



# Consolidated Community Benefit Plan FISCAL YEAR 2023

Kaiser Foundation Hospitals in California

**SAN RAFAEL** 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](https://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 Rafael service area demographic profile

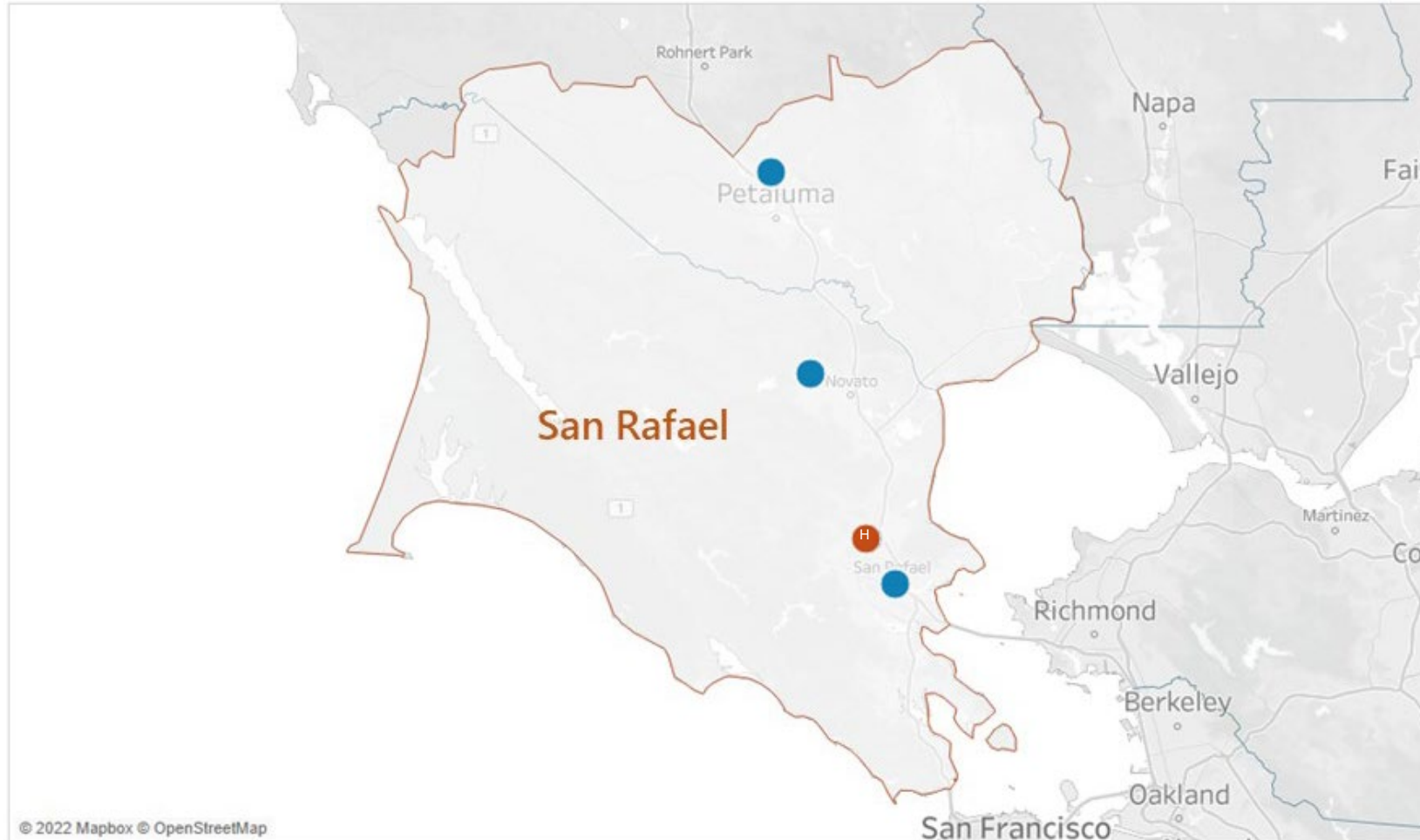
<b>Total population:</b>	<b>364,577</b>
American Indian/Alaska Native	0.2%
Asian	5.6%
Black	2.0%
Hispanic (Latinx)	19.3%
Multiracial	3.3%
Native Hawaiian/other Pacific Islander	0.2%
Other race/ethnicity	0.3%
White	69.1%
Under age 18	19.9%
Age 65 and over	21.4%

SOURCE: AMERICAN COMMUNITY SURVEY, 2015-2019

### C. Map and Description of Community Served

KFH-San Rafael service area

 Kaiser Permanente hospital     Kaiser Permanente medical offices



The KFH-San Rafael service area comprises Marin County and the southern portion of Sonoma County, including the cities of Petaluma, Boyes Hot Springs, and Sonoma. Cities in Marin County include Belvedere, Corte Madera, Fairfax, Larkspur, Mill Valley, Novato, Ross, San Anselmo, San Rafael, Sausalito, Marin City, Tiburon, Stinson Beach, Bolinas, Point Reyes, Inverness, Marshall, and Tomales.

## IV. Description of Community Health Needs Addressed

The following are the health needs KFH-San Rafael 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. **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. Although the San Rafael service area is among the wealthiest in California, income, access to employment, and the ability to generate long-term wealth varies throughout the service area. The median household income for white families is twice as high as the median household income of Black and Latinx families. Additionally, 25 percent of Latinx children in Marin County live below the federal poverty level, compared to 6 percent of white, 8 percent of Asian, and 14 percent Black children. This inequity is due to many factors related to the high cost of living and access to good paying jobs in the county. Interviewed community leaders shared that these challenges were furthered by the COVID-19 pandemic, illness, and public health orders limiting which business and services were open to the public, negatively impacting employment and wages – especially for those working in the service sector. To address income inequality in the service area, key informants recommended employers get more creative with salaries, benefits, retention strategies, and recruitment strategies for jobs within Marin County.
2. **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, differential treatment based on race, as well as access to fewer health care resources. In the San Rafael service area, although only 4 percent of the population is uninsured, 13 percent of adults reported delaying or having difficulty accessing health care that they felt they needed. This is in part due to rising health care costs and lack of adequate transportation for those living in rural areas. Additionally, access to regular care varies by population: 94 percent of Asian, 93 percent of white, 80 percent of Latinx, and 52 percent of Black residents have a usual source of health care. Interviewed community leaders shared there is a lack of culturally responsive providers and providers focused on the specific care needs of communities of color, LGBTQ+ individuals, as well as a lack of understanding of the intersectionality of multiple identities. They identified strategies to address access to care, such as expanding health education and outreach; emphasizing the role of Promotores as key health care advocates and trusted messengers in local communities; and collaborating with leaders in multiple sectors to create an integrated health care system.
3. **Education:** The link between education and health is well known — those with higher levels of education are more likely to be healthier and live longer. Having a high school diploma is correlated strongly with healthy behaviors, improved quality of life,

and higher life expectancy. Children from families with low incomes are less likely to experience the numerous benefits of attending preschool, including higher rates of high school graduation and college attendance and lower levels of juvenile incarceration. Access to early learning opportunities is limited for some children in Marin County; 35 percent of Marin County 3-to-5-year-olds are not enrolled in preschool. Additionally, the high school dropout rate of Marin County students increased from 1 percent of students in the 2014-15 school year to 6 percent in the 2016-17 school year. Only 68 percent of Latinx residents have obtained at least a high school diploma, compared to 98 percent of white, 93 percent of Asian, and 85 percent of Black residents. Interviewed community leaders emphasized learning losses for children during school closures due to COVID-19. They noted that remote learning options were very limited for students without reliable internet access. They also emphasized the lack of adequate staff for education positions, particularly preschool teachers and school psychologists.

**4. 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 suicidal 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 Marin County the age adjusted rate of death due to suicide, alcohol related disease, and drug overdoses per 100,000 population is only slightly better than California as a whole (32.0 compared to 34.3 per 100,000). However, the age adjusted rate of death due to intentional self-harm specifically is higher: 13.2 per 100,000 in Marin County compared to 10.5 per 100,000 statewide. Additionally, there are disparities related to mental and behavioral health. For example, 61 percent of students who are gay, lesbian, or bisexual reported feeling sad or hopeless almost every day compared to 23 percent of students who are straight. Interviewed community leaders noted the need for ongoing support, particularly to address the mental health impacts of recent wildfires and the COVID-19 pandemic. They noted that specific communities such as Latinx and Black residents may be particularly hesitant to utilize mental health or substance use services due to a lack of culturally competent care options. They also identified strategies to address mental and behavioral health such as peer support and drop-in centers.

**B. Health Needs Not Addressed**

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

Reason	Housing	Structural racism	Unhealthy substance use
Significant Kaiser Permanente investments already have been made to address this need	X		
This need is incorporated into other needs selected	X	X	X
Aspects of this need will be addressed in strategies for other needs	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 Rafael 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>	\$7,574,702
Charity care: Charitable Health Coverage programs	\$26
Charity care: Medical Financial Assistance Program <sup>2</sup>	\$5,409,495
Grants and donations for medical services <sup>3</sup>	\$128,090
<b><i>Subtotal</i></b>	<b>\$13,112,313</b>
<b>Other Benefits for Vulnerable Populations</b>	
Youth Internship and Education programs <sup>5</sup>	\$60,914
Grants and donations for community-based programs <sup>6</sup>	\$187,392
Community Benefit administration and operations <sup>7</sup>	\$161,247
<b><i>Subtotal</i></b>	<b>\$409,553</b>
<b>Benefits for the Broader Community</b>	
Community Giving Campaign administrative expenses	\$7,237
Grants and donations for the broader community <sup>8</sup>	\$437,123
National Board of Directors fund	\$13,701
<b><i>Subtotal</i></b>	<b>\$458,061</b>
<b>Health Research, Education, and Training</b>	
Graduate Medical Education <sup>9</sup>	\$404,516
Non-MD provider education and training programs <sup>10</sup>	\$1,472,934
Health research	\$1,014,139
<b><i>Subtotal</i></b>	<b>\$2,891,589</b>
<b>TOTAL COMMUNITY BENEFITS PROVIDED</b>	<b>\$16,871,517</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 KFHS-San Rafael. 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
<b>Access to Care</b>	<p><b>Medi-Cal and Charity Care:</b>                      In 2023, KFH-San Rafael provided access to care to 10,982 Medi-Cal members and provided financial assistance to 3,232 people through the Medical Financial Assistance (MFA) program.</p>
	<p><b>Free Clinic of San Rafael:</b>                      The mission of the RotaCare Bay Area Clinic of San Rafael is to provide free medical care to underserved clients. Our partnership with the RotaCare Bay Area Clinic of San Rafael supports the Free Clinic which provides medical care for adults who are uninsured, underinsured, or experiencing hardship residing in Marin County and neighboring communities. This project is expected to serve 250 patients. (This grant impacts 1 hospital service area in NCAL)</p>
	<p><b>Aliados Coordinated Approach to Epic:</b>                      The mission of the Aliados Health is to strengthen the capacity of member health centers to provide comprehensive, integrated care that improves health and health equity in communities. Aliados Health 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, Aliados Health 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 2 hospital service areas in NCAL)</p>
<b>Income &amp; Employment</b>	<p><b>2023 Building Local Outreach Capacity for CalFresh Enrollment (BLOC) Cohort:</b>                      Aliados Health is one of 18 community-based organizations in a Northern California cohort implementing innovative outreach and enrollment strategies that help eligible individuals apply for or retain CalFresh and Medi-Cal benefits. Aliados Health will coordinate with 10 health centers in Marin and Sonoma counties to target CalFresh and Medi-Cal redetermination-eligible populations, low-income individuals and families, immigrants, and seniors. Aliados Health will outreach to historically marginalized or newly eligible populations. (This impacts 2 hospital service areas in NCAL)</p>
	<p><b>Strengthening Community:</b>                      The mission of the La Luz Center is to strengthen the community through family services, economic advancement, and community engagement. La Luz Center was awarded \$50,000 over a year. The Strengthening Community program will increase economic stability primarily for Latino Sonoma Valley residents by providing enhanced wrap-around services and job readiness training and attainment, creating economic self-sufficiency and long-term stability to the community and small businesses through a human-centered, culturally, and linguistically competent client center service approach. This project is expected to serve 200 individuals with 1:1 support and workshops. (This grant impacts 1 hospital service area in NCAL)</p>

Need	Examples of most impactful efforts
	<p><b>Pathways To Stable Income and Employment:</b>                      The mission of the Conservation Corps North Bay is to develop youth and conserve natural resources for a resilient, sustainable, and equitable community. Our partnership with the Marin Conservation Corps supports Pathways to Stable Income and Employment. The project will connect participants to quality employment opportunities and financial stability. This project is expected to serve a diverse group of 80 local youth, ages 18-30 in Marin County. (This grant impacts 1 hospital service area in NCAL)</p>
<p><b>Education</b></p>	<p><b>Trauma-Informed Early Childhood Education:</b>                      The mission of the Marin Horizon School, Inc. is to challenge students to be self-reliant thinkers and lifelong learners. Our partnership with Marin Horizon School Inc. supports their work to inspire academic excellence, nurture students' natural love of learning, and encourage them to be responsible, confident, and creative. The Trauma-Informed Early Childhood Education program will provide parents and teachers with workshops, and a specialist will support students and teachers. This project is expected to serve 42 low-income Marin City children and their families. (This grant impacts 1 hospital service area in NCAL)</p>
	<p><b>Access to College Equity Academy:</b>                      The mission of the Huckleberry Youth Programs, Inc. is to educate, inspire, and support underserved youth to develop healthy life choices to maximize their potential, and to realize their dreams. Huckleberry Youth Programs, Inc. was awarded \$90,000 over a year. The Academy in San Rafael provides low-income, first-generation students of color with comprehensive, multi-year support and services that promote academic growth, high school achievement and graduation, access to post-secondary education, career exposure, and professional development. This project is expected to serve 130 individuals. (This grant impacts 1 hospital service area in NCAL)</p>
	<p><b>0-5 Bilingual Playgroups and Kindergarten Readiness:</b>                      The mission of the San Geronimo Valley Community Center is to foster healthy communities within the San Geronimo Valley and Nicasio by providing an inclusive, diverse, and dynamic center for locally based human services, arts and culture, education, health and wellness, and community building. Our partnership with the San Geronimo Valley Community Center supports the 0-5 Kindergarten Readiness Project. This provides critical early childhood education programs for children and families. Youth can access free social, academic, creative, and physical education through bilingual parent participation in play groups, transitional kindergarten, and kindergarten summer bridge programs. This project is expected to serve 150 Latino and Black and African American West Marin children and families. (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>Novato School Works Initiative:</b>                      The mission of the North Marin Community Services is to empower youth, adults, and families in diverse communities to achieve well-being, growth, and success, with opportunities for all. Our partnership with North Marin Community Services supports the School Works Initiative. This collaboration with the Novato Unified School District and the Marin County Probation Department provides prevention and early intervention services to youth and families. Staff and families work together to construct strengths-based, culturally responsive care plans that aim to address and disrupt the intergenerational impacts of trauma, strengthen and support healthy child-caregiver relationships, improve school performance and community connectedness, and reduce the number of Latino youth who subsequently enter the juvenile justice system. This project is expected to serve 100 individuals. (This grant impacts 1 hospital service area in NCAL)</p>
	<p><b>Staying Connected:</b>                      The mission of the Front Porch Communities and Services is to support well-being, social connections, and housing security in older adults. Front Porch Communities and Services was awarded \$90,000 over a year to provide connection programs, nutrition, affordable housing, and creative aging resources to older people in the Bay Area. The virtual Social Connection programs offer 1:1 and group interventions in English and Spanish effectively reduce isolation and loneliness in older adults by providing a wide variety of easily accessible learning, social, and support options that leverage the interests and skills of participants. Staying Connected will increase new Spanish-speaking registrants and users in Northern California. This project is expected to serve 1,790 individuals. (This grant impacts 15 hospital service areas 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.