



COMMUNITY BENEFIT PLAN 2022

KAISER FOUNDATION HOSPITALS
SOUTHERN CALIFORNIA REGION



RIVERSIDE

Kaiser Foundation Hospital (KFH)-Riverside

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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 12.5 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 over 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 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 2021 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 2021, Kaiser Foundation Hospitals in Northern and Southern California Regions provided a total of \$742,682,799 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 2021 (Endnotes on following page.)

Medical Care Services for Vulnerable Populations	
Medi-Cal shortfall ¹	\$288,558,881
Charity care: Charitable Health Coverage Programs ²	\$99,312
Charity care: Medical Financial Assistance Program ³	\$199,603,657
Grants and donations for medical services ⁴	\$16,348,695
Subtotal	\$504,610,545
Other Benefits for Vulnerable Populations	
Watts Counseling and Learning Center ⁵	\$3,255,305
Educational Outreach Program	\$987,097
Youth Employment programs ⁶	\$1,808,566
Grants and donations for community-based programs ⁷	\$40,751,208
Community Benefit administration and operations ⁸	\$14,174,499
Subtotal	\$60,976,675
Benefits for the Broader Community⁹	
Community health education and promotion programs	\$1,013,213
Kaiser Permanente Educational Theatre	\$5,513,539
Community Giving Campaign administrative expenses	\$307,906
Grants and donations for the broader community ¹⁰	\$7,678,509
National Board of Directors fund	\$742,763
Subtotal	\$15,255,930
Health Research, Education, and Training	
Graduate Medical Education	\$106,261,332
Non-MD provider education and training programs ¹¹	\$28,809,048
Grants and donations for the education of health care professionals ¹²	\$828,614
Health research	\$25,940,655
Subtotal	\$161,839,649
TOTAL COMMUNITY BENEFITS PROVIDED	\$742,682,799

TABLE A ENDNOTES

- ¹ Amount includes hospital-specific, unreimbursed expenditures for Medi-Cal Managed Care members and Medi-Cal Fee-for-Service beneficiaries on a cost basis. Unreimbursed Medi-Cal expenses in 2021 are reduced by an accounting adjustment recognizing prior years Medi-Cal revenue from the Hospital Quality Assurance Fee program that had been previously deferred.
- ² Amount includes hospital-specific, unreimbursed expenditures for Other Plan members and unreimbursed inpatient expenditures for Charitable Health Coverage on a cost basis.
- ³ Amount includes unreimbursed care provided at this facility to patients who qualify for the Medical Financial Assistance on a cost basis.
- ⁴ 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.
- ⁵ Watts Counseling and Learning Center's service expenses are divided among three hospitals: KFH-Downey, KFH-South Bay, and KFH-West Los Angeles.
- ⁶ 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.
- ⁷ 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.
- ⁸ The amount reflects the costs related to providing a dedicated community benefit department and related operational expenses.
- ⁹ 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.
- ¹⁰ 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 after scholarships 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 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 2021

NORTHERN CALIFORNIA HOSPITALS		SOUTHERN CALIFORNIA HOSPITALS	
Antioch	\$17,917,777	Anaheim	\$16,356,394
Fremont	\$7,116,988	Baldwin Park	\$17,686,803
Fresno	\$16,430,983	Downey	\$20,875,611
Manteca	\$26,686,282	Fontana	\$34,923,576
Modesto	\$17,136,688	Irvine	\$4,235,405
Oakland	\$42,896,496	Los Angeles	\$43,202,504
Redwood City	\$12,306,878	Moreno Valley	\$7,180,582
Richmond	\$33,878,375	Ontario	\$8,042,184
Roseville	\$26,457,596	Panorama City	\$15,120,887
Sacramento	\$50,937,840	Riverside	\$20,134,773
San Francisco	\$30,194,677	San Diego (2 Hospitals)	\$27,423,902
San Jose	\$21,292,093	South Bay	\$14,724,924
San Leandro	\$17,323,610	West Los Angeles	\$23,634,640
San Rafael	\$9,970,325	Woodland Hills	\$12,009,318
Santa Clara	\$29,099,172		
Santa Rosa	\$16,739,665		
South Sacramento	\$38,816,252		
South San Francisco	\$11,517,778		
Vacaville	\$12,770,478		
Vallejo	\$23,750,994		
Walnut Creek	\$13,889,350		
Northern California Total	\$477,131,296	Southern California Total	\$265,551,503

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, residences, 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-Riverside 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 table includes race, ethnicity data for the KFH-Riverside service area. 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/Latinx" indicates total population percentage reporting as Hispanic/Latinx.

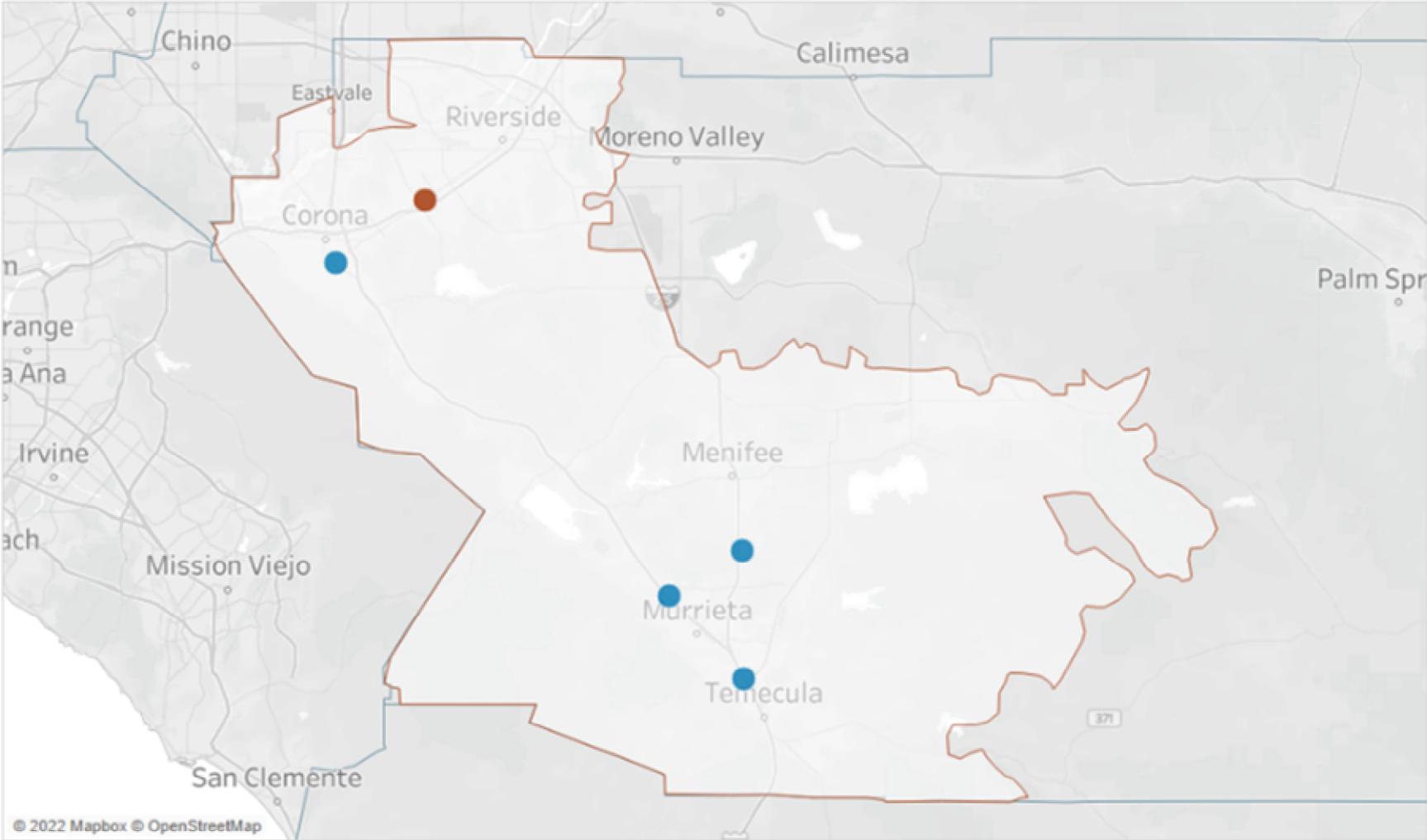
Total population:	1,485,220
American Indian/Alaska Native	0.4%
Asian	8.1%
Black	5.6%
Hispanic	46.9%
Multiracial	2.9%
Native Hawaiian/other Pacific Islander	0.3%
Other race/ethnicity	0.2%
White	35.5%
Under age 18	26.5%
Age 65 and over	12.0%

C. Map and Description of Community Served

The KFH-Riverside service area includes Corona, Eastvale, Hemet, Jurupa Valley, Lake Elsinore, Menifee, Murrieta, Norco, Quail Valley, Riverside, Romoland, Temecula, Wildomar, and Winchester.

KFH-Riverside Service Area Map

● Kaiser Permanente hospital ● Kaiser Permanente medical offices



IV. KFH-Riverside Community Health Needs

The following are the health needs that KFH-Riverside 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 Care: Access to adequate health care and mental health care are certainly important issues, including the importance of access to services available in the community (e.g., nonprofits, free resources, etc.). According to 2016 data, roughly 14% are uninsured in Riverside in contrast to 12% who are uninsured in the United States. Access to care was selected as a priority area because it was deemed critical by the community, which was demonstrated in a survey we conducted asking the community to let us know which issues they deem most important. Additionally, access to care was selected because KFH-Riverside finds health insurance coverage to be essential to improving the health of our community.

Behavioral Health (Mental Health and Substance Abuse): Community engagement data suggests mental health is a high priority area by the local community. Data shows that residents in the KFH-Riverside service area report having 3.9 poor mental health days per month. In comparison, California residents report 3.7 poor mental health days per month. There are also significant disparities in impact. The worst performing ethnicity experiences 63% higher than average rates of suicide in the service area. Behavioral health was selected largely due to growing community concern about the issue of mental health. Community members are concerned about minimizing the negative consequences of poor mental health such as suicide and interpersonal violence. At the same time, fewer poor mental health days ultimately equates to a greater number of good mental health days—which is at the heart of individuals flourishing.

Economic Opportunity: Economic opportunities—such as education, jobs, affordable housing, and other opportunities to reduce poverty—are an upstream predictor of good health. Proper education, income, and access to gainful employment equate to better health care, and better quality of life. The concept of economic opportunity was consistently identified as a priority issue throughout community engagement. Data supports community input: the median household income for Riverside is \$58,972 while the median for the state of California is \$64,500. Economic opportunity was selected as a priority area because it is a strong predictor of health. Poverty can affect education level, access to healthy foods, health behaviors, and long-term health outcomes. Interventions aimed at improving the predictors of health, like economic opportunity, can result in better overall long-term health outcomes.

Obesity/Diabetes/Stroke: Obesity has been a long-standing priority in the community. Additionally, obesity is considered an upstream health issue that leads to deadly health ailments such as heart disease and diabetes. The obesity prevalence rate in the Riverside region is exceedingly high—approximately 25.7% of the population is obese. Obesity was selected as a priority area

for several reasons. Foremost, obesity often leads to other health issues—so minimizing obesity could potentially reduce the prominence of a variety of health problems (e.g., diabetes, heart disease, some cancers, stroke, etc.). In addition, obesity affects a high proportion of the population, obesity has been a priority area for KFH-Riverside for quite some time, and there remains work to be done for our community in this area. As part of these efforts, KFH-Riverside will also address food insecurity. Roughly 9.4% of people living in Riverside County experienced food insecurity at some point during the year. Ensuring that families have regular access to nutritious food is imperative for good long-term health.

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-Riverside to conduct a selection process based on critical criteria including health need severity, magnitude, inequity, and the extent to which KFH-Riverside 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: asthma, cancer, and HIV/AIDS.

Asthma was not selected as an area to address largely because the severity of the issue is not exceedingly alarming at this time—asthma currently results in a 13.3% reduction in length of life per year, which is lower than some of the other top health issues.

Cancer was not selected due to the relatively low prevalence, affecting 4.0% of the KFH Riverside service area. In addition, there are community resources currently available to address the issue.

HIV/AIDS was not selected because the prevalence is roughly 0.3% in the KFH Riverside service area. Lastly, there are other community organizations working to address HIV/AIDS.

V. 2021 Year-End Results for KFH-Riverside

The 2021 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. 2021 Community Benefit Financial Resources Provided by KFH-Riverside

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-Riverside 2021 Year-End Community Benefit Expenditures

	2021
Medical Care Services for Vulnerable Populations	
Medi-Cal shortfall ¹	\$7,099,192
Charity care: Charitable Health Coverage Programs ²	\$5,402
Charity care: Medical Financial Assistance Program ³	\$6,678,403
Grants and donations for medical services ⁴	\$158,527
Subtotal	\$13,941,524
Other Benefits for Vulnerable Populations	
Summer Youth and INROADS programs ⁶	\$16,873
Grants and donations for community-based programs ⁷	\$661,985
Community Benefit administration and operations ⁸	\$719,673
Subtotal	\$1,398,531
Benefits for the Broader Community	
Community health education and promotion programs	\$87,418
Kaiser Permanente Educational Theatre ⁹	\$340,142
Grants and donations for the broader community ¹⁰	\$94,834
National board of directors fund	\$25,262
Subtotal	\$547,656
Health Research, Education and Training	
Graduate Medical Education	\$3,178,909
Non-MD provider education and training programs ¹¹	\$402,724
Grants and donations for health research, education, and training ¹²	\$61,577
Health research	\$603,852
Subtotal	\$4,247,062
Total Community Benefits Provided	\$20,134,773

TABLE C ENDNOTES

- 1 Amount includes hospital-specific, unreimbursed expenditures for Medi-Cal Managed Care members and Medi-Cal Fee-for-Service beneficiaries on a cost basis.
- 2 Amount includes hospital-specific, unreimbursed expenditures for Other Plan members and unreimbursed inpatient expenditures for Charitable Health Coverage on a cost basis.
- 3 Amount includes unreimbursed care provided at this facility to patients who qualify for the Medical Financial Assistance on a cost basis.
- 4 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.
- 5 Watts Counseling and Learning Center's service expenses are divided among three hospitals: KFH-Downey, KFH-South Bay, and KFH-West Los Angeles.
- 6 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.
- 7 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.
- 8 The amount reflects the costs related to providing a dedicated community benefit department and related operational expenses.
- 9 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.
- 10 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. 2021 Examples of KFH-Riverside 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-Riverside 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 conducts evaluations 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-Riverside. 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-Riverside 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 2021 (Tables B and C).

In addition to the below examples, which address specific health needs, Kaiser Permanente, Southern California implements additional 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 2021 Educational Theater provided 113 events in KFH-Riverside communities, reaching 11,331 youth 675 adults across 15 locations.

Need	Summary of impact	Examples of impactful efforts
<p>Access to Care</p>	<p>During 2021, Kaiser Permanente awarded 13 grants, totaling \$173,500 addressing this priority health need in the Riverside service area. In addition, a portion of money managed by a donor advised fund at California Community Foundation was used to award 4 grants, totaling \$111,666 that address this need.</p>	<p><u>Providing Affordable Healthcare</u> In 2021, KFH-Riverside provided \$7,099,192 medical care services to 43,983 Medi-Cal recipients (both health plan members and non-members) and \$6,678,403 in medical financial assistance (MFA) for 7,929 beneficiaries.</p> <p><u>Community Health Association Inland Southern Region (Core Operating - Capacity Building)~*</u> Community Health Association Inland Southern Region was awarded \$450,000 over two years to support member clinics in delivering culturally appropriate quality care to medically indigent, underserved, and uninsured and underinsured individuals. The program is expected to build capacity and provide technical assistance and improvement activities to 200 clinics in San Bernardino and Riverside counties.</p> <p><u>California Primary Care Association (CPCA Core Grant Proposal)~*</u> CPCA was awarded \$300,000 over two years to support the organization’s core services, including training, technical assistance, conferences, and peer networks. The grant is expected to serve 35,000 California community health center staff and leadership, policy makers, and stakeholders.</p> <p><u>Riverside Free Clinic (Comprehensive Health Services for the Underserved)</u> Riverside Free Clinic was awarded \$20,000 over one year to provide free comprehensive health services to Riverside’s (city and county) underserved population as well as to increase awareness of these services. The program is expected to serve 260 individuals</p>

Need	Summary of impact	Examples of impactful efforts
<p>Economic Opportunity</p>	<p>During 2021, Kaiser Permanente awarded 18 grants, totaling \$237,021 addressing this priority health need in the Riverside service area. In addition, a portion of money managed by a donor advised fund at California Community Foundation was used to award 5 grants, totaling \$163,333 that address this need.</p>	<p><u>California Housing Services & Operating Subsidy Fund for Project Homekey (NCAL Regional Grants splits with SCAL Regional Grants)~*</u> Enterprise Community Partners was awarded \$12,500,000 over two years to establish a public-private partnership fund to support operating costs and wraparound services for vulnerable populations. The partnership is expected to provide housing for about 1,500 individuals and technical assistance to 20 housing projects across California.</p>
		<p><u>Initiative for a Competitive Inner City, Inc. (Inner City Capital Connections Program)~</u> Initiative for a Competitive Inner City, Inc. was awarded \$180,000 to support business owners in under-resourced communities to build capacity for sustainable growth. The initiative is expected to provide training and resources for 50-75 local businesses in the Kaiser Permanente Southern California Region.</p>
		<p><u>Social Work Action Group (Homeless Encampment Response Team)</u> The Social Work Action Group was awarded \$25,000 over one year to provide a critical crisis response to a lack of primary care and behavioral health care for those most vulnerable and hardest to serve—those residing in homeless encampments located throughout mid and southwest Riverside County. The program is expected to serve 85 individuals.</p>
<p>Mental Health</p>	<p>During 2021, Kaiser Permanente awarded 12 grants, totaling \$236,500 addressing this priority health need in the Riverside service area.</p>	<p><u>Children Now (Child Behavioral Health Agenda)~</u> Children Now was awarded \$300,000 over two years to lead the development of California CBHA policies to improve children’s behavioral health. The program is expected to develop a policy agenda to better serve children and youth exposed to poverty, racism, and adverse childhood experiences in California.</p>

Need	Summary of impact	Examples of impactful efforts
		<p><u>Carolyn E. Wylie Center for Children, Youth & Families (Coping Skills Training for Very Young Children)</u></p> <p>The Carolyn E. Wylie Center for Children, Youth & Families was awarded \$25,000 over one year to provide workshops for children on coping techniques to prepare them for middle school, high school, and beyond. The program is expected to serve 3,000 individuals.</p>
<p>Obesity/ Healthy Eating Active Living</p>	<p>During 2021, Kaiser Permanente awarded 3 grants, totaling \$46,250 addressing this priority health need in the Riverside service area. In addition, a portion of money managed by a donor advised fund at California Community Foundation was used to award 4 grants, totaling \$157,483 that address this need.</p>	<p><u>Boys & Girls Club of Menifee Valley (Healthy Families & Safe Places)</u></p> <p>The Boys & Girls Club of Menifee Valley was awarded \$25,000 over one year to run Healthy Families & Safe Places programs in collaboration with local professionals to combat obesity among youth and adults, to provide a safe place both physically and emotionally, and to provide economic opportunity to parents by providing a place for their child to be while they work. The program is expected to serve 2,000 individuals.</p>