

## **Kaiser Foundation Hospital (KFH)-Anaheim and KFH-Irvine**

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## I. Introduction and Background

### A. About Kaiser Permanente

Founded in 1942 to serve employees of Kaiser Industries and opened to the public in 1945, Kaiser Permanente is recognized as one of America's leading health care providers and nonprofit health plans. We were created to meet the challenge of providing American workers with medical care during the Great Depression and World War II, when most people could not afford to go to a doctor. Since our beginnings, we have been committed to helping shape the future of health care. Among the innovations Kaiser Permanente has brought to U.S. health care are:

- Prepaid health plans, which spread the cost to make it more affordable
- A focus on preventing illness and disease as much as on caring for the sick
- An organized, coordinated system that puts as many services as possible under one roof—all connected by an electronic medical record

Kaiser Permanente is an integrated health care delivery system comprised of Kaiser Foundation Hospitals (KFH), Kaiser Foundation Health Plan (KFHP), and physicians in the Permanente Medical Groups. Today we serve approximately 12.2 million members in nine states and the District of Columbia. Our mission is to provide high-quality, affordable health care services and to improve the health of our members and the communities we serve.

Care for our members and patients is focused on their Total Health and guided by their personal 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

For 75 years, Kaiser Permanente has been dedicated to providing high-quality, affordable health care services and to improving the health of our members and the communities we serve. We believe good health is a fundamental right shared by all and we recognize that good health extends beyond the doctor's office and the hospital. It begins with healthy environments: fresh fruits and vegetables in neighborhood stores, successful schools, clean air, accessible parks, and safe playgrounds. Good health for the entire community requires equity and social and economic well-being. These are the vital signs of healthy communities.

Better health outcomes begin where health starts, in our communities. Like our approach to medicine, our work in the community takes a prevention-focused, evidence-based approach. We go beyond traditional corporate philanthropy or grantmaking to pair financial resources with medical research, physician expertise, and clinical practices. Our community health strategy focuses on three areas:

- Ensuring health access by providing individuals served at Kaiser Permanente or by our safety net partners with integrated clinical and social services;
- Improving conditions for health and equity by engaging members, communities, and Kaiser Permanente’s workforce and assets; and
- Advancing the future of community health by innovating with technology and social solutions.

For many years, we’ve worked side-by-side with other organizations to address serious public health issues such as obesity, access to care, and violence. We’ve conducted Community Health Needs Assessments to better understand each community’s unique needs and resources. The CHNA process informs our community investments and helps us develop strategies aimed at making long-term, sustainable change—and it allows us to deepen the strong relationships we have with other organizations that are working to improve community health.

### **C. Purpose of the Report**

Since 1996, Kaiser Foundation Hospitals (KFH) in Northern and Southern California have annually submitted to the Office of Statewide Health Planning and Development (OSHPD) 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 2020 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 (2 Hospitals), San Francisco, San Jose, San Leandro, San Rafael, Santa Clara, Santa Rosa, South Bay, South Sacramento, South San Francisco, Vacaville, Vallejo, Walnut Creek, West Los Angeles, and Woodland Hills.

In 2020, Kaiser Foundation Hospitals in Northern and Southern California Regions provided a total of \$1,294,404,117 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 and B. Note that 'non-quantifiable benefits' will be highlighted in the Year end Results section of KFH Community Benefit Plan, where applicable.

**Table A**

**KAISER FOUNDATION HOSPITALS IN CALIFORNIA**

**Community Benefits Provided in 2020** (Endnotes on following page.)

<b>Medical Care Services for Vulnerable Populations</b>	
Medi-Cal shortfall <sup>1</sup>	\$692,686,921
Charity care: Charitable Health Coverage Programs <sup>2</sup>	\$292,212,296
Charity care: Medical Financial Assistance Program <sup>3</sup>	\$94,951
Grants and donations for medical services <sup>4</sup>	\$32,762,341
<b>Subtotal</b>	<b>\$1,017,756,509</b>
<b>Other Benefits for Vulnerable Populations</b>	
Watts Counseling and Learning Center <sup>5</sup>	\$3,159,122
Educational Outreach Program	\$996,423
Youth Employment programs <sup>6</sup>	\$692,228
Grants and donations for community-based programs <sup>7</sup>	\$85,399,347
Community Benefit administration and operations <sup>8</sup>	\$12,241,501
<b>Subtotal</b>	<b>\$102,488,621</b>
<b>Benefits for the Broader Community<sup>9</sup></b>	
Community health education and promotion programs	\$1,091,019
Kaiser Permanente Educational Theatre	\$5,784,348
Facility, supplies, and equipment (In-kind)	\$3,609,800
Community Giving Campaign administrative expenses	\$681,817
Grants and donations for the broader community <sup>10</sup>	\$6,607,309
National Board of Directors fund	\$742,769
<b>Subtotal</b>	<b>\$18,517,062</b>
<b>Health Research, Education, and Training</b>	
Graduate Medical Education	\$98,995,981
Non-MD provider education and training programs <sup>11</sup>	\$27,487,338
Grants and donations for the education of health care professionals <sup>12</sup>	\$2,315,284
Health research	\$26,843,322
<b>Subtotal</b>	<b>\$155,641,925</b>
<b>TOTAL COMMUNITY BENEFITS PROVIDED</b>	<b>\$1,294,404,117</b>

## TABLE A 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 hospital-specific, unreimbursed expenditures for Other Plan members and unreimbursed inpatient expenditures for Charitable Health Coverage on a cost basis.
- <sup>3</sup> Amount includes unreimbursed care provided at this facility to patients who qualify for the Medical Financial Assistance on a cost basis.
- <sup>4</sup> Figures reported in this section for grants and donations for medical services consist of charitable contributions to community clinics and other safety-net providers; community health partnerships and collaboratives; and special Request for Proposals to support specific health issues such as childhood obesity, asthma, etc. The amount reported reflects hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the percentage of Health Plan members.
- <sup>5</sup> Watts Counseling and Learning Center's service expenses are divided among three hospitals: KFH-Downey, KFH-South Bay, and KFH-West Los Angeles.
- <sup>6</sup> Figures reported in this section are hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the number of Youth Employment Programs participants hired.
- <sup>7</sup> Figures reported in this section for grants and donations for community-based programs consist of charitable contributions made to external nonprofit organizations for a variety of programs and services that address the nonmedical needs of vulnerable populations. The amount reflects hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the percentage of Health Plan members.
- <sup>8</sup> The amount reflects the costs related to providing a dedicated community benefit department and related operational expenses.
- <sup>9</sup> Figures reported in this section are hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the percentage of Health Plan members, or several related denominators such as the number of Educational Theatre performances or Health Education programs.
- <sup>10</sup> Figures reported in this section for grants and donations for the broader community consist of charitable contributions made to external nonprofit organizations to educate health care consumers in managing their own health and making informed decisions when obtaining services; and to develop, produce, or communicate health care-related public policy information for a variety of programs and services aimed at general well-being of the community. The amount reflects hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the percentage of Health Plan members.
- <sup>11</sup> Amount reflects the net expenditures after scholarships for health professional education and training programs.

<sup>12</sup> Figures reported in this section for grants and donations for the education of health care professionals 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 such as physicians, nurses, physical therapists, social workers, pharmacists, etc. The amount reflects hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the percentage of Health Plan members.

**Table B**

**KAISER FOUNDATION HOSPITALS IN CALIFORNIA**

**Community Benefits Provided by Hospital Service Area in 2020**

<b>NORTHERN CALIFORNIA HOSPITALS</b>		<b>SOUTHERN CALIFORNIA HOSPITALS</b>	
Antioch	\$32,884,734	Anaheim	\$38,125,925
Fremont	\$11,870,189	Baldwin Park	\$31,073,319
Fresno	\$17,121,944	Downey	\$46,435,644
Manteca	\$30,479,883	Fontana	\$70,060,474
Modesto	\$16,601,850	Irvine	\$16,259,901
Oakland	\$68,247,808	Los Angeles	\$61,151,477
Redwood City	\$17,113,356	Moreno Valley	\$13,907,228
Richmond	\$45,313,562	Ontario	\$19,946,787
Roseville	\$46,614,984	Panorama City	\$39,931,373
Sacramento	\$87,732,815	Riverside	\$36,807,300
San Francisco	\$37,776,000	San Diego (2 Hospitals)	\$60,564,848
San Jose	\$29,971,995	South Bay	\$34,209,359
San Leandro	\$40,190,288	West Los Angeles	\$41,447,010
San Rafael	\$18,618,231	Woodland Hills	\$24,655,944
Santa Clara	\$43,328,256		
Santa Rosa	\$34,940,812		
South Sacramento	\$71,905,940		
South San Francisco	\$14,140,089		
Vacaville	\$26,348,833		
Vallejo	\$44,781,858		
Walnut Creek	\$23,844,101		
<b>Northern California Total</b>	<b>\$759,827,528</b>	<b>Southern California Total</b>	<b>\$534,576,588</b>

## **B. Medical Care Services for Vulnerable Populations**

For the purpose of this plan, KFH has quantified the unreimbursed costs of medical services provided in its hospitals to the underinsured and uninsured through government programs funded at the federal and state levels as well as Kaiser Permanente's own charity care programs. Government-funded programs include Medi-Cal Managed Care, Medi-Cal Fee-For-Service, and Healthy Families Program. KFH provides charity care through its Charitable Health Coverage and Medical Financial Assistance programs. Services provided to prepaid Medicare, Major Risk Medical Insurance Program (MRMIP), and Access for Infants and Mothers (AIM) beneficiaries are not reported.

## **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 Employment Programs (NCAL and SCAL)**

Youth workforce programs 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 groups, community clinics, libraries, nonprofit organizations, cable television channels, and schools.

### **Kaiser Permanente Educational Theatre (NCAL and SCAL)**

Since 1986, KPET has been using live theatre, music, comedy, and drama to inspire children, teens, and adults to make healthier choices and better decisions about their well-being. Its award-winning programs are as entertaining as they are educational and were developed with the advice of teachers, parents, students, health educators, medical professionals, and professional theatre artists. Professional actors who are also trained health educators deliver all performances and workshops. KPET programs share health information and develop individual and community knowledge about leading healthier lives. KPET is provided free of charge to schools and the general community. In addition to performances and classroom workshops, KPET supplies schools and organizations with supplementary educational materials - including workbooks, parent and teacher guides, and student wallet cards - to reinforce the messages presented in the programs.

## **E. Health Research, Education, and Training Programs**

### **Graduate Medical Education (GME)**

The mission of Kaiser Permanente GME is to recruit and prepare the physician workforce of the 21st century by optimizing the unique clinical and educational opportunities within our integrated model of care, which is now considered the gold standard for improving the entire U.S. health care system. Residents trained in our health care settings utilize technology to provide evidence-based, patient-centered care in a team-based model, employ population management strategies, and cultivate their skills in cultural sensitivity, effective communication and leadership. As part of their training, residents participate in rotations at school-based health centers, community clinics, and homeless shelters.

### **Non-MD Provider Education and Training Programs**

Kaiser Permanente provides education, training, residencies, internships, and/or scholarships and stipends for non-physician health care professionals in nursing, pharmacy, physical therapy, psychology, and radiology. 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 conducts, publishes, and disseminates high-quality epidemiological and health services research to improve health and medical care throughout our communities. Our Division of Research (NCAL), Department of Research and Evaluation (SCAL), Kaiser Foundation Research Institute, and Nursing Research Programs deploy a wide range of research methods, including clinical research, health care services research, and epidemiological and translational studies on health care that are generalizable and broadly shared, helping build a knowledge base that improves health and health care services.

**III. KFH-Anaheim and Irvine 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 the Community Served**

The following tables include race, ethnicity, and additional socioeconomic data for the KFH-Anaheim and KFH-Irvine service areas. Please note that "race" categories indicate "non-Hispanic" population percentage for Asian, Black, Native American/Alaska Native, Pacific Islander/Native Hawaiian, Some Other Race, Multiple Races, and White. "Hispanic/Latino" indicates total population percentage reporting as Hispanic/Latino. [Sources: ESRI, 2019; ACS 5-year estimates, 2013-2017]

**KFH-Anaheim Service Area Demographics**

<b>Race/Ethnicity</b>		<b>Socioeconomic</b>	
Total Population	1,567,929	Living in Poverty (<100% Federal Poverty Level)	13.83%
Asian/Pacific Islander	21.70%	Children in Poverty	18.5%
Black	1.96%	Unemployment	4.96%
Hispanic/Latino	45.16%	Uninsured Population	12.5%
Native American/Alaska Native	0.20%	Adults with No High School Diploma	18.62%
Some Other Race	0.16%		
Multiple Races	2.19%		
White	28.63%		

**KFH-Irvine Service Area Demographics**

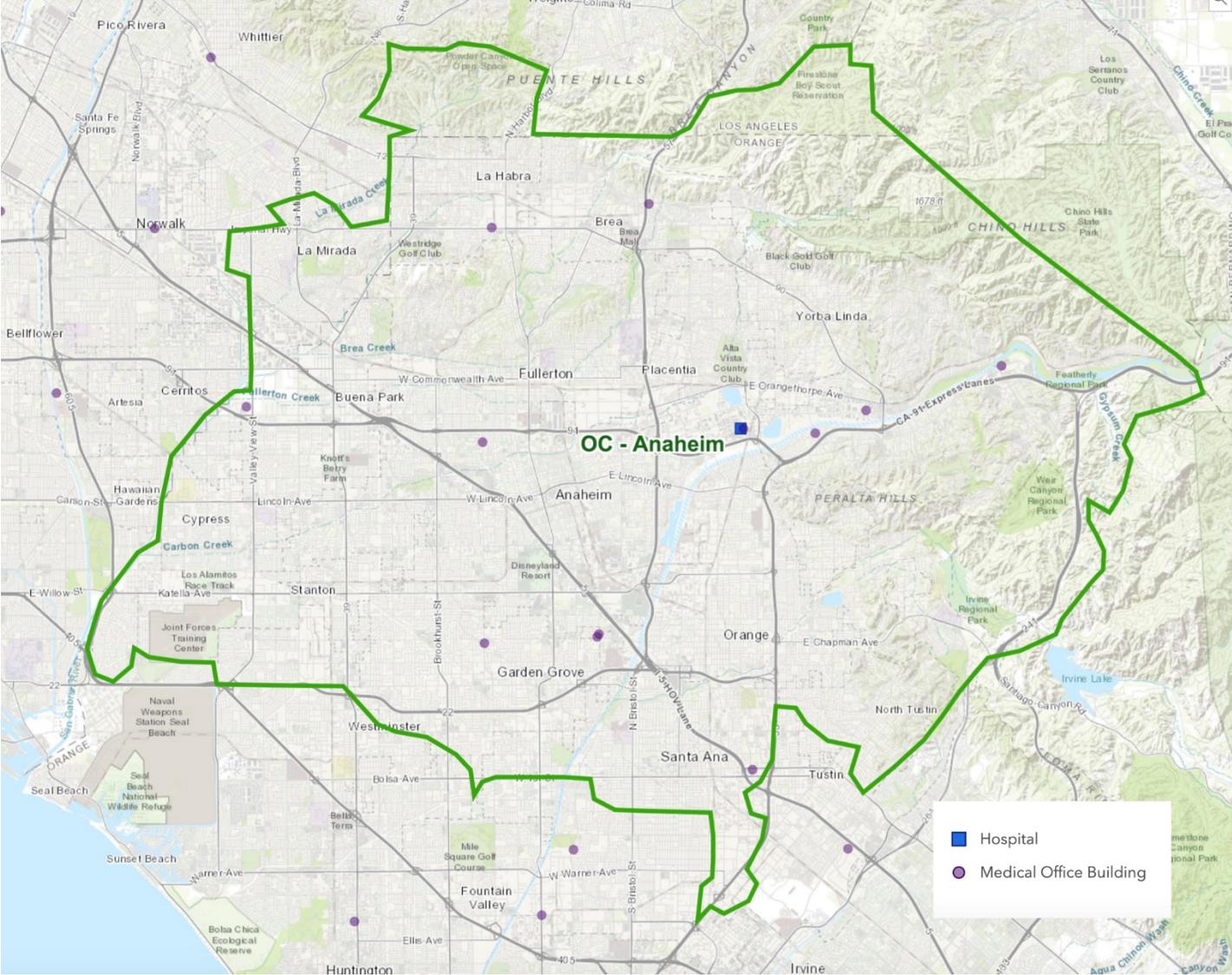
<b>Race/Ethnicity</b>		<b>Socioeconomic</b>	
Total Population	1,744,262	Living in Poverty (<100% Federal Poverty Level)	13.83%
Asian/Pacific Islander	20.74%	Children in Poverty	11.5%
Black	1.38%	Unemployment	4.22%
Hispanic/Latino	25.03%	Uninsured Population	8.5%
Native American/Alaska Native	0.19%	Adults with No High School Diploma	9.95%
Some Other Race	0.19%		
Multiple Races	3.54%		
White	48.94%		

### **C. Map and Description of Community Served**

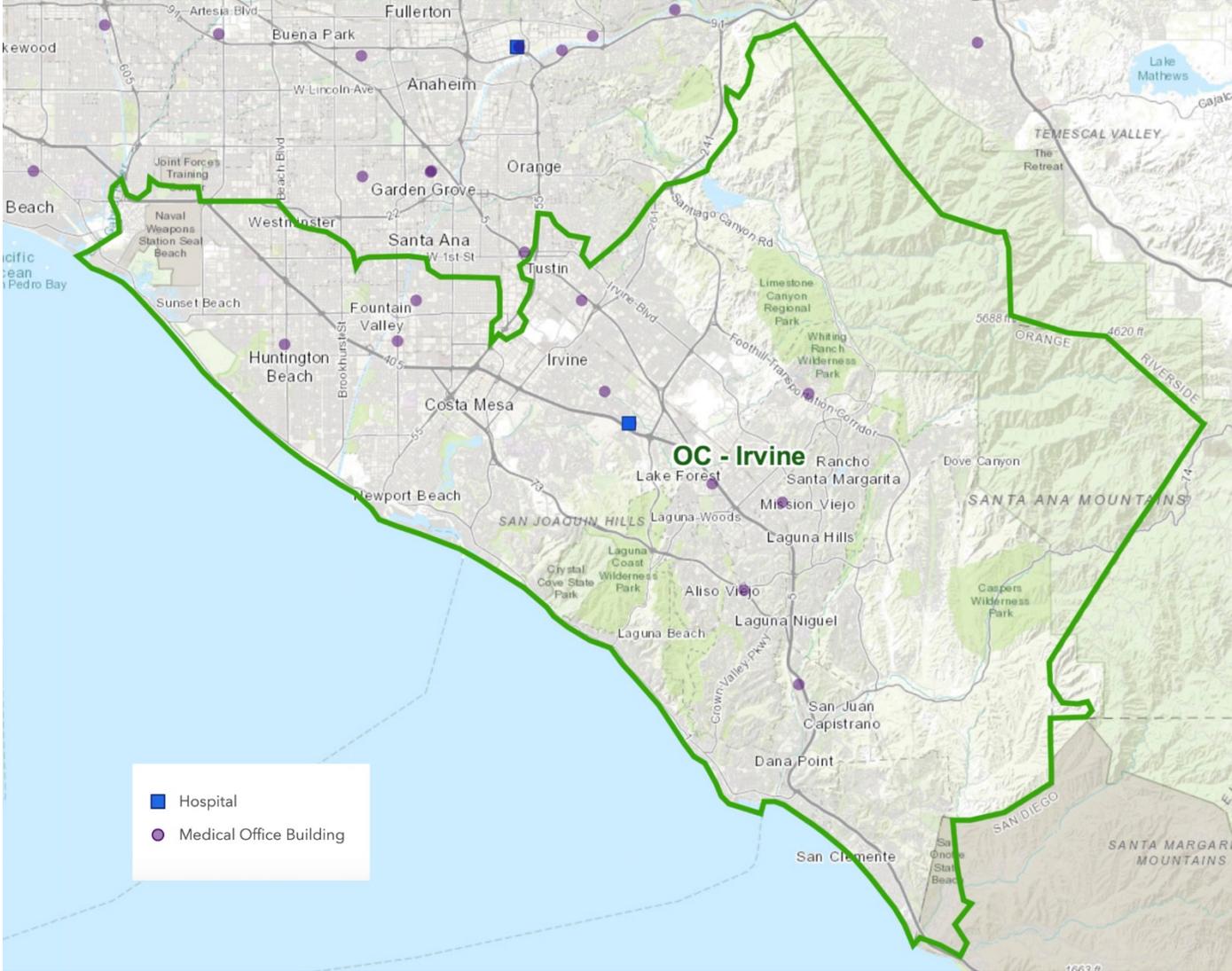
The KFH-Anaheim service area includes Anaheim, Brea, Buena Park, Chino Hills, Cowan Heights, Cypress, El Modena, Fullerton, Garden Grove, La Habra, La Mirada, La Palma, Los Alamitos, Modjeska, Modjeska Canyon, North Tustin, Orange, Placentia, Santa Ana, Silverado, Stanton, Tustin, Villa Park, and Yorba Linda.

The KFH-Irvine service area includes Aliso Viejo, Balboa Island, Capistrano Beach, Corona Del Mar, Costa Mesa, Coto de Caza, Dana Point, El Toro, Foothill Ranch, Fountain Valley, Huntington Beach, Irvine, Irvine Hills, Ladera Ranch, a section of Lake Elsinore, Laguna Beach, Laguna Hills, Laguna Niguel, Laguna Woods, Lake Forest, Midway City, Mission Viejo, Newport Beach, Newport Coast, Rancho Santa Margarita, San Clemente, San Juan Capistrano, Seal Beach, South Laguna, Sunset Beach, Trabuco Canyon, and Westminster.

### KFH-Anaheim Service Area Map



**KFH-Irvine Service Area Map**



## IV. KFH-Anaheim and Irvine Community Health Needs

The following are the health needs that KFH-Anaheim and Irvine is addressing during the 2020-2022 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 2019 CHNA Report and 2020-2022 Implementation Strategy Report at: <http://www.kp.org/chna>.

### A. Health Needs Addressed

**Access to Healthcare.** Access to comprehensive quality health care is important for the achievement of health equity and for increasing the quality of life for everyone. Limited access to health care can dramatically impact people's health outcomes. Health insurance is one of many mechanisms that enable people to access necessary care. In Orange County, only 80% of residents aged 18-64 are insured. During the community engagement process, residents also identified transportation, long wait times, cost, and difficulty navigating the healthcare system as barriers to accessing care. This health need was selected to be addressed in the Implementation Strategy because poor access to care, particularly preventative care, can negatively impact resident health and hospital operation; for instance, poor access to preventative care contributes to high Emergency Room Utilization and higher rates of chronic diseases if left untreated.

**Economic Security.** Economic insecurity exists in both the Anaheim and Irvine service areas. Secondary data indicates that the experience of economic insecurity impacts health needs locally, including poor mental health, obesity, diabetes, stroke, and cancer. In the Anaheim service area for example, on average, 15% of the population lives below the poverty level. Some subgroups in the service area, such as Latinos, experience higher levels of poverty (20%). This health need was selected to be addressed in the Implementation Strategy because community engagement revealed that the lack of economic security impacts resident's lives in various ways. The lack of affordable, quality housing in Orange County was cited in nearly every interview and focus group engagement during the Community Health Needs Assessment.

**Mental Health.** Mental health is an important component of a person's overall health and well-being. According to secondary data, poor mental health can result in a 61% reduction in life expectancy if left untreated. In the Irvine service area, white residents report having 3-4 poor mental health days a month. This health need was selected to be addressed in the Implementation Strategy because of the extensive level of work already being conducted around this issue in the service area in addition to the level of concern expressed by residents through the Community Health Needs Assessment. Through the community engagement process, residents indicated that youth and young adults are turning to substances like marijuana, vaping, and misuse of prescription drugs as a coping mechanism to address daily stressors. Additionally, Resident surveys

collected through the engagement process indicated that 64% were concerned about mental health and throughout engagements residents reported experiencing a number of barriers to accessing mental health care including stigma, language, insufficient providers and inpatient services, and cost.

## **B. Health Needs Not Addressed**

While all the health needs prioritized in the 2019 Community Health Needs Assessment process are important to address, the implementation strategy planning process requires KFH-Anaheim and Irvine to conduct a selection process based on critical criteria including health need severity, magnitude, inequity, and the extent to which KFH-Anaheim and Irvine is in a position to meaningfully address the need (see Section VII.A for a full description of selection criteria). Health needs that were not elevated across these critical criteria were not selected for the implementation strategy plan. Health needs not selected include: Stroke and Suicide. These health needs were not selected as standalone needs for the purposes of this report, but KFH Anaheim and Irvine plans to address these needs through efforts to improve Access to Care and Mental and Behavioral Health, respectively (see Section VIII for a full description of strategies).

## **V. 2020 Year-End Results for KFH-Anaheim and Irvine**

The 2020 Year-End Results highlight a select set of activities and grant financial resources for addressing health needs. For a full description of strategies and activities to address health needs, please review the 2020-2022 Implementation Strategy Plan at <http://www.kp.org/chna>.

### **A. 2020 Community Benefit Financial Resources Provided by KFH-Anaheim and Irvine**

Total Community Benefit expenditures are reported as follows:

- Quantifiable Community Benefit such as facility use and in-kind donations are included if funded by KFH, provided in a KFH facility, or are part of a KFH Community Benefit Plan.
- Medical care services for vulnerable populations include unreimbursed inpatient costs for participation in Kaiser Permanente-subsidized and government-sponsored health care insurance programs.
- 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 were not available by hospital service area, then regional expenses were allocated proportionally on the basis of KFHP membership or other quantifiable data, such as the number of Kaiser Permanente Educational Theatre performances presented, or Summer Youth students employed within each hospital area's community at large.

**Table C: KFH-Anaheim and Irvine 2020 Year-End Community Benefit Expenditures**

	<b>Anaheim 2020 Totals</b>	<b>Irvine 2020 Totals</b>
<b>Medical Care Services for Vulnerable Populations</b>		
Medi-Cal shortfall <sup>1</sup>	\$19,393,761	\$11,713,893
Charity care: Charitable Health Coverage Programs <sup>2</sup>	\$9,754	\$7,721
Charity care: Medical Financial Assistance Program <sup>3</sup>	\$11,278,531	\$1,127,957
Grants and donations for medical services <sup>4</sup>	\$979,823	\$954,428
<b>Subtotal</b>	<b>\$31,661,869</b>	<b>\$13,803,999</b>
<b>Other Benefits for Vulnerable Populations</b>		
Grants and donations for community-based programs <sup>7</sup>	\$1,345,787	\$1,017,355
Community Benefit administration and operations <sup>8</sup>	\$381,232	\$167,886
<b>Subtotal</b>	<b>\$1,727,019</b>	<b>\$1,185,241</b>
<b>Benefits for the Broader Community</b>		
Community health education and promotion programs	\$76,114	\$62,489
Kaiser Permanente Educational Theatre <sup>9</sup>	\$367,131	\$85,664
Community Giving Campaign administrative expenses	\$1,840	\$1,511
Grants and donations for the broader community <sup>10</sup>	\$306,872	\$251,939
National board of directors fund	\$20,477	\$16,811
<b>Subtotal</b>	<b>\$772,434</b>	<b>\$418,414</b>
<b>Health Research, Education and Training</b>		
Graduate Medical Education	\$2,819,081	\$3,369
Non-MD provider education and training programs <sup>11</sup>	\$506,524	\$324,265
Grants and donations for health research, education, and training <sup>12</sup>	\$143,681	\$117,961
Health research	\$495,317	\$406,652
<b>Subtotal</b>	<b>\$3,964,603</b>	<b>\$852,247</b>
<b>Total Community Benefits Provided</b>	<b>\$38,125,925</b>	<b>\$16,259,901</b>

*TABLE C 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 hospital-specific, unreimbursed expenditures for Other Plan members and unreimbursed inpatient expenditures for Charitable Health Coverage on a cost basis.
- <sup>3</sup> Amount includes unreimbursed care provided at this facility to patients who qualify for the Medical Financial Assistance on a cost basis.
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- <sup>5</sup> Watts Counseling and Learning Center's service expenses are divided among three hospitals: KFH-Downey, KFH-South Bay, and KFH-West Los Angeles.
- <sup>6</sup> Figures reported in this section are hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the number of Summer Youth students hired.
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- <sup>8</sup> The amount reflects the costs related to providing a dedicated community benefit department and related operational expenses.
- <sup>9</sup> Figures reported in this section are hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the percentage of Health Plan members, or several related denominators such as the number of Educational Theatre performances or health education programs.
- <sup>10</sup> Figures reported in this section for grants and donations for the broader community consist of charitable contributions made to external nonprofit organizations to educate health care consumers in managing their own health and making informed decisions when obtaining services; and to develop, produce, or communicate health care-related public policy information for a variety of programs and services aimed at general well-being of the community. The amount reflects hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the percentage of Health Plan members.

- 11 Amount reflects the net expenditures for health professional education and training programs.
- 12 Figures reported in this section for grants and donations for the education of health care professionals 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. The amount reflects hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the percentage of Health Plan members.

## **B. 2020 Examples of KFH-Anaheim and Irvine Activities Addressing 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's 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 KFH-Anaheim Implementation Strategy Report and the KFH-Irvine Implementation Strategy Report, posted on the internet at <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 made, number of dollars spent, number of people reached/served, and number and role of KFH volunteers. KFH also conduct evaluation of larger grant initiatives to understand both progress and outcomes. In addition to internal monitoring and evaluation, KFH requires grantees to propose, track, and report outcomes of the projects for which they have received funding.

The below tables provide highlights for a select number of programs, grants, collaboration and/or assets that aims to address the identified health needs for KFH-Anaheim and Irvine. The examples provided below are illustrations and not an exhaustive list. Where appropriate, summative information is provided for programs that have been implemented in multiple years.

The total number and amount of paid grants to address a health need include those that are awarded to organizations providing programs serving the KFH-Anaheim and Irvine service area and may also serve other KFH service areas. Grant examples denoted with (~) provide services and/or programs in multiple Kaiser Foundation Hospital service areas. Grant examples denoted with (\*) were distributed from the Kaiser Permanente Southern California Charitable Contribution Fund, a Donor Advised Fund (DAF) administered by the California Community Foundation; accordingly, grant amounts were not included in the community benefit totals for 2020 (Tables B and C). In addition to the below examples, which address specific health needs, Kaiser Permanente, Southern California implements community programs that address multiple health needs:

- Educational Theatre brings free, live theatrical programs to schools and communities. The programs are designed to inspire children, teens and adults to make healthier choices and informed decisions about their health by focusing on topics such as health reading and literacy, conflict management, healthy eating and active living, bullying, and sexually transmitted infections. All performances are delivered by professional actors who are also trained health educators.
  - In 2020 Educational Theater provided 90 events in KFH-Anaheim communities, reaching 8,620 youth and 437 adults across 21 locations.

- In 2020 Educational Theater provided 21 events in KFH-Irvine communities, reaching 2,159 youth and 152 adults across 10 locations.

Need	Summary of impact	Examples of impactful efforts
<p>Access to Care</p>	<p>During 2020, Kaiser Permanente paid 7 grants, totaling \$94,333 addressing this priority health need in the Anaheim service area. In addition, a portion of money managed by a donor advised fund at California Community Foundation was used to pay 10 grants, totaling \$294,651 that addresses this need.</p> <p>During 2020, Kaiser Permanente paid 7 grants, totaling \$94,333 addressing this priority health need in the Irvine service area. In addition, a portion of money managed by a donor advised fund at California Community Foundation was used to pay 10 grants, totaling \$294,651 that addresses this need.</p>	<p><b><u>Providing Affordable Healthcare</u></b></p> <p>In 2020, KFH-Anaheim provided \$19,393,761 in medical care services to 30,382 Medi-Cal recipients (both health plan members and non-members) and \$11,278,531 in medical financial assistance (MFA) for 11,848 beneficiaries.</p> <p>In 2020, KFH-Irvine provided \$11,713,893 in medical care services to 19,246 Medi-Cal recipients (both health plan members and non-members) and \$1,127,957 in medical financial assistance (MFA) for 3,015 beneficiaries.</p> <p><b><u>Advocating for Orange County’s Vulnerable Patient Population~*</u></b></p> <p>The Coalition of Orange County Community Clinics (COCCC) represents a consortium of safety net providers to support them in creating quality healthcare for vulnerable, underserved communities in Orange County, California. COCCC achieves this by building capacity to engage in advocacy, technical assistance, and training. In 2020, Kaiser Permanente paid \$350,000 (split among 2 service areas) to COCCC to:</p> <ul style="list-style-type: none"> <li>• Increase the implementation and sustainability of a culture of quality through the provision of Lean Six Sigma Greenbelt Certification training to at least 4 clinics.</li> <li>• Increase quality improvement incentive payments to clinics in Orange County by coordinating with CalOptima on the development of the payment methodology.</li> <li>• Develop the Coalition’s internal capacity to develop quality management and emergency preparedness plans for member clinics.</li> </ul>

**Supporting California’s Public Health Care System~**

The California Health Care Safety Net Institute (SNI) supports public healthcare systems by informing policy, providing measurement expertise, and accelerating learning. SNI serves the 21 public healthcare systems who are form the core of California’s safety net. In 2020, Kaiser Permanente paid \$300,000 (split among 15 service areas) to SNI to:

- Strengthen member public health care systems performance measurement capacity so they can measure and ultimately improve the care they provide.
- Improve population health by strengthening member public health care systems performance in statewide population health programs.
- Prepare member public health care systems for the next phase of delivery system transformation programs and requirements that will be part of the Medi-Cal waiver program and CallAIM program in 2021.

**Advocating for Health Centers to Improve the Health of Vulnerable Populations~\***

California’s Primary Care Association (CPCA) provides education, training, and advocacy to their members community health centers to best serve their low-income, underserved, and diverse patients. In 2020, Kaiser Permanente paid \$300,000 (split among 15 service areas) to CPCA to:

- Provide a comprehensive training program of web-based and in-person sessions, statewide or regional convenings, and statewide conferences that respond to the needs of members.
- Provide topic-specific individualized technical assistance as requested by members.
- Host job-specific and topic-specific Peer Networks and augment Peer Network program, as appropriate, in response to member requests or emerging issues.
- Educate policy makers and other key stakeholders about the unique and critical role that community health centers play in serving patients throughout the state as an integral part of an integrated health care delivery system.

**Supporting Free Health Care Services to the Uninsured~\***

Lestonnac Free Clinic provides high-quality health care services to uninsured, low-income and homeless individuals free of charge. The organization fills critical gaps in health care by providing a comprehensive array of services, including primary medical, preventative and restorative dental, mental health and specialty care services. In 2020, Kaiser Permanente paid \$95,000 (split among 5 service areas) to Lestonnac Free Clinic to:

- Provide free primary medical care to 7,500 uninsured residents.
- Provide free specialty medical care to 1,200 uninsured residents.
- Provide free dental services to 1,000 uninsured residents.
- Provide free behavioral health services to 400 uninsured residents.

**Addressing Breast Health Inequities**

Susan G. Komen Orange County (KOC) ensures that life-saving breast health initiatives are accessible to all people in the community, regardless of their age or background. KOC works to improve breast health by addressing the health inequities in breast cancer care and health care system delivery gaps among underserved populations. In 2020, Kaiser Permanente paid \$50,000 to KOC to:

- Establish a patient navigation pilot project to work with Orange County women on the continuum of breast cancer care.
- Partner with community clinic sites to implement the patient navigator pilot project and provide training for up to 20 patient navigators.

<p>Economic Opportunity</p>	<p>During 2020, Kaiser Permanente paid 9 grants, totaling \$278,667 addressing this priority health need in the Anaheim service area. In addition, a portion of money managed by a donor advised fund at California Community Foundation was used to pay 2 grants, totaling \$841,026 that addresses this need.</p> <p>During 2020, Kaiser Permanente paid 6 grants, totaling \$203,667 addressing this priority health need in the Irvine service area. In addition, a portion of money managed by a donor advised fund at California Community Foundation was used to pay 2 grants, totaling \$841,026 that addresses this need.</p>	<p><b><u>Supporting Permanent Housing Units for Homeless in California~*</u></b></p> <p>Enterprise Community Partners (Enterprise) is a national nonprofit that creates opportunity for low- and moderate-income people through affordable housing. Enterprise partners with states to provide operating subsidies, wraparound services, and technical assistance for new state-acquired properties that house a range of formerly homeless populations, including families, veterans, and people living with HIV. In 2020, Kaiser Permanente paid \$12.5 million (split among 15 service areas) to:</p> <ul style="list-style-type: none"> <li>• Support wraparound services and operations of up to 1,000 new housing units for homeless people.</li> <li>• Distribute at least 5 service and operating sub-grants to local public entities or homeless service providers.</li> <li>• Provide up to 20 individual housing projects around the state with technical assistance, resulting in plans to deploy creative, flexible service models to better serve the complex and varied needs of people transitioning out of homelessness.</li> </ul> <hr/> <p><b><u>Enhancing Safety Net Services in Southern California~*</u></b></p> <p>Step Up on Second Street (SU) delivers compassionate support services to people experiencing serious mental health conditions and persons who are experiencing chronic homelessness. SU meets the complex needs of people experiencing homelessness in underserved areas of Los Angeles, Orange, San Bernardino and Riverside Counties at a time when the number of homeless is increasing. In 2020, Kaiser Permanente paid \$100,000 (split among 13 service areas) to SU as core support to:</p> <ul style="list-style-type: none"> <li>• Sustain the organization through the unprecedented challenges of the COVID-19 pandemic. Kaiser Permanente's support helped SU with continuing to deliver on its mission to serve individuals experiencing mental health conditions and homelessness.</li> </ul>
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<p>Mental Health</p>	<p>During 2020, Kaiser Permanente paid 13 grants, totaling \$145,000 addressing this priority health need in the Anaheim service area. In addition, a portion of money managed by a donor advised fund at California Community Foundation was used to pay 1 grant, totaling \$1,000,000 that addresses this need.</p> <p>During 2020, Kaiser Permanente paid 14 grants, totaling \$220,000 addressing this priority</p>	<p><b><u>Providing Mental Health and Substance Use Treatment to All*~</u></b></p> <p>Mind OC was created to support Be Well Orange County, a public-private partnership to ensure optimal mental health and wellness for all residents of Orange County. In 2020, Kaiser Permanente paid Mind OC’s fiscal sponsor, OneOC, \$2,000,000 (split among 2 service areas) to:</p> <ul style="list-style-type: none"> <li>• Complete construction of a 60,000 square foot Regional Community Wellness Hub, for the co-location of mental health and substance abuse services at 265 Anita Drive, City of Orange by October 2020.</li> <li>• Establish a Wellness Fund to align public and private funding and execute a Capital and Programmatic Finance Plan to secure funding for construction expenditures and program services.</li> <li>• Complete provider service agreements, in collaboration with the Orange County Health Care Agency, to provide triage, intake and referral, crisis stabilization and residential services for 3,618 patients and 14,470 residential treatment patient days.</li> </ul>
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	<p>health need in the Irvine service area. In addition, a portion of money managed by a donor advised fund at California Community Foundation was used to pay 1 grant, totaling \$1,000,000 that addresses this need.</p>	<p><b><u>Advancing Mental Health Equity~</u></b></p> <p>The California Pan Ethnic Health Network (CPEHN) promotes health equity by advocating for public policies and sufficient resources to address the health needs of communities of color. In 2020, Kaiser Permanente paid \$300,000 (split among 15 service areas) to CPEHN to improve and build the current mental health workforce to meet community health needs by:</p> <ul style="list-style-type: none"> <li>• Providing training and technical assistance opportunities to build the capacity of 20 community partners, including the Behavioral Health Equity Collaborative, to advocate for a culturally competent mental health workforce.</li> <li>• Conducting policymaker education and advocacy to advance cultural competence among existing mental health workforce and expand opportunities for non-licensed professionals such as community health workers and navigators.</li> <li>• Developing and disseminating a minimum of two research briefs, fact sheets, and other communication tools to influence and inform policymakers on mental health equity and the need for a culturally competent workforce in California.</li> </ul>
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