



# Kaiser Foundation Hospital – Southern California Region

2018 COMMUNITY BENEFIT YEAR-END REPORT AND 2017-2019 COMMUNITY BENEFIT PLAN

## MORENO VALLEY

Submitted to the Office of Statewide Health Planning and Development in compliance with Senate Bill 697, California Health and Safety Code Section 127350.

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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 more than 12 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 more than 70 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 KP 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 2018 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 Rafael, Santa Clara, Santa Rosa, South Bay, South Sacramento, South San Francisco, Vacaville, Vallejo, Walnut Creek, West Los Angeles, and Woodland Hills.

In 2018, Kaiser Foundation Hospitals in Northern and Southern California Regions provided a total of \$1,220,499,099 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 – Total Community Benefits Provided in 2018 across California KFH**

<b>Medical Care Services for Vulnerable Populations</b>	
Medi-Cal shortfall <sup>1</sup>	\$740,302,826
Charity care: Medical Financial Assistance Program <sup>2</sup>	\$252,514,999
Grants and donations for medical services <sup>3</sup>	\$24,632,288
<b>Subtotal</b>	<b>\$1,017,450,114</b>
<b>Other Benefits for Vulnerable Populations</b>	
Watts Counseling and Learning Center <sup>4</sup>	\$3,171,145
Educational Outreach Program	\$977,755
Summer Youth and INROADS programs <sup>5</sup>	\$3,423,227
Grants and donations for community-based programs <sup>6</sup>	\$30,937,535
Community Benefit administration and operations <sup>7</sup>	\$12,672,094
<b>Subtotal</b>	<b>\$51,181,755</b>
<b>Benefits for the Broader Community<sup>8</sup></b>	
Community health education and promotion programs	\$1,028,815
Kaiser Permanente Educational Theatre	\$5,732,278
Community Giving Campaign administrative expenses	\$656,149
Grants and donations for the broader community <sup>9</sup>	\$3,975,643
National board of directors fund	\$742,683
<b>Subtotal</b>	<b>\$12,135,568</b>
<b>Health Research, Education, and Training</b>	
Graduate Medical Education	\$83,120,684
Non-MD provider education and training programs <sup>10</sup>	\$24,019,233
Grants and donations for the education of health care professionals <sup>11</sup>	\$1,706,941
Health research	\$30,884,804
<b>Subtotal</b>	<b>\$139,731,662</b>
<b>TOTAL COMMUNITY BENEFITS PROVIDED IN 2018</b>	<b>\$1,220,499,099</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 unreimbursed care provided at this facility to patients who qualify for the Medical Financial Assistance and Indigent Care programs on a cost basis.
- <sup>3</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>4</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>5</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 a related denominator such as the number of Summer Youth students hired.
- <sup>6</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>7</sup> The amount reflects the costs related to providing a dedicated community benefit department and related operational expenses.
- <sup>8</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>9</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>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 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.

**Table B – Community Benefits Provided in 2018 by KFH Service Area**

<b>NORTHERN CALIFORNIA HOSPITALS</b>		<b>SOUTHERN CALIFORNIA HOSPITALS</b>	
Antioch	\$32,394,786	Anaheim	\$42,524,980
Fremont	\$14,061,863	Baldwin Park	\$27,713,466
Fresno	\$11,163,875	Downey	\$40,855,894
Manteca	\$30,660,309	Fontana	\$69,928,344
Modesto	\$17,944,158	Irvine	\$16,693,413
Oakland	\$53,802,561	Los Angeles	\$48,562,408
Redwood City	\$16,822,970	Moreno Valley	\$13,225,236
Richmond	\$35,849,979	Ontario	\$17,190,388
Roseville	\$50,946,592	Panorama City	\$36,968,238
Sacramento	\$85,057,853	Riverside	\$34,701,604
San Francisco	\$35,547,422	San Diego	\$45,996,597
San Jose	\$29,984,480	South Bay	\$27,798,856
San Leandro	\$40,469,133	West Los Angeles	\$37,153,326
San Rafael	\$17,905,752	Woodland Hills	\$25,520,517
Santa Clara	\$48,816,820		
Santa Rosa	\$35,993,701		
South Sacramento	\$63,545,863		
South San Francisco	\$16,389,599		
Vacaville	\$28,202,916		
Vallejo	\$43,466,531		
Walnut Creek	\$26,638,672		
<b>Northern California Total</b>	<b>\$735,665,834</b>	<b>Southern California Total</b>	<b>\$484,833,265</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 healthcare 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, Department of Research & Evaluation (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-Moreno Valley and Coachella Valley Community Served**

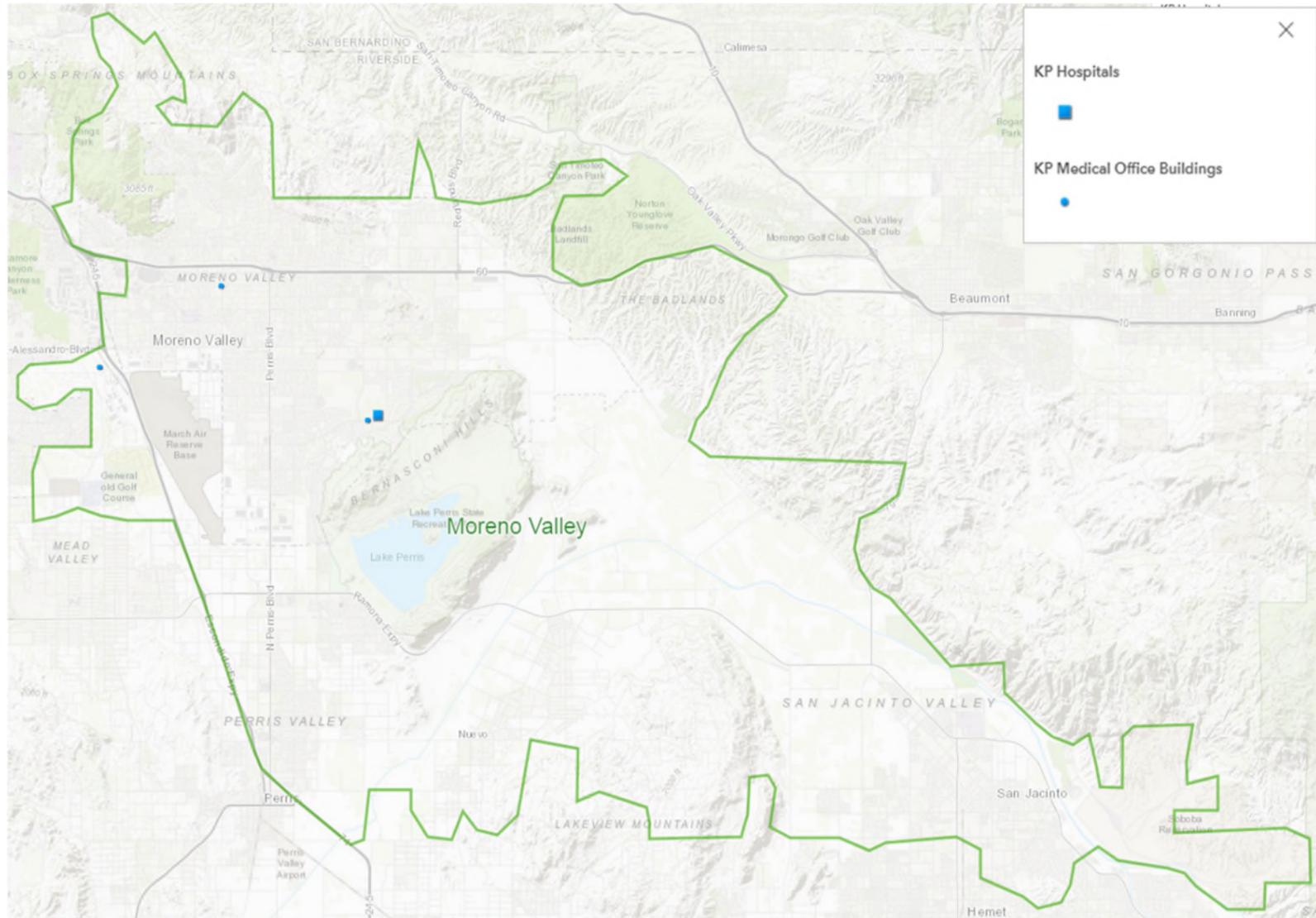
#### **A. Kaiser Permanente's Definition of Community Served**

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.

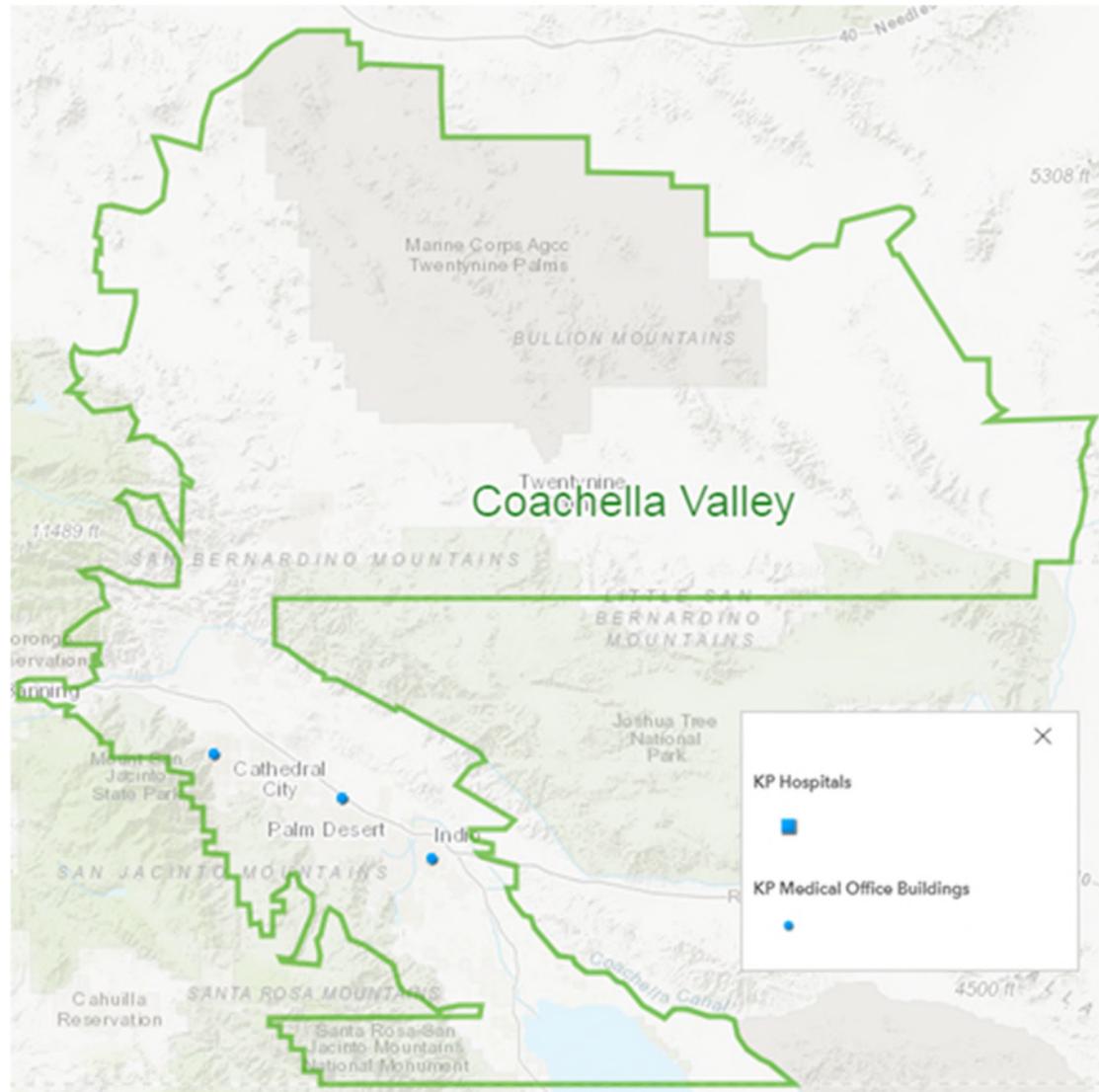
#### **B. Map and Description of Community Served**

The KFH-Moreno Valley and Coachella Valley service area includes Cabazon, Cathedral City, Coachella, Desert Hot Springs, Indian Wells, Indio, Joshua Tree, La Quinta, March Air Reserve Base, Mecca, Moreno Valley, Morongo Valley, Nuevo, Palm Springs, Palm Desert, Perris, Rancho Mirage, Salton City, San Jacinto, Thermal, Thousand Palms, Twentynine Palms, Whitewater and Yucca Valley.

# KFH-Moreno Valley Service Area Map



# KFH-Coachella Valley Service Area Map



## C. Demographic Profile of the Community Served

The following tables include race, ethnicity, and additional socioeconomic data for the KFH-Moreno Valley and Coachella Valley 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/Latino" indicates total population percentage reporting as Hispanic/Latino.

### KFH-Moreno Valley Service Area Demographics

Race/Ethnicity		Socioeconomic	
Total Population	318,576	Living in Poverty (<100% Federal Poverty Level)	19.48%
Asian	4.99%	Children in Poverty	27.58%
Black	14.17%	Unemployment	4.3%
Hispanic/Latino	58.40%	Uninsured Population	17.62%
Native American/Alaska Native	0.29%	Adults with No High School Diploma	25.80%
Pacific Islander/Native Hawaiian	0.47%		
Some Other Race	0.14%		
Multiple Races	1.91%		
White	19.64%		

### KFH-Coachella Valley Service Area Demographics

Race/Ethnicity		Socioeconomic	
Total Population	513,793	Living in Poverty (<100% Federal Poverty Level)	20.96%
Asian	2.68%	Children in Poverty	32.39%
Black	2.86%	Unemployment	4.2%
Hispanic/Latino	48.44%	Uninsured Population	16.48%
Native American/Alaska Native	0.42%	Adults with No High School Diploma	20.50%
Pacific Islander/Native Hawaiian	0.14%		
Some Other Race	0.17%		
Multiple Races	1.73%		
White	43.57%		

## **IV. Description of Community Health Needs Addressed by KFH-Moreno Valley and Coachella Valley**

The following are the health needs that KFH-Moreno Valley and Coachella Valley is addressing during the 2017-2019 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 2017-2019 Implementation Strategy Report at: <http://www.kp.org/chna>.

### **A. Access to Care**

The ability to access medical care is a wide-reaching construct that includes aspects such as the presence of health insurance, the affordability of seeking treatment, the availability of health care providers who can provide treatment, the ability to get to places where treatment is provided, and other issues around accessibility. Many people in the KFH-Moreno Valley service area still lack health insurance (22% are uninsured), and those that have it are often unclear on how to navigate the health care system and how to use it. Even those with health insurance who know how to get care can struggle to receive the care they need due to a shortage of providers; the local ratio of primary care providers to patient population is nearly half the California State average. This health need was selected because of its high priority ranking and KFH-Moreno Valley's wealth of existing resources and connections to address this issue.

### **B. Mental and Behavioral Health**

Mental health is the state of well-being in which every individual realizes his or her own potential, can cope with normal stresses of life, and is able to contribute to his or her community. Mental health includes not only the absence of negative mental health states (e.g., anxiety, depression, etc.) but also the presence of positive mental health states (e.g., satisfaction, self-worth, etc.) Mental health issues are closely related to other issues such as alcohol and substance use and abuse and smoking. Two indicators of mental health in the KFH-Moreno Valley service area are rates of suicide and the availability of mental health providers. In Coachella Valley, suicide mortality rates are much higher than in the State of California overall (14.2 versus 9.8 per 100,000 population). Additionally, there is a serious lack of mental health care providers; there are about 70 providers per 100,000 people in the KFH-Moreno Valley service area (compared to the state average of 157 per 100,000). KFH-Moreno Valley has many existing partnerships that can be used to address this issue.

### **C. Obesity/HEAL/Diabetes**

Excess weight is a major problem in the U.S. Being overweight, or, at a more extreme level, obese, can cause many health issues and exacerbate many existing conditions. Obesity is caused, in part, by an imbalance of energy output to energy intake; that is, eating too much or eating unhealthy food, while not obtaining enough exercise. Diabetes is the 7th leading cause of death in

America. 95% of people with diabetes have type 2 diabetes, which is highly associated with obesity/overweight. Over 60% of local adults are overweight or obese. Obesity is a risk factor for many of the other health issues that were identified (e.g., cardiovascular disease, cancer, diabetes, etc.), and thus, is a good place to start to reduce those issues as well. KFH-Moreno Valley will strive to encourage healthy eating and active living in order to reduce the number of people who are overweight or obese and or are at risk of having diabetes. KFH-Moreno Valley will continue to collaborate with existing resources and connections to address this need.

## **V. 2018 Year-End Results for KFH-Moreno Valley and Coachella Valley**

### **A. 2018 Community Benefit Financial Resources Provided by KFH-Moreno Valley and Coachella Valley**

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-Moreno Valley and Coachella Valley 2018 Year-End Community Benefit Expenditures**

	<b>2018 Totals</b>
<b>Medical Care Services for Vulnerable Populations</b>	
Medi-Cal shortfall <sup>1</sup>	\$9,765,751
Charity care: Medical Financial Assistance Program <sup>2</sup>	\$2,309,621
Grants and donations for medical services <sup>3</sup>	\$162,834
<b>Subtotal</b>	<b>\$12,238,206</b>
<b>Other Benefits for Vulnerable Populations</b>	
Summer Youth and INROADS programs <sup>5</sup>	\$34,967
Grants and donations for community-based programs <sup>6</sup>	\$251,893
Community Benefit administration and operations <sup>7</sup>	\$139,387
<b>Subtotal</b>	<b>\$426,247</b>
<b>Benefits for the Broader Community<sup>8</sup></b>	
Community health education and promotion programs	\$29,434
Kaiser Permanente Educational Theatre	\$104,953
Community Giving Campaign administrative expenses	\$4,836
Grants and donations for the broader community <sup>9</sup>	\$62,359
National board of directors fund	\$8,736
<b>Subtotal</b>	<b>\$210,318</b>
<b>Health Research, Education, and Training</b>	
Non-MD provider education and training programs <sup>10</sup>	\$59,001
Grants and donations for health research, education, and training <sup>11</sup>	\$41,443
Health research	\$250,021
<b>Subtotal</b>	<b>\$350,465</b>
<b>Total Community Benefits Provided</b>	<b>\$13,225,236</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 unreimbursed care provided at this facility to patients who qualify for the Medical Financial Assistance and Indigent Care programs on a cost basis.
- <sup>3</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> 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 a related denominator such as the number of Summer Youth students hired.
- <sup>6</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>7</sup> The amount reflects the costs related to providing a dedicated community benefit department and related operational expenses.
- <sup>8</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>9</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>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 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. 2018 Examples of KFH-Moreno Valley and Coachella Valley 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-Moreno Valley 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-Moreno Valley and Coachella Valley. 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- Moreno Valley and Coachella Valley 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 2018 (Tables B and C). For individual grant examples spanning two years (2017-2018), the cited payment amount represents the total dollars paid over the two-year time period. 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 2018, Educational Theater provided 24 events in 10 schools in the KFH-Moreno Valley communities, reaching 4,432 youth and 151 adults.
  - In 2018, Educational Theater provided 10 events in 5 schools in the KFH-Coachella Valley communities, reaching 1,658 youth and 60 adults.

Need	Summary of impact	Examples of most impactful efforts
<b>Access to Health Care</b>	<p>During 2018, Kaiser Permanente paid 7 grants, totaling \$326,667, addressing the priority health need in the KFH-Moreno Valley and KFH-Coachella Valley service areas. In addition, a portion of money managed by a donor advised fund at California Community Foundation was used to pay 3 grants, totaling \$591,667 that address this need.</p>	<p><b><u>Providing Affordable Health-care</u></b>  In 2018, KFH-Moreno Valley provided \$9,765,751 in medical care services to 16,244 Medi-Cal recipients (both health plan members and non-members) and \$2,309,621 in medical financial assistance (MFA) for 3,794 beneficiaries.</p> <p><b><u>Building Primary Care Capacity~</u></b>  The California Primary Care Association (CPCA) provides education, training, and advocacy to their member community health centers to best serve their low-income, underserved, and diverse patients. In 2018, Kaiser Permanente paid \$126,666 to CPCA to:</p> <ul style="list-style-type: none"> <li>• Hold statewide convenings and conferences and topic-specific peer networks to support over 1,200 California community health centers.</li> <li>• Provide 90 in-person and web-based trainings to over 4,400 attendees and 2,890 individual instances of technical assistance.</li> </ul> <p><b><u>Preserving and Expanding California Coverage Gains~</u></b>  Insure the Uninsured Project (ITUP) works to preserve and expand access to health care and coverage in California and to reduce access barriers for uninsured and underinsured populations. Over two years (2017-2018), Kaiser Permanente paid \$150,000 to ITUP to:</p> <ul style="list-style-type: none"> <li>• Conduct and disseminate health policy research.</li> <li>• Convene 13 regional statewide work groups to provide attendees with real-time updates on state and federal health care policy issues, emerging issues, and local collaboration opportunities.</li> <li>• Provide technical assistance to safety net providers and other stakeholders navigating health reform challenges.</li> <li>• Serve as a bridge between health policy and the health care sector to reach 19 million Californians.</li> </ul>

<p><b>Mental and Behavioral Health</b></p>	<p><b>Behavioral Health</b></p>	<p>During 2018, Kaiser Permanente paid 7 grants, totaling \$235,000, addressing the priority health need in the KFH-Moreno Valley and KFH-Coachella Valley service areas. In addition, a portion of money managed by a donor advised fund at California Community Foundation was used to pay 1 grant, totaling \$40,000 that address this need.</p>	<p><b><u>Health Care Access and Coverage for Homeless and at-risk Veterans</u></b>  United States Veterans Initiative provides primary care, mental health and case management services to at-risk, chronically homeless and disabled veterans at the March Air Reserve Base facility. In 2018, Kaiser Permanente awarded US Vets \$25,000 to:</p> <ul style="list-style-type: none"> <li>• Provide 219 veterans and their families with enrollment coordination services for all eligible health benefits.</li> <li>• Connect clients to a medical home and case management services.</li> <li>• Coordinate psychiatric, dental, addiction and transportation services.</li> </ul> <p><b><u>Strengthening Mental Health Policies and Practices in Schools~</u></b>  Children Now educates policymakers, school district leaders, and other key stakeholders about best practices and policy solutions to address suspension and expulsion policies that disproportionately impact students of color, improve school climate, and increase students' access to mental health services. Over two years (2017-2018), Kaiser Permanente paid \$150,000 to Children Now to:</p> <ul style="list-style-type: none"> <li>• Inform over 200 key legislators and stakeholders.</li> <li>• Support the California Department of Education in the development of the Whole Child Resource Map.</li> <li>• Lead committees for both the State School Attendance Review Board and the Superintendent's Mental Health Policy Workgroup.</li> </ul> <p><b><u>Improving Services for Human Trafficking Survivors~</u></b>  The Coalition to Abolish Slavery and Trafficking (CAST) expands services to improve health outcomes for trafficking victims in Los Angeles County. CAST coordinates a continuum of care for trafficking victims by combining social, medical, and legal services with leadership and advocacy. In 2018, Kaiser Permanente paid \$75,000 to CAST to:</p>
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- Coordinate Whole Person Care services, including housing, food, medical, mental health, legal, education, and employment for 100 human trafficking survivors.
- Educate and advocate with policymakers, county officials, and community leaders on how to expand or improve access to emergency and permanent housing for victims.

#### **Addressing Adverse Childhood Experiences (ACEs)\***

The Family Service Association Mental Health Staff Development program trains mental service providers in Parent Child Interaction Therapy, an evidence-based treatment for childhood behavioral issues. In 2018, Kaiser Permanente paid the association \$40,000 to:

- Train eight master level therapists in Adverse Childhood Experiences and Trauma Informed Practices.
- Fully implement Adverse Childhood Experience (ACEs) screening with 500 participants across all clinical programs.

#### **Mental Health First Aid Training**

Copper Mountain College Foundation invested in a Mental Health First Aid Train the Trainer model to help teachers and staff to identify, understand, and respond to signs of mental illness and substance abuse disorders. In 2018, Kaiser Permanente paid Copper Mountain Foundation \$10,000 to:

- Provide Mental Health First Aid training to 24 college employees.
- Identify a college staff to serve as the key instructor for future training sessions.
- Trained employees will provide Mental Health First Aid sessions throughout the campus and in community settings.

#### **Partnering around Mental Health**

KFH-Moreno Valley's Community Health Manager has participated in the Riverside Resilience Initiative, a county-wide collaborative which began in 2016. Community leaders formed two workgroups to work on strategies around innovative approaches to collecting ACEs data, activate policy and practice change to advance trauma informed care delivery. The

		<p>collaborative has hosted educational training webinars, town hall meetings, and learning workshops.</p> <p><b><u>Leveraging assets for Mental Health</u></b>  Our core functions across KP are using their assets to drive Mental &amp; Behavioral Health. For example:</p> <ul style="list-style-type: none"> <li>• Facilities: KFH-Moreno Valley conference room space was made available to the National Alliance for Mental Illness (NAMI) who provide the 10-week series Family to Family and Peer to Peer sessions at no cost to the community. During 2017-18, a total of 344 individuals participated in the weekly series.</li> </ul>
<p><b>Obesity/ HEAL/ Diabetes</b></p>	<p>During 2018, Kaiser Permanente paid 10 grants, totaling \$510,000, addressing the priority health need in the KFH-Moreno Valley and KFH-Coachella Valley service areas. In addition, a portion of money managed by a donor advised fund at California Community Foundation was used to pay 5 grants, totaling \$836,111 that address this need.</p>	<p><b><u>Advocating for Maternal, Infant, and Child Health~</u></b>  The California WIC Association (CWA) supports efforts to increase local WIC agencies' capacity, increase state and federal decision makers' understanding of WIC services, and increase the capacity of community health centers to build a breastfeeding continuum of care in low-income communities. Over two years (2017-2018), Kaiser Permanente paid \$100,000 to CWA to:</p> <ul style="list-style-type: none"> <li>• Pilot two video conferencing projects increasing awareness and consideration within the CA WIC community.</li> <li>• Collaborate with health centers to share WIC staff for nutrition and breastfeeding counseling (Watts Health Care and clinics in San Diego).</li> <li>• Work to strengthen ties with CPCA and present at CPCA's annual conference.</li> <li>• Visit all CA legislators with 44 appointments and drop-in visits.</li> <li>• Provide extensive information to legislators on nutrition and breastfeeding counseling, food benefits, local economic impacts to grocers, health outcomes, access to Farmers markets, and updates on immigration threats.</li> <li>• Participate in Capitol WIC Education Day in Sacramento with 50 attendees from 30 WIC agencies from all over the state.</li> </ul>

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**Fighting Food Insecurity~**

California Association of Food Banks' (CAFB) Farm to Family program's goal is to improve health food access by providing fresh produce to food banks, CalFresh outreach and enrollment, advocacy to support anti-hunger policies, and technical assistance to members. In 2018, Kaiser Permanente paid \$95,000 to CAFB to:

- Distribute 250,000 pounds of subsidized fresh fruits and vegetables to 11 member food banks.
- Maintain the State Emergency Food Assistance Program to provide food and funding of emergency food to food banks.

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**Healthy Living Program to Youth in Moreno Valley**

Think Together provides the Healthy Living Program at 20 schools in Moreno Valley and Val Verde Unified School District for the 2017-2018 school year. In 2018, Kaiser Permanente paid Think Together \$25,000 to:

- Provide 3,122 middle and elementary school students with nutrition education and physical activities.
  - Students in the program will engage in 30 minutes of physical activity at least four days a week through our CATCH (Coordinated Approach to Child Health) and new Skillastics® curriculum.
  - Students are learning about the nutritional value of various foods, tasting new fruits and vegetables, and learning to read food labels with discussion and reflection.
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### **Partnering around Obesity**

KP's partnership with Riverside County Health Coalition, which started in 2009, continues to align the strategies of the County Health Improvement Plan (CHIP) through a collaborative approach. Each quarterly meeting aims at providing topic specific expert panel speakers, discussions, and networking opportunities to the diverse and multi-sectoral group of community leaders. Topics in 2017 and 2018 have included: Racial & Ethnic Disparities Across the Lifespan; Improving Food Access in Riverside County; Education & Health; Developing a Resilient Community; Intersection between Behavioral & Physical Health; Housing & Health; and Healthy Cities Network

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### **Leveraging assets around Obesity and Health Living for Children**

Our core functions across KP are using their assets to drive the prevention of Obesity and Diabetes. For example:

- Responsive: KFH-Moreno Valley's Leadership Development Institute participants (400 managers) and outlying medical office building staff responded to Moreno Valley Unified School District's most under-resourced students by coordinating 3 collection drives throughout 2018. Through the direction of the District's Wellness Liaison, backpacks, shoes, and food pantry items have provided students with much needed items to thrive at school.