



Consolidated Community Benefit Plan FISCAL YEAR 2023

Kaiser Foundation Hospitals in California

VACAVILLE Northern California Region

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

Kaiser Foundation Hospitals (KFH)

Table of Contents

- I. Introduction and Background**
 - A. About Kaiser Permanente
 - B. About Kaiser Permanente Community Health
 - C. Purpose of the Report
- II. Overview and Description of Community Benefit Programs Provided**
 - A. California Kaiser Foundation Hospitals Community Benefit Financial Contribution
 - B. Medical Care Services for Vulnerable Populations
 - C. Other Benefits for Vulnerable Populations
 - D. Benefits for the Broader Community
 - E. Health Research, Education, and Training Programs
- III. Community Served**
 - A. Kaiser Permanente's Definition of Community Served
 - B. Demographic Profile of Community Served
 - C. Map and Description of Community Served
- IV. Description of Community Health Needs Addressed**
 - A. Health Needs Addressed
 - B. Health Needs Not Addressed
- V. Year-End Results**
 - A. Community Benefit Financial Resources
 - B. Examples of Activities to Address Selected Health Needs
- VI. Appendix**

I. Introduction and Background

A. About Kaiser Permanente

Kaiser Permanente is an integrated health care delivery system comprised of Kaiser Foundation Hospitals, Kaiser Foundation Health Plan, and physicians in the Permanente Medical Groups. For 75 years, Kaiser Permanente has been committed to shaping the future of health and health care — and helping our members, patients, and communities experience more healthy years. We are recognized as one of America’s leading health care providers and nonprofit health plans.

Kaiser Permanente is committed to helping shape the future of health care. Founded in 1945, Kaiser Permanente has a mission to provide high- quality, affordable health care services and to improve the health of our members and the communities we serve. We currently serve 12.6 million members in 8 states and the District of Columbia. Care for members and patients is focused on their total health and guided by their personal Permanente Medical Group physicians, specialists, and team of caregivers. Our expert and caring medical teams are empowered and supported by industry-leading technology advances and tools for health promotion, disease prevention, state-of-the-art care delivery, and world-class chronic disease management. Kaiser Permanente is dedicated to care innovations, clinical research, health education, and the support of community health.

B. About Kaiser Permanente Community Health

At Kaiser Permanente, we recognize that where we live and how we live has a big impact on our health and well-being. Our work is driven by our mission: to provide high-quality, affordable health care services and to improve the health of our members and our communities. It’s also driven by our heritage of prevention and health promotion, and by our conviction that good health is a fundamental right.

As the nation’s largest nonprofit, integrated health system, Kaiser Permanente is uniquely positioned to improve the health and wellbeing of the communities we serve. We believe that being healthy isn’t just a result of high-quality medical care. Through our resources, reach, and partnerships, we are addressing unmet social needs and community factors that impact health. Kaiser Permanente is accelerating efforts to broaden the scope of our care and services to address all factors that affect people’s health. Having a safe place to live, enough money in the bank, access to healthy meals and meaningful social connections is essential to total health. Now is a time when our commitment to health and values compel us to do all we can to create more healthy years for everyone. We also share our financial resources, research, nurses and physicians, and our clinical practices and knowledge through a variety of grantmaking and investment efforts.

As we reflect on how 2020 changed the world, we must recognize that communities everywhere are coping with unprecedented challenges magnified by the COVID-19 pandemic and a renewed struggle for racial equity and social justice.

Through our continued focus on expanding our community health approach we laid the foundation for an acceleration of work to meet the challenges posed by the public health crises we now face. We dedicated ourselves to improving the social health of our 12.6 million members and the millions of people who live in the communities we serve.

Learn more about Kaiser Permanente Community Health at <https://about.kaiserpermanente.org/community-health>.

For information on the CHNA, refer to the [2022 Community Health Needs Assessments and Implementation Strategies](http://www.kp.org/chna) (<http://www.kp.org/chna>).

C. Purpose of the Report

Since 1996, Kaiser Foundation Hospitals (KFH) in Northern and Southern California (NCAL, SCAL) have annually submitted to the California Department of Health Care Access and Information (HCAI) a Consolidated Community Benefit Plan, commonly referred to as the SB 697 Report (for Senate Bill 697 which mandated its existence). This plan fulfills the annual year-end community benefit reporting regulations under California Health and Safety Code, Section 127340 et seq. The report provides detailed information and financial data on the Community Benefit programs, services, and activities provided by all KFH hospitals in California.

II. Overview and Description of Community Benefit Programs Provided

A. California Kaiser Foundation Hospitals Community Benefit Financial Contribution

In California, KFH owns and operates 36 hospitals: 21 community hospitals in Northern California and 15 in Southern California, all accredited by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO). KFH hospitals are located in Anaheim, Antioch, Baldwin Park, Downey, Fontana, Fremont, Fresno, Irvine, Los Angeles, Manteca, Modesto, Moreno Valley, Oakland, Ontario, Panorama City, Redwood City, Richmond, Riverside, Roseville, Sacramento, San Diego, San Francisco, San Jose, San Leandro, San Marcos, San Rafael, Santa Clara, Santa Rosa, South Bay, South Sacramento, South San Francisco, Vacaville, Vallejo, Walnut Creek, West Los Angeles, and Woodland Hills.

In 2023, Kaiser Foundation Hospitals in Northern and Southern California Regions provided a total of \$1,156,318,352 in Community Benefit for a diverse range of community projects, medical care services, research, and training for health and medical professionals. These programs and services are organized in alignment with SB697 regulations:

- Medical Care Services for Vulnerable Populations
- Other Benefits for Vulnerable Populations
- Benefits for the Broader Community
- Health, Research, Education and Training

A breakdown of financial contributions is provided in Tables A. Note that 'non-quantifiable benefits' will be highlighted in the Year end Results section of KFH Community Benefit Plan, where applicable.

Table A

2023 Community Benefits Provided by Kaiser Foundation Hospitals in California (Endnotes in Appendix)

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

B. Medical Care Services for Vulnerable Populations

Medi-Cal

Kaiser Permanente provides coverage to Medi-Cal members in 22 counties in California through both direct contracts with the Department of Health Care Services (DHCS), and through delegated arrangements with other Medi-Cal managed care plans (MCPs). Kaiser Permanente also provides subsidized health care on a fee-for-service basis for Medi-Cal beneficiaries not enrolled as KFHP members. Reimbursement for some services is usually significantly below the cost of care and is considered subsidized care to non-member Medi-Cal fee-for-service patients.

Charitable Health Coverage

The Charitable Health Coverage program provides health care coverage to low-income individuals and families who don't have access to other public or private health coverage. CHC programs work by enrolling qualifying individuals in a Kaiser Permanente Individual and Family Health Plan. Through CHC, members' monthly premiums are subsidized, and members do not have to pay copays or out-of-pocket costs for most care at Kaiser Permanente facilities. Through CHC, members have a medical home that includes comprehensive coverage, preventive services and consistent access through the "front door" of the health delivery system.

Medical Financial Assistance

The Medical Financial Assistance program (MFA) improves health care access for people with limited incomes and resources and is fundamental to Kaiser Permanente's mission. Our MFA program helps low-income, uninsured, and underinsured patients receive access to care. The program provides temporary financial assistance or free care to patients who receive health care services from our providers, regardless of whether they have health coverage or are uninsured.

C. Other Benefits for Vulnerable Populations

Watts Counseling and Learning Center (SCAL)

Since 1967, the Watts Counseling and Learning Center (WCLC) has been a valuable community resource for low-income, inner-city families in South Central Los Angeles. WCLC provides mental health and counseling services, educational assistance to children with learning disabilities, and a state-licensed and nationally accredited preschool program. Kaiser Permanente Health Plan membership is not required to receive these services and all services are offered in both English and Spanish. This program primarily serves the KFH-Downey, KFH-South Bay and KFH-West LA communities.

Educational Outreach Program (SCAL)

Since 1992, Educational Outreach Program (EOP) has been empowering children and their families through several year-round educational, counseling, and social programs. EOP helps individuals develop crucial life-skills to pursue higher education, live a healthier lifestyle through physical activity and proper nutrition, overcome mental obstacles by participating in counseling, and instill confidence to advocate for the community. EOP primarily serves the KFH-Baldwin Park community.

Youth Internship and Education Programs (NCAL and SCAL)

Youth workforce programs such as the Summer Youth Employment Programs, IN-ROADS or KP LAUNCH focus on providing underserved diverse students with meaningful employment experiences in the health care field. Educational sessions and motivational workshops introduce them to the possibility of pursuing a career in health care while enhancing job skills and work performance. These programs serve as a pipeline for the organization and community-at-large, enhancing the future diversity of the health care workforce.

D. Benefits for the Broader Community

Community Health Education and Health Promotion Programs (NCAL and SCAL)

Health Education provides evidence-based clinically effective programs, printed materials, and training sessions to empower participants to build healthier lifestyles. This program incorporates tested models of behavior change, individual/group engagement and motivational interviewing as a language to elicit behavior change. Many of the programs and resources are offered in partnership with community-based organizations, and schools.

Kaiser Permanente Educational Theatre (NCAL and SCAL)

Kaiser Permanente's Educational Theatre has inspired and empowered millions of students and adults in communities to make healthy choices. Educational Theatre offers a wide range of award-winning theatrical productions and interactive workshops to schools throughout the Kaiser Permanente footprint.

Using the power of theatre and storytelling, our programs directly connect with students and adults through relatable characters and real-life situations. Audiences see themselves represented onstage in our culturally and ethnically diverse casts allowing them to connect with the narrative and educational messages in a meaningful way. Our team builds on this connection, inspiring students, and adults alike to make healthy choices and build stronger communities.

E. Health Research, Education, and Training Programs

Graduate Medical Education (GME)

The Graduate Medical Education (GME) program provides training and education for medical residents and interns in the interest of educating the next generation of physicians. Residents are offered the opportunity to serve a large, culturally diverse patient base in a setting with sophisticated technology and information systems, established clinical guidelines and an emphasis on preventive and primary care. The majority of medical residents are studying within the primary care medicine areas of family practice, internal medicine, obstetrics-gynecology, pediatrics, preventive medicine, and psychiatry.

Non-MD Provider Education and Training Programs

Kaiser Permanente provides a range of training and education programs for nurse practitioners, nurses, radiology and sonography technicians, physical therapists, post-graduate psychology and social work students, pharmacists, and other non-physician health professionals. This includes Northern California Region's Kaiser Permanente School of Allied Health Sciences, which offers 18-month training programs in sonography, nuclear medicine, and radiation therapy, and Southern California Region's Hippocrates Circle Program, which was designed to provide youth from under-represented communities and diverse backgrounds with an awareness of career opportunities as a physician.

Health Research

Kaiser Permanente's research efforts are core to the organization's mission to improve population health, and its commitment to continued learning. Kaiser Permanente researchers study critical health issues such as cancer, cardiovascular conditions, diabetes, behavioral and mental health, and health care delivery improvement. Kaiser Permanente's research is broadly focused on three themes: understanding health risks; addressing patients' needs and improving health outcomes; and informing policy and practice to facilitate the use of evidence-based care.

Kaiser Permanente is uniquely positioned to conduct research due to its rich, longitudinal, electronic clinical databases that capture virtually complete health care delivery, payment, decision-making and behavioral data across inpatient, outpatient, and emergency department settings.

III. Community Served

A. Kaiser Permanente's Definition of Community Served

Kaiser Permanente defines the community served by a hospital as those individuals residing within its hospital service area. A hospital service area includes all residents in a defined geographic area surrounding the hospital and does not exclude low-income or underserved populations.

B. Demographic Profile of Community Served

KFH-Vacaville service area demographic profile

Total population:	313,886
American Indian/Alaska Native	0.5%
Asian	11.2%
Black	10.7%
Hispanic	30.3%
Multiracial	5.5%
Native Hawaiian/other Pacific Islander	0.7%
Other race/ethnicity	0.4%
White	40.8%
Under age 18	23.4%
Age 65 and over	14.6%

SOURCE: AMERICAN COMMUNITY SURVEY, 2015-2019

C. Map and Description of Community Served

KFH-Vacaville service area

 Kaiser Permanente hospital  Kaiser Permanente medical offices



The KFH-Vacaville service area includes the Solano County communities of Dixon, Elmira, Fairfield, Rio Vista, Suisun City, Vacaville, and City of Winters in Yolo County. The KFH-Vacaville hospital is centrally located along the Interstate 80 corridor in Solano County and intersects with Interstate 505.

IV. Description of Community Health Needs Addressed

The following are the health needs KFHVacaville is addressing during the 2023-2025 Implementation Strategy period. For information about the process and criteria used to select these health needs and the health needs that were not selected (and the rationale), please review the [2022 CHNA Report and the 2023-2025 Implementation Strategy Report](http://www.kp.org/chna). (<http://www.kp.org/chna>).

A. Health Needs Addressed

1. **Access to care:** Access to comprehensive, quality health care services — including having insurance, local care options, and a usual source of care — is important for ensuring quality of life for everyone. Insurance by itself does not guarantee access to appropriate care, and many community members experience barriers related to language, transportation options, and differential treatment based on race, as well as access to fewer health care resources. In the Vacaville service area, significant racial/ethnic and other disparities in access to care indicate that there is an urgent need for more linguistically and culturally responsive care. There are disparities such as infant mortality rates for Black infants that are over twice that of white infants and unequal access to a usual source of care for Latinx residents compared to white residents. Interviewed community leaders shared that in addition to these disparities, there are insufficient specialty care options, too few providers for Medi-Cal and uninsured populations, and health services which have limited hours of operation and are inaccessible via public transportation. They also identified strategies to address access to care such as supporting vulnerable communities in accessing care; enhancing training for providers on culturally and linguistically responsive care; expanding access to specialty care providers across hospital systems; and strengthening cross-sector collaboration and coordination to integrate and improve care for individuals across providers.
2. **Mental & behavioral Health:** Mental health affects all areas of life, including a person's physical well-being, ability to work and perform well in school, and to participate fully in family and community activities. Anxiety, depression, and suicide ideation are on the rise due to the COVID-19 pandemic, particularly among Black and Latinx Americans. Communities across the country are experiencing a critical lack of capacity to meet the increased demand for mental health services. In the Vacaville service area, rates of death due to suicide, alcohol related disease, and drug overdoses per 100,000 are higher than state averages. There are disparities such as high rates of suicide attempts among LGBTQ+ students compared to straight students and lower rates of receiving sought-after treatment for behavioral health issues among Latinx and multiracial residents compared to white and Black residents. The interviewed community leaders shared that there are insufficient mental health services to meet the needs of the community, including for moderate mental health needs, on-site services, specialty care, and mental health services for underinsured individuals. They also expressed an urgent need for more linguistically and culturally responsive services. They identified strategies to address mental and behavioral health such as applying place-based and community specific strategies; hiring mental health providers who are culturally- and linguistically responsive to the communities they serve; and expanding the use of peers and trusted messengers in delivering care.
3. **Income & employment:** Economic opportunity provides individuals with jobs, income, a sense of purpose, and opportunities to improve their economic circumstances over time. People with steady employment are less likely to have an income below

poverty level and are more likely to be healthy. Those not having enough resources to meet daily needs such as safe housing and enough food to eat are more likely to experience health-harming stress and die at a younger age. In the Vacaville service area, an increasing cost of living amid stagnant wages has put pressure on workers with low income, who often must choose whether to prioritize housing, food, or health care. There are disparities such as lower per capita incomes for Black and Latinx residents and high rates of child poverty in the county’s more rural areas. The interviewed community leaders shared that frontline workers such as migrant seasonal farm workers and those in the hospitality industry have been disproportionately impacted by economic insecurity. They also identified strategies to address income and employment such as expanding job training with local companies; subsidies to ease economic pressures for low-income families; and addressing the root of economic insecurity issues through advocacy and systems change efforts.

4. **Housing:** Having a safe place to call home is essential for the health of individuals and families. Families’ greatest expenditure is housing, and for most homeowners, their most significant source of wealth. Housing costs have soared in recent years, causing financial difficulty. Black and Latinx renters are more likely to live in cost-burdened households and face housing instability. In the Vacaville service area, housing has become increasingly expensive as wages have remained stagnant. Other disparities such as a lack of affordable housing options for low-income households and seniors and high-cost burden for Black and Native American renters also exist. The Interviewed community leaders shared that the high cost of housing has led to the displacement of long-term residents and younger families who can no longer afford to live and work in the area. They also identified strategies to address housing such as expanding housing stock to include more affordable options; addressing barriers to economic security by increasing local wages; and collaborating across sectors towards advocacy and systems change efforts.

B. Health Needs Not Addressed

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

Reason	Community safety	Transportation
Community does not prioritize this need over other issues	X	X
Lack of feasible evidence-based or promising practices to address this need		
Less feasibility to make an impact on this need	X	X
Less ability for Kaiser Permanente to leverage expertise or assets to address this need	X	X
Less ability to leverage community assets to address this need		X
Aspects of this need will be addressed in strategies for other needs	X	X

V. Year-End Results

A. Community Benefit Financial Resources

Total Community Benefit expenditures are reported as follows:

- Medical care services for vulnerable populations include unreimbursed inpatient costs for participation in Kaiser Permanente-subsidized and government-sponsored health care insurance programs.
- Since 2006, figures for subsidized products have been reported on a cost-basis, (e.g., the difference of total revenues collected for services less direct and indirect expenses).
- Grant and donations are recorded in the general ledger in the appropriate amount and accounting period on an accrual, not cash basis. The amount reported reflects hospital-specific, unreimbursed expenditures. When hospital-specific expenditures are not available, dollars are allocated to each hospital based on the percentage of KFHP members.
- The unreimbursed portion of medical, nursing, and other health care professional education and training costs are included.

Resource allocations are reported, as follows:

- Financial expenditures are reported in exact amounts, if available, by hospital service area.
- If exact financial expenditure amounts are not available by hospital service area, then regional expenses are allocated proportionally based on KFHP membership or other quantifiable data.

Table B**KFH-Vacaville Community Benefits Provided in 2023** (Endnotes in Appendix)

Category	Total Spend
Medical Care Services for Vulnerable Populations	
Medi-Cal shortfall ¹	\$10,385,031
Charity care: Charitable Health Coverage programs	\$31
Charity care: Medical Financial Assistance Program ²	\$8,987,107
Grants and donations for medical services ³	\$318,595
<i>Subtotal</i>	\$19,690,763
Other Benefits for Vulnerable Populations	
Youth Internship and Education programs ⁵	\$142,133
Grants and donations for community-based programs ⁶	\$184,666
Community Benefit administration and operations ⁷	\$187,766
<i>Subtotal</i>	\$514,565
Benefits for the Broader Community	
Community Giving Campaign administrative expenses	\$8,427
Grants and donations for the broader community ⁸	\$357,207
National Board of Directors fund	\$15,954
<i>Subtotal</i>	\$381,588
Health Research, Education, and Training	
Graduate Medical Education ⁹	\$1,013,447
Non-MD provider education and training programs ¹⁰	\$650,704
Health research	\$1,180,924
<i>Subtotal</i>	\$2,845,075
TOTAL COMMUNITY BENEFITS PROVIDED	\$23,431,991

B. Examples of Activities to Address Selected Health Needs

All Kaiser Foundation Hospitals (KFH) carefully consider the evidence-base when determining which goals, strategies, and related activities would be most effective in addressing priority health needs. It is anticipated that successful implementation of key activities (programs, grants, 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 [2022 CHNA Report and the 2023-2025 Implementation Strategy Report](http://www.kp.org/chna) (<http://www.kp.org/chna>).

Mechanisms for monitoring progress are tailored to each activity and may include the collection and documentation of tracking measures such as number of grants awarded, total investments, and number of people reached/served. Kaiser Permanente also conducts evaluation of larger grant initiatives to understand both progress and outcomes. In addition to internal monitoring and evaluation, Kaiser Permanente requires grantees to track and report outcomes of the projects for which they have received funding.

The tables below provide highlights for a select number of programs, grants, collaboration and/or assets that aim to address the identified health needs for KFHVacaville. The examples provided below are illustrations and not an exhaustive list.

In addition to the highlights outlined in the tables to address specific health needs, Kaiser Permanente NCAL provided significant contributions to the East Bay Community Foundation (EBCF) in the interest of funding effective long-term, strategic community benefit initiatives. These EBCF-managed funds, however, are not included in the financial totals for 2023.

Need	Examples of most impactful efforts
<p>Access to Care</p>	<p>Medi-Cal and Charity Care: In 2023, KFH-Vacaville provided access to care to 21,989 Medi-Cal members and provided financial assistance to 4,255 people through the Medical Financial Assistance (MFA) program.</p>
	<p>Solano Mobility Older Adults Medical Trip Concierge Program (GoGo Program) Expansion: Our partnership with organizations across California build the network’s capacity to address social health needs and coordinate care. Solano Transportation Authority’s mission is to improve the quality of life in Solano County by delivering transportation projects to ensure mobility, travel safety, and economic vitality for all. Solano Transportation Authority was awarded \$75,000 over a year to expand the GoGo Program to provide 10 more trips monthly to seniors, people with disabilities, and veteran spouses. This project is expected to serve 2,000 individuals. (This grant impacts 2 hospital service areas in NCAL)</p>
	<p>Retaining Napa-Solano Medical Coverage with Unwinding of the Public Health Emergency: The mission of Community Health Initiative Napa County, Inc. is to improve the health of children, families, and seniors by providing access to care through health insurance enrollment, patient education, and advocacy. Community Health Initiative Napa County, Inc. was awarded \$95,000 over a year as one of 6 organizations in the KFH NCAL Medi-Cal Redeterminations cohort. Community Health Initiative Napa County, Inc. will help Medi-Cal beneficiaries retain coverage. Bilingual outreach, enrollment, navigation, resource referral, and retention activities support retention of Medi-Cal or enrollment into Covered California and other affordable health care solutions. This project is expected to focus on low-income Spanish-speaking individuals under age 50. (This grant impacts 2 hospital service areas in NCAL)</p>
<p>Mental & Behavioral Health</p>	<p>Behavioral Health Services for Low-Income, Vulnerable Populations: Rio Vista CARE’s mission is to improve the quality of life in this rural community, especially for the most vulnerable and low-income residents, by providing sliding scale fee-based mental health counseling and family strengthening services. Our partnership with Rio Vista CARE supports their provision of services to underserved children, youth, parents, and other adults. This project is expected to serve 30 underinsured or uninsured clients with local behavioral health services. (This grant impacts 1 hospital service area in NCAL)</p>

Need	Examples of most impactful efforts
	<p>Sustainable Mental Health Strategies for Sex Trafficking Survivors: The mission of Napa Solano SANE- SART (Sexual Assault Nurse Examiner; Sexual Assault Response Team) is to provide trauma-informed, evidenced-based forensic and mental health services to individuals who have experienced human trafficking, sexual exploitation, and violence. Our partnership with Napa Solano SANE- SART supports their provision of recovery services in an enabling environment tailored to survivor needs, priorities, and experiences. The program promotes healing, recovery, and resiliency via life skills and vocational training. This is expected to serve 20 individuals. (This grant impacts 2 hospital service areas in NCAL)</p> <p>Reducing Mental Health Disparities: The mission of the Solano Pride Center is to build community and promote well-being among LGBTQ+ people and allies. Our partnership with the Solano Pride Center supports efforts to reduce health disparities among LGBTQ people in Solano County. The project provides counseling and case management services, community support groups, and on-site and school-based support programming for LGBTQ youth. This project is expected to serve 120 individuals. (This grant impacts 2 hospital service areas in NCAL)</p>
<p>Income & Employment</p>	<p>2023 Building Local Outreach Capacity for CalFresh Enrollment (BLOC) Cohort and Food Distribution: Our collaboration with OLE Health and the Food Bank of Contra Costa is designed to ensure that all eligible individuals in Kaiser Permanente communities have access to CalFresh and Medi-Cal. These two organizations are members of the BLOC cohort, a partnership with 18 community-based organizations throughout Northern California to implement innovative strategies providing outreach and enrollment services for individuals to apply for or retain CalFresh and Medi-Cal benefits. These two BLOC projects will reach approximately 20,000 people. The Food Bank of Contra Costa and Solano was also awarded \$270,000 over one year to provide healthy food at over 90 schools across Contra Costa and Solano Counties. Produce and shelf-stable foods will be distributed to children, families, and communities disproportionately experiencing inequities. (These projects impact a total of 5 hospital service areas in NCAL)</p> <p>Increasing Academic Achievements of At-Risk Solano County Children: The mission of Leaven Kids is to revitalize communities through early education intervention. Leaven Kids was awarded \$50,000 over a year to provide services focused on increasing academic achievements by offering STEM equipment and lessons. The project will equip 7 Solano County sites and staff a new mobile learning unit to reach children in areas of Solano County where services are limited. This project is expected to serve 275 at-risk Solano County children. (This grant impacts 2 hospital service areas in NCAL)</p>

Need	Examples of most impactful efforts
<p>Housing</p>	<p>Homeless Outreach Partnership Event: The mission of the City of Fairfield Police Department Homeless Intervention Team and Community Action Team is to permanently reduce homelessness in the community. Our partnership supports their efforts to plan and coordinate activities with service providers and stakeholders. This will ensure an efficient and effective system offering access to shelter, food, employment, housing, and other basic needs and opportunities. The office assists with problem-solving and communications for complex situations requiring multiple resources and organizations. This project is expected to serve 2,500 individuals. (This grant impacts 1 hospital service area in NCAL)</p>
	<p>Homeless Prevention: The mission of SHELTER, Inc. is to prevent and end homelessness for low-income, homeless, and disadvantaged families and individuals by providing housing, services, support, and resources that lead to housing stability and self-sufficiency. Our partnership with SHELTER, Inc. supports the Homeless Prevention Program. The project will provide community-connecting services and up to a year of rental or financial assistance to participants on the verge of losing their homes due to financial hardships. This project is expected to serve 10 individuals. (This grant impacts 1 hospital service area in NCAL)</p>
	<p>Supporting the Family Strengthening Fund: The mission of the Children's Network of Solano County is to improve the lives of children through education, advocacy, coordination of community services, and community-based collaboratives. Children's Network of Solano County was awarded \$50,000 over a year for its Family Strengthening Fund. This project provides struggling families with assistance to meet basic needs like rent, utilities, food, and clothing and supports family resource center partners to identify, screen, and provide application assistance to clients. This project is expected to serve about 800 individuals. (This grant impacts 2 hospital service areas in NCAL)</p>

VI. Appendix

Appendix A

2023 Community Benefits Provided by Hospital Service Area in California

NORTHERN CALIFORNIA HOSPITALS	
Hospital	Amount
Antioch	\$31,299,825
Fremont	\$11,290,424
Fresno	\$20,928,037
Manteca	\$41,130,654
Modesto	\$22,586,200
Oakland	\$69,132,545
Redwood City	\$25,331,007
Richmond	\$36,688,203
Roseville	\$48,570,614
Sacramento	\$78,361,475
San Francisco	\$35,219,854
San Jose	\$35,629,222
San Leandro	\$36,579,806
San Rafael	\$16,871,517
Santa Clara	\$54,423,351
Santa Rosa	\$30,471,515
South Sacramento	\$59,522,915
South San Francisco	\$14,393,214
Vacaville	\$23,431,991
Vallejo	\$35,420,809
Walnut Creek	\$24,925,238
Northern California Total	\$752,208,416

SOUTHERN CALIFORNIA HOSPITALS	
Hospital	Amount
Anaheim	\$25,957,244
Baldwin Park	\$26,269,304
Downey	\$34,837,164
Fontana	\$61,085,066
Irvine	\$5,742,425
Los Angeles	\$59,171,816
Moreno Valley	\$11,117,047
Ontario	\$9,683,018
Panorama City	\$26,160,525
Riverside	\$26,225,914
San Diego (2 hospitals)	\$36,592,118
San Marcos	\$5,154,330
South Bay	\$20,830,614
West Los Angeles	\$38,973,081
Woodland Hills	\$16,310,271
Southern California Total	\$404,109,936

Appendix B

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 unreimbursed care provided to patients who qualify for Medical Financial Assistance on a cost basis.
- ³ Figures reported in this section for grants and donations consist of charitable contributions to community clinics and other safety-net providers and support access to care.
- ⁴ Applicable to only SCAL - Watts Counseling and Learning Center's service expenses are divided among three hospitals: KFH-Downey, KFH-South Bay, and KFH-West Los Angeles. Educational Outreach Program service expenses are only applicable to KFH-Baldwin Park.
- ⁵ Figures reported in this section are expenses for youth internship and education programs for under-represented populations.
- ⁶ Figures reported in this section for grants and donations consist of charitable contributions to community-based organizations that address the nonmedical needs of vulnerable populations.
- ⁷ The amount reflects the costs of the community benefit department and related operational expenses.
- ⁸ Figures reported in this section for grants and donations are aimed at supporting the general well-being of the broader community.
- ⁹ Amount reflects the net expenditures for training and education for medical residents, interns, and fellows.
- ¹⁰ Amount reflects the net expenditures for health professional education and training programs.
- ¹¹ Figures reported in this section for grants and donations consist of charitable contributions made to external nonprofit organizations, colleges, and universities to support the training and education of students seeking to become health care professionals.