



# Consolidated Community Benefit Plan FISCAL YEAR 2023

Kaiser Foundation Hospitals in California

**SAN FRANCISCO** Northern California Region

Submitted to the California Department of Health Care Access and Information in compliance with Senate Bill 697, California Health and Safety Code Section 127350

# Kaiser Foundation Hospitals (KFH)

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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 [2022 Community Health Needs Assessments and Implementation Strategies](http://www.kp.org/chna) (<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
<b>Medical Care Services for Vulnerable Populations</b>	
Medi-Cal shortfall <sup>1</sup>	\$487,302,412
Charity care: Charitable Health Coverage Programs	\$869
Charity care: Medical Financial Assistance Program <sup>2</sup>	\$397,648,749
Grants and donations for medical services <sup>3</sup>	\$26,274,860
<b>Subtotal</b>	<b>\$911,226,891</b>
<b>Other Benefits for Vulnerable Populations</b>	
Watts Counseling and Learning Center <sup>4</sup>	\$3,749,364
Educational Outreach Program <sup>4</sup>	\$887,210
Youth Internship and Education programs <sup>5</sup>	\$3,957,337
Grants and donations for community-based programs <sup>6</sup>	\$17,168,458
Community Benefit administration and operations <sup>7</sup>	\$11,527,980
<b>Subtotal</b>	<b>\$37,290,349</b>
<b>Benefits for the Broader Community</b>	
Community health education and promotion programs	\$1,282,138
Community Giving Campaign administrative expenses	\$408,191
Grants and donations for the broader community <sup>8</sup>	\$12,993,928
National Board of Directors fund	\$742,729
<b>Subtotal</b>	<b>\$15,426,986</b>
<b>Health Research, Education, and Training</b>	
Graduate Medical Education <sup>9</sup>	\$119,236,704
Non-MD provider education and training programs <sup>10</sup>	\$32,312,529
Grants and donations for the education of health care professionals <sup>11</sup>	\$476,947
Health research	\$40,347,947
<b>Subtotal</b>	<b>\$192,374,126</b>
<b>TOTAL COMMUNITY BENEFITS PROVIDED</b>	<b>\$1,156,318,352</b>

## 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, inner-city 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-San Francisco service area demographic profile](#)

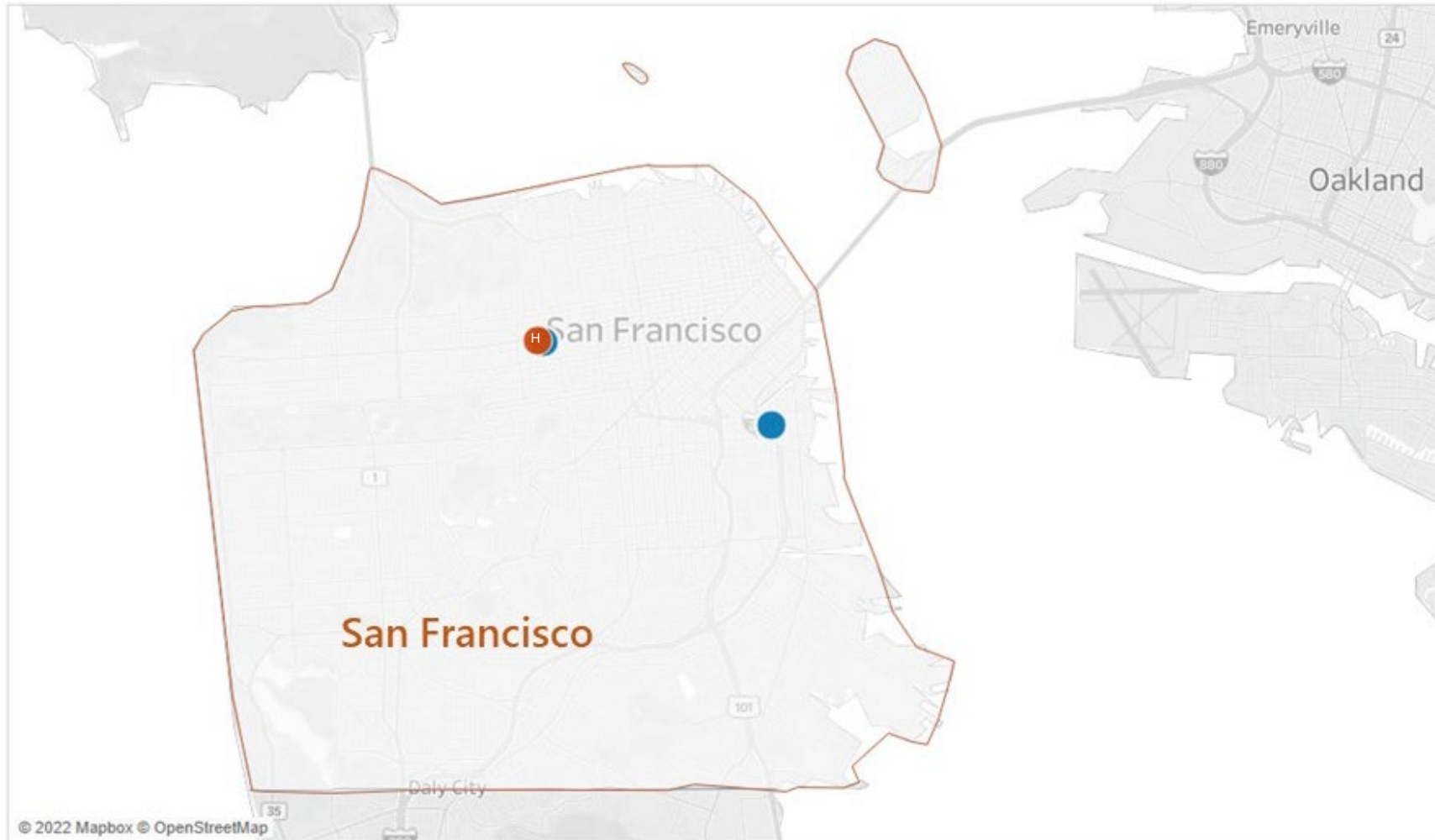
<b>Total population:</b>	<b>881,791</b>
American Indian/Alaska Native	0.2%
Asian	35.5%
Black	4.9%
Hispanic	15.3%
Multiracial	3.8%
Native Hawaiian/other Pacific Islander	0.4%
Other race/ethnicity	0.3%
White	39.6%
Under age 18	13.3%
Age 65 and over	15.3%

SOURCE: AMERICAN COMMUNITY SURVEY, 2015-2019

### C. Map and Description of Community Served

KFH-San Francisco service area

 Kaiser Permanente hospital      Kaiser Permanente medical offices



KFH-San Francisco has a service area that comprises the City and County of San Francisco. The service area also includes a nine-story medical office building in Mission Bay that opened in March 2016.

## IV. Description of Community Health Needs Addressed

The following are the health needs KFH-San Francisco 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). (<http://www.kp.org/chna>).

### A. Health Needs Addressed

1. **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. In the San Francisco service area, there is a higher rate of deaths of despair – those due to suicide, drug overdose and alcoholism – compared to the state average (41.4 compared to 34.3 per 100,000). Additionally, there are disparities related to mental/behavioral health such as Asian Americans being three times less likely than their white counterparts to seek treatment for mental health. Interviewed community leaders shared that the health provider workforce could better reflect the diverse populations of San Francisco, which remains a key barrier to accessing culturally and linguistically appropriate care. For example, community leaders spoke about the importance for Black communities to have mental health providers that look like them and understand intergenerational trauma. Leaders also identified strategies to address mental and behavioral health such as building trust with communities through enhanced collaboration and coordination among local organizations.
2. **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 are more likely to live in cost-burdened households and face housing instability. In the San Francisco service area, only 38 percent of the population own a home (compared to 55 percent statewide) and median rental costs are approximately \$1,986 (compared to \$1,689 statewide). Additionally, San Francisco has a higher proportion of people experiencing homelessness that are transitional age youth or chronically unhoused compared to its peer cities, despite offering more permanent supportive housing units. Interviewed community leaders shared that homes tend to be overcrowded, with multiple tenants living in single rooms. Further, not all populations experience this housing crisis equally, with families residing in Chinatown, Tenderloin, Bayview-Hunters Point, and Outer Mission – along with Vietnamese, Cambodian, and Latinx communities – disproportionately experiencing this shortage. Interviewed community leaders also identified strategies to address housing such as implementing warm handoffs between social service providers and prioritizing affordable housing.
3. **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. In the San Francisco service area, a first glance at indicators measuring access to care (e.g., overall percent uninsured residents, infant deaths, and number of primary care physicians per 100,000) shows that the service area compares favorably to state averages. However, several disparities, such as shorter life expectancy for Native Americans, more preventable hospitalizations for Black and Latinx populations, and disproportionate burden of COVID-19 related deaths by almost all communities of color drive the need for this health need. Interviewed community leaders shared that availability of culturally appropriate and responsive care, particularly considering the COVID-19 pandemic, remains critical. They also identified strategies to address access to care such as hiring diverse staff members and medical providers who are embedded into the communities they serve.

4. **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 the San Francisco service area, income or wealth inequality as measured by the Gini index is higher than state and national averages. Additionally, there are racial disparities related to income and employment such as Black and Latinx residents earning about a third of the income of white residents, per capita. 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 support income and employment such as workforce training and creating career pathways, wraparound services for job seekers, and system-level changes to address structural racism.

## B. Health Needs Not Addressed

The significant health needs identified in the 2022 CHNA that Kaiser Permanente San Francisco Medical Center does not plan to address are shown in the table below, along with the reasons for not addressing those needs.

Reason	Healthy Eating Active Living opportunities	Structural racism
Community does not prioritize this need over other issues	x	
This need is incorporated into other needs selected		x
Aspects of this need will be addressed in strategies for other needs	x	x

## 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 Permanente-subsidized 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-San Francisco Community Benefits Provided in 2023** (Endnotes in Appendix)

Category	Total Spend
<b>Medical Care Services for Vulnerable Populations</b>	
Medi-Cal shortfall <sup>1</sup>	\$9,101,547
Charity care: Charitable Health Coverage programs	\$45
Charity care: Medical Financial Assistance Program <sup>2</sup>	\$6,578,152
Grants and donations for medical services <sup>3</sup>	\$884,948
<b>Subtotal</b>	<b>\$16,564,692</b>
<b>Other Benefits for Vulnerable Populations</b>	
Youth Employment programs <sup>5</sup>	\$142,133
Grants and donations for community-based programs <sup>6</sup>	\$445,642
Community Benefit administration and operations <sup>7</sup>	\$276,601
<b>Subtotal</b>	<b>\$864,376</b>
<b>Benefits for the Broader Community</b>	
Community Giving Campaign administrative expenses	\$12,414
Grants and donations for the broader community <sup>8</sup>	\$921,838
National Board of Directors fund	\$23,503
<b>Subtotal</b>	<b>\$957,755</b>
<b>Health Research, Education, and Training</b>	
Graduate Medical Education <sup>9</sup>	\$14,209,704
Non-MD provider education and training programs <sup>10</sup>	\$883,689
Health research	\$1,739,638
<b>Subtotal</b>	<b>\$16,833,031</b>
<b>TOTAL COMMUNITY BENEFITS PROVIDED</b>	<b>\$35,219,854</b>

## **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, collaborations, 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 \(http://www.kp.org/chna\)](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 aim to address the identified health needs for KFH-San Francisco. 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
<p><b>Access to Care</b></p>	<p><b>Medi-Cal and Charity Care:</b>                      In 2023, KFH-San Francisco provided access to care to 16,132 Medi-Cal members and provided financial assistance to 3,896 people through the Medical Financial Assistance (MFA) program.</p>
	<p><b>Comprehensive and Individualized Access to Care for Marginalized and Low-income Children with Disabilities:</b>                      The mission of Support for Families of Children with Disabilities is to ensure that families of children with any disability or special health care need, and the providers who serve them, have the knowledge and support to make informed choices that enhance children's development and well-being. Our partnership with Support for Families of Children with Disabilities increases their ability to provide comprehensive and individualized access to care for marginalized and low-income children with disabilities. Clients are provided with assessments, service navigation and eligibility screenings, applications, enrollment, care coordination, and outreach surrounding care. This project is expected to serve 175 Black, Spanish-speaking, and Cantonese-speaking families in San Francisco. (This grant impacts 1 hospital service area in NCAL)</p>
	<p><b>Black Trans Integrative Medicine Access Initiative:</b>                      The mission of Lyon-Martin Community Health Services is to provide trauma-informed services to trans, non-binary, gender non-conforming, and intersex communities, and cis-women with sensitivity to sexual orientation, disability, race, ethnicity, and language regardless of immigration status or ability to pay. Lyon-Martin Community Health Services was awarded \$50,000 over a year to provide holistic, gender-affirming medical, mental health, and case management services to Black Trans people by Black Trans clinicians. This project is expected to serve 400 individuals. (This grant impacts 1 hospital service area in NCAL)</p>
	<p><b>Safety Net Partnerships in San Francisco:</b>                      The mission of the San Francisco Community Clinic Consortium is to develop innovative programs and advocate for policies to improve access to quality community-based primary health care. The San Francisco Community Clinic Consortium was awarded \$480,000 over a year as one of 5 community health centers across Northern California partnering with KFH in the Safety Net Partnership Initiative Clinic Consortia Cohort. As part of this cohort, the San Francisco Community Clinic Consortium will address health care disparities and health equity by supporting clinic training programs, transition to value-based care and alternative payment methodologies, and improvements in technology infrastructure. (This grant impacts 1 hospital service area in NCAL)</p>

Need	Examples of most impactful efforts
<p><b>Mental &amp; Behavioral Health</b></p>	<p><b>Improving Wellness for Youth Experiencing Homelessness:</b>                      The mission of the Larkin Street Youth Services is to create a continuum of services that inspires youth to move beyond the street, nurture potential, promote dignity, and support bold steps by all. Larkin Street Youth Services was awarded \$50,000 over a year to engage youth in a wraparound wellness program that provides individual therapy, group-based support, and substance use services. These activities leverage evidence-based and trauma-informed approaches to address clients' emotional health needs and concerns. This project is expected to serve 200 young people in San Francisco, ages 12-24, experiencing homelessness. (This grant impacts 1 hospital service area in NCAL)</p>
	<p><b>Strengthening San Francisco Families through Trauma-Informed Systems and Care:</b>                      The mission of Safe &amp; Sound is to prevent and reduce the impact of childhood abuse, neglect, and trauma by strengthening families, building communities, and advancing healing, equity, and justice. Safe &amp; Sound was awarded \$50,000 over a year to provide trainings and build the capacity of family-serving organizations to provide trauma-informed services and programs. This project is expected to serve 2,965 individuals with training and outreach. (This grant impacts 1 hospital service area in NCAL)</p>
	<p><b>Clinical Internship Program:</b>                      The mission of Instituto Familiar de la Raza is to promote and enhance the health and well-being of the Chicano, Latino, and Indígena community of San Francisco. Instituto Familiar de la Raza was awarded \$75,000 over a year. The Clinical Internship Program's training and infrastructure supports the mental health needs of Latinos in San Francisco. This project is expected to directly serve up to 10 clinical interns who will provide care to low-income, adults, youth, and children. (This grant impacts 1 hospital service area in NCAL)</p>
<p><b>Housing</b></p>	<p><b>Legal Support for Vulnerable Senior Tenants:</b>                      The mission of Legal Assistance to the Elderly is to protect and advance the right of San Francisco's seniors and adults with disabilities to be housed, healthy, financially stable, and safe. Our partnership with Legal Assistance to the Elderly supports the Legal Support for Vulnerable Senior Tenants project. The program provides housing preservation and eviction-prevention legal services. This project is expected to serve 435 individuals. (This grant impacts 1 hospital service area in NCAL)</p>

Need	Examples of most impactful efforts
	<p><b>Housing Stabilization and Effective Person-Centered Services for Seniors:</b>                      The mission of the Curry Senior Center is to promote wellness, dignity, and independence for seniors. Our partnership with the Curry Senior Center supports the Engagement Team’s culturally and linguistically capable staff to provide housing stabilization and effective person-centered services to clients who are unhoused and at risk of homelessness. The goal is to build clients’ confidence that their basic needs are secure by providing older adult residents of SF’s Tenderloin/Civic Center neighborhoods with compassionate care and connection. This project is expected to serve 150 individuals. (This grant impacts 1 hospital service area in NCAL)</p> <p><b>Strengthening the Medical Respite Ecosystem in San Francisco:</b>                      The mission of Community Forward SF is to help the most vulnerable individuals get off the street, find comprehensive services, and achieve stability so they may thrive. Community Forward SF is a partner in the Medical Respite initiative which will strengthen the ecosystem of providers to better align with standards, advance best practices, and enhance state-of-the-field knowledge. Medical respite programs offer short-term residential care for people experiencing homelessness to recover and heal in a safe environment while accessing clinical care and support services, including transition into stable living. This project is expected to serve 375 unhoused medically fragile individuals with whole-person care in the San Francisco community. (This impacts 1 hospital service area in NCAL)</p>
<p><b>Income &amp; Employment</b></p>	<p><b>Sustainable Food Security:</b>                      The mission of Bayview Hunters Point Community Advocates, Inc. is to combine community organizing with education, advocacy, and direct services in a grassroots organization founded, governed, and operated by long-term members of this vulnerable neighborhood in San Francisco. Bayview Hunters Point Community Advocates Inc. was awarded \$50,000 over a year. Bayview Hunters Point Community Advocates established a produce warehouse at the San Francisco Wholesale Produce Market, the only nonprofit and black-led entity at the Market, to improve the quality of food-security work in southeast San Francisco and build toward the creation of a community-owned cooperative grocery store in Bayview-Hunters Point. (This grant impacts 1 hospital service area in NCAL)</p>

Need	Examples of most impactful efforts
	<p><b>African American Male Postsecondary Pathways to Health Equity:</b>                      The mission of the San Francisco Achievers is to inspire and empower African American young men in the San Francisco Unified School District to succeed in college and postsecondary institutions. The program offers support for up to 9 years which provides guidance and support throughout high school and college. San Francisco Achievers was awarded \$90,000 over a year. The African American Male Postsecondary Pathways to Health Equity project works to close the achievement and opportunity gaps, increasing the number of African American postsecondary degree holders. This project is expected to serve 200 Black and African American youth. (This grant impacts 1 hospital service area in NCAL)</p> <hr/> <p><b>College to Career Programming:</b>                      The mission of Mission Graduates is to empower youth and their families on the path to higher education, equipping them for fulfilling careers that will strengthen future generations. Mission Graduates was awarded \$90,000 over a year. College access and success programs provide a range of comprehensive support services promoting academic and life skills and college admissions and persistence for first-generation students of color embracing their college and career aspirations. This project is expected to serve 1,550 high school students. (This grant impacts 1 hospital service area in NCAL)</p>

# 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
<b>Northern California Total</b>	<b>\$752,208,416</b>

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
<b>Southern California Total</b>	<b>\$404,109,936</b>

## Appendix B

### Endnotes

- <sup>1</sup> Amount includes hospital-specific, unreimbursed expenditures for Medi-Cal Managed Care members and Medi-Cal Fee-for-Service beneficiaries on a cost basis.
- <sup>2</sup> Amount includes unreimbursed care provided to patients who qualify for Medical Financial Assistance on a cost basis.
- <sup>3</sup> 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.
- <sup>4</sup> 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.
- <sup>5</sup> Figures reported in this section are expenses for youth internship and education programs for under-represented populations.
- <sup>6</sup> 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.
- <sup>7</sup> The amount reflects the costs of the community benefit department and related operational expenses.
- <sup>8</sup> Figures reported in this section for grants and donations are aimed at supporting the general well-being of the broader community.
- <sup>9</sup> Amount reflects the net expenditures for training and education for medical residents, interns, and fellows.
- <sup>10</sup> Amount reflects the net expenditures for health professional education and training programs.
- <sup>11</sup> 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.