organization name: OhioHealth

organization tax status: Tax-exempt not-for-profit

facility name: Mansfield Hospital

facility location: Mansfield, OH

brief description of facility: A 326-bed rural hospital in northern Ohio that admits more than 10,000 patients annually.

the project

brief description of project partially financed by the IRA:
OhioHealth installed two Level-2 electric vehicle (EV) charging stations at Mansfield Hospital to allow for four vehicles to charge at once.

ira funding mechanism(s):
The Alternative Fuel Vehicle Refueling Property Credit (§ 30C).

projected benefits of the project:
We expect to receive a direct payment equal to 30% of the cost of the qualified refueling property from § 30C. The stations will also provide fleet charging infrastructure for our vehicles to charge overnight, therefore allowing this site to now switch to a low/zero emissions fleet – saving operational dollars and emitting zero tailpipe emissions.

if the project is already in place, any realized benefits:
The community is benefiting from EV charging available at no cost during the day with hospital fleet able to charge overnight. The stations are also a visual indicator of our investments in sustainable technologies and match our hospital’s newly received Energy Star certification.

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Advice and Guidance

What influenced your organization’s decision to pursue this project?
As a White House/HHS Health Sector Climate Pledge Signee, OhioHealth is already working towards reducing our emissions, but the IRA made our efforts a lot more actionable. We decided on this project location because the presence of EV charging stations will allow more physicians using personal EVs to commute out to rural hospitals to practice. There is also an important equity piece to the project because rural communities often don’t have any charging stations, much less free charging stations, so I think we’re offering our community a great benefit while also supporting our emissions reduction goals.

How did the IRA affect your decision-making about this project?
Mansfield Hospital is an older hospital in our system, which requires capital dollars to be prioritized for other infrastructure needs. However, with the credits available from § 30C, we were able to secure capital funding for charging stations at this location.

Looking back, is there anything you wish you had known when you were starting to consider this project?
It will be helpful to include language from the relevant IRA tax credit in the bidding process so that you can be sure that you are meeting all of the requirements to receive the maximum credit allowance. Also, there is a funding gap between when the project was finished and when we will receive the credit. It is a short gap, but possible gap funding options are something to consider when leveraging these credits.

What advice would you give someone pitching a similar project to their leadership or board?
One thing that worked for us was emphasizing that we have a fiduciary responsibility to use available IRA funds. We also discussed how leveraging federal incentives for deferred maintenance can help offset costs for projects we need to do anyway. Finally, we always stressed that investing in this infrastructure supports our community’s, associates’, and fleet’s ability to support low/zero emissions and therefore cleaner air. We suggest that you start by creating a task force of appropriate stakeholders and implementing monthly meetings to keep conversations moving. If you are already working towards meeting certain energy efficiency and sustainability goals, the IRA presents great opportunities to achieve those goals, especially at locations with less capital.

You can contact OhioHealth by emailing allegra.wiesler@ohiohealth.com.

For more information on the Alternative Fuel Vehicle Refueling Property Credit and other IRA opportunities, please visit the Quickfinder for Leveraging the Inflation Reduction Act for the Health Sector.