

FISCAL YEAR 2023

Kaiser Foundation Hospitals in California

REDWOOD CITY Northern California Region



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I. Introduction and Background

A. About Kaiser Permanente

Kaiser Permanente is an integrated health care delivery system comprised of Kaiser Foundation Hospitals, Kaiser Foundation Health Plan, and physicians in the Permanente Medical Groups. For 75 years, Kaiser Permanente has been committed to shaping the future of health and health care — and helping our members, patients, and communities experience more healthy years. We are recognized as one of America's leading health care providers and nonprofit health plans.

Kaiser Permanente is committed to helping shape the future of health care. Founded in 1945, Kaiser Permanente has a mission to provide high- quality, affordable health care services and to improve the health of our members and the communities we serve. We currently serve 12.6 million members in 8 states and the District of Columbia. Care for members and patients is focused on their total health and guided by their personal Permanente Medical Group physicians, specialists, and team of caregivers. Our expert and caring medical teams are empowered and supported by industry-leading technology advances and tools for health promotion, disease prevention, state-of-the-art care delivery, and world-class chronic disease management. Kaiser Permanente is dedicated to care innovations, clinical research, health education, and the support of community health.

B. About Kaiser Permanente Community Health

At Kaiser Permanente, we recognize that where we live and how we live has a big impact on our health and well-being. Our work is driven by our mission: to provide high-quality, affordable health care services and to improve the health of our members and our communities. It's also driven by our heritage of prevention and health promotion, and by our conviction that good health is a fundamental right.

As the nation's largest nonprofit, integrated health system, Kaiser Permanente is uniquely positioned to improve the health and wellbeing of the communities we serve. We believe that being healthy isn't just a result of high-quality medical care. Through our resources, reach, and partnerships, we are addressing unmet social needs and community factors that impact health. Kaiser Permanente is accelerating efforts to broaden the scope of our care and services to address all factors that affect people's health. Having a safe place to live, enough money in the bank, access to healthy meals and meaningful social connections is essential to total health. Now is a time when our commitment to health and values compel us to do all we can to create more healthy years for everyone. We also share our financial resources, research, nurses and physicians, and our clinical practices and knowledge through a variety of grantmaking and investment efforts.

As we reflect on how 2020 changed the world, we must recognize that communities everywhere are coping with unprecedented challenges magnified by the COVID-19 pandemic and a renewed struggle for racial equity and social justice.

Through our continued focus on expanding our community health approach we laid the foundation for an acceleration of work to meet the challenges posed by the public health crises we now face. We dedicated ourselves to improving the social health of our 12.6 million members and the millions of people who live in the communities we serve.

Learn more about Kaiser Permanente Community Health at https://about.kaiserpermanente.org/community-health.

For information on the CHNA, refer to the <u>2022 Community Health Needs Assessments and Implementation Strategies</u> (http://www.kp.org/chna).

C. Purpose of the Report

Since 1996, Kaiser Foundation Hospitals (KFH) in Northern and Southern California (NCAL, SCAL) have annually submitted to the California Department of Health Care Access and Information (HCAI) a Consolidated Community Benefit Plan, commonly referred to as the SB 697 Report (for Senate Bill 697 which mandated its existence). This plan fulfills the annual year-end community benefit reporting regulations under California Health and Safety Code, Section 127340 et seq. The report provides detailed information and financial data on the Community Benefit programs, services, and activities provided by all KFH hospitals in California.

II. Overview and Description of Community Benefit Programs Provided

A. California Kaiser Foundation Hospitals Community Benefit Financial Contribution

In California, KFH owns and operates 36 hospitals: 21 community hospitals in Northern California and 15 in Southern California, all accredited by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO). KFH hospitals are located in Anaheim, Antioch, Baldwin Park, Downey, Fontana, Fremont, Fresno, Irvine, Los Angeles, Manteca, Modesto, Moreno Valley, Oakland, Ontario, Panorama City, Redwood City, Richmond, Riverside, Roseville, Sacramento, San Diego, San Francisco, San Jose, San Leandro, San Marcos, San Rafael, Santa Clara, Santa Rosa, South Bay, South Sacramento, South San Francisco, Vacaville, Vallejo, Walnut Creek, West Los Angeles, and Woodland Hills.

In 2023, Kaiser Foundation Hospitals in Northern and Southern California Regions provided a total of \$1,156,318,352 in Community Benefit for a diverse range of community projects, medical care services, research, and training for health and medical professionals. These programs and services are organized in alignment with SB697 regulations:

- Medical Care Services for Vulnerable Populations
- Other Benefits for Vulnerable Populations
- Benefits for the Broader Community
- Health, Research, Education and Training

A breakdown of financial contributions is provided in Tables A. Note that 'non-quantifiable benefits' will be highlighted in the Year end Results section of KFH Community Benefit Plan, where applicable.

Table A

2023 Community Benefits Provided by Kaiser Foundation Hospitals in California (Endnotes in Appendix)

Category	Total Spend	
Medical Care Services for Vulnerable Populations		
Medi-Cal shortfall ¹	\$487,302,412	
Charity care: Charitable Health Coverage Programs	\$869	
Charity care: Medical Financial Assistance Program ²	\$397,648,749	
Grants and donations for medical services ³	\$26,274,860	
Subtotal	\$911,226,891	
Other Benefits for Vulnerable Populations		
Watts Counseling and Learning Center ⁴	\$3,749,364	
Educational Outreach Program ⁴	\$887,210	
Youth Internship and Education programs ⁵	\$3,957,337	
Grants and donations for community-based programs ⁶	\$17,168,458	
Community Benefit administration and operations ⁷	\$11,527,980	
Subtotal	\$37,290,349	
Benefits for the Broader Community	•	
Community health education and promotion programs	\$1,282,138	
Community Giving Campaign administrative expenses	\$408,191	
Grants and donations for the broader community ⁸	\$12,993,928	
National Board of Directors fund	\$742,729	
Subtotal	\$15,426,986	
Health Research, Education, and Training		
Graduate Medical Education ⁹	\$119,236,704	
Non-MD provider education and training programs ¹⁰	\$32,312,529	
Grants and donations for the education of health care professionals ¹¹	\$476,947	
Health research	\$40,347,947	
Subtotal	\$192,374,126	
TOTAL COMMUNITY BENEFITS PROVIDED	\$1,156,318,352	

B. Medical Care Services for Vulnerable Populations

Medi-Cal

Kaiser Permanente provides coverage to Medi-Cal members in 22 counties in California through both direct contracts with the Department of Health Care Services (DHCS), and through delegated arrangements with other Medi-Cal managed care plans (MCPs). Kaiser Permanente also provides subsidized health care on a fee-for-service basis for Medi-Cal beneficiaries not enrolled as KFHP members. Reimbursement for some services is usually significantly below the cost of care and is considered subsidized care to non-member Medi-Cal fee-for-service patients.

Charitable Health Coverage

The Charitable Health Coverage program provides health care coverage to low-income individuals and families who don't have access to other public or private health coverage. CHC programs work by enrolling qualifying individuals in a Kaiser Permanente Individual and Family Health Plan. Through CHC, members' monthly premiums are subsidized, and members do not have to pay copays or out-of-pocket costs for most care at Kaiser Permanente facilities. Through CHC, members have a medical home that includes comprehensive coverage, preventive services and consistent access through the "front door" of the health delivery system.

Medical Financial Assistance

The Medical Financial Assistance program (MFA) improves health care access for people with limited incomes and resources and is fundamental to Kaiser Permanente's mission. Our MFA program helps low-income, uninsured, and underinsured patients receive access to care. The program provides temporary financial assistance or free care to patients who receive health care services from our providers, regardless of whether they have health coverage or are uninsured.

C. Other Benefits for Vulnerable Populations

Watts Counseling and Learning Center (SCAL)

Since 1967, the Watts Counseling and Learning Center (WCLC) has been a valuable community resource for low-income, innercity families in South Central Los Angeles. WCLC provides mental health and counseling services, educational assistance to children with learning disabilities, and a state-licensed and nationally accredited preschool program. Kaiser Permanente Health Plan membership is not required to receive these services and all services are offered in both English and Spanish. This program primarily serves the KFH-Downey, KFH-South Bay and KFH-West LA communities.

Educational Outreach Program (SCAL)

Since 1992, Educational Outreach Program (EOP) has been empowering children and their families through several year-round educational, counseling, and social programs. EOP helps individuals develop crucial life-skills to pursue higher education, live a healthier lifestyle through physical activity and proper nutrition, overcome mental obstacles by participating in counseling, and instill confidence to advocate for the community. EOP primarily serves the KFH-Baldwin Park community.

Youth Internship and Education Programs (NCAL and SCAL)

Youth workforce programs such as the Summer Youth Employment Programs, IN-ROADS or KP LAUNCH focus on providing underserved diverse students with meaningful employment experiences in the health care field. Educational sessions and motivational workshops introduce them to the possibility of pursuing a career in health care while enhancing job skills and work performance. These programs serve as a pipeline for the organization and community-at-large, enhancing the future diversity of the health care workforce.

D. Benefits for the Broader Community

Community Health Education and Health Promotion Programs (NCAL and SCAL)

Health Education provides evidence-based clinically effective programs, printed materials, and training sessions to empower participants to build healthier lifestyles. This program incorporates tested models of behavior change, individual/group engagement and motivational interviewing as a language to elicit behavior change. Many of the programs and resources are offered in partnership with community-based organizations, and schools.

Kaiser Permanente Educational Theatre (NCAL and SCAL)

Kaiser Permanente's Educational Theatre has inspired and empowered millions of students and adults in communities to make healthy choices. Educational Theatre offers a wide range of award-winning theatrical productions and interactive workshops to schools throughout the Kaiser Permanente footprint.

Using the power of theatre and storytelling, our programs directly connect with students and adults through relatable characters and real-life situations. Audiences see themselves represented onstage in our culturally and ethnically diverse casts allowing them to connect with the narrative and educational messages in a meaningful way. Our team builds on this connection, inspiring students, and adults alike to make healthy choices and build stronger communities.

E. Health Research, Education, and Training Programs

Graduate Medical Education (GME)

The Graduate Medical Education (GME) program provides training and education for medical residents and interns in the interest of educating the next generation of physicians. Residents are offered the opportunity to serve a large, culturally diverse patient base in a setting with sophisticated technology and information systems, established clinical guidelines and an emphasis on preventive and primary care. The majority of medical residents are studying within the primary care medicine areas of family practice, internal medicine, obstetrics-gynecology, pediatrics, preventive medicine, and psychiatry.

Non-MD Provider Education and Training Programs

Kaiser Permanente provides a range of training and education programs for nurse practitioners, nurses, radiology and sonography technicians, physical therapists, post-graduate psychology and social work students, pharmacists, and other non-physician health professionals. This includes Northern California Region's Kaiser Permanente School of Allied Health Sciences, which offers 18-month training programs in sonography, nuclear medicine, and radiation therapy, and Southern California Region's Hippocrates Circle Program, which was designed to provide youth from under-represented communities and diverse backgrounds with an awareness of career opportunities as a physician.

Health Research

Kaiser Permanente's research efforts are core to the organization's mission to improve population health, and its commitment to continued learning. Kaiser Permanente researchers study critical health issues such as cancer, cardiovascular conditions, diabetes, behavioral and mental health, and health care delivery improvement. Kaiser Permanente's research is broadly focused on three themes: understanding health risks; addressing patients' needs and improving health outcomes; and informing policy and practice to facilitate the use of evidence-based care.

Kaiser Permanente is uniquely positioned to conduct research due to its rich, longitudinal, electronic clinical databases that capture virtually complete health care delivery, payment, decision-making and behavioral data across inpatient, outpatient, and emergency department settings.

III. Community Served

A. Kaiser Permanente's Definition of Community Served

Kaiser Permanente defines the community served by a hospital as those individuals residing within its hospital service area. A hospital service area includes all residents in a defined geographic area surrounding the hospital and does not exclude low-income or underserved populations.

B. Demographic Profile of Community Served

KFH-Redwood City service area demographic profile

Total population:	538,229
American Indian/Alaska Native	0.1%
Asian	22.4%
Black	2.3%
Hispanic	22.5%
Multiracial	4.2%
Native Hawaiian/other Pacific Islander	1.2%
Other race/ethnicity	0.3%
White	46.9%
Under age 18	22.3%
Age 65 and over	15.2%

SOURCE: AMERICAN COMMUNITY SURVEY, 2015-2019

C. Map and Description of Community Served

KFH-Redwood City service area

Kaiser Permanente hospital
 Kaiser Permanente medical offices



The KFH-Redwood City service area covers the central, south, and coast-side subarea portions of San Mateo County. Cities include but are not limited to San Mateo, Belmont, East Palo Alto, El Granada, Foster City, Half Moon Bay, portions of Menlo Park, North Fair Oaks, Pescadero, Redwood City, and San Carlos.

IV. Description of Community Health Needs Addressed

The following are the health needs KFH-Redwood City is addressing during the 2023-2025 Implementation Strategy period. For information about the process and criteria used to select these health needs and the health needs that were not selected (and the rationale), please review the 2022 CHNA Report and the 2023-2025 Implementation Strategy Report. (http://www.kp.org/chna).

A. Health Needs Addressed

- 1. Income & employment: Economic opportunity provides individuals with jobs, income, a sense of purpose, and opportunities to improve their economic circumstances over time. People with steady employment are less likely to have an income below poverty level and more likely to be healthy. Those not having enough resources to meet daily needs such as safe housing and enough food to eat are more likely to experience health-harming stress and die at a younger age. In certain ZIP codes of the Redwood City service area, there are higher percentages of children living in poverty, higher unemployment rates, and less access to jobs than the rest of the area as well as state and national averages. Additionally, there are racial disparities related to income and employment such as Pacific Islander and Latinx residents earning less than a third per capita than white residents. Interviewed community leaders shared that the COVID-19 pandemic has exacerbated these disparities due to families losing jobs and being unable to afford basic needs. They also identified strategies to address income and employment needs such as workforce training, wraparound services, community partnerships and advocating for policies such as universal home visiting, universal childcare, and a universal basic income.
- 2. Mental & behavioral health: Mental health affects all areas of life, including a person's physical well-being, ability to work and perform well in school and to participate fully in family and community activities. Anxiety, depression, and suicide ideation are on the rise due to the COVID-19 pandemic, particularly among Black and Latinx Americans. Communities across the country are experiencing a critical lack of capacity to meet the increased demand for mental health services. Though the Redwood City service area fares better than state and national averages with lower rates of deaths of despair and higher rates of mental health providers, interviewed community leaders highlighted the need for more culturally responsive services and providers who are culturally and linguistically representative of the communities they serve. Additionally, there are disparities related to mental and behavioral health, such as a higher percentage of adults identifying as LGBTQ in San Mateo County having thought seriously about committing suicide, compared to heterosexual adults. Interviewed community leaders shared that the isolation, trauma, and stress of the COVID-19 pandemic has notably exacerbated the mental health of youth, seniors, families with young children and undocumented families. They also identified strategies to address mental and behavioral health needs, such as better coordination between providers, partnering with schools to distribute mental health resources to families, and training and hiring mental health providers who are culturally and linguistically responsive to the local community.
- 3. Housing: Having a safe place to call home is essential for the health of individuals and families. American families' greatest single expenditure is housing, and for most homeowners, their most significant source of wealth. Housing costs have soared in recent years, with many families experiencing difficulty paying for housing. Black and Latinx renters in particular are more likely

to live in cost-burdened households and face housing instability. In the Redwood City service area, there is a marked shortage of affordable housing and an increase in the homeless count between 2017 and 2019. Additionally, there are disparities related to housing such as Latinx, Black and Pacific Islander families having disproportionately higher housing cost burden. Interviewed community leaders shared that the general wealth of San Mateo County often overshadows pockets of struggling low-income families that may resort to moving outside the Bay Area and bearing the burden of long commutes to work or school. They also identified strategies to address housing needs such as innovative efforts to prevent homelessness, culturally responsive wraparound services, and care coordination.

4. Access to care: Access to comprehensive, quality health care services — including having insurance, local care options, and a usual source of care — is important for ensuring quality of life for everyone. Insurance by itself does not guarantee access to appropriate care, and many community members experience barriers related to language, transportation options, and differential treatment based on race, as well as access to fewer health care resources. Certain ZIP codes within the Redwood City service area, specifically the North Fair Oaks, Redwood City and Coastside communities, have a larger percentage of uninsured children and/or residents than the service area as a whole. Additionally, there are racial disparities related to access to care such as Latinx populations reporting the lowest rate of people with a usual source of care in the county and Black residents reporting the highest rate of preventable hospitalizations. Interviewed community leaders described provider bias and community distrust of the healthcare system as barriers to accessing care for marginalized communities, elevated by the COVID-19 pandemic which made families even more hesitant to go to healthcare facilities to receive care. They also identified strategies to improve access to care such as better coordination of care across healthcare and social services, providing more culturally and linguistically specific resources, and partnering with schools to increase families' access to health services.

B. Health Needs Not Addressed

The significant health needs identified in the 2022 CHNA that KFH-Redwood City does not plan to address are shown in the table below, along with the reasons for not addressing those needs.

Reason	Education	Structural racism
Community does not prioritize this need over other issues	х	
This need is incorporated into other needs selected		х
Aspects of this need will be addressed in strategies for other needs	х	х

V. Year-End Results

A. Community Benefit Financial Resources

Total Community Benefit expenditures are reported as follows:

- Medical care services for vulnerable populations include unreimbursed inpatient costs for participation in Kaiser Permanentesubsidized and government-sponsored health care insurance programs.
- Since 2006, figures for subsidized products have been reported on a cost-basis (e.g., the difference of total revenues collected for services less direct and indirect expenses).
- Grant and donations are recorded in the general ledger in the appropriate amount and accounting period on an accrual, not cash basis. The amount reported reflects hospital-specific, unreimbursed expenditures. When hospital-specific expenditures are not available, dollars are allocated to each hospital based on the percentage of KFHP members.
- The unreimbursed portion of medical, nursing, and other health care professional education and training costs are included.

Resource allocations are reported, as follows:

- Financial expenditures are reported in exact amounts, if available, by hospital service area.
- If exact financial expenditure amounts are not available by hospital service area, then regional expenses are allocated proportionally based on KFHP membership or other quantifiable data.

Table B

KFH-Redwood City Community Benefits Provided in 2023 (Endnotes in Appendix)

Category	Total Spend
Medical Care Services for Vulnerable Populations	
Medi-Cal shortfall ¹	\$7,462,487
Charity care: Charitable Health Coverage programs	\$26
Charity care: Medical Financial Assistance Program ²	\$14,298,639
Grants and donations for medical services ³	\$389,948
Subtotal	\$22,151,100
Other Benefits for Vulnerable Populations	
Youth Internship and Education programs ⁵	\$131,981
Grants and donations for community-based programs ⁶	\$279,992
Community Benefit administration and operations ⁷	\$155,373
Subtotal	\$567,346
Benefits for the Broader Community	
Community Giving Campaign administrative expenses	\$6,973
Grants and donations for the broader community ⁸	\$399,056
National Board of Directors fund	\$13,202
Subtotal	\$419,231
Health Research, Education, and Training	
Graduate Medical Education ⁹	\$219,051
Non-MD provider education and training programs ¹⁰	\$997,088
Health research	\$977,193
Subtotal	\$2,193,331
TOTAL COMMUNITY BENEFITS PROVIDED	\$25,331,007

B. Examples of Activities to Address Selected Health Needs

All Kaiser Foundation Hospitals (KFH) carefully consider the evidence-base when determining which goals, strategies, and related activities would be most effective in addressing priority health needs. It is anticipated that successful implementation of key activities (programs, grants, collaboration, and/or in-kind assets), tied to key goals and strategies, can contribute toward improving the priority health needs in the community. For information on the goals and strategies that were selected for each health need, please refer to the 2022 CHNA Report and the 2023-2025 Implementation Strategy Report (http://www.kp.org/chna).

Mechanisms for monitoring progress are tailored to each activity and may include the collection and documentation of tracking measures such as number of grants awarded, total investments, and number of people reached/served. Kaiser Permanente also conducts evaluation of larger grant initiatives to understand both progress and outcomes. In addition to internal monitoring and evaluation, Kaiser Permanente requires grantees to track and report outcomes of the projects for which they have received funding.

The tables below provide highlights for a select number of programs, grants, collaboration and/or assets that aims to address the identified health needs for KFH-Redwood City. The examples provided below are illustrations and not an exhaustive list.

In addition to the highlights outlined in the tables to address specific health needs, Kaiser Permanente NCAL provided significant contributions to the East Bay Community Foundation (EBCF) in the interest of funding effective long-term, strategic community benefit initiatives. These EBCF-managed funds, however, are not included in the financial totals for 2023.

Need	Examples of most impactful efforts	
Access to Care	Medi-Cal and Charity Care: In 2023, KFH-Redwood City provided access to care to 6,983 Medi-Cal members and provided financial assistance to 5,810 people through the Medical Financial Assistance (MFA) program.	
	Access to Care: The mission of the Ravenswood Family Health Network (RFHN) is to improve the health of the community by providing culturally sensitive, integrated primary and preventive health to all. Our partnership with RFHN supports their work to enroll patients into healthcare coverage programs and provide care, regardless of ability to pay or immigration status. The project also includes collaborating with community partners to address the social determinants of health. This project is expected to serve low-income individuals in the East Palo Alto area of San Mateo County. (This grant impacts 1 hospital service area in NCAL)	
	Umoja Health's Medical Redeterminations Outreach and Enrollment Efforts: The mission of the Bay Area Community Health Advisory Council is to increase awareness of health issues affecting African Americans and diverse communities, advocate for health education and access to resources, and actively encourage accountability for healthy lifestyles. Our partnership with the Bay Area Community Health Advisory Council supports their work to convene the Umoja Health collaborative. Work focuses on increasing enrollment in coverage programs for low-income individuals/families without coverage, especially due to Medi-Cal redeterminations. Outreach provides linguistic and culturally proficient health education to communities of color and community-based organizations that support enrollment in the North San Mateo County and South County regions. Our partnership with the Bay Area Community Health Advisory Council supports their work as one of 6 organizations in a cohort of grantees funded to support Medi-Cal redeterminations. This project is expected to serve community members in San Mateo County. (This grant impacts 2 hospital service areas in NCAL)	
Income & Employment	Family Needs Safety Net Program: The mission of Coastside Hope is to provide necessities to enhance the quality of life for all neighbors. Our partnership with Coastside Hope supports ongoing services to prevent homelessness by meeting clients' basic needs for food, clothing, shelter, and fundamental utilities. The Family Needs Safety Net Program will increase meal and nutrition distribution and purchasing power through assistance with CalFresh applications. This project is expected to serve 3,000 individuals in low-income communities in Half Moon Bay, El Granada, Moss Beach, and Montara. (This grant impacts 1 hospital service area in NCAL)	

Need	Examples of most impactful efforts	
	High School Completion & Post Secondary Graduation and Career Pathways: The mission of the Boys & Girls Clubs of The Peninsula is to empower the youth in our community with equitable access to social, academic, and career opportunities to thrive. Boys & Girls Clubs of The Peninsula was awarded \$60,000 over a year. The High School & Post-Secondary Success program increases graduation rates for youth of color in San Mateo County communities disproportionately experiencing inequities. Through academic support, mentoring, college readiness, career pathway opportunities, individualized coaching throughout college, and onsite mental health services, students develop skills and support networks. This project is expected to serve 490 individuals. (This grant impacts 2 hospital service areas in NCAL)	
	2023 Building Local Outreach Capacity for CalFresh Enrollment (BLOC) Cohort: The mission of the Second Harvest of Silicon Valley is to end hunger by ensuring that anyone who needs a healthy meal can get one. Second Harvest is one of 18 community-based organizations in Northern California's BLOC cohort implementing innovative outreach and enrollment strategies that help eligible individuals apply for or retain CalFresh and Medi-Cal benefits. Second Harvest of Silicon Valley will improve food security and economic stability for low-income children and families by distributing nutritious food (including fresh produce, high-quality protein, and healthy grains) with schools and community agency partners in San Mateo and Santa Clara counties. Staff screen clients for CalFresh eligibility and submit applications for eligible households, supporting clients' self-sufficiency and long-term security. (This impacts 3 hospital service areas in NCAL)	
Mental & Behavioral Health	Building Capacity to Support Mental Health of Youth in the Dependency and Juvenile Justice Systems: The mission of Court Appointed Special Advocates (CASA) of San Mateo County is to ensure that all abused and neglected children under the protection of the court have a consistent, caring adult who speaks on their behalf and helps them reach their full potential. Our partnership with CASA supports improvements in the systems of care for these youth. Innovations include increased training on mental health, trauma-informed care, and adverse childhood experiences (ACEs) mitigation; establishing partnerships with community organizations specializing in mental health training and services; and building resources and a support network for staff and volunteers working with youth who have mental health needs. This project is expected to provide 125 youth residing in San Mateo County with an assigned volunteer advocate. (This grant impacts 2 hospital service areas in NCAL)	

Need	Examples of most impactful efforts	
	Mental Health Wellness Program: The mission of Peninsula Bridge is to transform the lives of low-income students by preparing and supporting them for success in college preparatory high school programs and four-year colleges. Our partnership with Peninsula Bridge supports their Mental Health Wellness Program. Low-income youth are provided support in all areas of their lives with individualized one-on-one student mental health counseling services (including crisis intervention) and student and parent mental health education workshops. The program actively helps youth navigate significant challenges and stay engaged in school. This project is expected to serve 600 students and parents. (This grant impacts 1 hospital service area in NCAL)	
	Mobile Mental Health Clinic for Farmworkers: The mission of the Ayudando Latinos a Soñar (ALAS) is to improve social wellness through multicultural practices, mental health care, individualized and collective support (related to education, immigration, and work), and advocacy. ALAS was awarded \$125,000 over a year to expand mental health access programs through the Mobile Mental Health Clinic for Farmworkers. The program provides 1:1 in-person, telehealth, and group counseling services. This project is expected to serve 75 farmworkers. (This grant impacts 1 hospital service area in NCAL)	
Housing	Nurturing Fathers Initiative: The mission of the Human Investment Project, Inc. (HIP Housing) is to invest in human potential by improving the housing and lives of people. Our partnership with HIP Housing supports the Nurturing Fathers Initiative to fill a gap in father-centered social service programming. Low-income fathers are offered housing assistance, case management, and parenting curriculum to ensure families' positive mental, physical, and financial health. This project is expected to serve 5 households. (This grant impacts 2 hospital service areas in NCAL)	
	Integrating Dental Access: The mission of the County of San Mateo's Health Care for the Homeless/Farmworker Health Program is to serve homeless and farmworker individuals and families by ensuring they have access to comprehensive health care; in particular, primary health care, dental health care, and behavioral health services in a supportive, welcoming, and accessible environment. The County of San Mateo was awarded \$75,000 over a year to integrate dental services into the Homeless Navigation Center located in Redwood City. The Center houses individuals experiencing homelessness for up to 90 days and provide an array of services, including case management, re-housing, primary care, and dental care as part of the County's goal to achieve functional zero homelessness. This project is expected to serve 750 individuals. (This grant impacts 2 hospital service areas in NCAL)	

VI. Appendix

Appendix A 2023 Community Benefits Provided by Hospital Service Area in California

NORTHERN CALIFORNIA HOSPITALS		
Hospital	Amount	
Antioch	\$31,299,825	
Fremont	\$11,290,424	
Fresno	\$20,928,037	
Manteca	\$41,130,654	
Modesto	\$22,586,200	
Oakland	\$69,132,545	
Redwood City	\$25,331,007	
Richmond	\$36,688,203	
Roseville	\$48,570,614	
Sacramento	\$78,361,475	
San Francisco	\$35,219,854	
San Jose	\$35,629,222	
San Leandro	\$36,579,806	
San Rafael	\$16,871,517	
Santa Clara	\$54,423,351	
Santa Rosa	\$30,471,515	
South Sacramento	\$59,522,915	
South San Francisco	\$14,393,214	
Vacaville	\$23,431,991	
Vallejo	\$35,420,809	
Walnut Creek	\$24,925,238	
Northern California Total	\$752,208,416	

SOUTHERN CALIFORNIA HOSPITALS		
Hospital	Amount	
Anaheim	\$25,957,244	
Baldwin Park	\$26,269,304	
Downey	\$34,837,164	
Fontana	\$61,085,066	
Irvine	\$5,742,425	
Los Angeles	\$59,171,816	
Moreno Valley	\$11,117,047	
Ontario	\$9,683,018	
Panorama City	\$26,160,525	
Riverside	\$26,225,914	
San Diego (2 hospitals)	\$36,592,118	
San Marcos	\$5,154,330	
South Bay	\$20,830,614	
West Los Angeles	\$38,973,081	
Woodland Hills	\$16,310,271	
Southern California Total	\$404,109,936	

Appendix B

Endnotes

- ¹ Amount includes hospital-specific, unreimbursed expenditures for Medi-Cal Managed Care members and Medi-Cal Fee-for-Service beneficiaries on a cost basis.
- ² Amount includes unreimbursed care provided to patients who qualify for Medical Financial Assistance on a cost basis.
- ³ Figures reported in this section for grants and donations consist of charitable contributions to community clinics and other safety-net providers and support access to care.
- ⁴ Applicable to only SCAL Watts Counseling and Learning Center's service expenses are divided among three hospitals: KFH-Downey, KFH-South Bay, and KFH-West Los Angeles. Educational Outreach Program service expenses are only applicable to KFH-Baldwin Park.
- ⁵ Figures reported in this section are expenses for youth internship and education programs for under-represented populations.
- ⁶ Figures reported in this section for grants and donations consist of charitable contributions to community-based organizations that address the nonmedical needs of vulnerable populations.
- ⁷ The amount reflects the costs of the community benefit department and related operational expenses.
- ⁸ Figures reported in this section for grants and donations are aimed at supporting the general well-being of the broader community.
- ⁹ Amount reflects the net expenditures for training and education for medical residents, interns, and fellows.
- ¹⁰ Amount reflects the net expenditures for health professional education and training programs.
- ¹¹ Figures reported in this section for grants and donations consist of charitable contributions made to external nonprofit organizations, colleges, and universities to support the training and education of students seeking to become health care professionals.