•	•	•	•	•		100
	WEST VIRGINIA										
	VA Beckley Medical Center	Beckley	0		•	0			0		45
	VA Clarksburg - Louis A. Johnson Medical Center	Clarksburg	0	O	•	0	•	•	0		45
•	VA Huntington Medical Center	Huntington	•	•	•	•	•	•	0		90
	VA Martinsburg Medical Center	Martinsburg	•	•	•	•	•	•	•		100
	WISCONSIN										
	St. Clare Hospital	Baraboo	•		•	0	0		•		40
	Hudson Hospital and Clinic	Hudson	•	•	•	0	0	•	0		45
	NorthLakes Community Clinic	Iron River	•		•	•	•	•	•		100
	St. Mary's Janesville Hospital	Janesville	•	•	•	0	0		•		40
	American Family Children's Hospital	Madison	•	•	•	•	•	•	•		100
	St. Mary's Hospital	Madison	•		•	0	0		•		40
	University of Wisconsin Hospital and Clinics	Madison	•	•	•	•	•	•	•		100
	UW Health at the American Center	Madison	•	•			•	•	•		100
	VA William S. Middleton Memorial Veterans Hospital	Madison	•	•	•	•	•	•	•		100
•	Community Memorial Hospital	Menomonee Falls	•	•		•	•	•	•		85
	AIDS Resource Center of Wisconsin	Milwaukee	•		•	•	•	•	•		100
	Froedtert Memorial Lutheran Hospital	Milwaukee	•	•		•	•	•	•		100
	VA Clement J. Zablocki Medical Center	Milwaukee	•	•	•	•	•	•	•		100
	Westfields Hospital	New Richmond	0	•	0	0	0		0		25
	VA Tomah Medical Center	Tomah	•	•			•	•	0		65
•	St. Joseph's Hospital	West Bend	•	•	•	•	•	•	•		85
	WYOMING										
	VA Cheyenne Medical Center	Cheyenne	•	Ð	•	0			0		45
	VA Sheridan Medical Center	Sheridan	•	•		0	0		0		35



A Decade of Partners

The Human Rights Campaign would like to acknowledge the following partners that have helped us achieve so much progress over the past decade.



Our Founding and Endorsing Partner

The HEI was initially founded and organized as a joint project with **GLMA: Health Professionals Advancing LGBT Equality** (previously known as the Gay & Lesbian Medical Association). GLMA has served as an endorsing partner of the HEI since 2010.







Our Funding Partners

Pfizer Inc. has generously supported the HEI since 2010.

PhRMA has generously supported the HEI since 2013.

The Coca-Cola Foundation provided generous support for the HEI in 2012, 2013, 2014 and 2016.

In addition to the corporate partners listed above, **HRC's Federal Club Council members**, our major donors, are among the most invested stakeholders in this work. Through their generosity, they support the groundbreaking work of the HRC Foundation, which includes the Healthcare Equality Index.

1,200+

Our Participating Organization Partners

Of course, the HEI would not exist without the many healthcare facilities and health systems that participate in the HEI. **More than 1,200 facilities nationwide have participated in the HEI in some way over the years.** We greatly appreciate their participation and their efforts to make their facilities more LGBTQ inclusive and welcoming.

About the HRC Foundation Health & Aging Program

The Healthcare Equality Index is a project of the Health & Aging Program at the Human Rights Campaign Foundation. In addition to the HEI, the Health & Aging Program researches, develops and advocates for LGBTO health and aging initiatives at the federal, state and local levels, and provides support to institutions seeking to enhance LGBTO wellbeing via education, policy, research and technical assistance. The Health & Aging Program also includes the HIV Prevention and Health Equity Project, which works to leverage HRC's strengths to help end the HIV epidemic and the stigma surrounding HIV through public education and outreach.

About the Author

Tari Hanneman is the Director of the Health Equality Project at the Human Rights Campaign Foundation. In addition to managing the development and publication of the Healthcare Equality Index, she oversees other projects related to LGBTO health and aging. Tari has more than 20 years of experience in the nonprofit and philanthropic sector, primarily focused in the areas of health and women's issues. She holds a master's degree in public administration with an emphasis on nonprofit management from the University of Southern California, where she also did her undergraduate work – Fight On!

About the HEI Team

Marcos R. Garcia is the Senior Program Manager for the Health & Aging Program at the Human Rights Campaign Foundation. In this role, he engages directly with hospitals and other healthcare facilities nationwide to identify and improve LGBT-inclusive policies and practices. Marcos also manages all aspects of the HEI database and survey implementation. Born and raised in New Jersey, Marcos holds a bachelor's degree in neuroscience and behavior from Columbia University in the City of New York and previously worked at the National Cancer Institute.

Ashley Jeffrey is the Coordinator for the Health & Aging Program at the Human Rights Campaign Foundation. In this role, she fields questions from hospitals and other healthcare facilities nationwide about the HEI process, works on HEI survey review and provides logistical support for the HEI team. She holds a bachelor's degree in urban studies from Washington University in St. Louis.

Acknowledgments

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Thanks to the following Health and Aging Program interns who contributed countless hours researching hospital policies, performing survey review and doing a myriad of other HEI-related tasks: **Madison Brubaker**, **Preston Butler**, **Maya Deane-Polyak** and **Anna Liberman**.

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 Kaiser Permanente, Los Angeles Medical Center

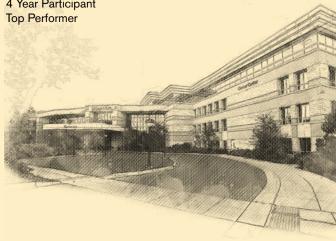
 Los Angeles, CA

 O'Permitter

 Leader in LGBTO

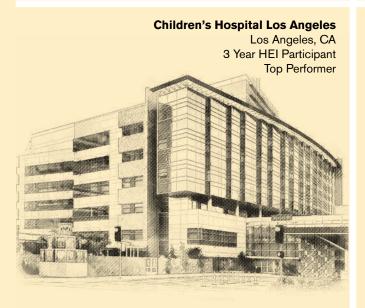
 Heithcare Equality

Billings Clinic Billings, MT 4 Year Participant Top Performer



Mosaic Life Care at St. Joseph Saint Joseph, MO 2 Year HEI Participant





El Rio Community Health Center Tucson, AZ 2 Year HEI Participant Leader in LGBTQ Healthcare Equality

HEI 2017 Online – 1,619 Evaluated Facilities

Search our new online database to find more than 1,600 healthcare facilities evaluated on their commitment to LGBTQ equality and inclusion. In addition to the 718 facilities listed in Appendix B, you will find another 901 hospitals that the HRC Foundation proactively researched.

As a service to the LGBTQ community, the HRC Foundation researched the policies at hospitals across the U.S. that did not respond to our recent invitations to actively participate in the survey. The 901 hospitals we researched were selected based on a variety of criteria related to size and location: the 100 largest hospitals in the U.S.; the largest hospitals in each of the 50 states, District of Columbia and Puerto Rico; and the largest hospitals within a 25-mile radius of the 50 largest metropolitan areas with significant LGBTQ populations.

HRC Foundation staff researched the patient, visitation and employment non-discrimination policies for each of these hospitals. We exhaustively searched these facilities' public websites for inclusive policies, using search terms such as "non-discrimination," "visitation," "EEO," "bill of rights," "sexual orientation" and "gender identity." HRC Foundation staff searched these facilities' websites much like an internet-savvy potential patient, visitor or applicant would in an attempt to learn whether a hospital had:

- An LGBTQ-inclusive patient non-discrimination policy
- An equal visitation policy
- An LGBTQ-inclusive employment non-discrimination policy

We contacted these hospitals multiple times with our findings to encourage them to submit documentation regarding incorrect policy listings. We also invited these hospitals to actively participate in the HEI 2017.

Search the HEI 2017 Database: www.hrc.org/hei/search

In addition to our all-new database search where you will find individual report cards for each hospital, you can also search for HEI-evaluated hospitals on our interactive Google map.

Search the HEI 2017 Map: www.hrc.org/hei/interactive-map

How We Obtained Information for the 2017 Report

The HEI criteria was assessed for the 590 healthcare facilities that actively participated in the Healthcare Equality Index. In order for a facility to actively participate, a facility representative must have completed and submitted the free online HEI survey. The data shown throughout this report was aggregated from these surveys. Invitations for the HEI 2017 survey were emailed in June 2016, and the deadline to submit completed surveys was September 30, 2016.

The survey aims to highlight and encourage the use of best practices and policies for LGBTQ-inclusive care by providing links to sample policies, requirements from the Centers for Medicaid and Medicare Services, recommendations from The Joint Commissions, and other guidance from the HRC website. Throughout the open survey period, HRC Foundation Health and Aging Program staff provided additional assistance and advice to help facility representatives complete the survey. Once submitted, HRC Foundation staff reviewed and verified documentation for appropriate language and consistency with required criteria. If any criteria were not met, the HRC Foundation gave healthcare facilities the opportunity to update the deficiencies and submit the required additional information necessary to meet the criteria.



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HUMAN RIGHTS CAMPAIGN FOUNDATION

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Scripps Memorial Hospital Encin

Scripps Mercy Hospital, Chula Vista camp