

Together we...

COMMUNITY BENEFIT PLAN
2011-2013



SAN ANTONIO
COMMUNITY HOSPITAL

A young girl with dark hair and a brown top is smiling warmly. She is holding a small green plant in a pot. The background is a soft-focus bokeh of warm colors. The image is partially framed by a white circular border on the right side.

Dear Friends,

At San Antonio Community Hospital, we are committed to building a strong and vibrant community by expanding our heritage of caring to improve the overall health and well-being of those we serve. People in our region count on our hospital to maintain its status as a leader of community health and to ensure its long term viability so we can continue to do what we do best, which is to provide exceptional healthcare services.

The Community Benefit Plan that follows highlights the three significant areas of community need that were identified through the Community Health Assessment, namely healthcare access, health education and promotion, and chronic disease prevention and management. Each of these pillars is highlighted in a separate section that describes the nature of the community need, showcases the breadth of our outreach efforts, and offers a glimpse of the benefits our activities provide throughout our region. Through our community benefit program, we extend the hospital's mission of caring for our community beyond our walls – we are reaching out into the community to provide tangible and meaningful assistance.

We are thankful for our community's steadfast commitment to San Antonio Community Hospital. Our ability to work together, to support one another, and to reach out to those in need defines who we are today and will continue to do so in the future. Together, we will improve the health status of individuals, families, and our entire regional community.

Harris Koenig
President and Chief Executive Officer

“ The needs are great, and none of us, including me, ever do great things. But we can all do small things... and together we can do something wonderful. ”

— *Mother Teresa*



SAN ANTONIO
COMMUNITY HOSPITAL

Contents

100 YEARS AND GROWING.....	5
ASSESSING OUR COMMUNITY'S NEEDS	6
HEALTHCARE ACCESS.....	11
HEALTH EDUCATION & PROMOTION	23
CHRONIC DISEASE PREVENTION & MANAGEMENT	33
CREATING A HEALTHY COMMUNITY	47
COMMUNITY BENEFIT.....	50

100 Years AND GROWING...

San Antonio Community Hospital was founded by Dr. William Howard Craig in 1907 to meet the healthcare needs of local residents. As the community surrounding the hospital grew, it became apparent that larger, more modern facilities were needed. Community leaders rallied to raise the needed capital and the hospital moved to its current location on San Bernardino Road in 1924. With community support, the hospital grew—from its modest beginning with 18-beds, five physicians, and limited staff—to a 279-bed regional medical facility with nearly 2,000 employees and a medical staff of 500 physicians. The hospital also has satellite

facilities located in Rancho Cucamonga and Fontana that provide outpatient care in a close and convenient setting.

The hospital's main campus in Upland is currently undergoing the largest expansion in its 105-year history. The 179,000 square foot addition, which will include a new 52-bed emergency department and 92-bed patient tower, is scheduled for completion in 2013. The project incorporates the latest healthcare architectural design and advanced technological features with the goal of meeting the needs of the growing population in the west end of California's Inland Empire.



Assessing Our Community's Needs

San Antonio is committed to understanding the needs of its diverse community and strives to respond in substantive ways to identify needs that are within its sphere of influence as a healthcare provider. To effectively reach this goal, the hospital uses a variety of ongoing assessment tools and conducts a formal community health assessment every three years.

Extensive community-based research conducted through the triennial assessment serves as the basis for enhancing the hospital's Community Benefit Program. Through quantitative and qualitative analysis of local and countywide health trends, a more accurate understanding of the area's challenging needs can be established. The report that follows is

designed to provide a basic understanding of San Antonio's community and to encapsulate the findings of the 2010 assessment. The desired end result of this endeavor is to generate discussion among key stakeholders regarding ways in which we can work together to improve the health status of the people who live, work, and play in our community.

San Antonio's Three Pillars

The major concerns identified through the community health assessment have been grouped into three priority areas: Healthcare Access, Health Promotion & Education, and Chronic Disease Prevention & Management. These three pillars have been used to develop a comprehensive three-

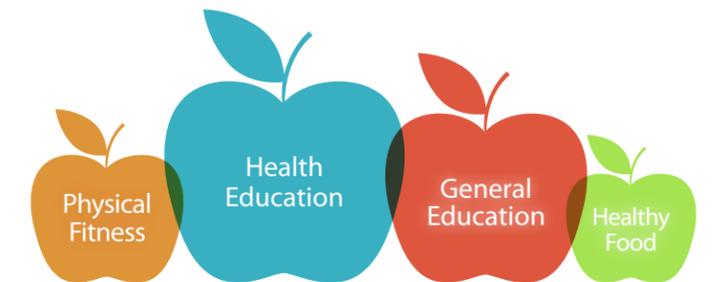
year strategic Community Benefit Plan that incorporates the findings of the community health assessment into specific strategies and tactics that are being undertaken to achieve measurable results. This is done with a pledge to continue meeting the hospital's mission "to improve the overall health of our regional community..." by focusing our community outreach efforts on combating existing and newly-arising health issues. The hospital's role in providing excellence in healthcare resources through direct patient care, health promotion, and disease prevention, as well as providing leadership in community health improvement efforts, is at the forefront of San Antonio's Community Benefit Program.

San Antonio Community Hospital Service Area



San Antonio Community Hospital's main campus is located in Upland with satellite facilities operating in Rancho Cucamonga and Fontana.

Main Community Health Concerns



Concerns based on the responses gathered from the community health assessment.



Together we...

**CREATE
SOLUTIONS**





“ San Antonio Community Hospital goes above and beyond the delivery of essential patient care services to ensure healthier children, early detection of disease, and enhanced access to basic healthcare services.”

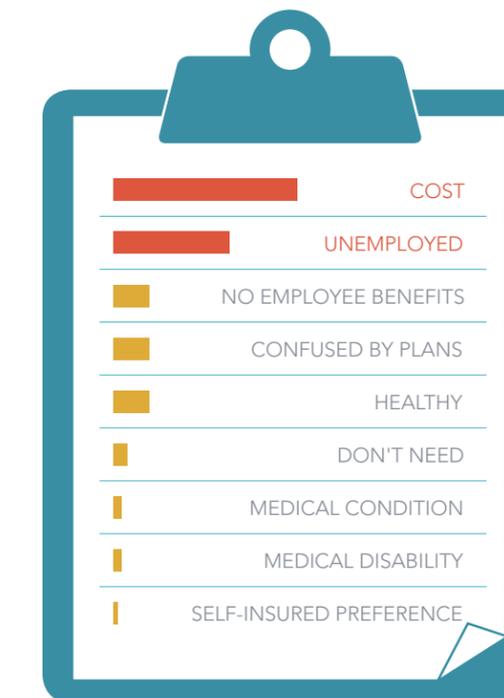
Healthcare ACCESS

People living in San Antonio Community Hospital’s service area, as well as those across San Bernardino County as a whole, are challenged in their ability to gain access to basic healthcare services. Factors contributing to this significant need include the area’s low educational attainment, which leads to lower wages and higher unemployment; a large blue-collar work force with little access to affordable employer-sponsored health insurance plans; and limited to non-existent options for disenfranchised segments of the population.

Our ongoing assessment has shown that community needs are great, but resources are few. In order to improve healthcare access, we must:

- Collaborate with community and government agencies and other organizations to leverage existing resources and avoid duplication.
- Improve accessibility for individuals who are uninsured, underinsured, disenfranchised, and lack the ability to obtain routine medical care.
- Identify the best practices to deliver medical care efficiently.
- Find creative solutions to develop and implement programs targeting individuals and families currently or in danger of slipping through the healthcare safety net that is diminishing due to increased state budget deficits and associated health and human services program reductions.

SACH Service Area Reasons For Being Uninsured



Education Leads to HEALTHIER LIVES

Education has the ability to influence health in many ways. An educational foundation is a direct determinant of future academic prospects, and academic performance and educational level are, in most cases, the predisposing factors that open (or close) the doors to employment opportunities. In turn, employment status has a direct impact on the ability to obtain health insurance. Typically,

post-secondary education provides enhanced knowledge and skills that tend to lead to higher-paying jobs, greater economic security, increased employment-based benefits, and the ability to obtain health insurance.

The educational performance and unemployment level of San Antonio's regional community is an indicator of the current and potential status of its members' health.

According to the *San Bernardino County Report on Graduation Rates*, nearly 23% of high school students do not graduate. In addition, less than one-fifth of the adults are able to successfully obtain a Bachelor's Degree.

Education has other important effects on people's lives: it improves earning power and social status and it has a positive effect on cognitive ability. These factors influence lifestyle choices,

knowledge and understanding of health issues, and health-related decisions. People who are better educated are more likely to follow doctors' instructions successfully and to navigate today's complex healthcare system. Furthermore, the occupations of people with lower educational levels are generally more dangerous and expose workers to greater

“ Nearly 23% of high school students do not graduate.”

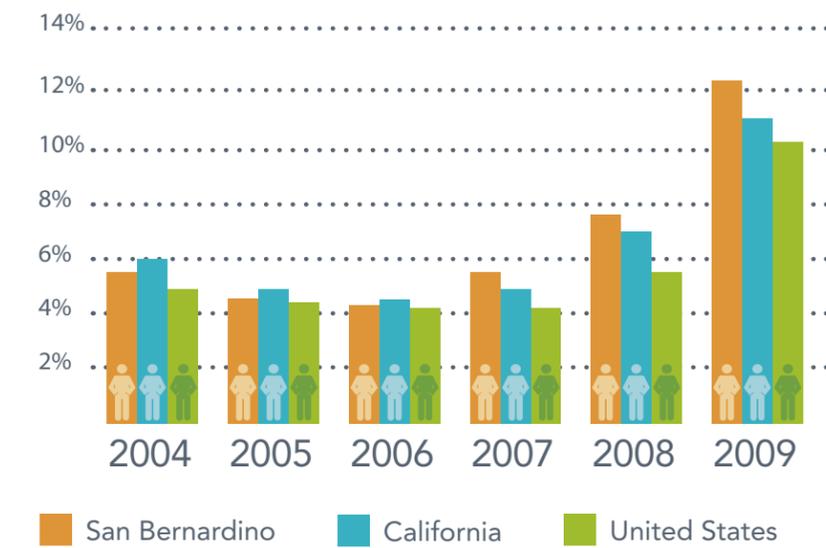
health hazards, from heavy machinery and chemicals to shifts that disrupt sleep cycles.

Where people live, learn, work and play affects how long and how well they live—to a greater extent than most of us realize. For many of our community's residents, prevention through routine medical care is out of reach, and they tend to seek healthcare services only in emergency situations.

When health insurance is obtained privately, the amount of money most people allocate to coverage is restricted by their ability to pay for it. The costs of medical care and insurance are now out of reach for many American households, pushing some families into bankruptcy, burdening businesses, reducing employment, and severely straining the budgets of federal, state, and local governments.

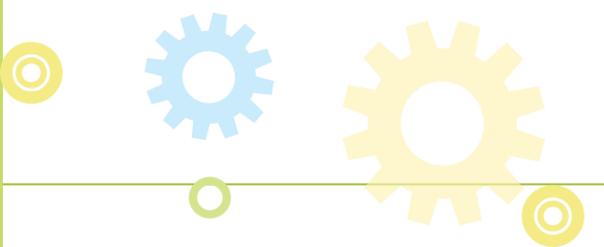
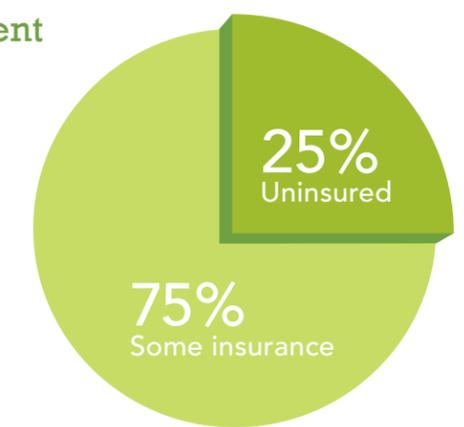
“ Where people live, learn, work, and play affects how long and how well they live—to a greater extent than most of us realize.”

Unemployment Rates 2004-2009



*Source: California Government Employment Development Department 2010

San Bernardino County Resident Insurance Status (2009)





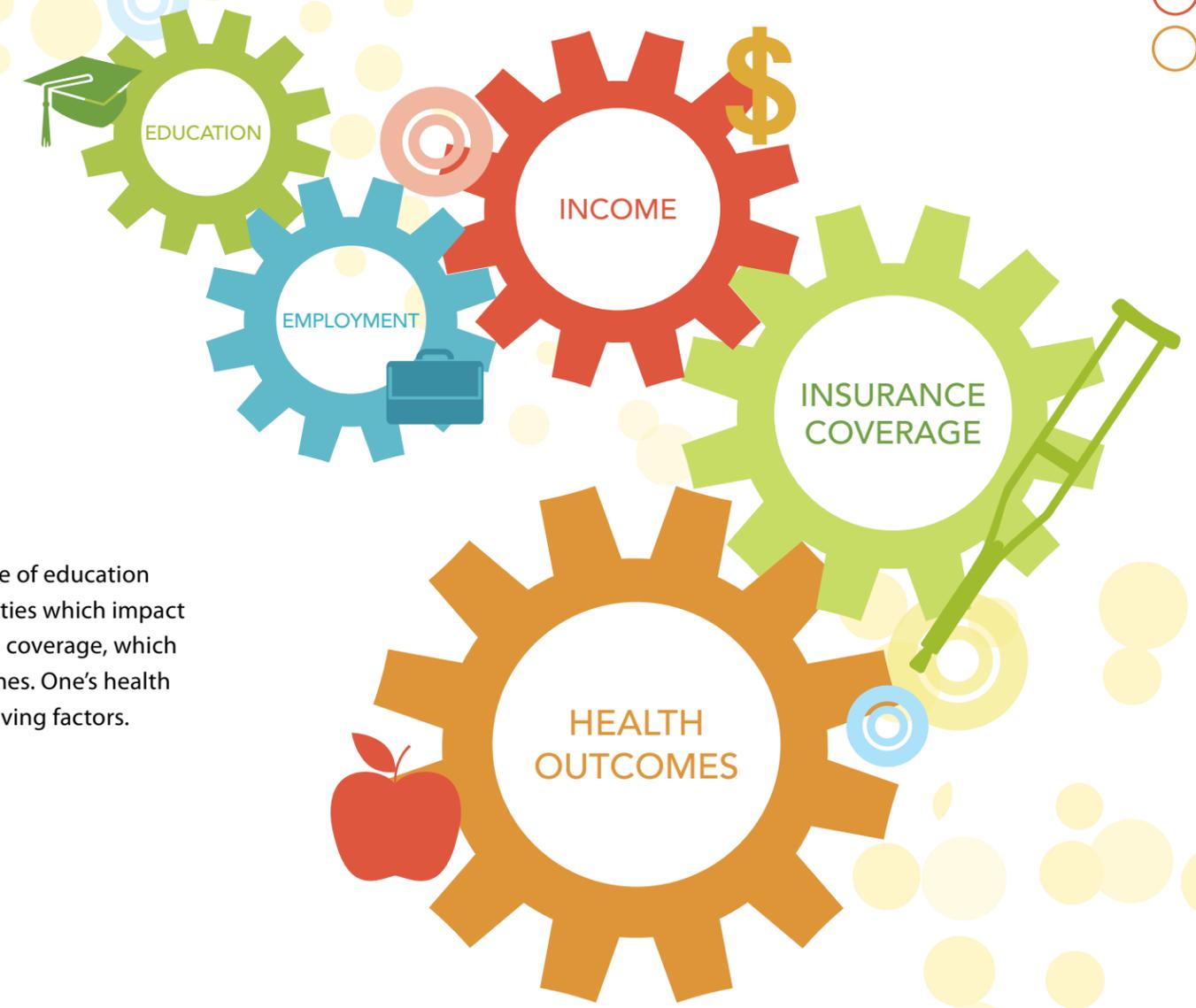
With deteriorating economic trends and continued high rate of unemployment, under-employment, and low wages and benefits for many who are employed, the number of uninsured and underinsured residents of the Inland Empire remains a challenge. For families whose means barely meet or fall short of their cost of living, health insurance and regular healthcare take a backseat. Moreover, it appears that this trend is likely to persist, at least in the immediate future.

Educational Attainment Age 25 and Older

- < High School
- High School Grad
- Some College
- Associate Degree
- Bachelor Degree
- Graduate or Professional Degree



Source: United States Census Bureau, 2005-2009 American Community Survey



The illustration shows the importance of education driving one's employment opportunities which impact income level and access to insurance coverage, which in turn, leads to better health outcomes. One's health status is affected by each of these driving factors.



HAPPY Club — GROWING HAPPY, HEALTHY CHILDREN

Given the region's economic challenges, it is not surprising that a significant number of people in our community are living in poverty. Children make up over one third of this population in San Bernardino County. Compassion for these children without access to healthcare sparked the creation of the Health Access Partnership Project for Youth, more commonly known as the HAPPY Club. This initiative came to fruition through a longstanding collaboration between San Antonio Community Hospital, the Kids Come First Clinic, the City of Ontario's Healthy Ontario Program, Partners for Better Health, and other community partners.

HAPPY's Goals Are To:

- Increase health plan enrollment for qualified children
- Conduct health screenings for children without access to healthcare through collaboration and coordination of care among public/private entities
- Demonstrate cost savings through new models of care for children within targeted groups

Children are enrolled in the HAPPY Club through the Kids Come First Community Clinic, which provides access to children's health services through: regular medical check-ups, preventive and wellness care, screening and assessment, immunizations, health education, and specialty care referrals. To date, the hospital has provided free diagnostic procedures for more than 250 children at a cost in excess of \$30,000.

In addition to the expense incurred by the hospital, members of the hospital's medical staff donate their time and resources to interpret diagnostic exams and to provide specialized medical care and treatment beyond the routine care provided by the Kids Come First Clinic.

The HAPPY Club's success has demonstrated that new ways of thinking about health can lead to innovative models of healthcare and can effectively fill some of the gaps in the healthcare safety net. The hope for the future is that other communities can replicate this model to improve access to healthcare for their children.



Cavities in Medi-Cal's Dental Program

Good dental health begins in childhood and has lifelong consequences. Although often overlooked, dental health is an essential component of overall wellness. Poor oral health is associated with the risk of heart disease and stroke. Studies have also shown that dental disease adversely affects school attendance and academic performance. For these reasons, preventative oral care is a crucial element in maintaining children's health. Unattended pain and infection may impede eating, verbal development, and learning during a pivotal period in a child's development. By the third grade, two-thirds of the children in California suffer from poor oral health, and one third of the children enrolled in Medi-Cal suffer from tooth decay.

Medi-Cal's fee-for-service dental program has been the primary dental care subsidizer for the majority of California's low-income, elderly, and disabled

residents. However, major reductions in the state's budget and inadequate reimbursement rates have limited the number of dentists willing to accept Medi-Cal patients. In fact, only 25% of

“Two-thirds of the children in California suffer from poor oral health, and one third of the children enrolled in Medi-Cal suffer from tooth decay.”

California's dentists accept Medi-Cal which severely limits access to dental care for those who need it most.

San Antonio Community Hospital Dental Center

Recognizing the importance of this community need, San Antonio Community Hospital has partnered with the Assistance League of the Foothill Communities to

provide dental education, screening, and treatment for children in the Inland Empire, and has done so for over 75 years. San Antonio Community Hospital Dental

Center is a community-wide volunteer effort that brings dental care to uninsured children and dental health education programs to elementary and junior high schools throughout the region. The Dental Center's goal is to educate children about the importance of dental hygiene and to provide prophylactic and therapeutic dental services to this vulnerable population.



“ Only 25% of California's dentists accept Medi-Cal patients...”

Children in need receive professional dental care and treatment from dentists and hygienists who volunteer their time to provide this valuable community service. Each year, these volunteers offer free dental screening to more than 5,000 children, and those in need of treatment are referred to the Dental Center for more comprehensive services. San Antonio, the Assistance League, and a highly dedicated team of dental professionals work together to raise the health status of our community by bringing dental health care to the children in our communities that need it most.





Together we...

EMPOWER & EDUCATE





Health Education & PROMOTION

San Antonio Community Hospital lives its mission to “improve the overall health of our regional community,” independently and in collaboration with its community partners by:

- Empowering the public with knowledge that leads to healthier lifestyles.
- Providing extensive and expansive health education designed to increase the general population’s awareness of prevention and wellness, the importance of newborn and child

health, and the benefits of behavioral and lifestyle changes.

- Addressing the major controllable factors contributing to chronic diseases and promoting these concepts to improve the overall health status of residents and to support healthy communities.
- Reinforcing healthy messages in the community through lectures, classes, screenings, and outreach programs provided by the hospital.

Engaging our community through widespread educational efforts is a hallmark of San Antonio’s Community Benefit program.

Aspects of Health Most Important to Our Community



* Findings from the community health assessment indicate avoiding life threatening disease is the most important aspect of one's health.



Girls Day Out — EMPOWERING WOMEN TO IMPROVE THEIR HEALTH

The spirit of educating transcends into every realm of the hospital's operations and is a primary feature of the hospital's larger events such as Girls' Day Out, where women care for other women. Although the event is viewed as a day of relaxation and fun, the underlying theme is to educate women about the various aspects of their health. Women constantly attend to the needs of their families, often placing those needs ahead of their own. At Girls' Day Out, women are reminded that their personal health is paramount to the health of their families. The activities, seminars, and exhibits are geared toward

empowering women to improve their health by emphasizing the importance of making healthy choices, recognizing the benefits of regular screenings, and using appropriate interventions to combat chronic diseases. In addition to raising local health awareness, Girls' Day Out receives national attention through San Antonio's membership in the Spirit of Women Hospital Network.

An element of the hospital's mission is to cultivate an atmosphere that "inspires confidence." The overarching goal in all its educational efforts is to enable the people it serves to have the confidence to make informed decisions to maintain proper health. As in so many aspects of life, knowledge is power; healthcare knowledge is particularly important since it gives people the power to control the overall quality of their lives.

"At Girls' Day Out, women are reminded that their personal health is paramount to the health of their families."



Healthy Beginnings — NURTURING THE FUTURE OF OUR COMMUNITY

The cornerstone of San Antonio's Community Benefit Program is Healthy Beginnings. This program provides families with a qualified team of medical professionals who care for newborns and their families before,

The ladies at Healthy Beginnings saved me. They are wonderful.

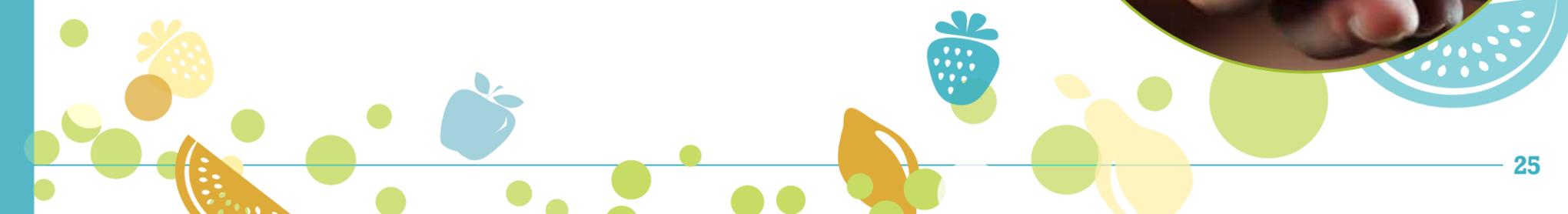
and after, they leave the hospital. Specially trained nurses provide prenatal and postpartum education for expectant and new mothers. Classes range from Lamaze childbirth preparation and infant care to sibling classes for new brothers and sisters.

The distinguishing element of the Healthy Beginning's program is the degree of postpartum care given to mothers and their newborns. The Healthy Beginnings

staff realizes the mental and emotional toll childbirth puts on a mother. For this reason, exceptional vigilance is given to identifying signs of postpartum depression and other psychosocial issues, such as substance abuse. New mothers receive continued support after the birth of their baby through breastfeeding and postpartum support groups and parenting classes. In addition to being tested for jaundice, infants are thoroughly assessed from head to toe to identify potential health concerns, and infant weights are monitored before and after breastfeeding to ensure proper nourishment.

The attention to detail provided by Healthy Beginning's Internationally Board Certified Lactation Consultants helps to ensure that babies receive appropriate and

timely pediatric interventions. The hospital understands that health and proper care from infancy is imperative in the prevention of chronic disease later in life.



Safe Haven Law — SAFE SURRENDER. NO SHAME. NO BLAME. NO NAMES.

San Antonio is devoted to saving the lives of newborns by providing a safe haven to end child abandonment. For a decade, the Safe Surrender Program has provided the means to surrender a baby anonymously to any hospital, fire department, or police department without criminal repercussions. While many healthcare workers were aware of the law, few junior high, high school, and college students knew about this safe and secure option for both infant and parents.

San Antonio Community Hospital's Safe Surrender program and DVD entitled Safe Surrender. No Shame. No Blame. No Names. is a wonderful example of how the hospital takes ownership in community health issues where it can make a difference. Produced in partnership with college film students,

Safe Surrender. No Shame. No Blame. No Names. contains powerful imagery and interviews with teenage girls who relate to young women at their own level. The DVD is provided to anyone willing to help raise awareness of the Safe Surrender alternative to infant abandonment. To date, more than 2,300 copies have been distributed to over 750 different community organizations, and the DVD has now been incorporated into public school curricula.



Obesity — A GATEWAY TO LIFE-THREATENING DISEASE

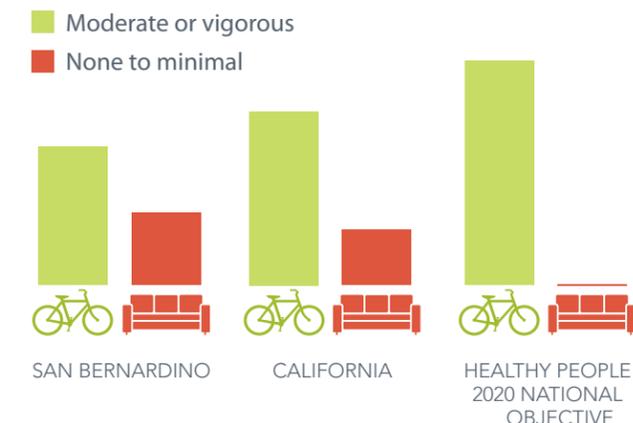
Community resources are instrumental in shaping behaviors that promote public health, and, conversely, health disparities arise in communities that do not support healthy lifestyles. As a result, obesity-related diseases such as cancer, diabetes, and heart disease are rampant among populations living in these communities.

“Currently, 29% of San Bernardino County adults are obese...”

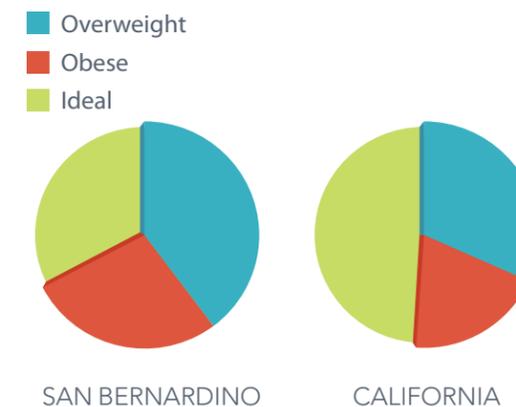
The hospital's community health assessment revealed that nearly 20% of residents in San Bernardino County report that they engage in no physical activity. Communities that lack infrastructure to promote healthy lifestyles, including bike lanes, sidewalks, parks, and recreational

facilities, make it difficult to participate in physical activity. In addition, these communities often lack a general sense of security on their streets. As a result, residents prefer not to spend time outdoors, which serves to perpetuate a sedentary lifestyle. High obesity rates are reflective of the disadvantages experienced by residents in these communities. Currently, 29% of San Bernardino County adults are obese, and this number is projected to rise unless drastic measures are taken. San Antonio understands the long-term impact of the obesity epidemic and is working with its community partners to inform and influence policy decisions that are designed to promote healthier lifestyles.

Adult Physical Activity Levels (2007)



Overweight & Obese Adults





HELP — HEALTHY EATING LIFESTYLES PROGRAM

The hospital has developed a number of strategies to raise awareness of balanced nutrition and active lifestyles as tools to combat the obesity epidemic. One example is the Healthy Eating and Lifestyles Program (HELP), which was launched in 2010. The program's goal is to reduce childhood obesity in local underserved communities by actively involving children in improving their own health. The hospital took a unique approach in the development of this program by training existing and new promotoras (community health educators) to teach the curriculum in their own communities. One of the hospital's registered dietitians trains the promotoras, who, in turn, use a team-teaching method to instruct

children and their parents about the importance of nutrition and physical activity in reducing obesity and increasing overall health.



Study conducted by UCLA Center for Health Policy Research and the California Center for Public Health Advocacy

In addition to increasing knowledge about balanced nutrition, the program promotes an active lifestyle. The intent is to teach children and their parents to match the number of calories expended to those consumed, while gaining the benefits of increased strength, agility, and overall well-being. Hula hoops and jump ropes are employed during class sessions so children learn fun ways to exercise. Children are taught how to overcome obstacles and to share successes so others may benefit as well. With increased awareness of the importance of proper nutrition and active living, improvements in health status will be demonstrated. The hope is that each child who completes the HELP program will use the knowledge gained to advocate for his or her own health. This is especially important in that obesity, specifically resulting from poor nutrition and lack of exercise, is the gateway to the most widespread chronic diseases affecting our community.

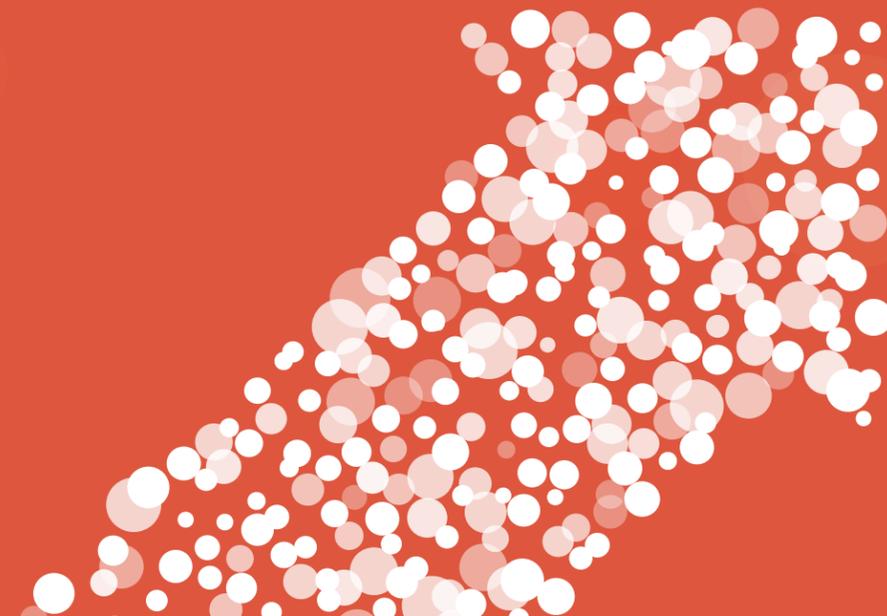
“ Instead of just telling them they shouldn't eat something, now we are teaching them why.”

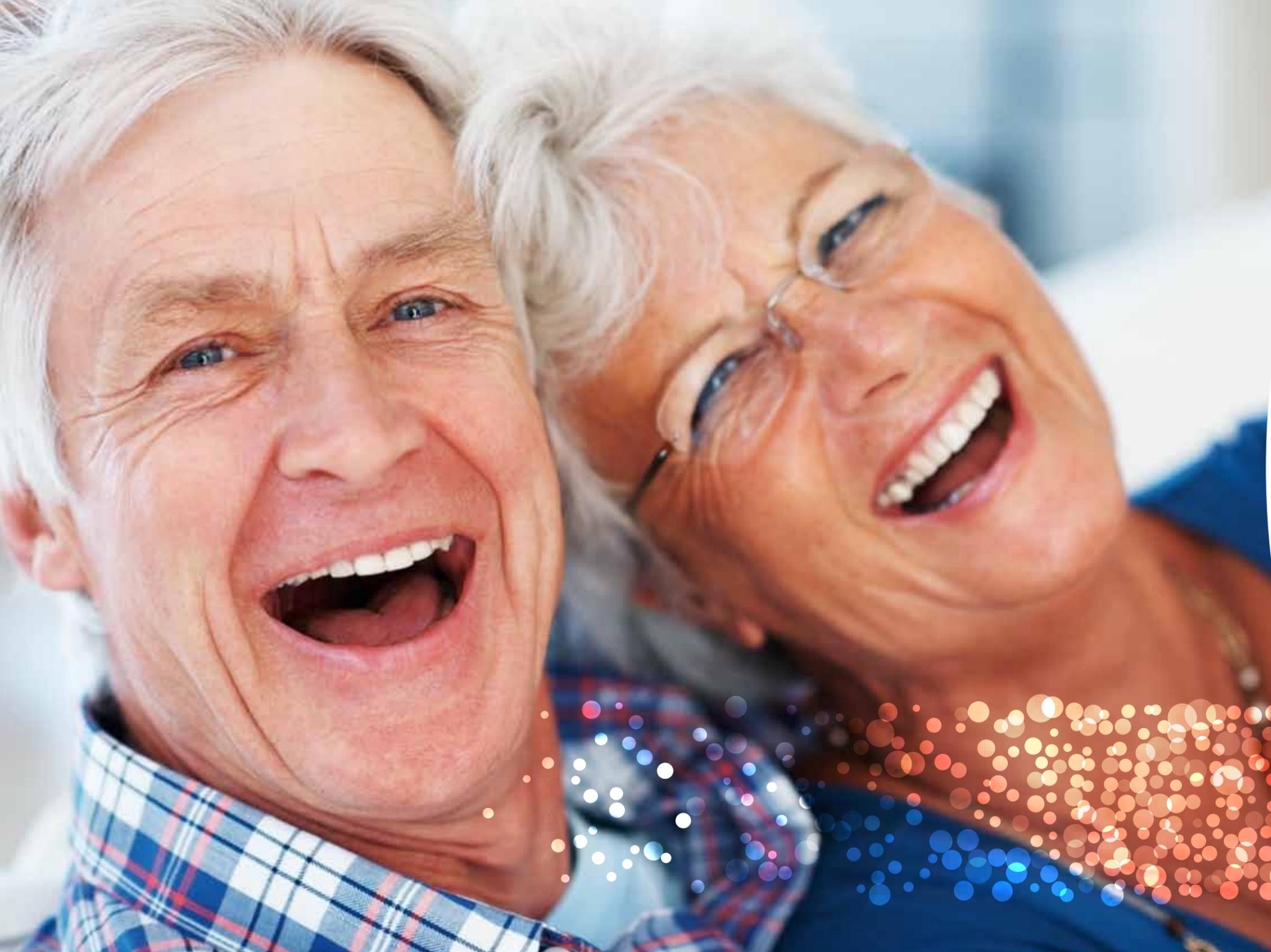




Together we...

RAISE
AWARENESS





Chronic Disease PREVENTION & MANAGEMENT

The hospital's 2010 community health assessment revealed that avoiding chronic disease is a top priority.

- Chronic disease is a significant area of need in terms of both prevention and management of debilitating and life-threatening illness, such as cancer, diabetes, asthma, and cardiovascular disease.
- A number of health indicators, including high blood pressure, high cholesterol, inadequate or inappropriate nutrition, and physical inactivity revealed considerable, ongoing health risks that will continue to exacerbate the high incidence of chronic diseases and their associated mortality rates.



DISEASE	San Bernardino	California	Healthy People 2020 National Objective
Coronary Artery Disease	182.8	137.1	100.8
Diabetes	30.6	21.1	-
All Cancers	168.9	155.9	160.6
Lung Cancer	41.8	38.1	45.5
Prostate Cancer	28.3	21.8	21.2
Colorectal Cancer	16.0	14.7	14.5
Female Breast Cancer	23.8	21.2	20.6
Cerebrovascular Disease (Stroke)	44.4	40.8	33.8

MORTALITY RATE (per 100,000 population)

* Source: 2010 County Health Status Profiles.



Prevention & Management



By engaging other medical providers and community resources in their efforts, San Antonio is working to improve health outcomes for people in its regional community by raising awareness of chronic diseases and their associated predisposing risk factors, as well as by providing a broad program of education and support relating to appropriate management techniques for those already suffering from chronic conditions.

- The hospital offers free health screenings for the uninsured and underinsured on a regular basis at local health fairs and special events to promote early detection of chronic diseases.
- Ongoing support groups are provided at no cost to those who have been diagnosed with a chronic disease.
- Targeted support is also available for families and caregivers to help them meet the challenges of caring for someone who is chronically ill.



These health concerns, as well as the health issues faced by the area's growing senior population, are a primary focus of the chronic disease pillar of the hospital's Community Benefit Plan. The goal is to develop chronic care clinics to provide follow-up in the management of chronic diseases.

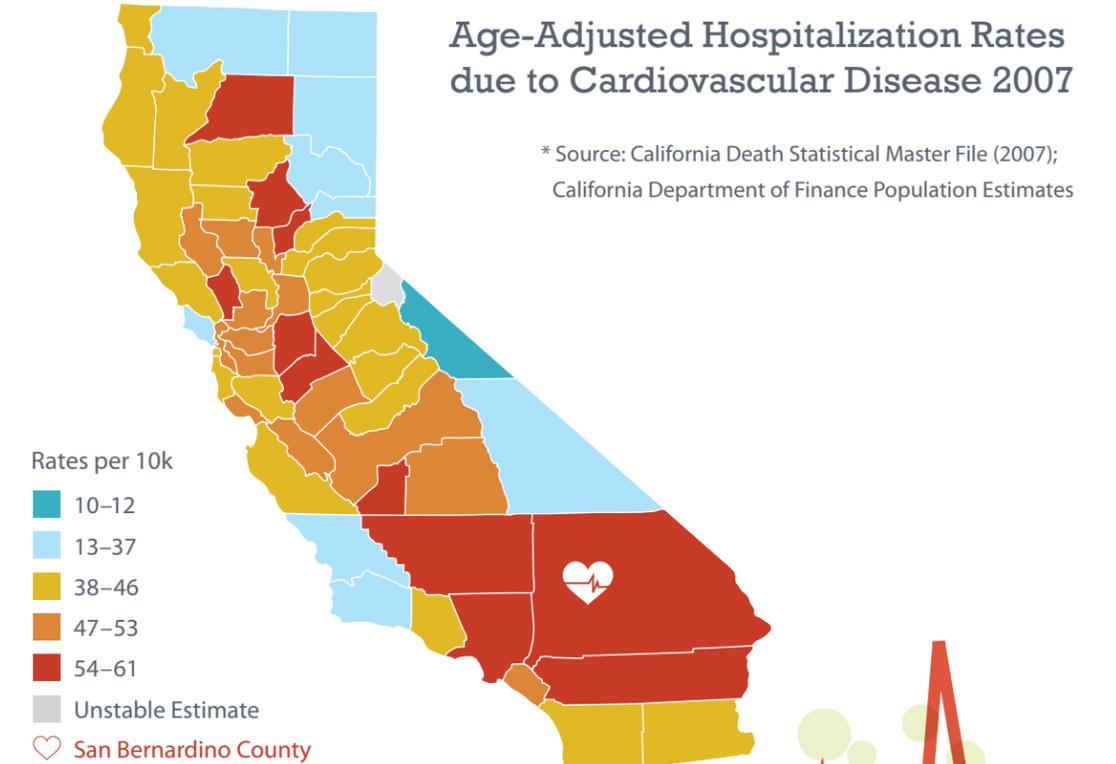
Cardiovascular Disease

CHRONIC DISEASE



San Bernardino County is brimming with cardiac disease and the resulting mortality rate is exorbitant. More than a third of all deaths in San Bernardino County are related to heart disease.

While numerous issues affect cardiac function, increasing awareness of the potential risk factors is the first step in improving cardiac health within our community. Because most cardiac risk factors are manageable, a top priority of the hospital's outreach efforts is to raise awareness of the potential impact that these controllable factors can have on cardiac health. This resolve is reflected in the events listed on San Antonio's Wellness Calendar. Each month, the hospital hosts an array of educational offerings designed to encourage people to be proactive in maintaining their cardiovascular health.





Heart Health Promotion Activities

- Healthy Heart Classes
- Cholesterol and Glucose Screenings
- Blood Pressure Screenings
- Heart Saver CPR Classes
- Community Education Lectures

The monthly Healthy Heart Class is an educational series that covers cardiac risk factors, congestive heart failure, and how to stay healthy through blood pressure management, stress management, diet, and exercise. Cardiovascular health and appropriate cardiac interventions are ongoing themes at many of the hospital's community

lectures. Given that cardiovascular disease is under-diagnosed in women, cardiovascular health is also highlighted at women's events, since it is imperative to raise awareness of the prevention of heart disease in the female population.

Treating Matters of the Heart

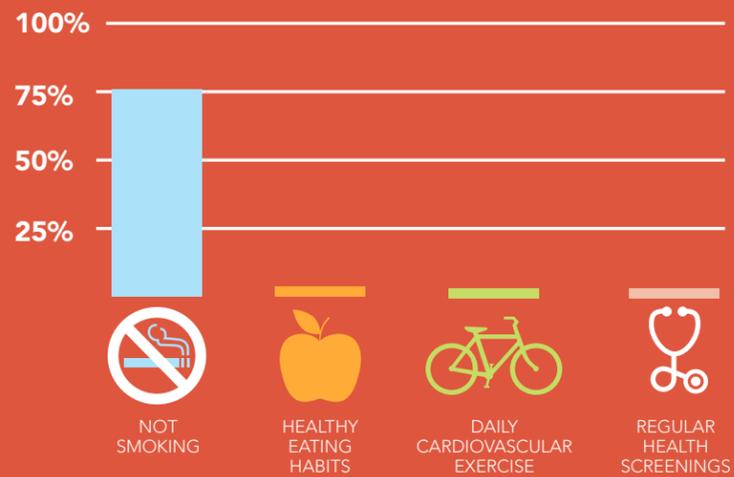
San Antonio has been treating matters of the heart for over 104 years, and as technology and treatment options continue to advance, the hospital remains at the forefront of cardiac care in the region. The hospital's position is well-recognized; in 2009, the Riverside

County Emergency Medical Services (EMS) Agency designated San Antonio Community Hospital as a STEMI (ST-Elevation Myocardial

“ More than a third of all deaths are due to heart disease in San Bernardino County. ”

Infarction) Receiving Center. Previously, the hospital received this designation in Los Angeles and San Bernardino counties, making it the only heart program in the Inland Empire to have a tri-county designation.

Factors in the Promotion of a Healthy Heart Identified by our Community



“ It is imperative to raise awareness of the prevention of heart disease in the female population. ”

Cancer Care

Cancer is at the forefront of health concerns among residents within the hospital's service area. Most adults know at least one person who has succumbed to cancer. Despite relative decreases in death rates over the past ten years, cancer is still the second leading cause of death in the United States. Closer to home, San Bernardino County has one of the highest age-adjusted cancer death rates in the state.

Many cancer risk factors including poor diet, physical inactivity, and obesity are fundamental cancer contributors and are responsible for one-third of all cancer deaths. Like cardiac risk factors, this finding is particularly disturbing as almost one-third of San Bernardino County's population is obese.

Early detection is the best defense against all cancers. The five-year survival rate for common cancers can reach 98% when detected before the cancer has spread

beyond the organ in which it originated. Recognizing the community's need for early cancer detection, San Antonio:

- Provides free cancer screenings at various community health events.
- Hosts an annual prostate cancer education and screening event for uninsured and underinsured men.
- Offers education and low- to no-cost mammogram screenings for low-income women through its Women Caring for Women Program.

The hospital offers a number of educational programs and support services in addition to its full range of cancer diagnosis and treatment modalities. Cancer patients, cancer survivors, family members, and the

community-at-large can access a wide range of educational materials, videos, physician referrals, and clinical trial information through San Antonio's Cancer Resource Center. In addition, the hospital's community lecture series provides the latest information regarding cancer diagnosis and treatment, as well as highlighting healthy lifestyle choices that help to mitigate cancer risk.



The goal of San Antonio's cancer awareness and screening strategy is two-fold: to reduce cancer risk and to identify cancer early to facilitate the best possible outcome for those diagnosed with cancer.

From a cancer treatment perspective, the hospital's comprehensive cancer care includes:

- medical and radiation oncology
- oncology surgery
- chemotherapy
- intensity modulated radiation therapy (IMRT)
- radioactive seed implantation
- sentinel node/lymphatic mapping
- Gamma Knife radiosurgery

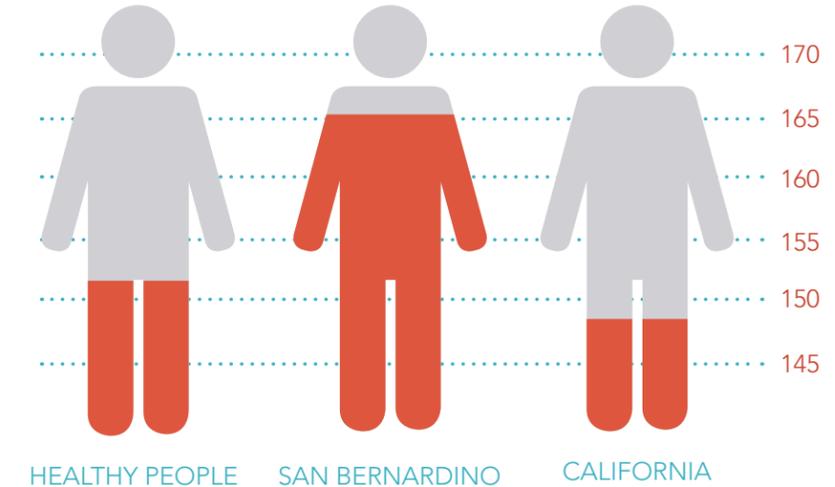
Gamma Knife

The Gamma Knife radiosurgery system is the only one of its kind offered in San Antonio's primary service area.

This advanced technology enables the neurosurgeon to perform brain surgery without a scalpel using a low-dose radiation beam to target tumors and abnormal cells with precision. This less invasive method is performed on an outpatient basis, allowing patients to receive treatment and return home the same day.

Age-Adjusted Death Rate For All Cancers 2006-2008 (per 100,000 population)

* Source: California Department of Public Health, County Health Status Profiles 2010



“ Most adults know at least one person who has succumbed to cancer. ”



Women's Breast and Imaging Center

The Women's Breast and Imaging Center provides state-of-the-art technology along with comprehensive and personalized diagnostic care for women in one convenient location. Designed by women with female patients in mind, the Center has become an

Women Caring for Women

Women Caring for Women (WCW), funded in part by the Susan G. Komen for the Cure® Inland Empire Affiliate grant, is an outreach program designed to bring the exceptional services offered by the Women's Breast and Imaging

Center to low-income and uninsured women in the west end of the Inland Empire. WCW bridges a critical gap in services by removing traditional barriers

that prevent women from accessing critically important diagnostic services beyond an initial screening mammogram. For women without financial resources, navigating the healthcare system is daunting; for an uninsured woman who has an abnormal screening mammogram, the obstacles leading to diagnosis and treatment seem to be insurmountable. San Antonio's WCW program, in concert with the support provided by the nurse navigator, has removed these obstacles by filling the large gap in the healthcare safety net typically experienced by uninsured women.

“Women Caring for Women bridges a critical gap in services by removing traditional barriers that prevent women from accessing critically important diagnostic services.”

important source of support. The Center's breast health services are augmented by an experienced nurse navigator who facilitates patient care and provides psychosocial support, from initial screening through diagnosis, treatment, and survivorship.



Diabetes Support

CHRONIC DISEASE



There are a number of key determinants of diabetes risk, though obesity has been shown to have a strong correlation with the development of this disease. Since childhood obesity often translates into to adult obesity, indicators of increased risk for diabetes often begin in childhood. However, there is a significant difference: youth have a greater opportunity to decrease their risk factors and lessen the likelihood they will develop diabetes.

Balanced nutrition and exercise are the artillery to accomplish diabetes risk reduction. It is easy to list the benefits of consuming spinach and jogging regularly, but at San Antonio we take it a step further by packaging information in a way that resonates with our community. Every month, community members are invited to the hospital to learn how to take healthy ingredients and transform them into delicious meals. These cooking classes are designed to engage people in preparing

quick and easy meals that are packed with nutrition. By learning appropriate techniques to keep themselves and their families healthy, participants minimize the risk that they will develop diabetes or another debilitating chronic disease.

Commitment to Prevention & Management

San Antonio's commitment to chronic disease prevention and management is demonstrated through many of its strategic initiatives. For example, the hospital's community health team is frequently found at local health fairs providing the uninsured and underinsured with prevention education. From a chronic disease management perspective, classes and support groups are offered with the goal to provide clear advice and ongoing support as individuals and their families learn to effectively manage the effects of diabetes. The hospital recognizes that there is much work to be done to

decrease the occurrence of diabetes in our community and is committed to continuing to fight the diabetes epidemic through awareness, prevention, treatment, and ongoing disease management.





Senior Health Issues

Chronic disease has become synonymous with aging; in fact, most Americans over the age of 65 suffer from at least one, if not more, chronic diseases. With the right care, however, one's Golden Years need not be hampered by the pain and inconvenience caused by chronic conditions. Older adults who remain physically active and pursue healthy lifestyles are finding that vitality, rather than disability, is defining their concept of future health status.

San Antonio understands the importance of supporting healthy lifestyle choices at all ages, but also recognizes the importance of convenience for seniors who may have limited access to transportation. For this reason, the hospital collaborates with area senior centers to bring needed services to locations that are easily accessible to the senior population. Providing influenza vaccinations is a prime example of San Antonio's outreach to older adults in the community. In the past, senior centers received flu vaccine at no cost from the county and San Antonio's nurses administered the vaccinations. Although the vaccine is no longer available from the county, San Antonio is committed



to providing flu vaccinations, along with health screenings and education, with the cost of the vaccine now borne by the hospital. To further accommodate the needs of seniors, the hospital offers drive-through flu clinics at its satellite facility in Fontana. People can receive the vaccine without having to leave the comfort of their own cars.

Generations Ahead

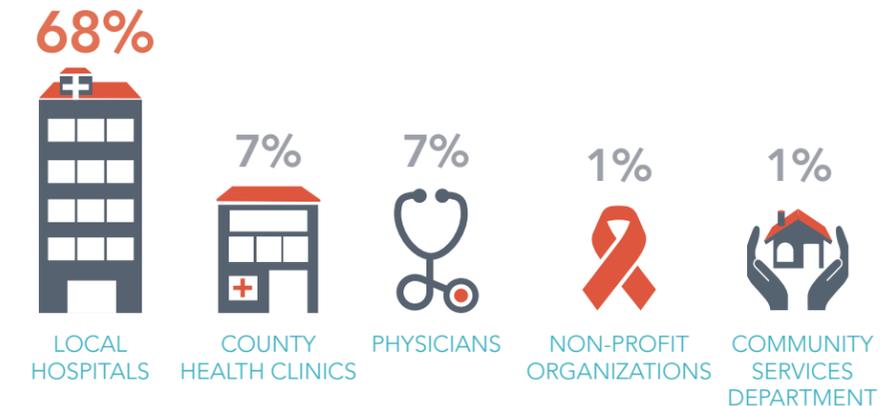
The elderly population is a growing segment of San Antonio's service area and the hospital believes in taking special care of its seniors. San Antonio has developed a

new membership program to augment its traditional geriatric services. *Generations*

“Adults who remain physically active and pursue healthy lifestyles are finding that vitality, rather than disability, is defining their concept of future health status.”

Ahead is designed to meet the special health and educational needs of seniors through targeted services and programs. More than 200 older adults joined the program during the first month following its launch. Our seniors have enriched the community and in return the hospital constantly strives to recognize their contributions by helping them maintain their health and vitality.

Most Prominent Entity In Disease Prevention According to our Community





Together we...

BUILD HEALTHY COMMUNITIES





Creating A HEALTHY COMMUNITY

Dedicated to providing the best healthcare options possible, San Antonio Community Hospital is establishing partnerships with other healthcare providers, public benefit agencies, and community leaders. This commitment has been demonstrated by the effort expended in forging partnerships and leveraging resources to increase access to healthcare services.

“We have learned that when community agencies and organizations coalesce around a common problem...progress is inevitable.”

Through our Community Benefit Program we have learned that when community agencies and organizations coalesce around a common problem, and each one contributes its portion toward the solution, the burden is reduced and progress is inevitable. While some partners may be able to provide tangible assets such as personnel or supplies and others contribute intangible resources in the form of knowledge, expertise, or the ability to connect the right people, working together allows us to produce health outcomes with a demonstrated benefit to the community.

Our Community Partners

- Assistance League of the Foothill Communities
- Children’s Network
- City of Chino, Healthy Chino
- City of Fontana, Healthy Fontana
- City of Montclair, Montclair Community Collaborative
- City of Ontario, Healthy Ontario
- City of Rancho Cucamonga, Healthy Rancho Cucamonga
- City of Upland, Healthy Start Healthy Future
- Chaffey Joint Union High School District
- Inland Empire Community Benefits Collaborative
- Kids Come First Community Clinic
- Loma Linda University
- Susan G. Komen Foundation® Inland Empire Affiliate
- Upland Community Partnership for Youth Development



Improving Health & Quality of Life

The needs of our community are ever changing and the strategies and tactics employed to address these needs must adapt to those changes. To ensure that the hospital's programs and services are effective in meeting its goal to improve the health status and quality of life throughout our region, San Antonio will:

- Actively engage its community in ongoing assessment and evaluation. The information gleaned from the 2010 Community Health Assessment was the driving force in establishing the hospital's community benefit focus for 2011 through 2013.
- Create synergy within the three pillars of the Community Benefit Program, which promotes positive health benefits and provides complementary interventions.
- Increase access to healthcare services including having the knowledge and practical tools that enable individuals to reduce their risk of disease or to improve their disease management skills.
- Engage community members to take control of their own health, which is best accomplished through health education and promotion, and is key to preventing or managing disease.
- Develop programs and services with defined goals and measurable outcomes to address the specific community needs that have been identified using methods designed to achieve cost efficiency, long-term efficacy, and a demonstrated improvement in the health of the community.

Influencing Policy Change

Although it is beyond the hospital's scope to implement environmental change, San Antonio is serving as a voice to support the Healthy Communities movement in informing policy development. Changing the built environment is a key strategy to facilitate healthy eating and physical activity opportunities. One of the best methods to effect such change is to implement policies governing city zoning ordinances at a local level. For example, working in partnership with the City of Rancho Cucamonga's Healthy RC program, the hospital was instrumental in crafting a city ordinance to increase access to healthy food by expanding zoning for community gardens and certified farmers markets.

Whether San Antonio is providing direct services or working collaboratively to improve community health status, the hospital's commitment to its regional community is unwavering. The 2010 and 2011 Community Benefit Valuation highlights the direct cost of San Antonio's Community Benefit Program. However,

the true value of community outreach is not measured in dollars, but rather in individuals, families, neighborhoods, cities, and even an entire region that have received the benefit of the hospital's services and programs. It is San Antonio Community Hospital's privilege to provide healthcare to our community, with the overarching goal to continually improve the health status of those who live, work, and play in our community.

“ San Antonio is serving as a voice to support the Healthy Communities movement. ”



Community Benefit Valuation

	2010	2011
UNREIMBURSED MEDICAL CARE ⁽¹⁾	\$ 7,715,744	\$ 8,094,332
COMMUNITY HEALTH IMPROVEMENT SERVICES	\$ 1,302,418	\$ 1,386,387
COMMUNITY BENEFIT INVENTORY TOTAL COST	\$ 9,018,162	\$ 9,480,719
UNREIMBURSED MEDICARE	\$ —	\$ 852,490
OTHER UNCOMPENSATED CARE ⁽²⁾	\$ 10,320,913	\$ 9,592,227
COMMUNITY BUILDING ACTIVITIES	\$ 3,821	\$ 9,293
TOTAL BENEFIT TO OUR COMMUNITY	\$ 19,342,896	\$ 19,934,729

⁽¹⁾ UNREIMBURSED MEDICAL CARE:

Charity Care

SACH's Charity Care Policy relieves low income families of the overwhelming financial burden of paying out-of-pocket for hospital care. This creates a safety net at a time when they need it most. SACH provided \$2,516,243 in charity care in 2010 and \$2,799,104 in 2011 on a fully allocated cost basis.

Medi-Cal

SACH lost \$5,199,501 on the services it provided to Medi-Cal patients on a fully allocated cost basis in 2010 and \$5,295,228 in 2011.

⁽²⁾ OTHER UNCOMPENSATED CARE (BAD DEBTS) totaled \$10,320,913 in actual cost incurred by SACH to treat these patients in 2010 and in 2011 the cost was \$9,592,227. Uncompensated care is not included in the valuation; however, the cost incurred to treat these patients represents an additional community benefit.



“ Together we will build alliances to promote health, prevent disease, and increase access to primary care for members of the community. ”

Community Benefit Plan 2011-13 Key Services

	HEALTHCARE ACCESS	HEALTH EDUCATION & PROMOTION	CHRONIC DISEASE PREVENTION & MANAGEMENT
COMMUNITY HEALTH EDUCATION	Cancer Education & Support		✓
	Cardiac Education & Support		✓
	Healthy Beginnings & Maternity Education Support	✓	✓
	Chronic Disease Prevention & Support		✓
	H.E.L.P. (Healthy Eating Lifestyles Program)		✓
	Community Health Education, Wellness, & Support		✓
	Community Benefit Programming & Outreach	✓	✓
	Women's Symposium		✓
COMMUNITY BASED HEALTHCARE SERVICES	Blood Drives	✓	
	Dental Center	✓	
	Health & Fitness Screenings	✓	✓
	HAPPY Club	✓	✓
	Influenza Immunization Program	✓	✓
	Mission Cataract Project	✓	✓
	Paramedic Base Station	✓	✓
HEALTHCARE SUPPORT SERVICES	Meals on Wheels	✓	✓
MEDICAL & PROFESSIONAL EDUCATION	Physicians, Medical Students, Nurses, & Other Professionals	✓	✓
	Physician Symposium	✓	✓
COMMUNITY BUILDING ACTIVITIES	Healthy Communities Collaborative	✓	✓
	Community Coalition Building	✓	✓
	Community Support & Donations	✓	✓

San Antonio Community Hospital's Community Benefit Vision:

"We will improve the overall health of our community by establishing partnerships with other health care providers, public benefit agencies, and community leaders. As partners, we will ensure that the community's scarce resources are allocated to achieve the maximum benefit for its residents.

Together we will build alliances to promote health, prevent disease, and increase access to primary care for members of the community. This community-wide emphasis will complement the full-range of clinical services traditionally provided by San Antonio Community Hospital.

We will develop community-based healthcare programs with defined goals and measurable outcomes to ensure long-term efficacy, cost effectiveness, and a demonstrated improvement in the health status of our community."

CREATING A HEALTHY COMMUNITY





SAN ANTONIO
COMMUNITY HOSPITAL

MISSION

Our mission is to improve the overall health of our regional community by offering healthcare services that both comfort and cure, in settings that inspire confidence, and in a manner that earns the trust of our patients, our physicians, and our employees.

VISION

Our vision is to use our strengths to enhance our reputation for excellence in quality care, patient experience, and exceptional working and practice environment.

VALUES

SAFETY

We make safety our highest priority for our patients, employees, physicians, and visitors.

INTEGRITY

We do the right thing—ethically, legally, and morally.

EXCELLENCE.

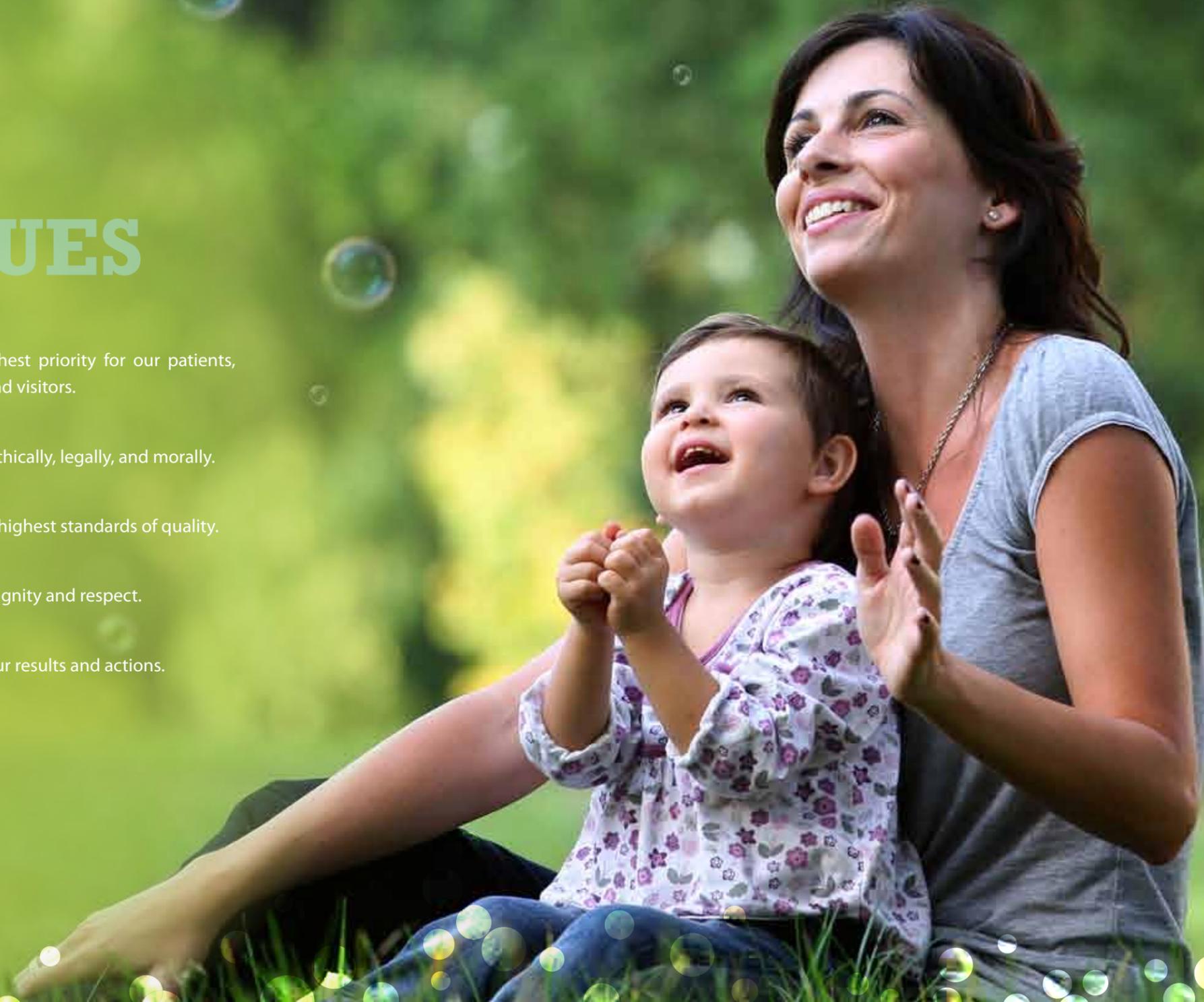
We hold ourselves to the highest standards of quality.

COMPASSION.

We treat everyone with dignity and respect.

ACCOUNTABILITY.

We are accountable for our results and actions.





SAN ANTONIO COMMUNITY HOSPITAL



*Inventory & Economic Valuation of
Community Benefits*

The Hospital's community benefit inventory was completed using software developed by the Catholic Hospital Association and VHA, Inc. in partnership with Lyon Software. The Community Benefit Inventory for Social Accountability (CBISA) software allowed SACH's activities to be summarized into the broad categories outlined in Senate Bill 697.

San Antonio Community Hospital's (SACH) primary responsibility is to provide healthcare services; however, its mission does not end there. Every effort is made to reach out into the community with additional services and programs in response to the community's needs. A summary and valuation of the 2011 program follows, along with an accounting of the financial losses sustained in providing medical care to uninsured and underinsured patients. In addition to charity care, SACH sustains significant losses when the reimbursement received from Medi-Cal falls short of the costs incurred to provide care.

Definitions

Medi-Cal

SACH lost **\$5,295,228** on the services provided to Medi-Cal patients on a fully allocated cost basis, which compares actual payments received to the total actual costs incurred by the hospital for treating these patients, during 2011.

Charity Care

Charity Care has two components. The first component is patient care that the hospital decides, in advance, to provide at no cost to patients and families for a variety of reasons (e.g., lack of insurance or financial hardship). The second component of Charity Care is care that was initially billed by the hospital's business office, but is determined to be uncollectible due to financial hardship or other reasons. In these cases, unlike true "bad debt," the patient or family has typically expressed a sincere interest in working with the hospital, but they lack the resources to make payments. For these reasons, the hospital makes no further attempt to collect on these accounts, writing them off as Charity Care. SACH provided **\$2,799,104** in Charity Care during 2011.

Medicare

SACH incurred a shortfall of **\$852,490** on the services it provided to Medicare patients on a fully allocated cost basis.

Other Uncompensated Care

Other uncompensated care (bad debts) totaled **\$9,592,227** in actual cost incurred by SACH to treat these patients. Uncompensated care is not included in SACH's community benefit valuation; however, the costs incurred to treat these patients represent an additional direct benefit to the community.

Valuation

The following table summarizes the 2011 valuation, delineated by major category.

2011 Community Benefit Valuation (without Medicare Losses)

<u>Category</u>	<u>Activity</u>	<u>Value</u>	<u>Total</u>
Medical Care	Medi-Cal Losses	5,295,228	
	Charity Care	2,799,104	
	EMS Base Station	148,837	
	Immunizations	28,365	
	Physician Fees	489,599	
	Hospital Outpatient Services	5,365	
	<i>Total Medical Care</i>		\$ 8,766,498
Medical Education	Chaffey College Nursing/Radiology Training	176,846	
	Cardiac Symposium	22,885	
	<i>Total Medical Education</i>		199,731
Vulnerable Populations	<u>Community Agency Support</u>		
	Meals on Wheels	24,362	
	Reach Out	198	
	Upland Healthy Start/Healthy Future	595	
	Total Agency Support	25,155	
	<u>Health Fairs and Screenings</u>		
	City of Claremont: Joslyn Senior Center	513	
	Fontana Police Department Health and Safety Fair	602	
	Prostate Cancer Screening	6,885	
	Total Health Fairs and Health Screenings	8,000	
	<u>Other Activities/Vulnerable Populations</u>		
	Healthy Beginnings	207,250	
	HELP	2,973	
	SACH Outreach	7,744	
	SACH Dental Center	5,644	
	Total Other Activities	223,611	
	<u>Support Groups</u>		
	Caring Hearts	556	
	Breast Cancer	926	
	Cancer Caregiver	93	
	Cancer Journaling	278	
	Cancer Support	278	
Diabetes	105		
Nutrition for Cancer	139		
Pilates for Cancer	3,149		
Orientation for the Newly Diagnosed	463		
Total Support Groups	5,987		
<u>Vouchers</u>			
Transportation (Taxi & Bus)	5,785		
	<i>Total Vulnerable Populations</i>		268,840
Broader Community	<u>Health Fairs and Screenings</u>		
	City of Ontario: Family Health Expo	161	
	City of Upland Family Fun Day	554	

	Kiwanis Track Meet	426	
	Victoria Gardens: Teddy Bear Clinic	4,787	
	Health Fair Supplies/Education Materials	13,202	
	Sports Injury Screening	<u>9,010</u>	
	Total Health Fairs/Screening	28,140	
	<u>Community Education</u>		
	Breast Feeding	995	
	Cardiac Classes	1,111	
	Community Education Calendars	28,483	
	Community Health Lectures	19,219	
	CPR & First Aid Classes	2,936	
	Family Friends & Infant CPR	2,088	
	Infant Care	2,358	
	Kick/Prenatal Yoga	7,660	
	Moms Embracing the Moment	5,864	
	Prepared Childbirth	2,984	
	Prepared Childbirth Crash Course	379	
	Prepared Childbirth C-Section Course	(38)	
	Safe Sitter Education	492	
	Sibling Classes	158	
	Well Connected	24,767	
	Women's Symposium	<u>60,000</u>	
	Total Community Education	159,456	
	<u>Other Activities</u>		
	Blood Drives	33,850	
	SACH Internships	11,900	
	Upland Sharps Program	608	
	Total Other Activities	46,358	
	Total Broader Community		233,954
Other Quantifiable Benefits	Community Benefit Planning/Preparation		11,998
	COMMUNITY BENEFIT INVENTORY TOTAL COST		<u>\$ 9,480,719</u>
Community Building Activities	<u>Community Agency Support</u>		
	Friends of the Pacific Electric Trail	250	
	Healthy Chino	265	
	Healthy Fontana	265	
	Healthy Ontario	529	
	Healthy Rancho Cucamonga	1,984	
	Fist of Gold	500	
	Lefty's 5K	5,000	
	Reach Out	500	
	Total Community Agency Support		9,293
	TOTAL BENEFIT TO OUR COMMUNITY		<u>\$ 9,490,012</u>

2011 Community Benefit Valuation (with Medicare Losses)

<u>Category</u>	<u>Activity</u>	<u>Value</u>	<u>Total</u>
Medical Care	Medicare Losses	\$852,490	
	Medi-Cal Losses	5,295,228	
	Charity Care	2,799,104	
	EMS Base Station	148,837	
	Immunizations	28,365	
	Physician Fees	489,599	
	Hospital Outpatient Services	5,365	
	Total Medical Care		\$ 9,618,988
Medical Education	Chaffey College Nursing/Radiology Training	176,846	
	Cardiac Symposium	22,885	
	Total Medical Education		199,731
Vulnerable Populations	<u>Community Agency Support</u>		
	Meals on Wheels	24,362	
	Reach Out	198	
	Upland Healthy Start/Healthy Future	595	
	Total Agency Support	25,155	
	<u>Health Fairs and Screenings</u>		
	City of Claremont: Joslyn Senior Center	513	
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	Prostate Cancer Screening	6,885	
	Total Health Fairs and Health Screenings	8,000	
	<u>Other Activities/Vulnerable Populations</u>		
	Healthy Beginnings	207,250	
	HELP	2,973	
	SACH Outreach	7,744	
	SACH Dental Center	5,644	
	Total Other Activities	223,611	
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Cancer Support	278		
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Orientation for the Newly Diagnosed	463		
Total Support Groups	5,987		
<u>Vouchers</u>			
Transportation (Taxi & Bus)	5,785		
	Total Vulnerable Populations		268,840

Broader Community	<u>Health Fairs and Screenings</u>		
	City of Ontario: Family Health Expo	161	
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	Health Fair Supplies/Education Materials	13,202	
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	Total Health Fairs/Screening	28,140	
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	Women's Symposium	<u>60,000</u>	
	Total Community Education	159,456	
	<u>Other Activities</u>		
	Blood Drives	33,850	
	SACH Internships	11,900	
	Upland Sharps Program	<u>608</u>	
	Total Other Activities	46,358	
	Total Broader Community		233,954
Other Quantifiable Benefits	Community Benefit Planning/Preparation		11,998
	COMMUNITY BENEFIT INVENTORY TOTAL COST		<u>\$ 10,332,916</u>
Community Building Activities	<u>Community Agency Support</u>		
	Friends of the Pacific Electric Trail	250	
	Healthy Chino	265	
	Healthy Fontana	265	
	Healthy Ontario	529	
	Healthy Rancho Cucamonga	1,984	
	Fist of Gold	500	
	Lefty's 5K	5,000	
	Reach Out	500	
	Total Community Agency Support		9,293
	TOTAL BENEFIT TO OUR COMMUNITY		<u>\$ 10,333,209</u>

 SAN ANTONIO COMMUNITY HOSPITAL	Department: Hospital Policy/Procedure Manual				
	Section: Policies and Procedures, Hospitalwide				
	Title: CHARITY CARE				
	Number: 8610.03040			Page 1 of 7	
	<input checked="" type="checkbox"/> Hospitalwide	<input type="checkbox"/> Interdepartmental	<input type="checkbox"/> Department	<input type="checkbox"/> Patient Care	<input checked="" type="checkbox"/> Non- Patient Care
Policy History			Approval: _____ Dates _____		
Effective Date:	10/01		EMG: 9/01		
Revision Date(s):	4/03, 4/04, 1/05, 2/05, 5/06, 12/07, 1/08, 01/11		Finance Committee: 3/04, 2/05, 5/06, 02/09, 09/10,03/11		
Review Date(s):	7/08, 01/09, 08/10, 01/11		Medical Executive Committee: 8/08		

PURPOSE:

To provide charity or partial-pay charity to patients who may not qualify for State, Federal, County or other assistance and have no reasonable means to pay.

POLICY:

San Antonio Community Hospital (SACH) is committed to providing charity care to persons who have healthcare needs and are uninsured, underinsured, ineligible for a government program, or otherwise unable to pay, for medically necessary care based on their individual financial situation. Consistent with its mission to deliver compassionate, high quality, affordable healthcare services and to advocate for those who are poor and disenfranchised, SACH strives to ensure that the financial capacity of people who need health care services does not prevent them from seeking or receiving care. SACH will provide, without discrimination, care for emergency medical conditions to individuals regardless of their eligibility for financial assistance or for government assistance.

Accordingly, this written policy:

- Includes eligibility criteria for financial assistance – free and discounted (partial charity) care
- Describes the basis for calculating amounts charged to patients eligible for financial assistance under this policy
- Describes the method by which patients may apply for financial assistance
- Describes how the hospital will widely publicize the policy within the community served by the hospital
- Limits the amounts that the hospital will charge for emergency or other medically necessary care provided to individuals eligible for financial assistance to amount generally received by the hospital for commercially insured or Medicare patients

Charity is not considered to be a substitute for personal responsibility. Patients are expected to cooperate with SACH’s procedures for obtaining charity or other forms of payment or financial assistance, and to contribute to the cost of their care based on their individual ability to pay. Individuals with the financial capacity to purchase health insurance shall be encouraged to do so, as a means of assuring access to health care services, for their overall personal health, and for the protection of their individual assets.

In order to manage its resources responsibility and to allow SACH to provide the appropriate level of assistance to the greatest number of persons in need, the Board of Trustees establishes the following guidelines for the provision of patient charity.

II. DEFINITIONS

For the purpose of this policy, the terms below are defined as follows:

Charity Care: Healthcare services that have been or will be provided but are never expected to result in cash inflows. Charity care results from a provider's policy to provide healthcare services free or at a discount to individuals who meet the established criteria.

Family: Using the Census Bureau definition, a group of two or more people who reside together and who are related by birth, marriage, or adoption. According to Internal Revenue Service rules, if the patient claims someone as a dependent on their income tax return, they may be considered a dependent for purposes of the provision of financial assistance.

Family Income: Monetary assets and income may be considered when determining eligibility under this Charity Care Policy. Monetary assets shall not include retirement or deferred-compensation plans qualified under the Internal Revenue Code, or non-qualified deferred-compensation plans. The first ten thousand dollars (\$10,000.00) of a patient's monetary assets shall not be counted in determining eligibility, nor shall fifty percent (50%) of a patient's monetary assets over the first ten thousand dollars (\$10,000.00) be counted in determining eligibility. Net worth shall be considered including eligible liquid and non-liquid assets owed less liabilities and claims against assets. (Reference AB774, Health & Safety Code § 147405(b))

Uninsured: The patient has no level of insurance or third party assistance to assist with meeting his/her payment obligations.

Underinsured: The patient has some level of insurance or third-party assistance but still has out-of-pocket expenses that exceed his/her financial abilities.

Gross charges: The total charges at SACH's established rates for the provision of patient care services before deductions from revenue are applied.

Emergency medical conditions: Defined within the meaning of section 1867 of the Social Security Act (42 U.S.C. 1395dd).

Medically necessary: As defined by Medicare (services or items reasonable and necessary for the diagnosis or treatment of illness or injury).

III. PROCEDURES

A. **Services Eligible Under This Policy.** For purposes of this policy, "charity" or "financial assistance" refers to healthcare services provided by SACH without charge or

at a discount to qualifying patients. The following healthcare services are eligible for charity:

1. Emergency medical services provided in an emergency room setting;
2. Services for a condition which, if not promptly treated, would lead to an adverse change in the health status of an individual;
3. Non-elective services provided in response to life-threatening circumstances in a non-emergency room setting; and
4. Medically necessary services, evaluated on a case-by-case basis at SACH's discretion.

B. Eligibility for Charity. Eligibility for charity will be considered for those individuals who are uninsured, underinsured, ineligible for any government health care benefit program, and who are unable to pay for their care, based upon a determination of financial need in accordance with this Policy. The granting of charity shall be based on an individualized determination of financial need, and shall not take into account age, gender, race, social or immigrant status, sexual orientation or religious affiliation.

C. Method by Which Patients May Apply for Charity Care.

1. Financial need will be determined in accordance with procedures that involve an individual assessment of financial need; and may
 - a. Include an application process, in which the patient or the patient's guarantor are required to cooperate and supply personal, financial and other information and documentation relevant to making a determination of financial need. Documentation may include, but is not limited to: most recent pay check stub(s), copies of bank statements, and the most recent tax filings.
 - b. Include the use of external publicly available data sources that provide information on a patient's or a patient's guarantor's ability to pay (such as credit scoring);
 - c. Include reasonable efforts by SACH to explore appropriate alternative sources of payment and coverage from public and private payment programs and to assist patients to apply for such programs;
 - d. Take into account the patient's available assets, and all other financial resources available to the patient; and
 - e. Include a review of the patient's outstanding accounts receivable for prior services rendered and the patient's payment history.
2. It is preferred but not required that a request for charity and a determination of financial need occur prior to rendering of non-emergent medically necessary services. However, the determination may be done at any point in the collection cycle. The need

for financial assistance shall be re-evaluated at each subsequent time of services if the last financial evaluation was completed more than a year prior, or at any time additional information relevant to the eligibility of the patient for charity becomes known.

3. SACH's values of human dignity and stewardship shall be reflected in the application process, financial need determination and granting of charity. Requests for charity shall be processed promptly and SACH shall notify the patient or applicant in writing within 30 days of receipt of a completed application.

D. **Presumptive Financial Assistance Eligibility**. There are instances when a patient may appear eligible for charity care discounts, but there is no financial assistance form on file due to a lack of supporting documentation. Often there is adequate information provided by the patient or through other sources, which could provide sufficient evidence to provide the patient with charity care assistance. In the event there is no evidence to support a patient's eligibility for charity care, SACH could use outside agencies in determining estimate income amounts for the basis of determining charity care eligibility and potential discount amounts. Once determined, due to the inherent nature of the presumptive circumstances, the only discount that can be granted is a 100% write-off of the account balance. Presumptive eligibility may be determined on the basis of individual life circumstances that may include:

1. State-funded prescription programs;
2. Homeless or received care from a homeless clinic;
3. Participation in Women, Infants and Children programs (WIC);
4. Food stamp eligibility;
5. Subsidized school lunch program eligibility;
6. Eligibility for other state or local assistance programs that are unfunded (e.g., Medicaid spend-down);
7. Low income/subsidized housing is provided as a valid address; and
8. Patient is deceased with no known estate.

E. **Eligibility Criteria and Amounts Charged to Patients**. Services eligible under this Policy will be made available to the patient in accordance with financial need, as determined in reference to Federal Poverty Levels (FPL) in effect at the time of the determination. Once a patient has been determined by SACH to be eligible for financial assistance, that patient shall not receive any future bills based on undiscounted gross charges. The basis for the amounts SACH will charge patients qualifying for financial assistance is as follows:

<u>Size of Family Unit*</u>	<u>Poverty Guidelines*</u>
1 person	\$ 32,670
2 persons	44,130
3 persons	55,590
4 persons	67,050
5 persons	78,510
6 persons	89,970
7 persons	101,430
8 persons	112,890
9 or more persons	11,460/per add'l person

*The above annual income levels are based on 300% of the published Federal Poverty Guidelines, which appeared in the Federal Register on January 20, 2011, and are effective February 1, 2011. The Size of Family Unit includes the patient and any dependents who reside with the patient, as well as any dependents for which the patient has a legal financial obligation (i.e., child support).

F. Communication of the Charity Program to Patients and Within the Community.

Notification about charity available from SACH, which shall include a contact number (909.466.8566), shall be disseminated by SACH by various means, which will include, but are not limited to:

1. All patients registered in the Emergency Department or Admitting Office will receive a letter advising the patient that that hospital offers discount, charity, and other payment alternative programs;
2. Outpatient Registration will provide the same letter to all patients who have never previously been treated at SACH;
3. By posting notices in various areas including the emergency room, billing office, and outpatient registration areas; and
4. At other public places as SACH may elect. SACH also shall publish and widely publicize a summary of this charity care policy on facility websites, in brochures available in patient access sites and at other places within the community served by the hospital as SACH may elect. . Such notices and summary information shall be provided in the primary languages spoken by the population serviced by SACH. Referral of patients for charity may be made by any member of SACH's staff or medical staff, including physicians, nurses, financial counselors, social workers, case managers, chaplains, and religious sponsors. A request for charity may be made by the patient or a family member, close friend, or associate of the patient, subject to applicable privacy laws.

G. Relationship to Collection Policies. SACH's management shall develop policies and procedures for internal and external collection practices (including actions the hospital may take in the event of non-payment, including collections action and reporting to credit agencies) that take into account the extent to which the patient qualifies for charity, a patient's good faith effort to apply for a governmental program or

for charity from SACH, and a patient's good faith effort to comply with his or her payment agreements with SACH. For patients who qualify for charity and who are cooperating in good faith to resolve their discounted hospital bills, SACH may offer extended payment plans, will not send unpaid bills to outside collection agencies, and will cease all collection efforts. SACH will not impose extraordinary collections actions such as wage garnishments, liens on primary residences, or other legal actions for any patient without first making reasonable efforts to determine whether that patient is eligible for charity care under this financial assistance policy. Reasonable efforts shall include:

1. Validating that the patient owes the unpaid bills and that all sources of third-party payment have been identified and billed by the hospital;
2. Documentation that SACH has or has attempted to offer the patient the opportunity to apply for charity care pursuant to this policy and that the patient has not complied with the hospital's application requirements;
3. Documentation that the patient does not qualify for financial assistance on a presumptive basis;
4. Documentation that the patient has been offered a payment plan but has not honored the terms of that plan.

H. **Regulatory Requirements**. In implementing this Policy, SACH management and facilities shall comply with all other federal, state, and local laws, rules, and regulations that may apply to activities conducted pursuant to this Policy.

A monthly charity care report summary, with supporting individual documentation, will be signed off by the Director of Business Services & Managed Care and Senior Vice President of Finance. Upon completion of signatures, the report will be forwarded to the Finance Department. Business Services will retain the summary report and supporting documentation for seven (7) years.

A monthly charity care report summary, with supporting individual documentation, will be signed off by the Director of Business Services & Managed Care and Senior Vice President of Finance. Upon completion of signatures, the report will be forwarded to the Finance Department. Business Services will retain the summary report and supporting documentation for seven (7) years.

REFERENCES:

(Previously Business Services Policy/Procedure #8531.10001 *Charity Care*)

AB774

SB350

California Health & Safety Code § 127400 – 127446

Patient Protection and Affordable Care Act (PPACA)

Title: **CHARITY CARE**

Number: **8610.03040**

Page: 7 of 7

RELATED POLICIES/ATTACHMENTS/FORMS:

Form #8350 Financial Application (located in Business Services Department)

Hospital Policy/Procedure #8610.04010 *Discount Care*

END