



Mark Twain St. Joseph's Hospital
Community Benefit Report 2012
Community Benefit Implementation Plan 2013

A message from the President/Chief Executive Officer and Chairman of the Board

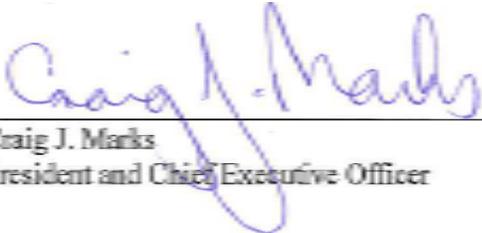
At Mark Twain St. Joseph's Hospital, we share a commitment to optimize the health of the community we are privileged to serve. Vital to this effort is the collaboration we enjoy with our community partners. How we contribute to the quality of life and the environment in our communities has always been a key measure of our success and it will continue to be so as we move forward.

In January 2012, Dignity Health, formerly Catholic Healthcare West, announced changes in our governance structure and name that will better position the system to welcome new partners in a changing health care landscape. The new name, Dignity Health, was chosen because dignity has been one of our core values since our founding. It is deeply embedded in our culture and clearly describes who we are and what we stand for. Our new governance structure more accurately reflects our current composition of both religiously sponsored and community sponsored hospitals.

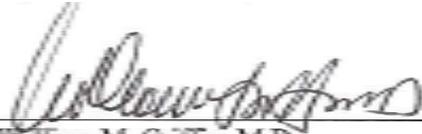
During fiscal year 2012 we, like the nation, were impacted by the continuing economic downturn and experienced both successes and challenges. Despite declining revenue from government sponsored patients, we provided over \$9 million in charity care, community benefits, and unreimbursed patient care.

At Mark Twain St. Joseph's Hospital we strive to manage our resources and advance our healing ministry in a manner that benefits the common good now and in the future. Despite today's challenges we see this as time of great hope and opportunity for the future of health care. We want to acknowledge and thank the women and men who have worked together in a spirit of collaboration to address the health priorities of our community through health and wellness programs and services.

In accordance with policy, the Mark Twain St. Joseph's Healthcare Board of Directors reviewed and approved the annual Community Benefit Report and Implementation Plan on October 4, 2012 and are now pleased to share it with those we serve, our greater community.



Craig J. Marks
President and Chief Executive Officer



William M. Griffin, M.D.
Chairman of the Board

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EXECUTIVE SUMMARY

Mark Twain St. Joseph's Hospital (MTSJH), founded in 1951, is located at 768 Mountain Ranch Road, San Andreas, CA. It became a member of Dignity Health, formerly Catholic Healthcare West (CHW)¹, in 1996. The facility is a not-for-profit, 25-bed Critical Access Hospital serving all of Calaveras County, California. Over 300 employees provide the necessary services.

The hospital's services include 24-hour Emergency Services; Inpatient/Outpatient Surgery; Intensive Care Unit; Medical and Surgical Units; General X-ray, Ultrasound, Mammography, CT Scan, MRI and Nuclear Medicine; Respiratory Therapy Services; Nurse Call Center; Physical Therapy Services; Inpatient Skilled Rehabilitation; Full Service Clinical Lab; Cardiac & Pulmonary Rehabilitation; and Health Education.

The hospital's affiliated medical staff provide Family Practice, Allergy, Alternative Medicine, Internal Medicine, Pathology, Psychology, Pediatrics, Gynecology, Orthopedic Surgery, General Surgery, Ophthalmology, Orthopedic Surgery, Urology, Podiatry, Allergy, Behavioral Health, Dermatology, Radiology, Anesthesiology, Neurology, Pain Management, Emergency Medicine, Cosmetic and Reconstructive Surgery, Spine Surgery, Cardiology and Pulmonary Medicine.

Access to care in the County is further supported by five MTSJH Family Medical Centers located in Arnold, Angels Camp, Valley Springs, San Andreas and Copperopolis, and Creekside Imaging in Angels Camp. Services at these Ambulatory Centers include Immediate Care, Primary Care, Behavioral Health, Pediatrics, General X-ray, Laboratory Draws and Health Education.

In the rural environment of our community, small business, agencies and the hospital partner to provide various events throughout the year that are focused on promoting the health of the community, enhancing quality of life for the residents and showcasing the unique history and natural wonders of our environment. Based on the prioritized health need of the community, a specific focus has been on Women's Health issues and primary care and prevention

A Community Needs Assessment was conducted in 2011 in support of our stated mission - to improve the health of our greater community. The goal of the assessment is to continually improve the quality of health and health care for county residents by providing accurate and reliable information to community members and health care providers; raising awareness of health needs, changing trends, emerging issues, and community challenges; and providing research-based data for the hospital and the community to continue strategic planning efforts. The focus of the assessment is on health and the major factors that impact health such as the economy, public safety and the natural environment. As compared to the State and Nation, Community issues identified in the assessment include a higher percentage of Calaveras County adults who are obese, and a higher incidence of high blood pressure amongst the residents.

¹For more information on the name change, please visit www.dignityhealth.org

To address two of the chronic care needs of the community, MTSJH has chosen the Congestive Heart Failure/Chronic Obstructive Pulmonary Disease and Diabetes Education programs as Long Term Improvement Plans (LTIP). The goal of these programs is to improve quality of life for participants by increasing their self-efficacy and avoiding hospital admissions.

Mark Twain St. Joseph's Hospital FY2012 Community Benefit Report and FY2013 Community Benefit Implementation Plan document our commitment to the health and improved quality of life in our community. The total value of community benefit for FY2012 is **\$3,574,093**. Including the shortfall from Medicare, the total expense for community benefit was **\$9,499,055**. Quantifiable Benefits included traditional charity care, unpaid costs of Medi-Cal and Medicare, community service donations, community health services and education, and community building activities.

MISSION, VISION AND VALUES STATEMENT

MISSION

The Mission of Mark Twain St. Joseph's Hospital is to continuously improve the health status of its community.

VISION

A vibrant general acute care provider linked to a comprehensive system of care, chosen for clinical excellence, standing in partnership with patients, employees, and physicians to improve the health of the communities we serve.

VALUES

We achieve the mission through our **core values of dignity, collaboration, justice, stewardship and excellence**, as are seen in the following principles:

1. Continuous improvement of the quality of care delivered
2. Access to care for all
3. Respect for the individual
4. Working with others towards common goals
5. Fostering a sense of family and community
6. Employee development and recognition

ORGANIZATIONAL COMMITMENT

The Mark Twain Health Care District Board of Directors is comprised of five local elected officials who are responsible for ensuring that appropriate healthcare services are provided to the community. The Mark Twain St. Joseph's Healthcare Corporation Board of Trustees is responsible for governance oversight of hospital operations through a management agreement with Dignity Health.

Each year the Mark Twain St. Joseph's HealthCare Corporation Board of Trustees, medical staff leadership, and hospital leadership develop the Community Benefit Plan as part of the annual Strategic Planning process. This process takes a snapshot of the community, reviews the forecast demographics and Community Needs Assessment (2011), reminds itself of its Mission, Vision and Values and develops strategies and goals for the upcoming years. Hospital leadership then develops tactics to meet these goals and dedicates the resources during the budgetary process and program design. Performance measurements and accountabilities are established.

Mark Twain St. Joseph's Hospital participates in the Dignity Health Community Grants program and annually awards funding to other not-for-profit organizations in the community who share in the same Mission, Vision and Values. In FY2012, community grants totaling \$22,079 were given to the following agencies:

- Calaveras Mentoring Foundation, "connecting youth with safe, positive adult role models who will offer support, guidance and friendship and help the youth with healthy life decisions."
- Community Mind Matters Clinic, "help individuals and families affected by autism spectrum disorders, attention deficit hyperactivity disorders, and learning disabilities, in achieving their maximum potential, and to promote public understanding by serving as a community resource."
- Community United Methodist Church Food Pantry, "help feed the hungry of Calaveras County."

COMMUNITY

Calaveras County is approximately 130 miles east of San Francisco, 60 miles southeast of Sacramento, and 50 miles east of Stockton. The total population is about 43,000 with an area of 1,008 square miles. Our only incorporated city, the Angels Camp, has a population of about 5,400.

Our county geography begins near sea-level in the west with oak-dotted rolling hills, changes to mixed evergreens and oak forests, then dramatic stands of gigantic trees, and culminates near 8,200 feet in the eastern part of the county with evergreens growing among granite boulders of the Sierra Nevada Range. Major rivers, the Mokelumne and the Stanislaus, form borders north and south.

In Calaveras County, the poorest residents have been severely impacted by the recession and the elimination of programs and services that local governments are no longer able to fund. The

growing gap in needed services has placed at risk the health of hundreds of underserved individuals and families who are now turning to emergency departments for basic non-acute medical services because they have lost or lack a primary care provider. Our 5 Family Medical Centers (rural health clinics) help to fill this gap. However, it is still estimated that 28% of the visits to the ED are for non-emergent care.

Access to care for these patient populations requires collaborative problem solving at the community level. Not-for-profit health providers must work together to leverage resources and maximize health assets in innovative ways to restore what has been lost, enhance what still exists and ensure sustainable health programs and services are developed and available over the long-term to the populations that need them the most. Community-based collaboration has been and will be a priority and will continue to drive community benefit efforts in the future. It will become more important for community stakeholders to work in partnerships to maximize the limited resources that are available.

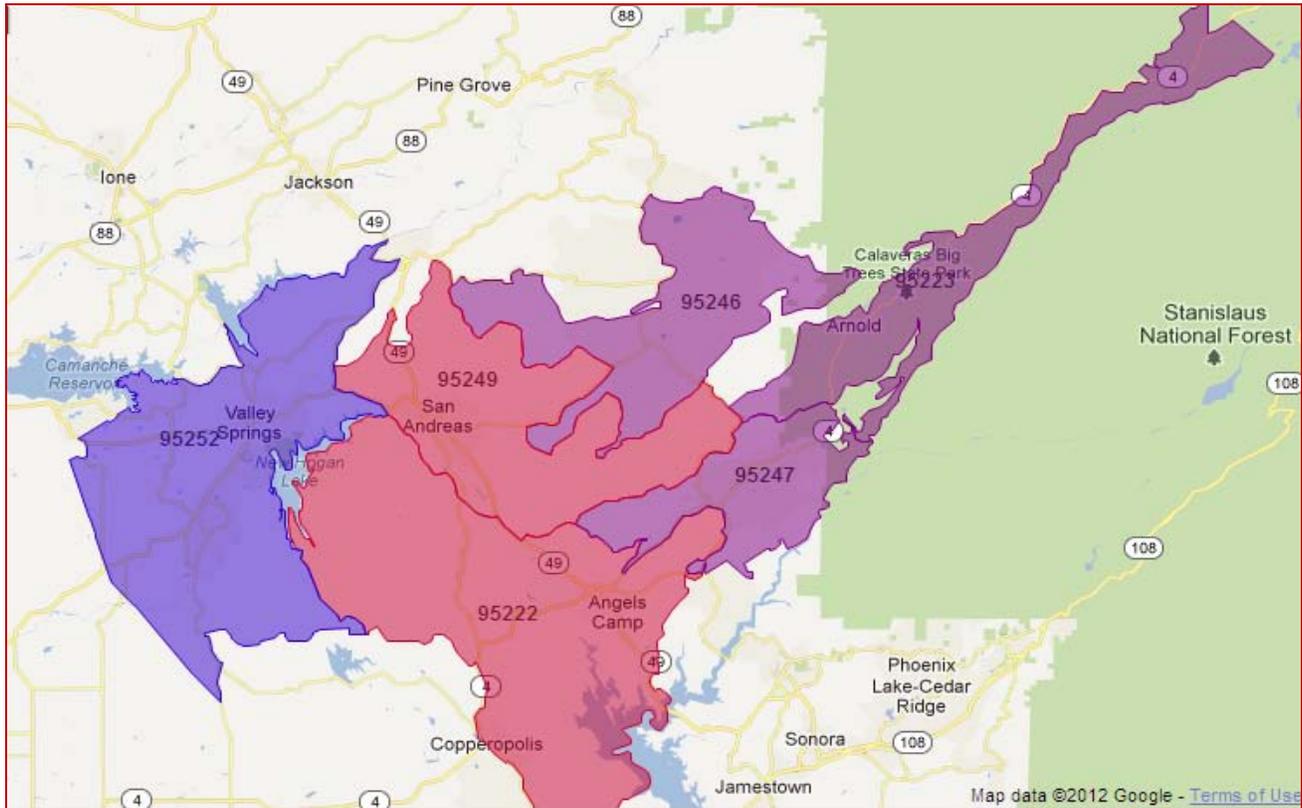
Other demographics include:

- Population: 39,251
- Diversity: 82.8% White, 10.9% Hispanic, 1.4% Asian, 0.8% Black, 4% Other
- Average Income: is \$69,408
- Uninsured: 18.42%
- Unemployment: 4.4%
- No High School Diploma: 9.5%
- Renter: 14.2%
- CNI Score is 3.1%
- Medicaid patients is 18.42%
- Other Area Hospitals: 0

Calaveras County is a Health Professional Shortage Area (HPSA) and portions of the County are Medically Underserved Areas (MUS). Besides Mark Twain St. Joseph's Hospital and its 5 ambulatory care centers, the following facilities and resources are available:

- Mark Twain Convalescent Hospital
- Country Haven Assisted Living
- Community Clinics
- Children Services
- Home Health Care
- Hospice
- Mental Health
- Drug & Alcohol Abuse
- Support Groups & Services
- Transportation

The current Community Needs Index is shown below, indicating the communities which have the highest needs based on socio-economic indicators of unemployment, lack of insurance, education level, cultural/language and housing. Median score is 3.1.



Lowest Need **Highest Need**
■ 1 - 1.7 Lowest ■ 1.8 - 2.5 2nd Lowest ■ 2.6 - 3.3 Mid ■ 3.4 - 4.1 2nd Highest ■ 4.2 - 5 Highest

Median CNI Score: 3.1

COMMUNITY BENEFIT PLANNING PROCESS

MTSJH Hospital Leadership oversees community benefit activities for the hospital as it strives to meet the health and wellness needs of the local community. Several members of Mark Twain's senior and middle management team serve the community on a variety of community-based not-for-profit Boards, such as Children and Families Commission, Habitat for Humanity, Soroptimists International, Economic Development Corporation, local Churches and Chamber of Commerce to name a few. In addition, most employees have linkages to various service organizations throughout the communities. Community involvement is evidenced by participation of local business and community leaders in the Hospital's Governing Boards, Finance Committee, Ethics Committee and our Parish Nurse Advisory Committee.

Community Needs Assessment Process

A Community Needs Assessment was conducted in 2011, as required by State law (SB697). The needs assessment is a primary tool used by the hospital to determine its community benefit plan, which outlines how the hospital will give back to the community in the form of health care and other community services to address unmet community health needs. This assessment incorporates components of primary data collection and secondary data analysis that focus on the health and social needs of the MTSJH Service Area. The Primary Service Area encompasses the cities, towns and communities of Calaveras County that include 22 zip code areas.

Targeted interviews were used to gather primary data and opinions from members of the MTSJH community. For the interviews, community leaders were contacted and asked to participate in the needs assessment. Secondary data was collected from a variety of sources, including but not limited to: the U.S. Census Bureau; federal, state, and local government agencies; health care institutions; and online databases.

Health Issues

- Slightly more than 1 in 4 adults in Calaveras and surrounding counties were obese in 2009.
- The percentage of adults with diabetes fluctuated between 6% and 10% between 2003 and 2009, with similar fluctuations in the rest of the state.
- One-third of residents reported that they had been diagnosed with high blood pressure.
- Limited services and service providers make it difficult to access mental health, obstetrical and specialty care services.
- The percentages of Calaveras County children with all required immunizations was 75% in 2010 for kindergartners and 83% for child care entrants, both worse than the state averages.
- There is inadequate attention given to preventative care, healthy lifestyles, nutrition and exercise.

SocialDemographic Issues

- The area reflects an aging population with approximately 56% of the population over the age of 44 and 50% of the population is female.
- A declining economy is impacting the community by increased joblessness, decreases in employer-based health insurance, higher costs for transportation and decreased availability of affordable housing.
- The median household income is \$54,971 compared to the state median income of \$60,883.
- Persons below the federal poverty level is 8.3%.
- Home ownership rate is 78.8%.
- A lack of providers in Calaveras County (primary care, mental health, specialists) negatively impacts access to care and requires residents to travel outside of the County to obtain services.
- 1 in 315 houses in Calaveras County was in foreclosure in September 2011.
- Large numbers of youth and adults are overweight and obese.
- Smoking among adults and teens is a concern.

Assets Assessment

Throughout the community are important resources that everyone can benefit in times of need. During 2011 Mark Twain St. Joseph's published a Community Resources brochure for residents to keep handy at home and in the car. The mission is to help create a healthier community. The organizations in this brochure work with us to provide Community Resources that can make a difference.

The County's Resource Connection and the Mark Twain Health Care District have reviewed the assessment and have developed their own strategies to effect change.

DEVELOPING THE HOSPITAL'S IMPLEMENTATION PLAN

MTSJH leadership oversees the development of the community benefit plan for the hospital as it strives to meet the health and wellness needs of the local community. Community involvement is evidenced by participation of local business and community leaders in the Hospital's Governing Boards, Finance Committee, Ethics Committee and Parish Nurse Advisory Committee.

Working with the Mark Twain Healthcare District Board of Directors and other community stakeholders, the Community Needs Assessment was reviewed and discussed. Priorities were identified. Factors were considered for this process (e.g., target population, location of target population, severity of the problem, resources currently available, available community partners, etc.). Partnerships also addressed how the identified health issues can be addressed and if a vulnerable population was identified.

Addressed priorities included establishment of a mobile health clinic for the underserved populations in the West county area, support for Health Fairs in all communities and continued support of the Resource Connection's Food Bank which helps to fill an unmet nutrition need, including childhood obesity.

Planning for the Uninsured/Underinsured Patient Population

Uninsured or underinsured residents who are not able to pay for the healthcare services received and are not eligible for any government sponsored programs may qualify for the hospital's Payment Assistance Program. This program is announced at all MTSJH registration areas and a brochure is included with the admission package or is available in the registration department. An executive summary of the policy is included in the Appendix.

Plan Report and Update

The Strategic Plan for FY2013 is focused in six areas:

- “Quality – Create value for our patients, physicians, employees, and community by exceeding expectations and continually improving outcomes for clinical quality, and customer satisfaction;”
- “Cost – Achieve best in class standing in organization performance;”
- “Growth – Develop services to improve service area position and capital capacity to support future growth;”
- “Integration - Align physicians with MTSJH in order to meet the health care needs of the community;”
- “Connectivity – Develop electronic linkages across the continuum of care to facilitate clinical data sharing and care management;” and
- “Leadership – Establish MTSJH as the best health system to work and practice.

Establish MTSJH as the cornerstone of the community, through provision of services and community engagement. Become the community health leader through collaboration, socially responsible programs, and advocacy for the community.”

The Strategic Plan outlines opportunities in community benefit, community grants, advocacy and social justice.

Key Community Benefit Program Descriptions:

Dignity Health has adopted five core principles that guide the selection and prioritization of Community Benefit program activities. These core principles are:

- **Disproportionate Unmet Health-Related Needs**
Seek to accommodate the needs of communities with disproportionate unmet health-related needs.
- **Primary Prevention**
Address the underlying causes of persistent health problems
- **Seamless Continuum of Care**
Emphasize evidence-based approaches by establishing operation linkages (i.e., coordination and re-design of care modalities) between clinical services and community health improvement activities.
- **Build Community Capacity**
Target charitable resources to mobilize and build the capacity of existing community assets to meet the needs of the community.
- **Collaborative Governance**
Engage divers community stakeholders in the selection, design, implementation, and evaluation of program activities.

For FY2012, Mark Twain St. Joseph’s Hospital has also identified five key community benefit programs. Significant efforts and resources will be focused with the expectation of clear and measurable outcomes.

Priority Focus Area	Program Outcomes	Possible Evaluation Measures
<i>Primary Prevention - Altering susceptibility or reducing exposure for susceptible individuals:</i>		
Family Medical Centers - Community Clinics	Increased rates of immunization/vaccination	Clinic clients/encounters. Decreased incidents of illness; decreased admissions and/or length of hospital stay for flu/pneumonia.
Diabetes Education/ Management	Change in awareness, knowledge, attitudes and skills.	Increase in awareness, knowledge, attitudes, and skill development or acquisition.
Heart Disease Management	Decrease in utilization rates for chronic diseases.	Increased health outcomes, decreased admissions and/or length of hospital stay.

Pulmonary Disease Management	Decrease in utilization rates for chronic diseases	Increased health outcomes, decreased admissions and/or length of hospital stay.
Healthcare Access/Reform:		
Enhance geographic access for Medi-Cal and Healthy Families	Access to healthcare services	Number of persons enrolled, retained

Specific Community Benefit Program Descriptions:

Health Fairs (Free Admission) – Throughout the year, Mark Twain St. Joseph’s Hospital is involved with many Health Fairs. Community Service Organizations attend the health fair and provide community education and service to those in attendance. Cholesterol Screening, Blood Pressure Checks, Bone Density Studies and Health Education are just a few of the services provided.

In September, MTSJH conducted its 13th Annual Fall Health Fair on the hospital campus. Over 60 informational booths featured health, exercise, wellness, childcare, safety, traditional and alternative medicine, health foods, quality of life and recreation. Free Cholesterol and Osteoporosis screenings and Blood Pressure Checks were conducted, as well as flu (500+) and pneumonia vaccinations. Over 500 blood draws/tests were provided at a discounted price. Other benefits included a Child Car Seat Checkup. This year’s “Fall” Health Fair is scheduled for October 1, 2012.

In March 2012, MTSJH conducted its 2nd Annual Spring Health Fair at Ironstone Vineyards to accommodate the residents along the Highway 4 Corridor. Although not as large as our Fall fair, it has grown dramatically in its two years.

New Summer Health Fair (Free Admission) – As a result of the success at the Fall and Spring Health Fairs, and the need to provide the services to the North-West communities, a new Summer Health Fair was held in Valley Springs on July 21st . This new fair was funded by the Mark Twain Health Care District using the Fall and Spring health fairs as a template. The weather was wet and windy, the attendance was down, and the enthusiasm was up. The 3rd Annual Summer Fair is be scheduled for July 2013.

Teddy Bear Clinic – This annual activity brings all of the kindergartners in Calaveras County to our hospital to learn more about what happens at a hospital. The children are taken on a tour of the hospital and visit several departments where they can diagnose their “teddy bear wellness patient.” The purpose of the clinic is to reduce some of the apprehension about the hospital and to remind the children that we are not always about pain and shots. This is a three-day live a healthy lifestyle community benefit of the hospital.

Mini-Health Fairs – A series of mini-health fairs were conducted in the community. Partnerships with the Music in the Parks, sponsored by the Calaveras County Arts Council; the Farmer’s Market, sponsored by the Angels Camp Business Association; and the First Friday Concerts, hosted by the Murphy’s Community Club, all provided venues for the Fairs. The Fairs include health information, blood pressure checks, strength testing, advice from nurse/mid-level, etc. We also participated in an employee health fair at Black Oak Casino in neighboring Tuolumne County to provide health information to their 400+ employees.

American Heart Association – For this report, 22 persons benefited from our Life Support classes to community members and medical personnel. Partners included the San Andreas and Copperopolis Fire Departments.

Baby Sitting Basics – 17 boys and girls from ages 12-14 attended this class to educate our youth to responsibly care for young children.

Disaster Preparedness – During the year, 78 persons in Calaveras County participated in communications workgroups to coordinate communications between Public Safety, Public Health and MTSJH. Partners include law enforcement, Fire, EMS, EMSA, Public Health and EMA. The goal is to improve processes and coordinate technologies for emergency service organizations.

Medication Vouchers – Without having access to proper medication at home, patients would need to remain hospitalized. This program provides medication vouchers to inpatients who cannot afford needed medications. 20 patients benefited from this service in FY2012.

Pink In The Night – This is a Cancer awareness group providing education to persons who have experienced a cancer related illness. Various businesses in Calaveras County are provided pink lights which are kept on throughout October. The lights are provided through the hospital's Foundation.

Immunizations – Annual vaccination against influenza is the primary means for minimizing serious adverse outcomes from influenza virus infections. These infections result in approximately 20,000 deaths and 110,000 hospitalizations per year in the United States. The amount of trivalent inactivated influenza vaccine produced for distribution in the United States has increased substantially. During FY2012, over 1,500 influenza vaccinations were administered. Donations were accepted, but not required. Starting in 2007, the hospital began to offer pneumonia vaccinations at their annual Fall Health Fair and now offer them at all Health Fairs.

Summer Health Career Camp – This annual week-long camp provides high school students with exposure to various healthcare careers by working side-by-side with our employees. Besides working in the departments, the students receive a full day of orientation just like new employees; obtain a CPR training and certification; have a special lunch with their families in attendance on the last day of class; have a chance to share their experiences with hospital leadership and learn about other health care careers they may have missed.

Blood Pressure Checks – Free Blood Pressure Checks are always offered at the five Family Medical Centers and the Hospital. Blood Pressure Checks are also conducted at various community events throughout the county.

Nurse Call Center – The Nurse Call Center offers free and confidential access to registered nurses answering health-related questions using a toll-free 800 number 24 hours a day, 7 days a week. The community can also obtain 24-hour access to health information by using the directory to link into our audio health library and receive physician referrals. Total calls for the year were 4,097 with 18 physician referrals.

Breast Cancer Early Detection Program – Mark Twain St. Joseph’s Hospital participates in the California State funded Breast Cancer Early Detection Program (BDECP) as a provider of clinical services and advanced diagnostics. Staff physicians and the hospital reach out to women over 40 who, because of financial or insurance limitations, are not able to receive annual breast exams and mammograms. Actual number of participants is not tracked by MTSJH.

Take It To Heart - For the sixth year in a row, The Soroptimist International of Calaveras County joined MTSJH to offer free comprehensive cholesterol tests to all Calaveras County women during April and May. A total of 380 cholesterol tests were provided in this program.

Diabetes Education – Diabetes touches every family. It is the leading cause of blindness among adults ages 20 to 74, and is the sixth leading cause of death in America. Education is the key factor to managing Diabetes. Our commitment is to provide the skills and techniques needed to self-manage the disease. Monthly one-on-one classes were provided to the community, serving about 39 people.

Financial Assistance – Our Financial Assistance expense in FY2012 amounted to \$418,145. 43,251 persons benefited by our traditional Financial Assistance, Unpaid Costs of Medi-Cal and Medicare and other Public Programs.

Calaveras County Fair – MTSJH supported the first aid station with registered nurses 24 hours a day to support those persons who stayed with their animals during the entire run of the Fair. We also were a major sponsor of the Fair.

Radiation Therapy Transportation – Mark Twain St. Joseph’s offers free transportation to the Ben Shaeffer Cancer Institute and St. Joseph’s Medical Center for Calaveras County residents who require radiation therapy. If necessary, special accommodations for non-radiation therapy patients can be made to the Stockton/Lodi area. This program is funded by the Mark Twain Health Care District and is not included in community benefit reporting by the Corporation.

Sponsorships and Donations - As a member of the community, Mark Twain St. Joseph’s responds to requests for direct funding and goods and services to support community organizations and activities such as Grad Nite, Relay for Life, Cancer Support Group, etc.

Community Health Education Center - Calaveras County suffers from a scarcity of meeting rooms. MTSJH provides meeting room space in the Community Health Education Center at no cost to health and community related groups as our schedule permits.

In addition, Mark Twain St. Joseph’s Hospital partners with others in the community to offer the following:

- **Community Health Education Substance Abuse** – Collaborative between the Calaveras County Health Services Agency, Mark Twain St. Joseph’s Hospital and the Calaveras County Office of Education. The vision is to have a community free from substance abuse through better education.

- **Children and Families Master Plan** – Includes Mark Twain St. Joseph’s Hospital, Human Resources Council and the Calaveras County Health Services Agency as the lead agent. The goal is to train community advocates for the children of our communities.
- **Mark Twain St. Joseph’s Hospital’s Family Medical Centers** - Five Federally-qualified Rural Health Clinics strategically located in remote communities of Calaveras County. Visitors to these centers are provided primary healthcare services and provide us with information about the additional needs and services that are important to their community.
- **Women’s Health Resource Center** – As part of our Strategic Plan for FY2006, we first identified Women’s Health as a major need for services. In the years since, our strategic plan continues to identify a Women’s Resource Center as a goal. A community advisory group was identified and provided valuable input into the Center’s programs. The Center will be part of the new Family Medical Center in Angels Camp, providing education, support, and services for our communities jnischeduled to open in the next few years.

Long Term Improvement Project (LTIP)

In FY2008 we identified a new community benefit initiative that supported CHW’s Horizon 2010 vision to decrease inpatient admissions for ambulatory sensitive conditions. The literature and research have proven that if patients are treated appropriately in an outpatient and/or community-based setting, these conditions may not require an acute care ED visit or hospital admission.

As we move toward fulfillment of the initiatives identified in Horizon 2020, a long-term improvement program (LTIP) goal has been established to bring even greater focus to our direction.

Goal: By offering evidence-based chronic disease management (CDM) programs, CHW facilities/service areas will be effective in avoiding hospital admissions for two of the most prevalent ambulatory care sensitive conditions in their communities.

Objective: Participants in the facility/service area evidence-based CDM program(s) will avoid admissions to the hospital or emergency department for the six months following their participation in the program.

PROGRAM DIGEST

A. PROGRAMS

Flu/Pneumonia Immunizations at Health Fairs	
Hospital CB Priority Areas	<input type="checkbox"/> Cancer <input type="checkbox"/> Chronic Conditions <input type="checkbox"/> Cancer <input checked="" type="checkbox"/> Access to Primary Care Services <input type="checkbox"/> Preventive Care Services
Program Emphasis	Please select the emphasis of this program from the options below: <input type="checkbox"/> Disproportionate Unmet Health-Related Needs <input checked="" type="checkbox"/> Primary Prevention <input type="checkbox"/> Seamless Continuum of Care <input type="checkbox"/> Build Community Capacity <input type="checkbox"/> Collaborative Governance
Link to Community Needs Assessment Vulnerable Population	The service area for Mark Twain St. Joseph Hospital is known for its rolling hills and giant valleys, which often make access to health care services challenging for the residents.
Program Description	The hospital supports Health Fairs at four locations throughout the county, including Murphys, Valley Springs and San Andreas. Services provided include flu/pneumonia immunizations.
FY 2012	
Goal 2012	Improve access to primary care and preventive services for the residents of the Mark Twain St. Joseph Hospital service area to sustain or improve health.
2012 Objective Measure/Indicator of Success	Residents obtaining immunizations at the Health Fairs will have decreased incidents of illness; decreased admissions and/or length of hospital stay for flu/pneumonia.
Intervention Strategy for Achieving Goal	Flu/pneumonia vaccines will be provided to residents who utilize the Health Fairs .
Result FY 2012	In FY2012, more than 1,500 persons received flu/pneumonia vaccines and health promotion materials at various health fairs held in the community.
Hospital's Contribution/Program Expense	Mark Twain St. Joseph Hospital net expenses for participation in flu/pneumonia vaccination program amounted to \$1,477.
FY2013	
Plan for FY2013	Continue with flu/pneumonia vaccinations and health promotion at various health fairs held in the community.
2013 Objective Measure/Indicator of Success	Increase immunizations at the Health Fairs by 10% annually
Baseline	For FY 2012, 1,500 persons received flu/pneumonia vaccines at the MTSJH Health Fairs. This is the baseline.
Intervention Strategy	Increase marketing about the Health Fairs. Provide additional immunizations in underserved areas with mini health fairs.
Community Benefit Category	Primary Care/prevention

Diabetes Education/Management	
Hospital CB Priority Areas	<input type="checkbox"/> Cancer <input checked="" type="checkbox"/> Chronic Conditions <input type="checkbox"/> Cancer <input type="checkbox"/> Access to Primary Care Services <input type="checkbox"/> Preventive Care Services
Program Emphasis	Please select the emphasis of this program from the options below: <input type="checkbox"/> Disproportionate Unmet Health-Related Needs <input checked="" type="checkbox"/> Primary Prevention <input type="checkbox"/> Seamless Continuum of Care <input type="checkbox"/> Build Community Capacity <input type="checkbox"/> Collaborative Governance
Link to Community Needs Assessment Vulnerable Population	Although the rate is unreliable (+ or – 23%), Mark Twain St. Joseph's Hospital's last Community Health Needs Assessment indicates age-adjusted Diabetes is below the statewide rate, we believe the incidence is actually above the Health People 2010 objective of 15/100,000. A more recent thorough assessment report will probably indicate the prevalence of Diabetes in our county is 1 out of 10 adults and more prevalent among persons living below the poverty level and obese adults.
Program Description	Certified Diabetes Educator will meet with diabetic patients twice monthly after self-reporting of all hospital inpatient and outpatient visits in the past year. After consultations and education on self-management of their disease, the CDE will report on the increase or decrease in hospital readmissions. Tracking will continue for six months. The intent is to delay the progression of diabetes-related medical issues.
FY 2012	
Goal 2012	Improve access to primary care and preventive services for the residents of the Mark Twain St. Joseph Hospital service area to sustain or improve health. Reduce readmissions by 5%.
2012 Objective Measure/Indicator of Success	Decrease uncontrolled diabetes readmission rates of participants in the preventative health intervention.
Intervention Strategy for Achieving Goal	CDE met with persons identified in the baseline twice monthly.
Result FY 2012	The classes were temporarily placed on hold due to staffing issues while a new Registered Dietitian was recruited. One-on-One classes continued under contract with Sutter Health.
Hospital's Contribution/Program Expense	The 1-on-1 classes had an expense of \$36,000 for the year. There was no expense for the group diabetes classes as none occurred.
FY2013	
Plan for FY2013	Certified Diabetes Educator Consultant contracted to provided diabetes education to patients within the communities of Calaveras County through referrals from practitioners. Patient consultations/education occur at MTSJH's Family Medical Centers (five locations within Calaveras County) to increase outreach and access.
2013 Objective Measure/Indicator of Success	Fifty percent of the participants or greater who received Diabetes Self Management Education (DSME) will avoid diabetes-related admissions to the hospital or emergency department for the six months following their participation in the program.
Baseline	Building new baseline for FY2013 by tracking the number of total patients participating in our DSME program; data established August 2012 and on-going during the year to determine the level at which the metric goal is achieved.
Intervention Strategy for Achieving Goal	Certified Diabetes Educator providing Diabetes Self-Management Education to patients through individual consultation and group classes. Self-Management topics include but are not limited to: <ul style="list-style-type: none"> • Diabets overview • Monitoring • Physical Activity • Medications • Healthy Eating • Carbohydrate Counting • Meal Planning • Problem Solving • Reducing Risks Data collected will aid in evaluating the effectiveness of our DSME program to help determine areas for growth and improvement for the next fiscal year.
Community Benefit Category	A1 – a Community Health Education – Lectures/Workshops

Chronic Heart Disease and Pulmonary Disease Management	
Hospital CB Priority Areas	<input type="checkbox"/> Cancer <input checked="" type="checkbox"/> Chronic Conditions <input type="checkbox"/> Cancer <input type="checkbox"/> Access to Primary Care Services <input type="checkbox"/> Preventive Care Services
Program Emphasis	Please select the emphasis of this program from the options below: <input checked="" type="checkbox"/> Disproportionate Unmet Health-Related Needs <input checked="" type="checkbox"/> Primary Prevention <input checked="" type="checkbox"/> Seamless Continuum of Care <input type="checkbox"/> Build Community Capacity <input type="checkbox"/> Collaborative Governance
Link to Community Needs Assessment Vulnerable Population	Residents of the community have a high mortality and morbidity rate from chronic diseases such as COPD and CHF.
Program Description	Mark Twain St. Joseph Hospital initiated a heart disease management program to help improve health outcomes and decrease admissions and/or length of hospital stay for persons with CHF or COPD.
FY 2012	
Goal 2012	Mark Twain St. Joseph Hospital will decrease inpatient utilization rates for persons with CHF or COPD who participate in the hospital's intervention program by at least 5%.
2012 Objective Measure/Indicator of Success	Decrease or avoid admissions of persons with CHF or COPD, particularly among the vulnerable populations of uninsured and dually eligible (Medicare/MediCal) community residents.
Intervention Strategy for Achieving Goal	Cultivate relationships with primary care physicians to partner in the care of patients with CHF or COPD. Provide short-term outpatient case management services for target population. Offer disease management education to program participants.
Result FY 2012	No participants were identified.
Hospital's Contribution/Program Expense	n/a
FY2013	
Plan for FY2013	Work with local providers to identify class participants. Begin classes.
2013 Objective Measure/Indicator of Success	Team up with Calaveras County Public Health to decrease the readmission rates among vulnerable population.
Intervention Strategy for Achieving Goal	Working in partnership with CCPH to create a framework for resources to be offered to the community. Attending monthly interdisciplinary meetings as we build up the references and resources needed to educate the community.
Community Benefit Category	Community Health Education

This implementation strategy specifies community health needs that the Hospital has determined to meet in whole or in part and that are consistent with its mission. The Hospital reserves the right to amend this implementation strategy as circumstances warrant. For example, certain needs may become more pronounced and require enhancements to the described strategic initiatives. During the three years ending December 31, 2015, other organizations in the community may decide to address certain needs, indicating that the Hospital should then refocus its limited resources to best serve the community.

Community Benefit and Economic Value

Note: These expenses were calculated utilizing a cost accounting system.

	Persons	Total Expense	Offsetting Revenue	Net Benefit	% of Organization Expenses	Revenues
<u>Benefits for Vulnerable</u>						
Financial Assistance	689	418,145	0	418,145	0.9	0.8
Medicaid	17,290	8,149,563	6,484,190	1,665,373	3.5	3.3
Means-Tested Programs	4,173	2,421,536	1,091,129	1,330,407	2.8	2.6
Community Services						
Community Benefit Operations	0	8,541	0	8,541	0.0	0.0
Community Health Improvement Services	68	1,200	0	1,200	0.0	0.0
Financial and In-Kind Contributions	0	104,928	0	104,928	0.2	0.2
Subsidized Health Services	20	5,206	0	5,206	0.0	0.0
Totals for Community Services	88	119,875	0	119,875	0.3	0.2
Totals for Vulnerable	22,240	11,109,119	7,575,319	3,533,800	7.5	7.0
<u>Benefits for Broader Community</u>						
Community Services						
Community Building Activities	20	274	0	274	0.0	0.0
Community Health Improvement Services	2,331	24,608	0	24,608	0.1	0.0
Financial and In-Kind Contributions	2,143	15,411	0	15,411	0.0	0.0
Totals for Community Services	4,494	40,293	0	40,293	0.1	0.1
Totals for Broader Community	4,494	40,293	0	40,293	0.1	0.1
Totals - Community Benefit	26,734	11,149,412	7,575,319	3,574,093	7.6	7.1
Unpaid Cost of Medicare	25,272	21,196,822	15,271,860	5,924,962	12.8	11.8
Totals with Medicare	52,006	32,346,234	22,847,179	9,499,055	20.2	18.9

Telling the Story

For FY2012 Mark Twain St. Joseph's Hospital staff provided many speaking engagements to the community through Service Organizations, to the County Board of Supervisor's meetings during Public Comment, the Health Fairs, mini-Health Fairs, and community benefit projects such as the Teddy Bear Clinic, Health Career Fairs and other activities during this fiscal period. In addition, the hospital publishes a Community Report in local newspapers and mailings to key stake-holders in the community. The dcomplete report is posted on the hospital's website

DIGNITY HEALTH
SUMMARY OF PATIENT PAYMENT ASSISTANCE POLICY
(June 2012)

Policy Overview:

Dignity Health is committed to providing payment assistance to persons who have health care needs and are uninsured or under-insured, ineligible for a government program, and otherwise unable to pay for medically necessary care based on their individual financial situations. Consistent with its mission to deliver compassionate, high quality, affordable health care services, and to advocate for those who are poor and disenfranchised, Dignity Health strives to ensure that the financial capacity of people who need health care services does not prevent them from seeking or receiving care. Payment assistance is not considered to be a substitute for personal responsibility, and patients are expected to cooperate with Dignity Health's procedures for obtaining payment assistance, and to contribute to the cost of their care based on individual ability to pay. Individuals with financial capacity to purchase health insurance shall be encouraged to do so as a means of assuring access to health care services.

Eligibility for Patient Payment Assistance:

- Eligibility for payment assistance will be considered for those individuals who are uninsured, ineligible for any government health care benefit program, and unable to pay for their care, based upon a determination of financial need in accordance with the policy.
- The granting of payment assistance shall be based on an individualized determination of financial need, and shall not take into account age, gender, race, or immigration status, sexual orientation or religious affiliation.

Determination of Financial Need:

- Financial need will be determined through an individual assessment that may include:
 - a. an application process in which the patient or the patient's guarantor is required to cooperate and supply all documentation necessary to make the determination of financial need;
 - b. the use of external publicly available data sources that provide information on a patient's or a patient's guarantor's ability to pay;
 - c. a reasonable effort by the Dignity Health facility to explore and assist patients in applying for appropriate alternative sources of payment and coverage from public and private payment programs; and will take into account the patient's assets and other financial resources.
- It is preferred but not required that a request for payment assistance and a determination of financial need occur prior to rendering of services. The need for payment assistance may be re-evaluated at each subsequent rendering of services, or at any time additional information relevant to the eligibility of the patient for payment assistance becomes known.
- Dignity Health's values of human dignity and stewardship shall be reflected in the application process, financial need determination and granting of payment assistance. Requests for payment assistance shall be

processed promptly, and the Dignity Health facility shall notify the patient or applicant in writing within 30 days of receipt of a completed application.

Patient Payment Assistance Guidelines:

Services eligible under the policy will be made available to the patient on a sliding fee scale, in accordance with financial need as determined by the Federal Poverty Level (FPL) in effect at the time of the termination as follows:

- Patients whose income is at or below 200% of the FPL are eligible to receive free care;
- Patients whose income is above 200% but not more than 350% of the FPL are eligible to receive services at the average rates of payment the Dignity Health facility would receive from Medicare, Medicaid (Medi-Cal), Healthy Families, or any other government-sponsored health program in which the hospital participates, whichever is greater in amount for the same services;
- Patients whose income is above 350% but not more than 500% of the FPL are eligible to receive services at 135% of the average rates the Dignity Health facility would receive from Medicare, Medicaid (Medi-Cal), Healthy Families, or any other government-sponsored health program in which the hospital participates, whichever is greater for the same services;
- Patients whose income exceeds 500% of the FPL may be eligible to receive discounted rates on a case-by-case basis based on their specific circumstances, such as catastrophic illness or medical indigence, at the discretion of the Dignity Health facility.

Dignity Health's administrative policy for Eligibility and Application for Payment Assistance shall define what qualifies as income for these purposes.

Communication of the Payment Assistance Program to Patients and the Public:

- Information about patient payment assistance available from Dignity Health, including a contact number, shall be disseminated by the Dignity Health facility by various means, including the publication of notices in patient bills and by posting notices in the Emergency and Admitting Departments, and at other public places as the Dignity Health facility may elect. Such information shall be provided in the primary languages spoken by the populations served by the Dignity Health facility.
- Any member of the Dignity Health facility staff or medical staff may make referral of patients for payment assistance. The patient or a family member, a close friend or associate of the patient may also make a request for payment assistance.

Budgeting and Reporting:

- Specific dollar amounts and annual plans for patient payment assistance will be included within the Social Accountability Budget of the Dignity Health facility. Dignity Health facilities will report patient payment assistance calculated at cost in the annual Social Accountability Report and may voluntarily report such information as deemed appropriate.
- Patient payment assistance statistics shall be disclosed in annual financial statements but shall not include amounts that are properly considered to be bad debt or contractual discounts.

Relationship to Collection Policies:

- Dignity Health system management shall develop policies and procedures for internal and external collection practices by Dignity Health facilities that take into account the extent to which the patient qualifies for payment assistance, a patient's good faith effort to apply for a governmental program or for payment assistance from Dignity Health, and a patient's good faith effort to comply with his or her payment agreements with the Dignity Health facility.
- For patients who qualify for payment assistance and who are cooperating in good faith to resolve their hospital bills, Dignity Health facilities may offer interest-free extended payment plans to eligible patients, will not impose wage garnishments or liens on primary residences and will not send unpaid bills to outside collection agencies.

Regulatory Requirements:

In implementing this policy, dignity health management and dignity health facilities shall comply with all federal, state and local laws, rules and regulations that may apply to activities conducted pursuant to this policy.

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