



2014 Community Benefit Plan and Report



Our Promise to the Community

Making a positive measurable difference in the health of individuals in the communities we serve — fulfilling the Scripps mission.



Letter from the CEO

The Scripps story began with a strong commitment to the San Diego community — a commitment that continues today.

Our founders, Ellen Browning Scripps and Mother Mary Michael Cummings were both women ahead of their time. Their commitment to provide for the health care needs of a growing community resulted in the Scripps Health of today.

Miss Ellen, as she was known, preferred the term “investment” over “donation,” and her contributions were carefully considered as much for their future promise as for their immediate impact. Decades earlier, Mother Mary Michael’s patient logs illustrated her fundamental mission to make quality health care available to all who needed it.

Today, more than 16,000 employees, physicians and volunteers continue to build on our rich history and keep the spirit of community service alive. The pages that follow provide a comprehensive account of how we achieve that: our community benefit programs and services, and our plans for continued action in the future.

In 2014, Scripps’ community benefit contributions totaled \$355,306,156. This includes \$301,570,492 in uncompensated care, \$37,652,958 in professional education and health research, \$2,336,403 in community building activities, and \$13,746,303 in community health services.

In 2014, we will continue to experience many challenges imposed by the economy and health care reform, including changing care and payment models, and declining reimbursement. Scripps is ready to meet those challenges and will continue our legacy of making a vital and measurable difference in our community.

As a private, tax-exempt health care system, Scripps will continue to fulfill the mission adopted nearly 90 years ago.

A handwritten signature in black ink, which appears to read "Chris Van Gorder". The signature is fluid and cursive, written in a professional style.

Chris Van Gorder, FACHE
President and CEO

Mission, Vision and Values

Our Mission

Scripps strives to provide superior health services in a caring environment and to make a positive, measurable difference in the health of individuals in the communities we serve.

We devote our resources to delivering quality, safe, cost-effective, socially responsible health care services. We advance clinical research, community health education, education of physicians and health care professionals and sponsor graduate medical education. We collaborate with others to deliver the continuum of care that improves the health of our community.

Our Values

We provide the highest quality of service.

Scripps strives to provide superior health services in a caring environment and to make a positive, measurable difference in the health of individuals in the communities we serve.

We devote our resources to delivering quality, safe, cost-effective, socially responsible health care services. We advance clinical research, community health education, education of physicians and health care professionals and sponsor graduate medical education. We collaborate with others to deliver the continuum of care that improves the health of our community.

We demonstrate complete respect for the rights of every individual.

Scripps honors the dignity of all persons. We show this by our actions toward one another and those we serve. We embrace the diversity that allows us to draw on the talents of one another. We respect and honor the cultural, ethnic and religious beliefs and practices of our patients in a manner consistent with the highest standard of care. All this is done in a compassionate setting. Our goal is to create a healing environment in partnership with all caregivers committed to serving our patients.

We care for our patients every day in a responsible and efficient manner.

Scripps serves as a major community health care resource for San Diego County and, as such, we are accountable for the human, financial and ecological resources entrusted to our care as we promote healing and wholeness. We begin from a base of excellence and collaborate with co-workers, physicians, patients, and other providers to find new and creative ways to improve the delivery of health care services. All members of our community will have access to timely, affordable and appropriate care.

Our Vision

Scripps strives to be the health care leader in San Diego and nationally by becoming:

- The provider of choice for patients
- The employer of choice for the community
- The practice environment of choice for physicians, nurses and all health care professionals.

About Scripps

Founded in 1924 by philanthropist Ellen Browning Scripps, Scripps Health is a \$2.6 billion nonprofit integrated health system based in San Diego, California. Scripps treats a half-million patients annually through the dedication of 2,600 affiliated physicians and 13,800 employees among its five acute-care hospital campuses, home health care services, and an ambulatory care network of physician offices and 26 outpatient centers and clinics. In 2013, Scripps Hospice program was established and provides end of life care.

Recognized as a leader in the prevention, diagnosis and treatment of disease, Scripps is also at the forefront of clinical research, genomic medicine, wireless health and graduate medical education. With three highly respected graduate medical education programs, Scripps is a longstanding member of the Association of American Medical Colleges. More information can be found at www.scripps.org.

Today, the health system extends from Chula Vista to Oceanside, with 26 primary and specialty care outpatient centers. A leader in the prevention, diagnosis and treatment of disease, Scripps was named by Truven in 2013 as one of the Top 15 large health systems in the nation for providing high-quality, safe and efficient patient care. On the forefront of genomic medicine and wireless health technology, the organization is dedicated to improving community health while advancing medicine through clinical research and graduate medical education. Scripps has also earned a national reputation as a premier employer, named by Fortune magazine as one of "America's 100 Best Companies to Work For" every year since 2008.

Scripps Facilities/Divisions

Scripps Green Hospital

Scripps Memorial Hospital Encinitas

Scripps Memorial Hospital La Jolla

Scripps Mercy Hospital

- San Diego Campus
- Chula Vista Campus

Scripps Clinic (13 locations)

Scripps Coastal Medical Center (13 locations)

Scripps Hospice Care

Scripps Home Health Care

Scripps Whittier Diabetes Institute

Scripps Clinical Research Services

Service Offerings

Scripps is an integrated health care delivery system consisting of four acute-care hospitals on five campuses, 26 outpatient centers and clinics, home health care, hospice care, clinical research, and ancillary services for the San Diego region and beyond. Scripps primary services include:

Cardiovascular Care

- Scripps treats 55,000 heart patients annually – more than any other provider in San Diego. With volume comes high quality, as evidenced by the program ranking 20th nationally by U.S. News & World Report in cardiology and heart surgery in 2013-2014. Scripps is the only San Diego heart program on the list that has received the coveted honor eight years in a row (2006-2013).

- Scripps has broken ground on the \$456-million Scripps Prebys Cardiovascular Institute, which will bring together expertise from across the system. Scheduled to open in 2015, it will be the largest heart hospital on the West Coast with 167 inpatient beds and will serve as a center of excellence for research and education.
- For more than 30 years, Scripps has been the exclusive provider of heart services to the more than 500,000 Kaiser Permanente patients in San Diego. A new 10-year contract was signed in 2011.

Cancer Care

- Scripps is committed to fighting cancer, and mobilized the collective resources of its five hospital campuses, outpatient centers and research division to form the Scripps Cancer Center.
- In 2008, it became the first multihospital system in California to earn network accreditation from the American College of Surgeons Commission on Cancer. Scripps opened a new state-of-the-art regional radiation therapy center in 2012 and, in February 2014, we opened the region's first proton therapy center, which is only the second in California.
- Women's gynecology is ranked 37th in U.S. News and World Report.

Diabetes

- The Scripps Whittier Diabetes Institute is dedicated to caring for and educating people with diabetes through diabetes management and support programs. Its mission is to improve quality of life for people with diabetes through innovative education programs, clinical care, research and collaborations that pursue prevention and a cure.

Behavioral Health and Drug and Alcohol Care

- The Scripps behavioral health and drug and alcohol care line offers a variety of services to adults with emotional, behavioral and or addictive disorders. Our goal is to assist patients in regaining control of their lives and reconnecting with their families and community. Scripps behavioral health services provides inpatient and outpatient mental health services. Psychiatric liaison services are provided at all five acute care Scripps hospitals and associated urgent care facilities. A supportive employment program is also offered to those seeking volunteer or employment opportunities.
- The Scripps Drug and Alcohol Treatment Program is nationally recognized for excellence in treatment of alcohol and drug abuse. The Division of Mental Health is a behavioral health, outpatient treatment facility for geriatric patients of the Scripps Clinic Medical Group.⁴

Women's and Newborn Services

- Scripps delivers 10,000 babies and provides care to thousands of women needing obstetrical, routine and advanced gynecological care on an annual basis.

- Scripps offers a full spectrum of obstetrics and gynecology services throughout San Diego. The combined programs of Scripps Green Hospital and Scripps Memorial Hospital La Jolla – listed as “Scripps La Jolla Hospitals and Clinics” – are ranked among the nation’s top hospitals in gynecology.
- The Women and Newborn Services care line creates a forum to foster development of an integrated women’s clinical care line operated at multiple Scripps Health sites across the inpatient and ambulatory continuum of care. Scripps Health prioritizes system efforts related to OB, gynecology and NICU development.

Neurosciences

- Scripps has been recognized for high performance in Neurology & Neurosurgery by U.S. News & World Report (2013-2014)
- Scripps Memorial Hospital La Jolla was one of the first in the nation certified as a Comprehensive Stroke Center by the Joint Commission. Additionally, all four Scripps emergency rooms are certified Primary Stroke Centers.
- Our physicians lead research activities designed to find better treatments for conditions like Parkinson’s, MS, and Alzheimer’s.

Orthopedic/Spine

- Scripps Health orthopedic and spine care is committed to helping the greater San Diego community stay healthy and active. In addition to providing advanced diagnostic services, surgical and non-surgical treatments and rehabilitation care, Scripps physicians are also well-known leaders in the field of orthopedic surgery—locally and nationally.
- Dedicated to improving patient care and quality of life, Shiley Center for Orthopaedic Research and Education (SCORE) at Scripps Clinic investigates the safety and efficacy of new technologies and therapies designed for the treatment of musculoskeletal diseases and disorders.
- Scripps orthopedic physicians serve as team physicians for the San Diego Padres in collaboration with internal medicine specialists at Scripps.
- Scripps provides musculoskeletal trauma care at Scripps Mercy, a Level I trauma center, and Scripps La Jolla, a Level II trauma center.
- The combined programs of Scripps Green Hospital and Scripps Memorial Hospital La Jolla – listed as “Scripps La Jolla Hospitals and Clinics” – are ranked among the nation’s top hospitals in orthopedics.

Primary Care

- Scripps Health offers a county-wide network of primary care physicians with expertise in family medicine, internal medicine and pediatrics to care for individuals at every stage of their lives.

- Full range of services includes prevention, wellness and early detection services to diagnosis and treatment of injuries, illnesses and management of chronic medical conditions.
- Scripps is affiliated with more than 2,600 primary care physicians and medical specialists in locations throughout San Diego County.

Hospice Care

- Scripps provides hospice services to the entire San Diego region.
- Hospice provides interventions that focus on comfort and quality of life and help patients to live comfortably as they approach the end of life. The care involves the patient and family, and provides supportive services to meet physical, emotional and spiritual needs.
- The interdisciplinary team includes medical doctors board-certified in hospice and palliative care, nurses, social workers and a pastoral or spiritual counselor. Depending on patient needs, they may also be assigned a home health aide, physical therapist, occupational therapist, nutritionist or volunteers.

Emergency and Trauma Medicine

- Scripps operates two of the region's five adult trauma centers, including a Level 1 trauma center at Scripps Mercy Hospital, San Diego.
- Scripps recently redesigned how emergency care is delivered and became the first hospital in California to reduce the average wait time to see a physician to less than 30 minutes.
- All four Scripps emergency rooms are accredited stroke centers by The Joint Commission, and are certified by the American Heart Association as STEMI (ST Elevation Myocardial Infarction – a severe heart attack caused by clotting of one or more arteries) receiving centers.

Governance

As a not-for-profit health care system, Scripps takes pride in its service to the community. The Scripps system is governed by a 14-member, volunteer Board of Trustees. This single point of authority for organizational policy ensures a unified approach to serving patients across the region. The organizational structure of Scripps Health is included in Appendix C.

Organizational Foundation

Scripps provides a comprehensive range of inpatient and ambulatory services through our system of hospitals and clinics. In addition, Scripps participates in dozens of partnerships with government and not-for-profit agencies across our region to improve our community's health. And our partnerships don't stop at our local borders. Our participation at the state, national and international levels includes work with government and private disaster preparedness and relief agencies, the State Commission on Emergency Medical Services, national health advocacy organizations; as well as international partnerships for physician education and training, and direct patient care. In all that we do, we are committed to quality patient outcomes, service excellence, operating efficiency, caring for those who need us today and planning for those who may need us in the future.

SCRIPPS HEALTH

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Effective 01/01/2014



2014 Community Benefit Our Promise to the Community

In fiscal year 2013, Scripps Health provided

\$355 million

in community benefit services



Improving the Health of Our Community

Scripps is dedicated to creating a healthier community — today and tomorrow. Every year, our expert physicians, staff and trained volunteers support this vision by caring for thousands of low-income and uninsured individuals and families. From community benefit programs and services, such as free clinics, health fairs and assistance with obtaining health insurance, to training the next generation of physicians, we are focused on providing compassionate care to those in need.

Investing in Our Community

Scripps touches countless lives in San Diego. We are proud of our multifaceted community efforts, which expand access to vitally needed health care services, and improve the health and quality of life for people throughout the region. This report shares many of the ways we serve our community.

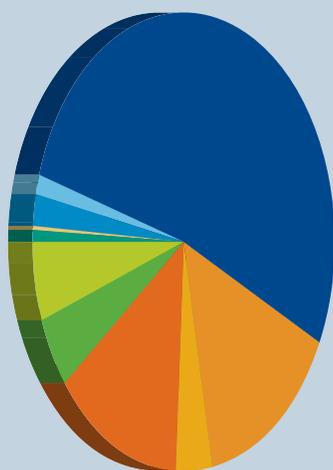
In fiscal year 2013, Scripps devoted more than \$355 million to community benefit programs, including \$48.6 million in charitable care. We offer many free and low-cost services, including medical clinics, screenings for key health indicators, youth programs, special education for pregnant mothers and patient advocacy services.

Keeping patients at the center of everything we do, Scripps collaborates with other health systems, community groups, government agencies, businesses and grassroots organizations to serve the greatest needs and prioritize our investments in the health of our community. For more information, visit scripps.org/communitybenefit.

Scripps Facts

- 2,600 affiliated physicians and 13,800 employees treat and support more than a half-million patients each year.
- We care for people throughout San Diego with four acute care hospitals on five campuses, 26 outpatient centers, home health, hospice and a mobile medical unit.
- Three highly respected graduate medical education programs and two pharmacy resident programs train the next generation of caregivers.
- Operating revenue: \$2.609 billion
- Operating expenses: \$2.418 billion
- Total inpatient discharges: 69,073
- Total outpatient visits: 2,181,706
- Emergency visits: 183,232

Total Community Benefits in FY13: \$355,306,156*



Medicare Shortfalls	\$187,002,793	52.6%	Community Building Activities	\$2,336,403	0.7%
Medi-Cal and other means tested government programs	\$52,312,428	14.7%	Cash and in-kind Contributions	\$926,342	0.3%
Bad Debt	\$13,558,100	3.8%	Subsidized Health Services	\$7,879,358	2.2%
Charity Care	\$48,697,171	13.7%	Community Health Improvement Services & Community Benefit Operations	\$4,940,603	1.4%
Health Research	\$17,205,724	4.8%			
Professional Education	\$20,447,234	5.8%			

Colors coordinate clockwise from medicare shortfalls.

14.7% of our total operating expenses in 2013 were devoted to community benefit services at cost.*

*Hospital Provider Fee was reported as offsetting revenue from Medi-Cal.

Financial Assistance Policy: Scripps' financial assistance policy reflects our commitment to assisting low-income and uninsured patients with discounted hospital charges, charity care, and flexible billing and debt collection practices. These programs are consistent with California Hospital AB774 Fair Pricing Policy legislation and are available to everyone in need, regardless of their race, ethnicity, gender, religion or national origin.



Scripps provides free heart screenings for thousands of teens through its community partnership with EP Save A Life Foundation. At these events, teens also learn CPR so they can help their peers in an emergency.

Preventing Sudden Cardiac Death in Teens

Each year, 7,000 teens lose their lives due to sudden cardiac arrest (SCA). SCA is not a heart attack — it is caused by an abnormality in the heart’s electrical system that can easily be detected with a simple EKG. Unfortunately, heart screenings are not a part of a regular, well-child exam or pre-participation sports physical. The first symptom of SCA could be death. San Diego alone annually loses three to five teens from SCA.

As a sponsor of the Eric Paredes Save A Life Foundation for the past two years, Scripps has helped provide more than 10,000, free cardiac screenings to local teens, including the homeless, uninsured and underinsured. We’ve discovered more than 100 who were at risk for SCA. Our highly trained team of volunteers, led by Scripps Clinic cardiologist John Rogers, MD, includes doctors, nurses, and EKG and echocardiogram techs from across our system. The screenings are non-invasive and include a health history, EKG, and if indicated — an echocardiogram. Parents are notified of the results for follow-up with their family physician.

“We’re having a tremendous response to this program and we’re screening more and more teens each year,” says Dr. Rogers. “We are extremely proud to partner with the Save A Life Foundation in this vital effort to keep our teens healthy.”



In 2013, we supported screening events at five area high schools. We screened 3,924 teens, identifying 67 with abnormalities and 33 who were at risk.

The EP Save A Life Foundation was founded by Rhina and Hector Paredes, after their healthy, 15-year-old son Eric passed away from SCA in 2009. Rhina is a registered nurse at Scripps Green Hospital.

The ultimate goals of our partnership with the foundation are to help standardize cardiac screenings among youth; equip schools with readily accessible, automatic external defibrillators; and provide training for students and staff. In addition to participating in these important outreach events, Scripps supported the foundation through a donation in its inaugural year that was used to purchase EKG machines.

Expanding Diabetes Care and Prevention



Patient education is an important part of diabetes outreach programs at Scripps.

Project Dulce has been fighting the diabetes epidemic for more than 16 years by providing diabetes care, self-management education and continuous support to low-income and uninsured populations throughout San Diego County. Recognized for its impact, the comprehensive program serves as an international model of patient care and advocacy, helping individuals with the disease learn to improve their health — and their lives. In 2013, Project Dulce provided services to more than 20,000 patients through clinic-based services.

One of the primary components of the program is recruiting peer educators from the community to work directly with patients. These educators reflect the diverse population affected by diabetes and help teach others about changing eating habits, adopting exercise routines and other ways to help manage this chronic disease.

Dulce Mothers Pilot Program Changes Lives

Last year, Project Dulce expanded its patient-focused efforts by creating Dulce Mothers, a pilot study specifically aimed at reducing type 2 diabetes and cardiovascular risk in Latino women through a culturally based curriculum.

“Although we’ve come a long way with diabetes care in the past three decades, there are still few prevention programs designed for low-income, Spanish-speaking populations,” says Athena Philis-Tsimikas, MD, corporate vice president of Scripps Whittier Diabetes Institute. “We want to help change that.”

Dulce Mothers included 84 participants, 18-45 years old, with a history of gestational diabetes mellitus (GDM). The women underwent an eight-week, peer educator-led group intervention tailored to the Latino culture and new mothers. Lifestyle changes and cardiovascular risks were assessed in participants at the beginning of the study, and at three and six months.

The results were extremely positive, with the women showing significant improvements in lipids, blood pressure levels, physical activity and dietary fat intake. The program also helped reduce preconceived ideas about the disease.

In FY14, Dulce Mothers will pilot another program with the goal of decreasing the incidence of type 2 diabetes by managing a major diabetes risk factor — obesity — in underserved, ethnically diverse populations. The program will test the effectiveness of a weight management curriculum designed for Latino women with gestational diabetes.

Supporting Healthy Families

Raising healthy families and caring for the next generation of San Diegans — before they're even born — help create a healthier community for years to come.

The Scripps Family Medicine Program at Scripps Mercy Hospital, Chula Vista, is providing access, education and clinical services to nearly 200 pregnant women in south San Diego County. The goal of the program, "Improving Perinatal Care for Underserved Latina Women — Healthy Women, Healthy Babies," is to provide access to perinatal care for underserved Latino women in order to improve birth outcomes.

With funding from the March of Dimes, the program applies the principles of the Centering Healthcare Institute and focuses on changing the way patients experience their care through assessment, education and group support. Centering Pregnancy is the institute's model devoted specifically to improving maternal and child health, and has been shown to result in increased prenatal visits, greater levels of breast feeding and stronger relationships between mothers and their health care providers before, during and after pregnancy.



Scripps is committed to caring for underserved families throughout the San Diego region.

The results are promising. Women who gave birth reported an enhanced prenatal experience, gained less weight throughout their pregnancy and showed improved health care knowledge. As the program continues, patient navigators will follow-up with participants to gauge other important factors and help them maintain healthy lifestyles.

Advocating for Those in Need

Thousands of uninsured patients in San Diego are eligible, though not enrolled in, government-assisted medical benefits. Without insurance to provide for preventive and routine care, these individuals often rely on costly emergency services for health care.

Since 1999, the Consumer Center for Health Education and Advocacy, a project of the Legal Aid Society of San Diego, Inc., has helped tens of thousands of San Diegans obtain health care. The consumer center helps low-income, uninsured patients from Scripps Mercy Hospital, other Scripps hospitals and Mercy Clinic, and behavioral health patients (including the homeless) who need assistance obtaining health care benefits, Supplemental Security Income benefits and related services. In addition to providing this vital community service, the program reduces uncompensated care expenses for Scripps. In 2013, the center helped more than 3,600 individuals and families.



Scripps graduate medical education programs provide a comprehensive, hands-on curriculum that focuses on patient-centered care.

Scripps Mercy Pharmacy Residency Program Trains Tomorrow's Clinicians

For more than 70 years, physicians in Scripps graduate medical education programs have helped care for underserved populations throughout the region. Our robust graduate medical education programs are well-recognized for excellence and offer residencies in a variety of practices, including internal medicine, family medicine, podiatry and pharmacy.

Scripps Mercy Hospital Pharmacy Post-Graduate Year 1 Residency Program prepares pharmacist clinicians for acute-care patient practice, adjunct faculty positions or to pursue additional graduate training in a focused area of practice. The dynamic program is one of the most competitive and sought-after residencies in the United States, and focuses on pharmacotherapy, project management skills, research and hands-on teaching in a decentralized pharmacy setting. For 13 years, the residency has helped pharmacist graduates understand how to practice compassionate, patient-centered care.

The residency currently trains two pharmacy residents with doctor of pharmacy degrees and adds another resident in 2014. Attending pharmacists also train 15-20, fourth-year pharmacy students.

The program has academic affiliations with Loma Linda University, University of Southern California, University of California San Diego and University of California San Francisco. During its history, a large percentage of the pharmacy resident graduates have been hired by Scripps.

"Our residents are trained to understand how they impact patients' lives from a global perspective, not just from a pharmacist's view," says Harminder Sikand, PharmD, clinical director and residency director of the program. "They learn from patients so they can give back to patients."

Scripps Memorial Hospital La Jolla, with Scripps Green Hospital in La Jolla, offers three, 12-month Post-Graduate Year 1 resident positions focusing on pharmacotherapy, research and teaching in a decentralized pharmacy setting. These programs are accredited by the American Society of Health-System Pharmacists.

Our graduate medical education programs at Scripps Green Hospital and Scripps Mercy Hospital, Chula Vista, are also making a positive impact on our community. In 2013, we had a total of 125 residents and 33 fellows enrolled throughout the Scripps system.

Mercy Clinic: Patient-Centered Care for Low-Income, Uninsured Patients



Mercy Clinic, located in the heart of San Diego, provides access and care to thousands of patients every year regardless of their ability to pay.

Mercy Clinic has a long history of serving our community's low-income and uninsured patients, providing them with access to advanced health care and some of the nation's finest medical experts. Supported by the extensive Scripps Health network, clinic staff includes physicians from Scripps Mercy Hospital and a full-time staff of nurses and other personnel who deliver quality, compassionate care to thousands of patients each year.

Benefiting the working and disabled poor who need chronic disease management and specialty medical care, Mercy Clinic saw 9,570 patients in 2013. The clinic also upgraded and added new beds to serve the senior and disabled populations, and began transitioning to electronic health records to ensure a strong continuum of care throughout the Scripps system.

Annually, 90 percent of patient visits are paid through Medi-Cal, Medicare or another insurance plan. Scripps provides full financial assistance for patients earning less than 200 percent of the federal poverty level guidelines. Financial assistance is also available to others who qualify according to federal guidelines.

In addition to providing medical services, Mercy Clinic serves as a training ground for more than 60 residents each year from the Scripps Mercy Hospital Graduate Medical Education Program. The clinic also annually trains approximately 50 rotating medical students.

Raising Awareness About Depression

Last October, Scripps again participated in National Depression Screening Day, an annual event aimed at helping people identify the signs of depression and providing resources to assist those at risk. In the past two years, Scripps has expanded the availability of free depression screenings by making them available at all five of our hospital campuses. The screenings are open to adults of all ages on a walk-in basis, and include referrals to mental health professionals, as well as literature that can be shared with friends and family members.

In 2013, Scripps staff cared for more than 125 people, offering screening services and information in both English and Spanish.

Miles of Smiles for Scripps Mentoring Program



Ruben Vega Perez

Scripps Mercy Hospital, Chula Vista, may be located in California, but its unique youth program reaches across the nation. The Scripps Mercy Hospital School to Career Mentoring Program is designed to inspire, educate and encourage youth to explore career pathways in health care. The program pairs young people with volunteer mentors in the health and social services professions in a hospital setting.

"It was a once-in-a-lifetime experience," says 18-year-old Ruben Vega Perez, who completed the program last year. "It taught me about the importance of putting patients first, as well as possible career options."

A graduate of Southwest High School, which serves primarily low-income and minority students, Ruben is now a student at Yale University with a full scholarship. He is pursuing a degree in molecular, cellular and developmental biology, with the goal of becoming a neuroscientist and returning to our border region where he was raised. Ruben is the first in his family to pursue a college education.

Making Our Community a Healthier Place

At Scripps, we put the patient at the center of all we do. We have joined with our partners throughout the San Diego community with a goal to ensure that everyone has access to lifesaving care. Whether it's a physician visit, a class or a prevention program, Scripps is committed to enhancing access to care and improving our community's health.



For more information about the programs and services offered by Scripps Health, visit scripps.org/communitybenefit or contact the Scripps Health Office of Community Benefit Services at 858-678-7095.

2014 COMMUNITY BENEFIT REPORT

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Fulfilling the Scripps Mission

This report was developed in response to Senate Bill 697. Passed in 1994, the bill requires California's community, not-for-profit hospitals to annually describe and document the full range of community benefits they provide. Scripps has taken this legislative requirement a step further.

This report incorporates not only documentation of community benefits, but also a more detailed explanation of the specific community benefit activities provided by our five acute-care hospital campuses, home health care, wellness centers and clinics.

The report details programs and services that provide community benefits above and beyond standard practices of care. It is divided into three primary category areas:

- Uncompensated Health Care
- Community Health Services
- Professional Education and Health Research

The report covers the period of October 2012 through September 2013 (fiscal year 2013). During this fiscal year, Scripps devoted \$355,306,156 to community benefit programs and services in the three areas listed above (see figures 1:1 and 1:2). Our programs emphasize community-based prevention efforts and use innovative approaches to reach residents at greatest risk for health problems.

Definitions of the terms used in this report can be found in Appendix A.

The documentation and activities described in this report are commitments we make to improve the health of both our patients and the diverse San Diego communities. As a longstanding member of these communities, and as a not-for-profit community resource, our goal and responsibility are to assist all who come to us for care, and to reach out especially to those who find themselves vulnerable and without support. This responsibility is an intrinsic part of our mission. Through our continued actions and community partnerships, we strive to raise the quality of life in the community as a whole.

Community benefit is defined as programs or activities that provide treatment or promote health and healing in response to an identified community need.

Community benefit programs must meet at least one of the following criteria:

- Respond to a public health need.
- Involve education or research that improves overall community health.
- Respond to needs of special populations.
- Supply services or programs that would likely be discontinued if the decision was made on a purely financial basis because they operate at a financial loss.

Schedule H (Form 990)

Hospitals with tax-exempt status are now required to provide information specific to their organization on Schedule H of the recently redesigned Form 990 (the annual information return filed by tax-exempt organizations). The entire Schedule H was mandatory beginning with tax year 2009¹.

Schedule H contains six parts. Part I requests details about a hospital's charity care program and quantifies charity care expenditures. Part II quantifies the hospital's community building activities. Part III quantifies costs due to Medicare shortfalls and bad debts owed to the organization. Part IV requires disclosure of any joint ventures in which a hospital participates. Part V requests information about the entity's health care facilities. Part VI provides an area to provide a narrative of charitable activities that may be difficult to quantify. (See Appendix A for a definition of terms.)

Scripps has aligned the 2014 Community Benefit Plan and Report to the Schedule H categories. According to the IRS, community building activities, bad debt and Medicare shortfalls are reported, but not included in the community benefit totals. (See page 21 for a breakdown of the Scripps Systemwide Uncompensated Care Summary for fiscal year 2013)

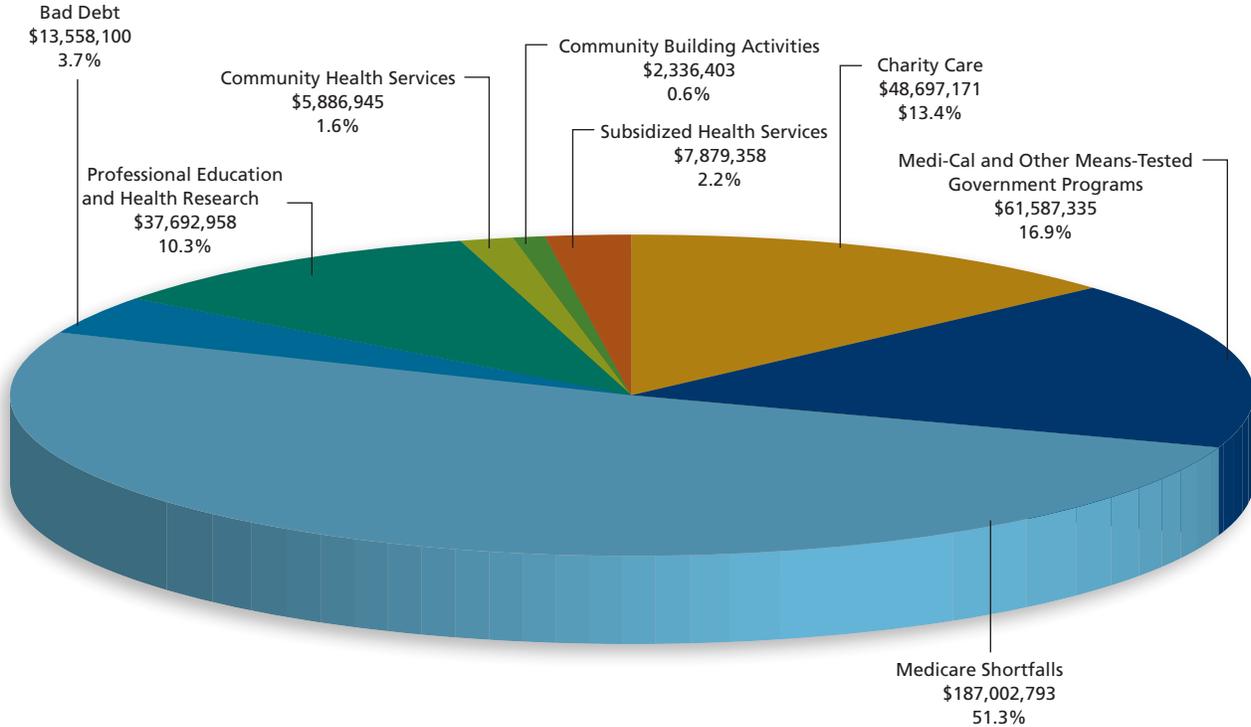
Hospital Provider Fee Program

The California Hospital Fee Program (the Program) was signed into law effective January 1, 2010. During the year ended September 30, 2013, Scripps Health recognized supplemental provider fee amounts of \$100,947,000. This amount was recognized as net patient revenue in the consolidated statement of operations. Scripps Health recognized quality assurance fees of \$91,673,000. This amount was recorded as provider fee expenses in the consolidated statement of operations. In addition, Scripps Health was assessed and accrued charitable contributions to CHFT of \$540,418 in the statement of operations. The net operating income recognized by Scripps Health from provider fee was \$8,734,000 in fiscal year 2013.

¹ Congressional Research Services, Nov 19, 2009, www.crsdocuments.org

FIGURE 1:1

Fiscal Year 2013 Scripps Total Community Benefit Services Distribution, \$364,581,064 (before provider fee)



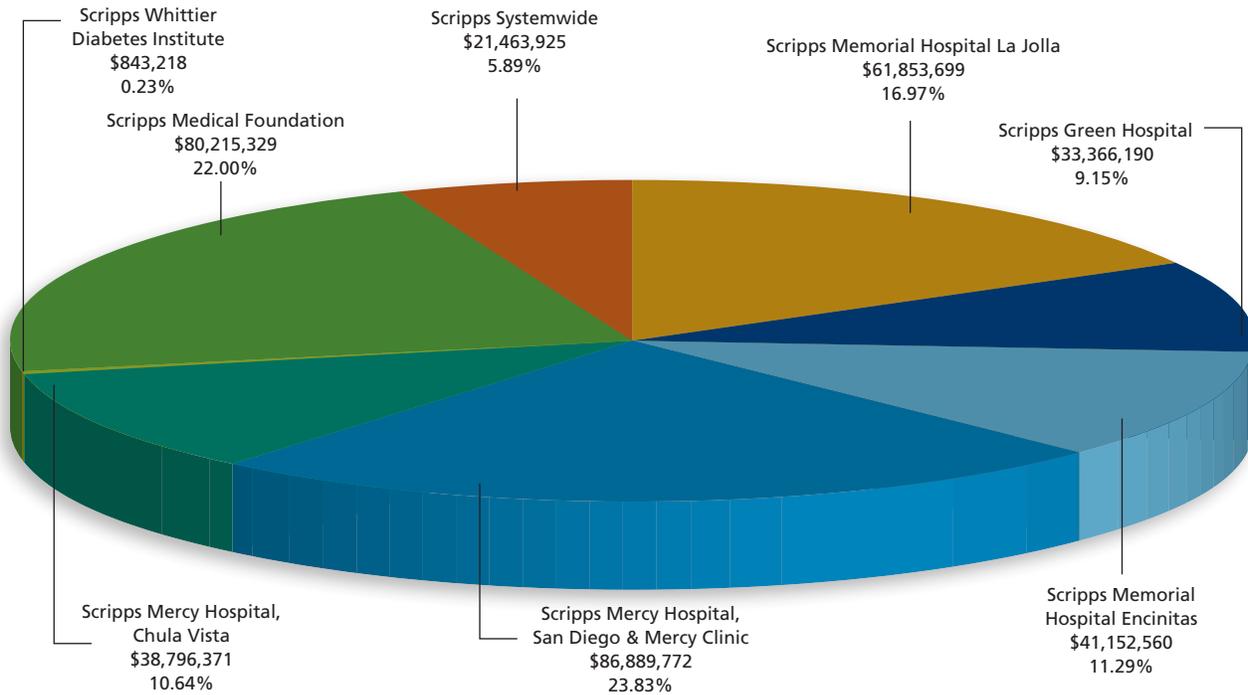
Provider Fee Impact	Bad Debt	Charity Care	Medi-Cal & Other Means-Tested	Medicare & Medicare HMO	Community Health Svcs	Prof Ed and Health Research	Subsidized Health Svc	Total
Community Benefit Services Before Provider Fee	\$13,558,100	\$48,697,171	\$61,587,335	\$187,002,793	\$5,886,945	\$37,692,958	\$7,879,358	\$364,581,064
Provider Fee			(\$9,274,907)					(\$9,274,907)
Net Community Benefit Services After Provider Fee	\$13,558,100	\$48,697,171	\$52,312,428	\$187,002,793	\$5,886,945	\$37,652,958	\$7,879,358	\$355,306,156

Community Benefit Services

Community benefit services include those programs and services offered to the community that go above and beyond what is provided as a normal part of patient care. Scripps divides community benefit services into three categories: uncompensated health care, community health services, and professional education and health research. Uncompensated care includes charity care, bad debt, Medi-Cal and other means-tested government programs and Medicare shortfalls.

FIGURE 1:2

Fiscal Year 2013 Scripps Total Community Benefit Services by Operating Unit, \$364,581,064 (before provider fee)



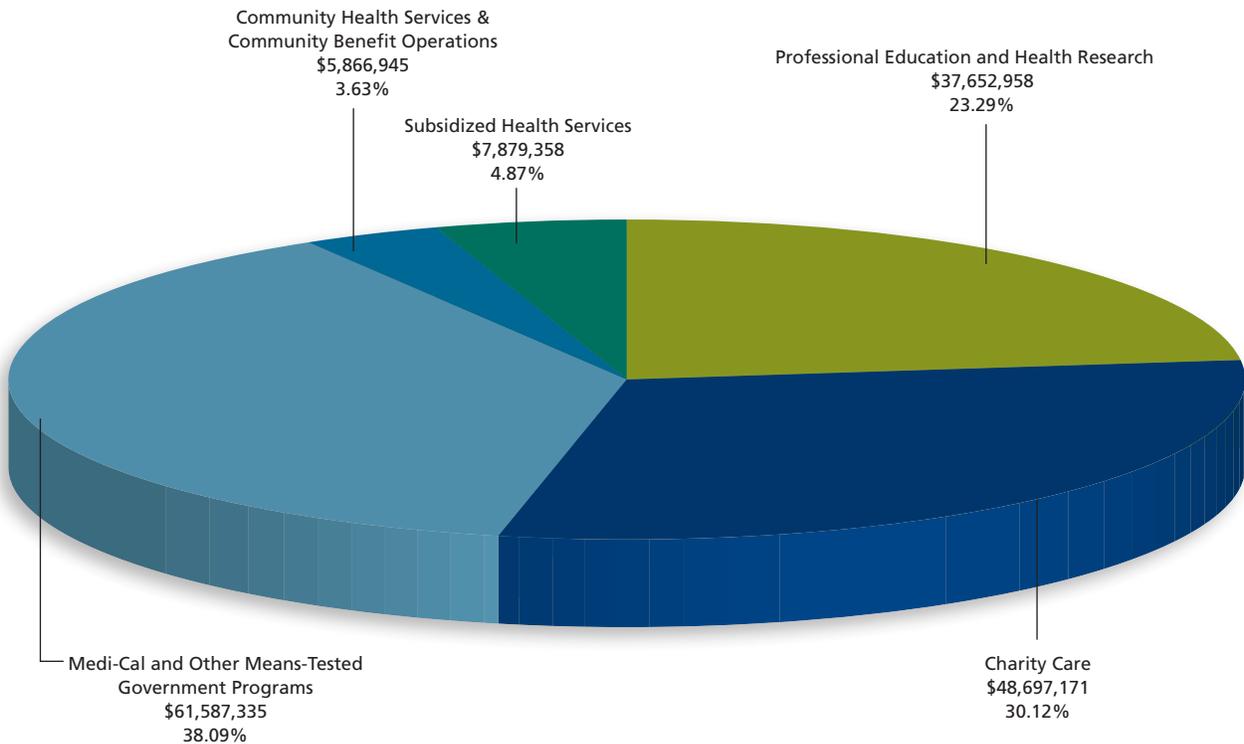
Provider Fee Impact	La Jolla	Green	Encinitas	Mercy San Diego	Mercy Chula Vista	Whittier	SMF	System-Wide	Total
Community Benefit Services Before Provider Fee	61,853,699	33,366,190	41,152,560	86,889,772	38,796,371	843,218	80,215,329	21,463,925	364,581,064
Provider Fee	10,763,945	8,038,553	6,583,199	(23,222,604)	(11,437,999)				(9,274,907)
Net Community Benefit Services After Provider Fee	72,617,644	41,404,743	47,735,759	63,667,167	27,358,372	843,218	80,215,329	21,463,925	355,306,156

Community Benefit Services

Community benefit services include those programs and services offered to the community that go above and beyond what is provided as a normal part of patient care. Scripps divides community benefit services into three categories: uncompensated health care, community health services, and professional education and health research. Uncompensated care includes charity care, bad debt, Medi-Cal and other means-tested government programs and Medicare shortfalls.

FIGURE 1:3

Fiscal Year 2013 Scripps Schedule H Community Benefit Services by Category, \$161,683,768 (before provider fee)



Provider Fee Impact	Charity Care	Medi-Cal & Other Means-Tested	Community Health Svcs	Prof Ed and Health Research	Subsidized Health Svc	Total
Community Benefit Services Before Provider Fee	48,697,171	61,587,335	5,866,945	37,652,958	7,879,358	161,683,768
Provider Fee		(9,274,907)				(9,274,907)
Net Community Benefit Services After Provider Fee	48,697,171	52,312,428	5,866,945	37,652,958	7,879,358	152,408,860

Community Benefit Services (Schedule H)

Community building activities, bad debt and Medicare shortfall do not count as community benefits under the new Schedule H 990, but are still reportable outside the community benefit table.

Community Health Needs Assessment (CHNA)

Community Health Needs Assessment (CHNA) originated from California statewide legislation in the early 1990s. SB 697 took effect in 1995, which required private non-profit hospitals to submit detailed information to the Office of Statewide Health Planning and Development (OSHPD) on their community benefit contributions. Annual hospital community benefit reports are summarized by OSHPD in a Report to the Legislature, which provides valuable information for government officials to assess the care and services provided to their constituents.

As part of the community benefit reports filed, non-profit hospitals are required to conduct a CHNA every three years. This comprehensive account of health needs in the community is designed for hospitals to plan their community benefit programs together with other local health care institutions, community-based organizations and consumer groups.

In San Diego County, the long history of collaboration among hospitals, health care systems and community partners has resulted in successful partnership on past CHNAs. While public institutions and district hospitals do not have to report under SB 697, these institutions have become an integral part of the CHNA in San Diego County. Information is gathered through the CHNA for the purposes of reporting community benefit, developing strategic plans, creating annual reports, providing input on legislative decisions, and informing the general community of health issues and trends.

Scripps strives to improve community health through collaboration. Working with other health systems, community groups, government agencies, businesses and grassroots movements, Scripps is better able to build upon existing assets to achieve broad community health goals.

View the full summary of the Scripps Health 2013 Community Health Needs Assessment Report at (<http://www.hasdic.org/chna.htm>). This document allows interested parties and members of the community a mechanism to access the full spectrum of information relative to the development of the Scripps Health 2013 Community Health Needs Assessment Report.

Background/Required Components of the Assessment

Scripps Health has a long history of responding to the health needs of the communities it serves, extending beyond traditional hospital care to address the health care needs of the region's most vulnerable populations. Since 1994, these programs have been created based on an assessment of needs identified through hospital data, community input, and major trends. Previous collaborations among non-profit hospitals, health care systems and other community partners have resulted in numerous well-regarded Community Health Needs Assessments (CHNA) reports. Click on [Charting the Course VI](#) for previous needs assessments.

The Patient Protection and Affordable Care Act ("Affordable Care Act" or "ACA") of 2010 is bringing about significant regulatory changes in the health care industry. Scripps Health was given the task of conducting an expanded Community Health Needs Assessment (CHNA) that met the new federal requirements.

Additional information on the ACA requirements for nonprofit hospitals can be found at www.irs.gov, keyword: "Charitable Organizations."

As a nonprofit hospital, Scripps Health fulfilled this requirement through the development and distribution of this Assessment. While this is a federally mandated exercise, Scripps Health hopes to leverage the information collected for this report to benefit the community at-large in other future planning initiatives. The IRS also required hospital organizations that conduct a CHNA to make the report widely available by posting it on a publicly accessible website. View the full summary of the [Scripps Health 2013 Community Health Needs Assessment Report](#).

Required Components of the Assessment

Per IRS requirements, there are five components the CHNA must include:

- A description of the community served by the health system and how it was determined.
- A description of the processes and methods used to conduct the assessment.
- A description of how the hospital organization took into account input from persons who represent the broad interests of the community served by the hospital facility.
- A prioritized description of all of the community health needs identified through the CHNA, as well as a description of the process and criteria used in prioritizing such health needs.
- A description of the existing health care facilities and other resources within the community available to meet the community health needs identified through the CHNA.

Community Health Needs Assessment

Executive Summary

Grounded in a longstanding commitment to address community health needs in San Diego, seven hospitals and health care systems came together under the auspices of the Hospital Association of San Diego and Imperial Counties (HASD&IC) to conduct a triennial Community Health Needs Assessment (CHNA) that identifies and prioritizes the most critical health-related needs of San Diego County residents. Participating hospitals will use the findings to guide their community programs and to meet IRS regulatory requirements that not-for-profit (tax exempt) hospitals conduct a health needs assessment in the community once every three years.

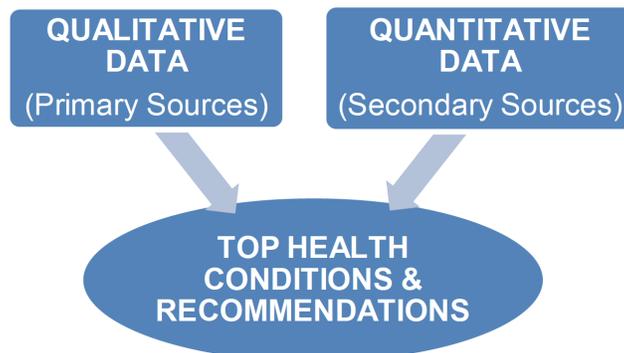
Per guidance from an advisory group of hospital representatives, HASD&IC contracted with the Institute of Public Health (IPH) at San Diego State University to design and implement the CHNA. The IPH employed a rigorous methodology using both community input (primary data sources) and quantitative analysis (secondary data sources) to identify and prioritize the top health conditions in San Diego County.

San Diego County is a socially and ethnically diverse community with a population of 3.2 million people. Although the study area for this CHNA is the entire county, each hospital has the ability to use the county-wide findings or adapt the findings to reflect the communities they serve, as much of the data is available at zip code level.

In order to prioritize the community health needs, the IPH developed a methodology that included both qualitative and quantitative data sources. Quantitative data included hospital discharge data, statistics from the San Diego County Health and Human Services Agency, the U.S. Census Bureau, the Centers for Disease Control and others. The IPH also sought direct input from the community through an electronic survey to health experts and community leaders, key informant interviews and community forums.

HASD&IC 2013 CHNA Framework

CHNA Framework



Community Prioritization Process (CHNA Methodology)

The IPH employed a six-step methodology to assess community health needs in San Diego County.



Click [here](#) to read the IPH Methodology Summary.

Community Served

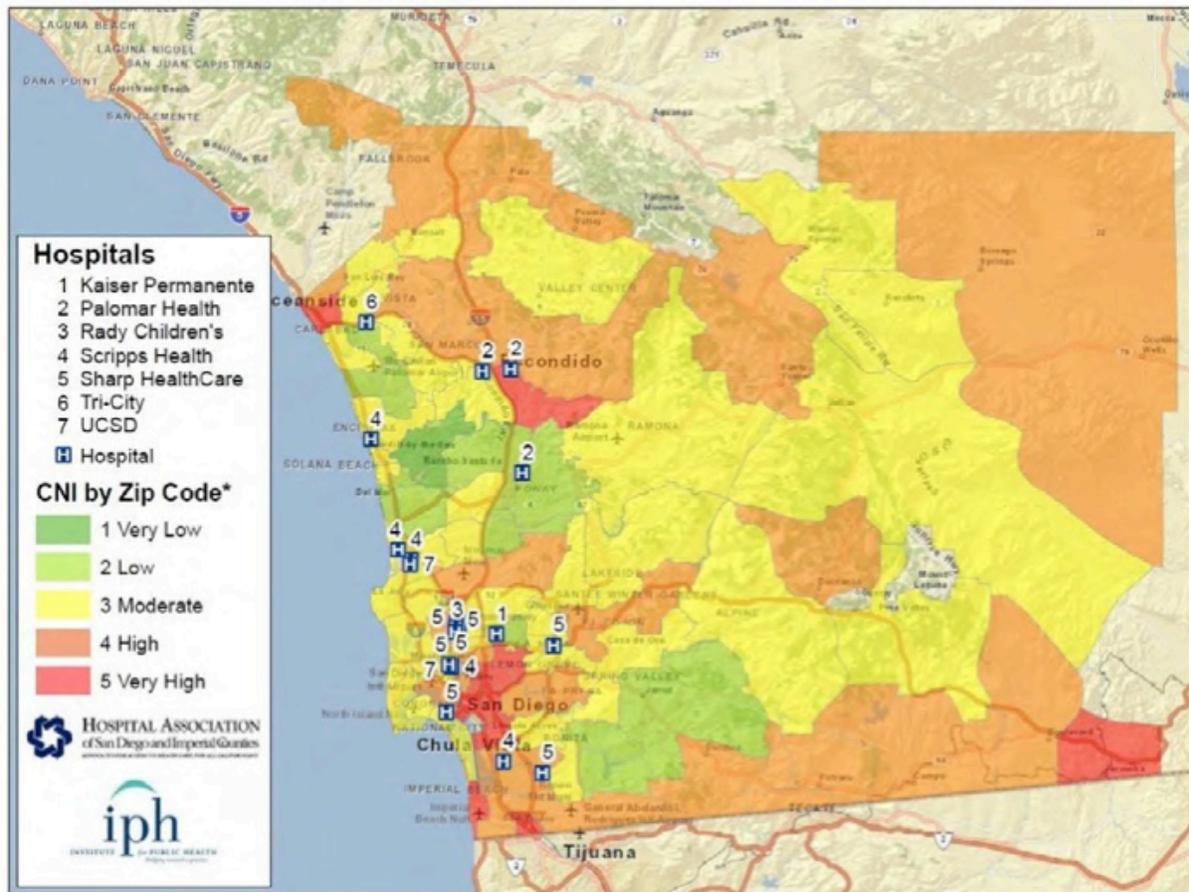
Scripps serves the entire San Diego county region with services concentrated in North Coastal, North Central, Central and Southern region of San Diego. Community outreach efforts are focused in those areas with proximity to a Scripps facility. Scripps hosts, sponsors and participates in many community-building events throughout the year.



Identify Vulnerable Communities

Recognizing that health needs differ across the region and that socioeconomic factors impact health outcomes, the IPH used the Dignity Health Community Need Index (CNI) to identify communities within San Diego County with the highest level of health disparities and needs. The CNI identifies the severity of health disparity for every zip code in the United States and demonstrates the link between community need, access to care and preventable hospitalizations. These high-need regions were selected as locations for the community forums.

Community Need Index*, San Diego County, 2011.



Health Expert, Community Leader and Resident Feedback

The IPH and CHNA Advisory Workgroup sought feedback from community leaders, health experts and residents of vulnerable communities. This was done through three methods: an electronic survey for community leaders and health experts; key informant interviews; and community forums for residents in vulnerable communities throughout San Diego County.

Sources of Community Input



- Online Survey of Health Experts and Leaders
Initial email sample (n=120). Total surveys completed (n=89).
- Community Forums (106 community residents)
El Cajon, Oceanside, Escondido, Logan Heights, and San Ysidro
Conducted in neighborhoods with high Community Need Index scores
- Five Key Informant Interviews
Leaders chosen based on discipline expertise and knowledge of health issues affecting communities

Prioritized Health Conditions



Prioritized San Diego County Community Health Needs: The health needs were prioritized based on the following criteria:

- Have a significant prevalence in the community,
- Contribute significantly to the morbidity and mortality in San Diego County,
- Disproportionately impact vulnerable communities,
- Reflect a need that exists throughout San Diego County, and
- Can be addressed through evidence-based practices by hospitals and health care systems.

Report Findings

San Diego County Community Health Needs

When the IPH combined the results of all the data and information gathered, four conditions emerged clearly as the top community health needs in San Diego County (in alphabetical order):

- Cardiovascular Disease
- Diabetes (type 2)
- Mental/Behavioral Health
- Obesity

Health Themes Identified in the Community Health Needs Assessment

Once all the community input was integrated (survey respondents, key interviewees, and community forum participants) the following five broad categories emerged as recommendations for hospitals to organize community health programs:

- Access to Care or Insurance
- Care Management
- Education
- Screening Services
- Collaboration

Scripps Health Implementation Plan

Scripps Health has a long history (since October 1994) of responding to the health needs of the communities we serve, extending beyond traditional hospital care to provide community benefit programs that address the health care needs of the region's most vulnerable populations. With the CHNA complete and health priority areas identified, Scripps Health developed a systemwide corresponding Implementation Plan. The Implementation Plan translates the research and analysis presented in the Assessment into actual, measurable strategies and objectives that can be carried out to improve community health outcomes.

Scripps Health convened an internal workgroup comprised of Scripps executives, community benefit representatives and clinical care line leaders to lead the development of the Scripps Health Implementation Plan. While Scripps Health cannot realistically address every issue, Scripps Health will endeavor to resolve those that most heavily affect our patient populations, service area, and are consistent with our strategy and resource availability. In addition to the CHNA and Implementation Plan, Scripps Health will continue to meet community needs by providing charity care and uncompensated care, professional education and community benefit programs. Scripps offers community benefit services through our five acute-care hospital campuses, home health services, wellness centers and clinics

In support of the 2013 Community Health Needs Assessment, and ongoing community benefit initiatives, a detailed description of Scripps strategies and corresponding measures/metrics for the four health issues can be found at scripps.org/communitybenefit. Listed below are the programs Scripps Health will address for the health priority areas identified in the CHNA:

Cardiovascular Disease

- **Eric Paredes Save A Life Foundation (Screenings).** Prevent sudden cardiac arrest and death in middle and high school aged children, including underserved areas in San Diego County, through awareness, education and action.

Diabetes

- **Diabetes Community Health Education and Outreach.** Provide outreach and educational resources that improve health status and access for the community and the underserved population.

- **Project Dulce.** Improve Self-Management Education for underserved population living with diabetes.

Mental and Behavioral Health

- **Depression Screenings.** Implement mental health screenings and provide resources to raise awareness of mental health disease and its symptoms, as well as provide referrals for those at risk for having mental health problems.

Obesity

- **Dulce Mothers.** Decrease the incidence of type 2 diabetes by managing a major diabetes risk factor, obesity, in underserved, ethnically diverse populations by testing the effectiveness of a weight management curriculum designed for Latino women diagnosed with gestational diabetes mellitus (GDM).

Uncompensated Health Care

Scripps contributes significant resources to provide low and no-cost health care for our patients in need. During fiscal year 2013, Scripps contributed \$301,570,492 in uncompensated health care, including \$48,697,171 in charity care, \$239,315,221 in Medi-Cal and other means-tested government programs and Medicare shortfall, and \$13,558,100 in bad debt.

Scripps provides hospital services for one-quarter of the county's uninsured patients. Scripps Mercy Hospital, San Diego and Scripps Mercy Hospital, Chula Vista provide 67 percent of Scripps' charity care (refer to figure 3:4).

The health care safety net in San Diego County is highly dependent upon hospitals and community health clinics to care for uninsured and medically underserved communities. Finding more effective ways to coordinate and enhance the safety net is a critical policy challenge.

While public subsidies (e.g., County Medical Services) help finance services for San Diego County's uninsured populations, these subsidies do not cover the full cost of care. Combined with Medi-Cal and Medicare funding shortfalls, Scripps and other local hospitals absorb the cost of caring for uninsured patients in their operating budgets. This places a significant financial burden on hospitals and physicians.

California's Uninsured

California had the greatest number of uninsured residents of any state, 7 million, and the seventh largest percentage of uninsured under 65 in the country. Many of the state's uninsured are employed, however, the percentage of residents who receive coverage through their jobs has declined dramatically, dropping from 63 percent in 1988 to 54 percent in 2012. While public insurance has mostly offset this gap, 20 percent of Californians remains uninsured. With the implementation of the Patient Protection and Affordable Care Act of 2010 (ACA), the numbers of uninsured residents in California will be reduced, although a significant number will be left behind.*¹

State Uninsured Comparison

Three-Year Average, 2010 to 2012:

	TOTAL POPULATION	UNINSURED RESIDENTS	
	In Millions	In Millions	Share of Total
United States	\$266.4	\$48.1	18.1%
HIGHEST PROPORTION STATES			
Texas	\$22.9	\$6.1	26.9%
Florida	\$15.5	\$3.8	24.7%
Nevada	\$2.3	\$1.6	25.7%
New Mexico	\$1.7	\$0.4	24.4%
Georgia	\$8.6	\$1.9	21.6%
Montana	\$0.8	\$0.2	21.8%
California	\$33.7	\$7.0	21.2%

*All numbers reflect people under age 65.

Source: Employee Benefit Research Institute estimates of the Current Population Survey, 2011-2013 March Supplements.

The percentage of Californians with employer-based coverage continued to fall, dropping from 63 percent in 1988 to 53.5 percent in 2012. While public insurance has partially filled this gap, almost 22 percent of Californians remain uninsured. This statistic should change dramatically in the coming years as the Patient Protection and Affordable Care Act is implemented.

Californians with annual family incomes below \$25,000 are most likely to be uninsured. The likelihood of being uninsured is greater in California than the United States as a whole for all income levels.²

1 California Health Care Foundation, California Health Care Almanac. California's Uninsured: By the Numbers, Paul Fronstin, Employee Benefit Research Institute, December 2013.

2 California Health Care Foundation, California Health care Almanac, December 2012

*In 2015, an estimated 5.6 million Californians will be uninsured. Of this population, 2.6 million are expected to take coverage, but 3.1 million are expected to stay uninsured.

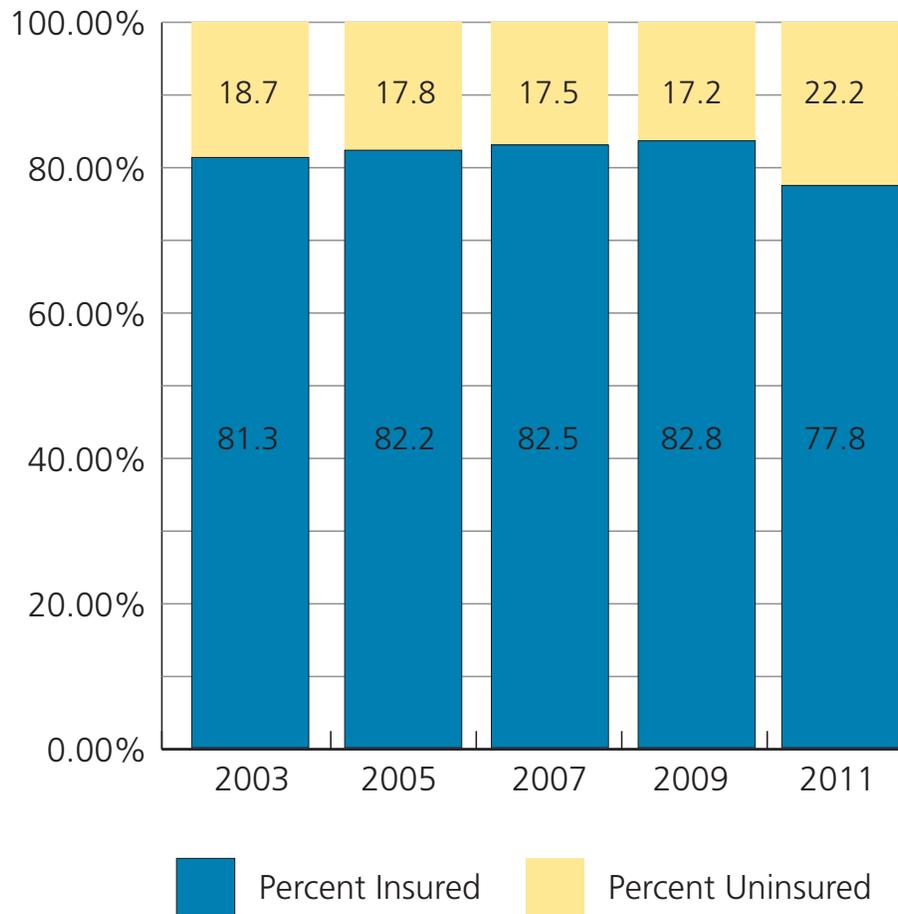
California's not-for-profit hospitals are navigating through a changing and extremely uncertain landscape, as implementation of the ACA moves forward with many unanswered questions. At least 4 million Californians may be able to obtain health care coverage who were uncovered before, meaning new demand on hospitals and the services they provide. At the same time, deep cuts in Medi-Cal and Medicare funding are coming from the state and federal governments. California's hospitals already provide more than \$13 billion in unreimbursed, or free, health care, according to data from the California Office of Statewide Health Planning and Development. Requiring hospitals to absorb potentially billions of dollars more in uncompensated care, at a time when politicians are cutting payment levels, puts these hospitals and the communities they serve in jeopardy.³

³ California Hospital Association. "Charity Care Mandate on Not-for-Profit Hospitals". 2013.

San Diego's Uninsured

San Diego experienced a decrease in the percentage of insured residents from 2009 to 2011 (see to figure 3:1). At that time, 22.2 percent of the adult (19 to 64), non-military population in San Diego County lacked health insurance coverage.

Figure 3:1 Percent of Non-Military Adults (age 19 to 64) with health insurance Coverage San Diego County, 2003-2011⁴

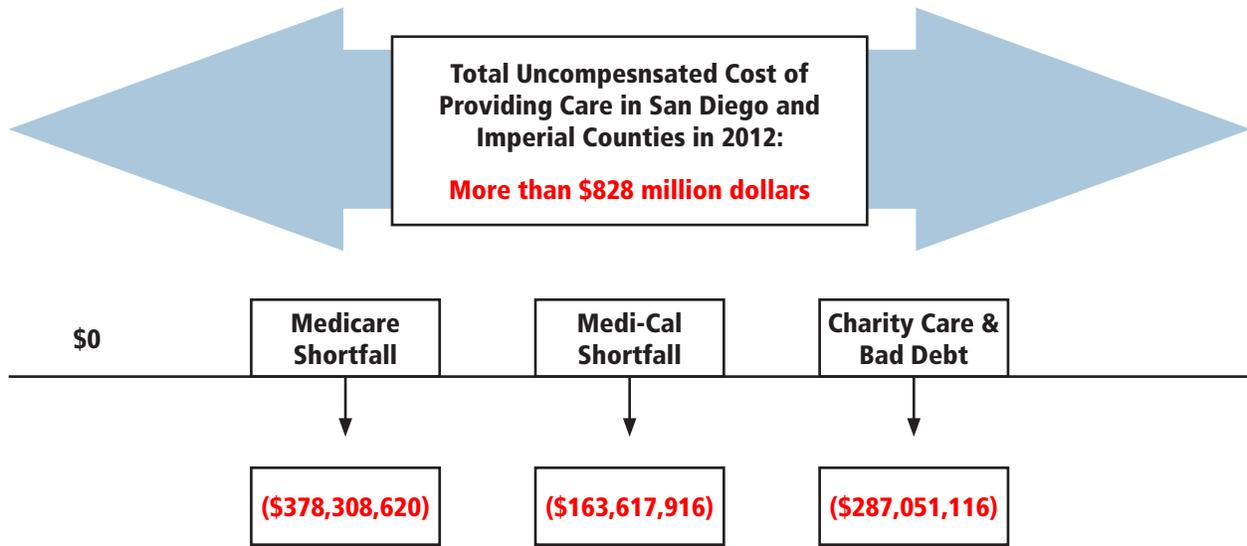


Source: OSHPD Annual Financing Data, 2010 calendar year.

⁴ California Health Interview Survey. "Source: 2009 California Health Interview Survey," www.chis.ucla.edu

Medicare and Medicaid Payments are Vital to Preserve Access to Care

California hospitals continue to face challenges due to payment shortfalls; key workforce shortages; unfunded state mandates; an increasing regulatory burden; and the continued escalation of technology costs, including health information technology. With Medicare and Medicaid payments not fully covering the costs of care, hospitals are concerned about the sustainability of services required by an aging American public that is experiencing a higher rate of chronic disease. Increasing demands for services are also expected, as more individuals obtain health insurance and seek access to care due to health care reform.⁵



Financial Assistance

Assisting Low-Income, Uninsured Patients

The Scripps financial assistance policy is consistent with AB774 California Hospital Fair Pricing Policy legislation. These practices reflect our commitment to assisting low-income and uninsured patients with discounted hospital charges, charity care and flexible billing and debt collection practices. These programs are available to everyone in need, regardless of their race, ethnicity, gender, religion or national origin.

Scripps provides full financial assistance for low-income and uninsured patients earning less than 200 percent of the federal poverty level guidelines. For individuals who qualify, between 201-400 percent of the poverty level, financial assistance is based on a discount schedule. For 2014, the Department of Health and Human Services defined a family of four's 200 percent federal poverty level as \$47,700.

**FY13 Scripps System Uncompensated Health Care Summary
(After Provider Fee)**

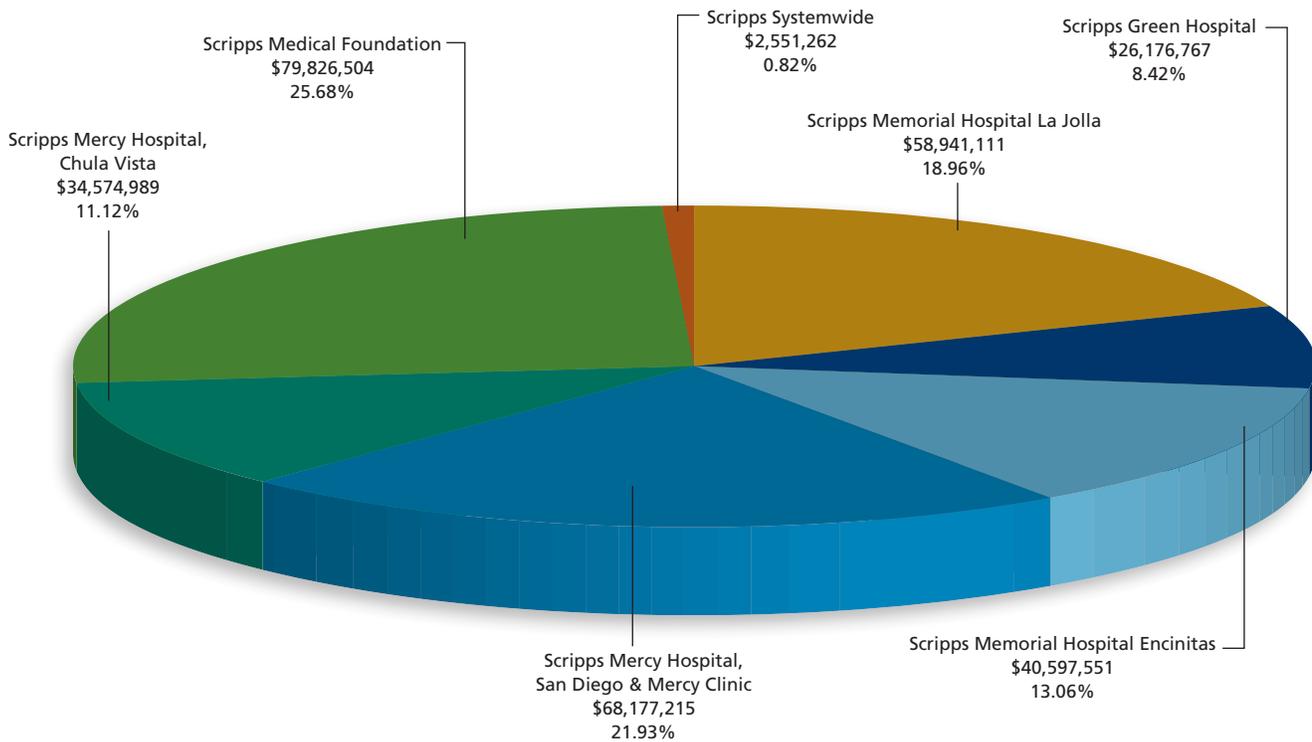
Title	Financial Support*
Bad Debt	\$13,558,100
Charity Care	\$48,697,171
Medi-Cal (Shortfall)**	\$21,493,028
Medicare and Medicare HMO (Shortfall)	\$187,002,793
Other Means-Tested Government Programs (Shortfall)	\$30,819,400
SCRIPPS TOTAL FY13 UNCOMPENSATED CARE	\$301,570,492
SCRIPPS SCHEDULE H FY13 UNCOMPENSATED CARE (Excludes Bad Debt and Medicare Shortfalls)	\$101,009,559

* Financial Support is: Calculations for bad debt and charity care are estimated by extracting the gross write-offs of bad debt and charity care charges and applying the hospital ratio of costs to charges (RCC) to estimate the cost of care. Calculations for Medi-Cal & other means-tested government programs and Medicare shortfall are derived using the payor-based cost allocation method. Bad debt and Medicare shortfall do not count as community benefits under the new Schedule H 990, but are still reportable outside the community benefit table.

**The California Hospital Fee Program (the Program) was signed into law effective January 1, 2010. During the year ended September 30, 2013, Scripps Health recognized supplemental provider fee amounts of \$100,947,000. This amount was recognized as net patient revenue in the consolidated statement of operations. Scripps Health recognized quality assurance fees of \$91,673,000. This amount was recorded as provider fee expenses in the consolidated statement of operations. In addition, Scripps Health was assessed and accrued charitable contributions to CHFT of \$540,000 in the statement of operations. The net operating income recognized by Scripps Health from provider fee was \$8,734,000 in fiscal year 2013.

FIGURE 3:2

FY13 Scripps Total Uncompensated Care by Operating Unit, \$310,845,399⁶ (before provider fee)



Provider Fee Impact	La Jolla	Green	Encinitas	Mercy San Diego	Mercy Chula Vista	Whittier	SMF	System-Wide	Total
Community Benefit Services Before Provider Fee	58,941,111	26,176,767	40,597,551	68,177,215	34,574,989	-	79,826,504	2,551,262	310,845,399
Provider Fee	10,763,945	8,038,553	6,583,199	(23,222,604)	(11,437,999)	-			(9,274,907)
Net Community Benefit Services After Provider Fee	69,705,056	34,215,320	47,180,749	44,954,610	23,136,990	-	79,826,504	2,551,262	301,570,492

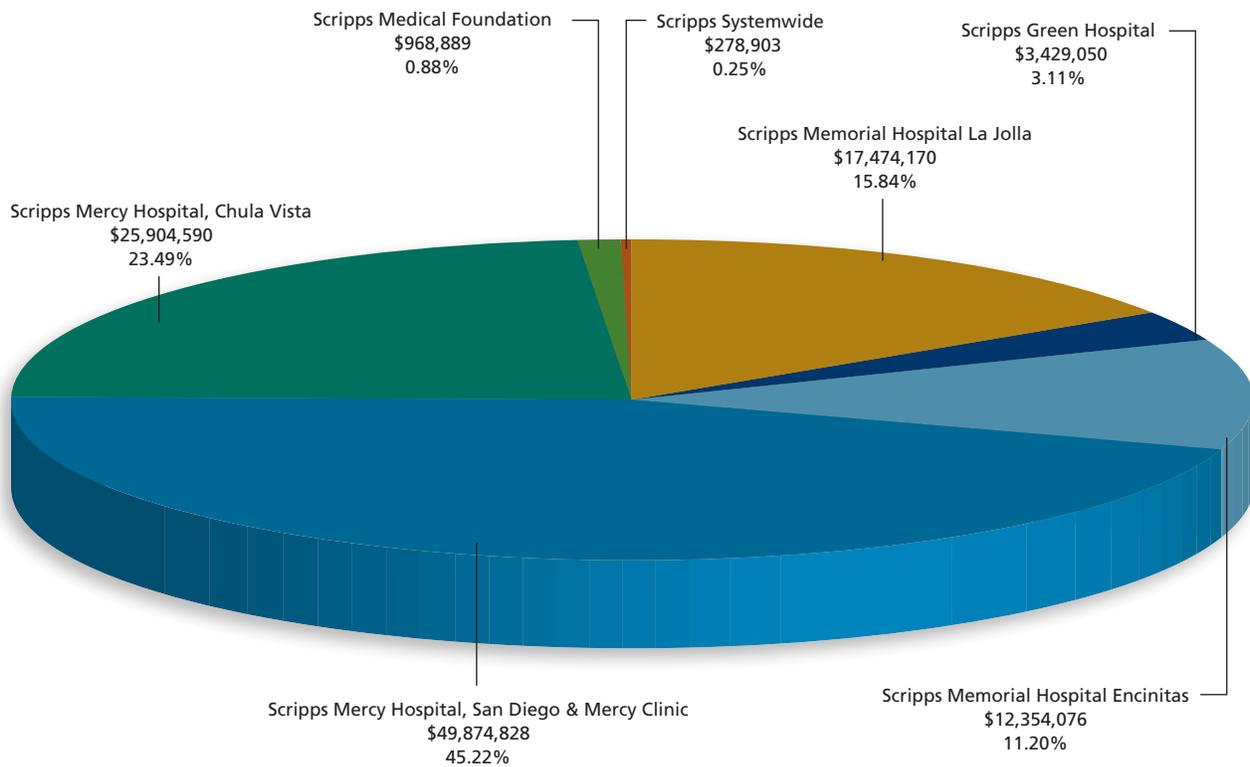
Uncompensated Health Care

Uncompensated health care includes the sum of expenses associated with charity care, Medi-Cal and other means-tested government programs, Medicare shortfalls and bad debt. A detailed account of Scripps fiscal year 2013 uncompensated care expenditures are contained in the following graphs.

⁶ Calculations for Medi-Cal and other means-tested government programs and Medicare shortfalls are derived using the payor-based cost allocation method. Calculations for bad debt and charity care are estimated by extracting the gross write-offs of bad debt and charity care charges and applying the hospital ratio of cost to charges (RCC) to estimate net cost of care.

FIGURE 3:3

FY13 Scripps Schedule H Uncompensated Care by Operating Unit, \$110,284,506⁷ (before provider fee)



Provider Fee Impact	La Jolla	Green	Encinitas	Mercy San Diego	Mercy Chula Vista	Whittier	SMF	System-Wide	Total
Community Benefit Services Before Provider Fee	17,474,170	3,429,050	12,354,076	49,874,828	25,904,590	-	968,889	278,903	110,284,506
Provider Fee	10,763,945	8,038,553	6,583,199	(23,222,604)	(11,437,999)				(9,274,907)
Net Community Benefit Services After Provider Fee	28,238,115	11,467,603	18,937,274	26,652,223	14,466,591	-	968,889	278,903	101,009,599

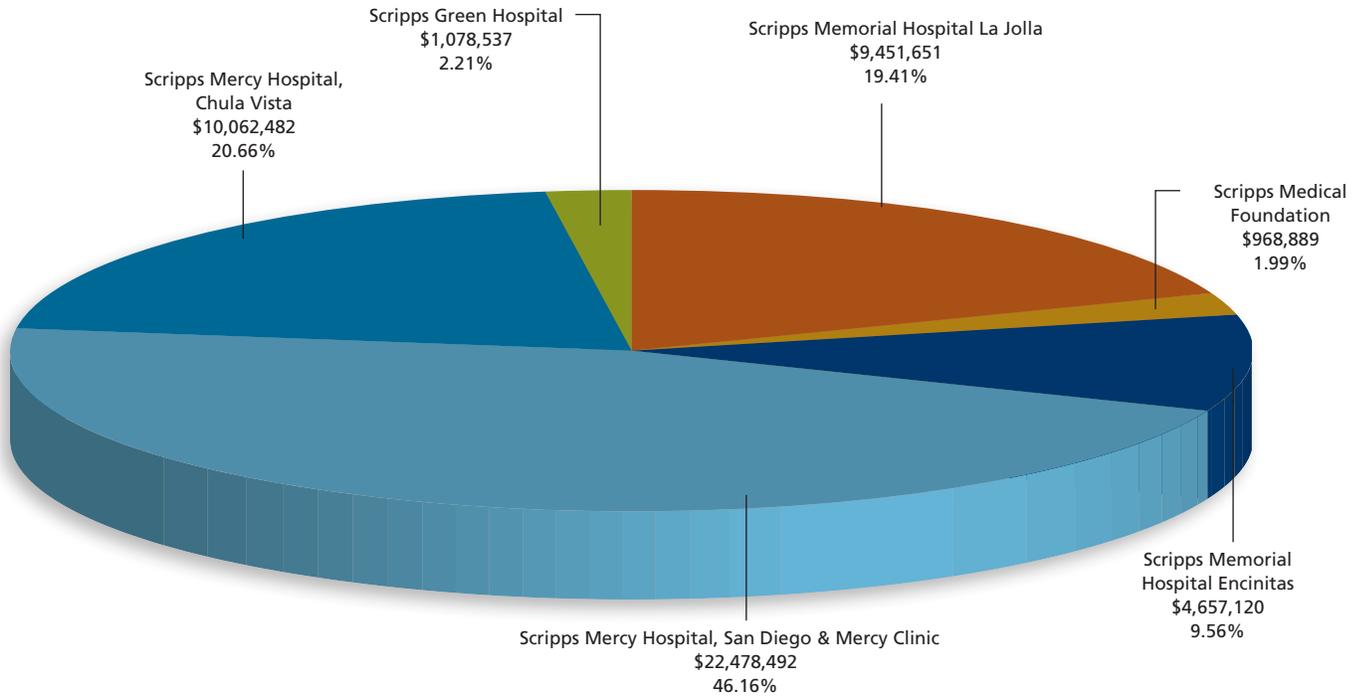
Uncompensated Health Care (Schedule H)

Uncompensated health care includes the sum of expenses associated with charity care, Medi-Cal and other means-tested government programs.

⁷ Calculations for Medi-Cal and other means-tested government programs are derived using the payor-based cost allocation method. Calculations for charity care are estimated by extracting the gross write-offs of charity care charges and applying the hospital ratio of cost to charges (RCC) to estimate the cost of care. Community building activities, bad debt and Medicare shortfall do not count as community benefits under the new Schedule H 990 but are still reportable outside the community benefit table

FIGURE 3:4

FY13 Scripps Charity Care by Operating Unit, \$48,697,171⁸



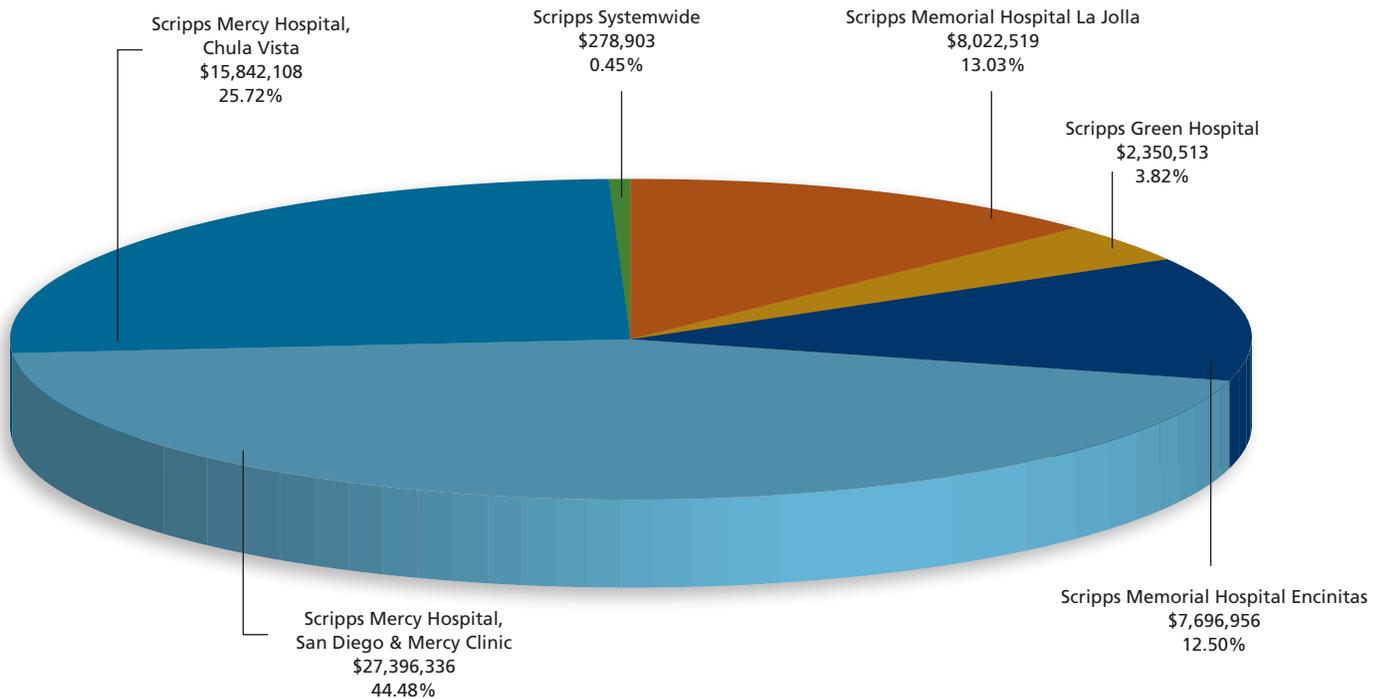
Charity Care

Part of Scripps' legacy is its commitment to providing services for vulnerable populations. Scripps provides charity care for patients with little or no resources at all its hospitals.

⁸ Calculations for charity care are estimated by extracting the gross write-offs of charity care charges and applying the hospital ratio of cost to charges (RCC) to estimate the cost of providing charity care.

FIGURE 3:5

FY13 Scripps Medi-Cal and Other Means-Tested Programs by Operating Unit, \$61,587,335⁹ (before provider fee)



Provider Fee Impact	La Jolla	Green	Encinitas	Mercy San Diego	Mercy Chula Vista	Whittier	SMF	System-Wide	Total
Community Benefit Services Before Provider Fee	8,022,519	2,350,513	7,696,956	27,396,336	15,842,108	-	-	278,903	61,587,335
Provider Fee	10,763,945	8,038,553	6,583,199	(23,222,604)	(11,437,999)				(9,274,907)
Net Community Benefit Services After Provider Fee	18,786,464	10,389,066	14,280,155	4,173,732	4,404,109	-	-	278,903	52,312,428

Medi-Cal and Other Means-Tested Programs (Shortfall)

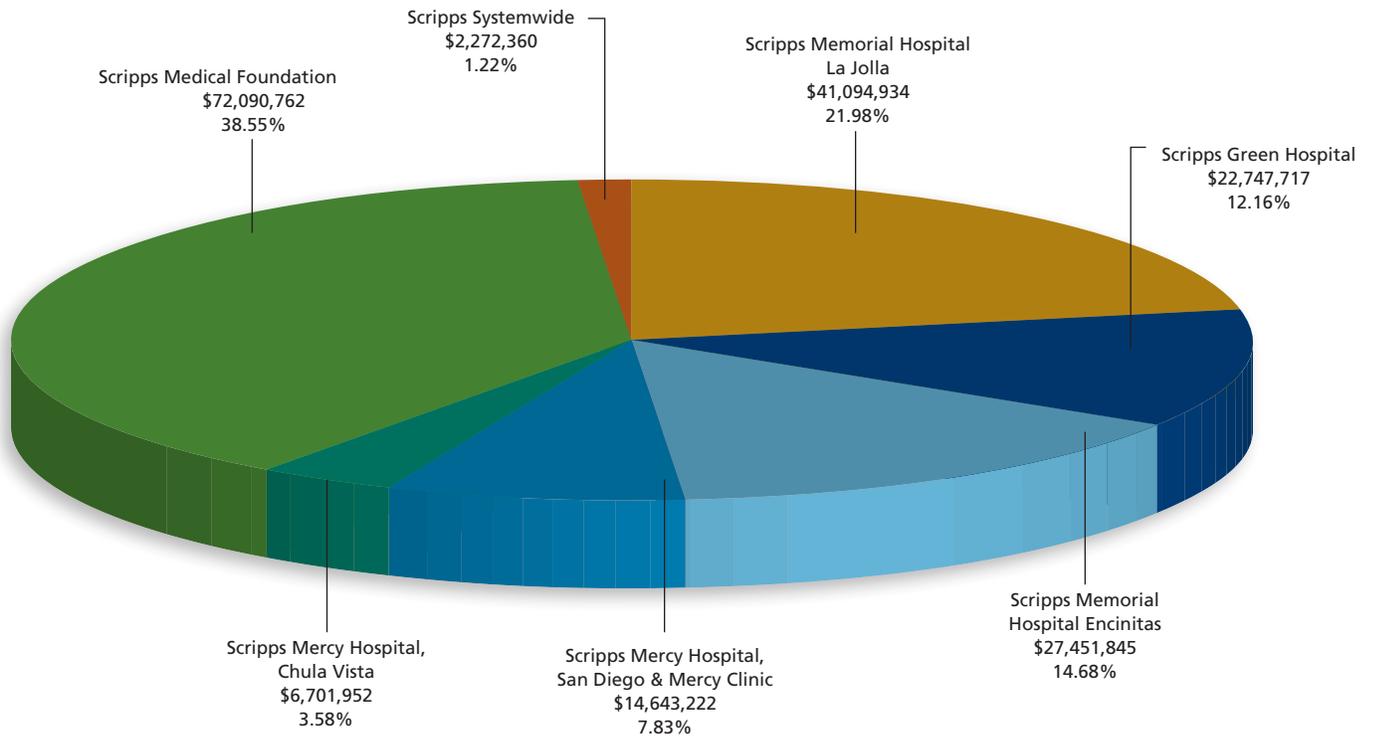
In addition to providing charity care services, Scripps accepts patients for whom it is reimbursed under various county, state and federal indigent care programs (CMS, Medi-Cal and Medi-Cal HMO) at amounts that, in some cases, do not cover the full cost of care.

⁹ Calculations for Medi-Cal/CMS are derived using the payor-based cost allocation method.

The California Hospital Fee Program (the Program) was signed into law effective January 1, 2010. During the year ended September 30, 2013, Scripps Health recognized supplemental provider fee amounts of \$100,947,000. This amount was recognized as net patient revenue in the consolidated statement of operations. Scripps Health recognized quality assurance fees of \$91,673,000. This amount was recorded as provider fee expenses in the consolidated statement of operations. In addition, Scripps Health was assessed and accrued charitable contributions to CHFT of \$540,418 in the statement of operations. The net operating income recognized by Scripps Health from provider fee was \$8,734,000 in fiscal year 2013.

FIGURE 3:6

FY13 Scripps Medicare and Medicare HMO (Shortfall) by Operating Unit, \$187,002,793¹⁰



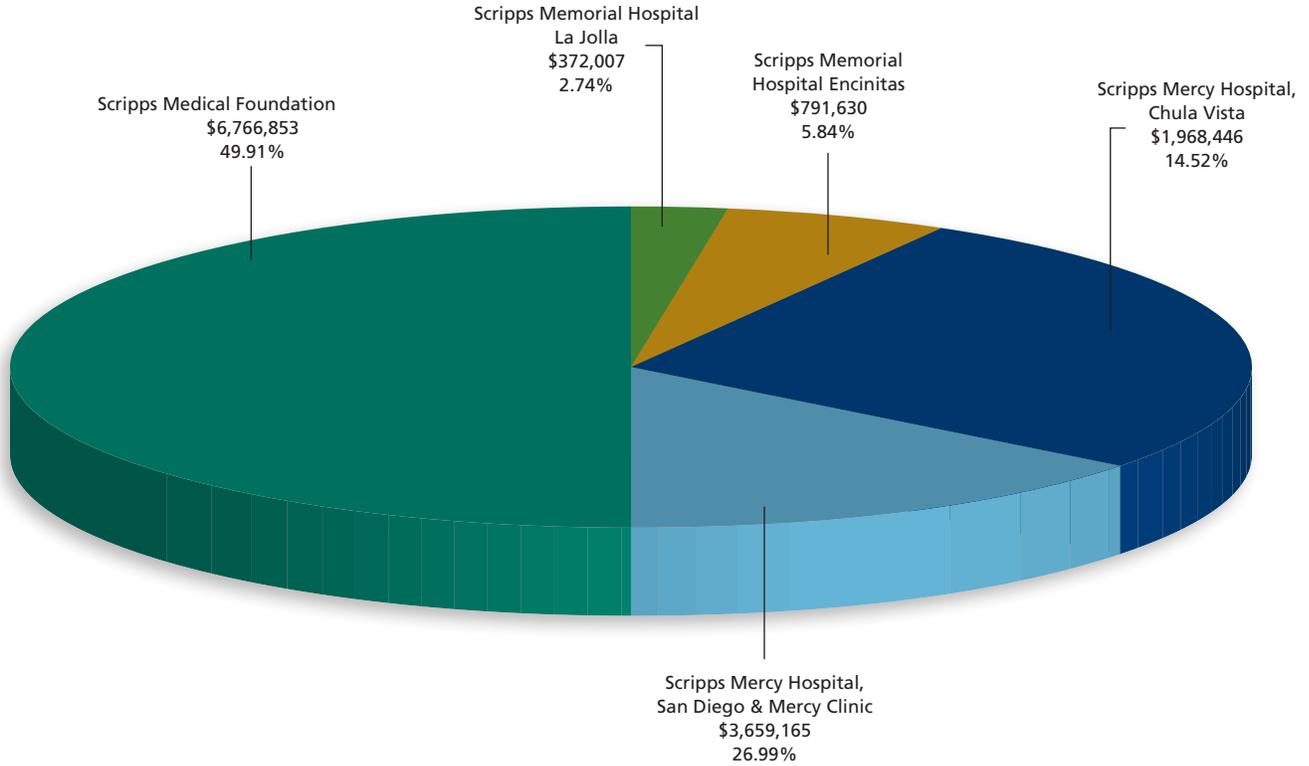
Medicare and Medicare HMO (Shortfall)

In addition to providing charity care services, Scripps accepts patients for whom it is reimbursed under various county, state and federal programs (Medicare, Medicare PPO, Medicare HMO and Medicare SHPS) at amounts that, in some cases, do not cover the full cost of care.

¹⁰ Calculations for Medicare are derived using the payor-based cost allocation methodology.

FIGURE 3:7

FY13 Scripps Bad Debt by Operating Unit, \$13,558,100¹¹



Bad Debt

Scripps also provides benefits to the broader community, including services for individuals who do not qualify for charity care, but need special services and support. Each year, Scripps provides care for which no compensation is received to people who do not meet the criteria for charity care, are not covered by a third-party payer or have a co-payment obligation that is not met.

¹¹ Cost of bad debt is estimated by applying the hospital ratio of cost-to-charges (RCC) to the gross write-offs of bad debt to arrive at the estimated cost of providing care.

Community Health Services

Community Health Services include prevention and wellness programs — screenings, health education, support groups and health fairs — supported by operational funds, grants, in-kind donations and philanthropy. Per section 2 – Community Health Needs Assessment (CHNA) — 15 health conditions were initially chosen based on frequencies of discharge data from the hospital data, and having a large impact on hospitals in terms of frequency of diagnosis and cost of care. The list of 15 health conditions (Acute Respiratory Infections, Asthma, Back Pain, Breast Cancer, Cardiovascular Disease, Colorectal Cancer, Dementia and Alzheimer’s, Diabetes, High Risk Pregnancy, Lung Cancer, Mental/Behavioral Health, Obesity, Prostate Cancer, Skin Cancer and Unintentional Injuries) was used as a starting point to solicit input from health experts and leaders, and community members. By combining the results of all the methods employed (primary and secondary data sources) the top four health conditions were identified; Obesity, Cardiovascular Disease, Diabetes (type 2) and Mental/Behavioral Health. The programs included in this section raise public awareness and understanding of the community health needs documented in the Scripps 2013 Community Health Needs Assessment Report (Refer to Section 2 — Community Health Needs Assessment (CHNA)).¹

Scripps defines Community Health Services according to the Schedule H 990 categories mandated by the IRS. They are broken down into five main areas: (See the Scripps Community Health Services Summary List for more details, page 56).

- Community health improvement services
- Community benefit operations
- Cash and in-kind contributions
- Subsidized health services
- Community building activities

During fiscal year 2013 (October 2012 to September 2013), Scripps invested \$5,866,944 in community health services (does not include subsidized health). This figure reflects the costs associated with providing these programs — salaries, materials and supplies — minus revenue.

Here are a few highlights of activities conducted by Scripps during fiscal year 2013. Refer to figure 4:1 for a graphic representation of the FY13 Scripps Systemwide Community Health Services program distribution.

¹ Demographic and community need information data presented throughout the body of this document are based upon the findings of the San Diego Hospital Association and Imperial Counties 2013 Community Health Needs Assessment and the most recent San Diego County community health statistics (unless otherwise indicated). Retrieved from the World Wide Web: <http://www.hasdic.org/chna.htm>

Access to Care

Two primary barriers to obtaining health care, on both the local and national level, are lack of health insurance and access to specialty and primary care providers. Reduced access to basic health care services increases illness, injury and mortality and is a major burden on hospitals and health providers, who must provide uncompensated care for the uninsured. More people without insurance translates into higher use of emergency departments, which by law must provide stabilizing care to all patients, regardless of their ability to pay.

In an effort to provide for people in need, Scripps sponsored a number of programs in fiscal year 2013.

Mercy Outreach Surgical Team

Working in Mexico, the Mercy Outreach Surgical Team (MOST) provides reconstructive surgeries for children at no cost. MOST volunteers performed reconstructive surgeries on children suffering from birth defects or accidents. In special circumstances, surgeries are also provided for adults. During fiscal year 2013, the MOST team provided reconstructive surgeries for more than 400 children. (Sponsored by Scripps Mercy Hospital, San Diego and affiliated physicians.)

Scripps Recuperative Care Program (RCU)

The Scripps Rescue Mission Project provides a safe discharge for chronically homeless patients with ongoing medical needs. All these patients are unfunded and many have substance abuse and/or mental health issues — additional problems that make these patients difficult to place post-acute. RN case management oversight is provided by Scripps Health with physician backup to ensure completion of their medical recovery goals. The Rescue Mission provides a safe, secure environment with 24-hour supervision, medication oversight, meals, clothing, counseling, assistance with Medi-Cal and disability application, as well as help finding housing. Scripps Health pays a daily fee to the RCU to support the patient's cost in the program. For FY13, total cost savings for Scripps has been more than \$176,000.

Graduate Medical Education Staff — Support St. Vincent de Paul Village Medical Center and St. Leo's Clinic

Weekly community clinics were held at the St. Vincent de Paul and St. Leo's clinics. Staffed by Scripps Green Hospital and Scripps Clinic internal medicine residents, these clinics cared for approximately 800 of our county's most vulnerable residents during fiscal year 2013. (Sponsored by Scripps Clinic/Green Hospital.)

Fiji Alliance Project

In partnership with the International Relief Teams of San Diego and the Loloma Foundation, Scripps employees, Scripps Clinic physicians and other Scripps-affiliated physicians provided medical and surgical services in Fiji. As one of their rotations, residents from Scripps Clinic and Scripps Green Hospital have the opportunity to participate in these medical missions. The team performs procedures to remedy cleft lips and palates, eyelid,

face and feet deformities, burn scars, breast masses and hernias, as well as providing diabetes management. All surgical supplies were donated by Professional Hospital Supply Corporation (PHS), the supplier for Scripps Health. The supplies included surgical gowns, gloves, drapes, dressings, bandages, sutures, etc. Cardinal Health Systems, which provides pharmaceuticals and other supplies for Scripps Health, donated all medications. (Sponsored by Scripps Clinic/Green Hospital.)

Scripps Health Community Benefit (CB) Fund

In 2013, Scripps awarded \$215,000 in community grants to programs in San Diego (six grants ranging from \$10,000 to \$120,000). The funded projects address some of San Diego County's high-priority health needs, seeking to improve access to vital health care services for at-risk populations, including the homeless, economically disadvantaged, mentally ill and others. Since the Community Benefit Fund began, Scripps has awarded \$2.4 million. Programs funded during fiscal year 2013 include:

Consumer Center for Health Education and Advocacy (CCEA)

Funding provides low-income, uninsured Mercy Clinic and behavioral health patients help obtaining health care benefits, SSI and related services, while reducing uncompensated care expenses at Mercy. The project provides advocacy services for time-intensive government benefit cases. (Sponsored by Scripps Mercy Hospital Administration.)

Catholic Charities

Funding provides short-term emergency shelter for medically fragile homeless patients being discharged from Scripps Mercy Hospital, San Diego. The program is being expanded to Scripps Mercy Hospital, Chula Vista. Case management and shelter are provided for homeless patients discharged from Scripps Mercy Hospital. While these patients no longer require hospital care, they do need a short-term recuperative environment. Patients who demonstrate a willingness to change receive one week in a hotel, along with food and bus fare to pursue a case plan. The focus of the case management is to stabilize the client by helping them connect to more permanent sources of income, housing and other self-reliance measures. The partnership seeks to reduce emergency room recidivism in this population and improve their quality of life.

2-1-1 Health Care Navigation Program

There is an overwhelming need for a dependable service to help people navigate today's complex health care system. Since the inception of the health care navigation program, 2-1-1 has responded to more than 6,000 calls from clients seeking health-related resources. In addition, 5,726 self-selected "health" as their need. 2-1-1 San Diego is the dialing code for information about community, health and disaster services. It connects people with resources over the phone, online and in print. Locally, 2-1-1 San Diego was launched in June 2005 as a multilingual and confidential service committed to providing access 24/7.

American Heart Association

Scripps provided funding for the 2013 Heart Walk Corporate Sponsorship. Heart disease and stroke are the No. 1 and No. 3 causes of death in the nation. Heart disease claims more than 950,000 Americans each year. Scripps partners with the American Heart Association on its annual Heart Walk to raise funds for research, professional and public education, and advocacy.

Back Pain

Most people in the United States will experience lower back pain at least once during their lives. Back pain is one of the most common reasons people go to the doctor or miss work. Some causes of back pain include muscle or ligament strain, bulging or ruptured disks, arthritis, skeletal irregularities and osteoporosis.

Risk Factors for back pain include:

- Excess weight or obesity
- Lack of exercise
- Improper lifting
- Those with psychological issues, such as depression and anxiety (reasons unknown)

Disparities in the United States (NHIS, 2010):

- Adults without a high school diploma were more likely to have lower back pain.
- Adults in poor families were more likely to experience lower back pain.
- Women are more likely than males to have experienced pain in the lower back (30.0% versus 26.0%).

Healthy People 2020:

- Goal: Reduced activity limitation due to chronic back conditions.
- Target: 27.6 per 1,000.
- Baseline: 30.7 in 2008 data source: National Health Interview Survey, CDC, NCHS

Burden:

- Lower back pain has been reported as the 6th most costly condition in the United States.
- 29% of adults over the age of 18 have pain in the lower back.
- Back pain affects 60% to 80% of people in their lifetime.

During fiscal year 2013, Scripps engaged in the following healthy back pain prevention and treatment activities.

Scripps Mende Well Being

Scripps Mende Well Being offered various lectures on chronic pain management and new alternatives to healing. These lectures focused on advanced programs, treatments and relief from pain and suffering. This orientation included related irritable bowel, insomnia, stress,

back pain, depression and chronic fatigue information. These lectures were free and open to the community. (Sponsored by Scripps Memorial Hospital La Jolla, Community Benefits.)

Cancer/Oncology

Cancer is the second leading cause of death in the U.S., exceeded only by heart disease, and accounts for almost one-quarter of all deaths in San Diego County. The actual all-cancer death rate among residents of San Diego County was 148.6 per 100,000 in 2009.

Breast Cancer

Breast cancer is defined as any cancerous growth that inhabits the tissues in the breast. In this type of cancer, the cells in the breast region grow abnormally and in an uncontrolled way. Though breast cancer is mostly found in women, in rare cases it is also found in men. In the U.S. alone, one out of every eight women has this disease. Common types include: Ductal Carcinoma Breast Cancer and Lobular Carcinoma Breast Cancer, named for the location of the breast in which they began.

Not counting some kinds of skin cancer, breast cancer in the United States is:

- The most common cancer in women, no matter your race or ethnicity.
- The most common cause of death from cancer among Hispanic women.
- The second most common cause of death from cancer among white, African American, Asian/Pacific
- Islander, and American Indian/Alaska Native women.

Breast Cancer Disparities in the United States:

Although the incidence of breast cancer in white, non-Hispanic females is greater than that of black females, the mortality rates among African American females is much greater than that of white, non-Hispanic females.

Colorectal Cancer

NCI defines colorectal cancer as any cancer "that forms in the tissues of the colon or rectum." Most colon cancers are adenocarcinomas (cancers that begin in cells that make and release mucus and other fluids).

Of cancers that affect both men and women, colorectal cancer is the second leading cause of cancer-related deaths in the United States. Colorectal cancer also is one of the most commonly diagnosed cancers in the United States; among all men and women it is the third most common cancer in the U.S. today. Clinical symptoms include blood in/on the stool, persistent cramping, pains and aching in the stomach, and unexplained weight loss.

Risk Factors for colorectal cancer include:

- Age: 90% of all cases diagnosed are in people above the age of 50 years.
- Inflammatory bowel disease.
- A personal or family history of colorectal cancer or colorectal polyps.

- A genetic syndrome or hereditary non-polyposis colorectal cancer (Lynch syndrome).
- Lifestyle factors, such as lack of regular physical activity, low fruit and vegetable intake, low-fiber and high-fat diets, alcohol consumption, tobacco use, and being overweight or obese.

Colorectal cancer prevalence in the United States:

SEER estimates that 1,140,161 men and women currently have been diagnosed with colorectal cancers.

Lung Cancer

Lung cancer is the leading cause of cancer death and the second most diagnosed cancer in both men and women in the United States. In 2008, 14 percent of all cancer diagnoses and 28 percent of all cancer deaths were due to lung cancer. Lung cancers usually are grouped into two main types called small cell and non-small cell. These types of lung cancer progress in different manners, and therefore require different courses of treatment. Non-small cell lung cancer is more common than small cell lung cancer. Clinical symptoms can include, chest pain, shortness of breath, wheezing, coughing up blood, constant fatigue, unexplained weight loss, and coughing that progressively worsens and does not subside.

Some facts about lung cancer in 2008:

- 208,493 people in the United States were diagnosed with lung cancer, including 111,886 men and 96,607 women.
- 158,592 people in the United States died from lung cancer, including 88,541 men and 70,051 women.

Lung cancer prevalence in the United States:

On January 1, 2009, in the United States there were approximately 387,762 men and women alive who had a history of cancer of the lung and bronchus — 178,490 men and 209,272 women.

Prostate Cancer

NCI defines prostate cancer as a cancer that forms in tissues of the prostate, a gland in the male reproductive system found below the bladder and in front of the rectum.¹ While cancerous cells within the prostate itself are generally not deadly on their own, as a cancerous tumor grows some of the cells can break off and spread to other parts of the body through the lymph or the blood, through the process of metastasis. Prostate cancer usually occurs in older men. Clinical symptoms include: difficulty starting urination, weak/interrupted flow of urine, pain/burning during urination, frequent urination, blood in urine or semen, and unspecified pain in the back, hips or pelvis.

Not counting some forms of skin cancer, prostate cancer in the United States is:

- The most common cancer in men, no matter your race or ethnicity.
- The second most common cause of death from cancer among white, African American, American Indian/Alaska Native, and Hispanic men.
- The fourth most common cause of death from cancer among Asian/Pacific Islander men.

Risk factors for prostate cancer include:

- Age: The older a man is, the greater his risk for getting prostate cancer.
- Family history: A man with a father, brother, or son who has had prostate cancer is two-to-three times more likely to develop the disease himself.
- Race: Prostate cancer is more common in some racial and ethnic groups than in others.

Prostate cancer prevalence in the United States:

SEER estimates that 2,496,784 males currently have been diagnosed with cancer of the prostate.

Skin Cancer

Skin cancer is a cancer that forms in the various tissues of the skin, and is the most common form of cancer in the United States. The two most prevalent types of skin cancer—basal cell (forms in the lower part of the epidermis) and squamous cell (forms in the flat cells that form the surface of the skin) carcinomas—are highly curable. However, the third most common skin cancer, melanoma, forms in the cells that make the pigment melanin and are considered more dangerous. About 65 percent – 90 percent of melanomas are caused by exposure to ultraviolet (UV) light. Clinical symptoms include moles that are asymmetrical, have irregular borders, uneven coloration, experience increases in diameter, or have evolved or changed in recent weeks or months.

Risk factors for the three most common types of skin cancer:

- Sunlight
- Severe, blistering sunburns
- Lifetime sun exposure
- Tanning

Melanoma of the skin prevalence in the United States:

SEER estimates that 876,344 persons currently have been diagnosed with melanoma of the skin.

Scripps has developed a series of prevention and wellness programs to educate people about the importance of early detection and treatment for some of the most common forms of cancer. Here are a few examples of Scripps cancer programs during fiscal year 2013.

Scripps Green Hospital Cancer Support Groups

Scripps Green Hospital support groups offer cancer patients the opportunity to express the emotions that come with a cancer diagnosis and help them cope more effectively with their treatment regimens by support groups that nurture their physical, emotional and spiritual well-being. Classes at Scripps Green Hospital, such as the free cancer writing workshop, “When Words Heal,” use expressive writing to help patients navigate their journey with cancer.

Scripps Mercy Hospital, Chula Vista: Community Benefit Services, Breast Health Clinical Services

A total of 3,873 women were referred to clinical breast health services at community and Scripps Mercy Hospital, Chula Vista radiology services. A total of 4,431 services were provided, including telephone reminders, outreach and education, case management and a variety of presentations. (Sponsored by Scripps Mercy Hospital, Chula Vista, Community Benefits.)

Patient Continuity of Care with Scripps Mercy Hospital, Chula Vista Radiology

A total of 25 services were provided, including encouragement for patients to repeat exams, assistance to get patients' health insurance approval to repeat exams, social/emotional support and education about preventing breast cancer. (Sponsored by Scripps Mercy Hospital, Chula Vista, Community Benefits.)

Scripps Mercy Hospital, Chula Vista Radiology, Positive Breast Cancer Patient Support

A total of 40 services were provided, including phone calls, social/emotional support and home visits, as well as resource packages with educational materials on nutrition, treatment options, commonly asked questions and local resources. (Sponsored by Scripps Mercy Hospital, Chula Vista, Community Benefits.)

Scripps Polster Breast Care Center, Music as Medicine Program

Patients and their supporters participate in the "Music as Medicine" therapy class. The music therapist asks questions and tailors the therapy to the participants' emotional and physical needs. Sessions involve listening to music, writing songs, discussing what lyrics mean to the participants, use of singing bowls, vocalization and drumming. Research has shown that music can boost immune function, block incoming pain stimuli, lower blood pressure and influence emotional well-being. (Sponsored by Scripps Polster Breast Care Center.)

Scripps Polster Breast Care Center, Support Groups

Scripps Polster Breast Care Center support groups provide a venue for women to come together, discuss issues relating to diagnoses and receive support. (Sponsored by Scripps Polster Breast Care Center.)

Cancer Awareness and Educational Events

A series of educational events are coordinated with American Cancer Society awareness months. The events focus on various types of cancer, including breast, lung, cervical, colorectal, skin, ovarian/gynecological and prostate. A registered nurse clinician answers questions and provides educational materials. (Sponsored by Scripps Memorial Hospital La Jolla Cancer Center.)

Health Education and Support Groups

Education and support groups are provided to San Diego County residents for a wide variety of health concerns. Topics include families who have experienced the loss of a child, children who have lost a parent to cancer, infertility, parenting twins, improving children's reading abilities, Huntington's disease, Parkinson's disease, mental illness, ostomy, postpartum issues, gynecological cancer, chronic pain and multiple sclerosis. (Sponsored by Scripps Memorial Hospital La Jolla, Community Benefits.)

Cardiovascular Disease

Coronary heart disease and stroke are the No. 1 and No. 3 causes of death in the nation. Heart disease claims more than 950,000 Americans every year. Stroke killed 137,119 people in 2006 and is a leading cause of serious, long-term disability.

The World Health Organization defines cardiovascular disease (CVD) as a group of disorders of the heart and blood vessels that include coronary heart disease, cerebrovascular disease, peripheral arterial disease, rheumatic heart disease, congenital heart disease, deep vein thrombosis and pulmonary embolism. Coronary heart disease is the most common form of heart disease. High blood pressure, high cholesterol, and smoking are all risk factors that could lead to CVD and stroke. About half of Americans (49 percent) have at least one of these three risk factors.

Risk Factors for Cardiovascular Disease:

- Behaviors: Tobacco use, obesity, poor diet that is high in saturated fats, and excessive alcohol use.
- Conditions: High cholesterol levels, high blood pressure and diabetes.
- Heredity: Genetic factors likely play a role in heart disease and can increase risk.

Heart disease is the leading cause of death in the United States.

- Heart disease is the leading cause of death for people of most racial/ethnic groups in the United States, including African Americans, Hispanics and whites.
- Between 70% and 89% of sudden cardiac events occur in men.
- About two-thirds (64%) of women who die suddenly of coronary heart disease have no previous symptoms.

Prevalence Data:

In 2010, 4.1% of adults living in San Diego had ever had Coronary Heart Disease.

In 2010, 3.6% of adults living in California had ever had Coronary Heart Disease.

During fiscal year 2013, Scripps engaged in the following heart health, cardiovascular disease prevention and treatment activities.

American Heart Walk

In addition, Scripps employees volunteered their time to coordinate walker participation and fundraising efforts. The San Diego Heart Walk raised more than \$1.19 million. In 2013, more than 1,700 Scripps Heart Walk participants — employees, families, and friends — walked to help raise more than \$142,000. Additionally, Scripps reached out to the community at the event and provided health education materials and giveaways. (Sponsored by Scripps Community Benefit Services.)

Community Health Education Programs

The community health education programs cover a wide variety of topics on disease management, health care updates and prevention. The programs cover hysterectomy, stroke, stress, varicose veins, infertility, cardiac, depression, macular degeneration, memory, brain, orthopedic care, robotic surgery, skin care, back care, migraines, knee pain, pelvic floor incontinence, safety and fall prevention, bladder health, healthy dining, exercise, voice, flu prevention, sleep disorders, nutrition, hypertension, foot care, spine surgery, joint replacement, breathing, pain management and medication. (Sponsored by Scripps La Jolla Community Benefit Services.)

CPR Classes for Patients and Families of the Cardiac Treatment Center

CPR classes are offered four times a year to Cardiac Treatment Center patients and their families. The program improves community health by increasing knowledge of cardiopulmonary resuscitation practices. (Sponsored by Cardiac Treatment Center at Scripps Memorial Hospital La Jolla.)

Cardiac Treatment Center Group Exercise Programs

Cardiac Treatment Center Group Exercise Programs include tai chi, offered twice weekly; classes to decrease stress and improve balance, strength and flexibility; restorative yoga, offered three times a week; fit ball, offered twice a week; classes to improve strength, posture and core stability; yoga for cancer recovery, offered weekly; classes to decrease stress, improve circulatory flow, and ease tension during healing; classes centering on balance, offered weekly; classes to build balance, posture and coordination; power yoga, offered twice weekly; classes to improve strength and flexibility; weekly pilates classes, yoga for multiple sclerosis, offered weekly; classes to promote healing and improve strength and flexibility; and weekly meditation classes. (Sponsored by the Cardiac Treatment Center, Scripps Memorial Hospital La Jolla.)

Stroke Care Programs

Scripps sponsored a wide variety of stroke-related education and awareness programs. (Sponsored by Scripps Mercy Hospital Stroke Program.)

Heart Health, Scripps Home Health Services

Scripps Home Health provided community education to promote independent congestive heart failure (CHF) management to prevent exacerbations and hospitalizations. Patients received information on what CHF is, medications, diet, weight and exercise. In fiscal year 2013, 20 San Diego county residents were served. (Sponsored by Scripps Home Health Services.)

The Eric Paredes Save A Life Foundation

The Eric Paredes Save A Life Foundation is committed to preventing sudden cardiac arrest and death in middle and high school-aged children through awareness, education and action. Scripps made a \$15,000 donation to purchase EKG machines. The donation helped the foundation provide electrocardiogram and echocardiogram screenings for 2,991 children before they could participate in organized sports and other activities. The gift also purchased automated external defibrillators for schools.

Diabetes

The 2011 National Diabetes Fact Sheet (the most recent year data is available) estimates 25.8 million children and adults in the U.S., 8.3 percent of the population, have diabetes. These statistics include 18.8 million people with diagnosed diabetes and another 7.0 million people with undiagnosed diabetes. Each year 1.9 million new cases of diabetes are diagnosed in people 20 and older.

More than 90 million Americans (33 percent) live with a chronic disease. While there are many disabling chronic diseases, diabetes has been identified as one of the primary chronic conditions in San Diego County. The diabetes death rate was 17.4 per 100,000 in 2009.

There are three major types of diabetes: type 1, type 2 and gestational. All three types share similar characteristics — the body loses the ability to either make or to use insulin. Without enough insulin, glucose stays in the blood, creating dangerous blood sugar levels. Over time, this buildup damages kidneys, heart, nerves, eyes and other organs.

Type 2 diabetes, once known as adult-onset or noninsulin-dependent diabetes, is a chronic condition that affects the way your body metabolizes sugar (glucose), which is the body's main source of fuel. With type 2 diabetes, your body either resists the effects of insulin — a hormone that regulates the movement of sugar into your cells — or doesn't produce enough insulin to maintain a normal glucose level. If left untreated, type 2 diabetes can be life-threatening. Clinical symptoms can include: frequent urination, excessive thirst, extreme hunger, sudden vision changes, unexplained weight loss, extreme fatigue, sores that are slow to heal and increased number of infections.

Some alarming facts about type 2 diabetes:

- About 1.9 million people aged 20 years or older were newly diagnosed with diabetes in 2010 in the U.S.
- Diabetes is the leading cause of kidney failure, non-traumatic lower-limb amputations, and new cases of blindness among adults in the United States.
- Diabetes is a major cause of heart disease and stroke, and is the 7th leading cause of death in the United States.

Some risk factors for developing diabetes include:

- Being overweight or obese.
- Having a parent, brother, or sister with diabetes.
- Having high blood pressure measuring 140/90 or higher.
- Being physically inactive — exercising fewer than three times a week.

Diabetes Prevalence:

U.S. age-adjusted prevalence rates for adult diagnosed diabetes for the year of 2010 were 8.7 percent, as compared to a rate of 3.7 percent rate in 1980. The State of California reported a rate of 8.9 percent for the same year.

More than 7 million Americans are unaware they have diabetes. The complications related to diabetes are serious and can be reduced with preventive practices. Diabetes is a serious community health problem, leading to school and work absenteeism, elevated hospitalization rates, frequent emergency room visits, permanent physical disabilities and sometimes death. During fiscal year 2013, Scripps sponsored the following diabetes management initiatives.

Project Dulce

A collaboration between Scripps Whittier Diabetes Institute, the Council of Community Clinics and Community Health Improvement Partners (CHIP), Project Dulce is a comprehensive, culturally sensitive diabetes management program for underserved and uninsured people in San Diego County. The program is team-based and incorporates the chronic care model.

Project Dulce has been active in communities across San Diego for the past 16 years, providing diabetes care and self-management education. Nurse-led teams strive for measurable improvements in their patients' health; nurse educators lead multidisciplinary teams that provide clinical management; and peer educators from each cultural group, known as promotoras, provide public and patient education for their communities. This innovative program combines state-of-the-art clinical diabetes management with proven educational and behavioral interventions.

In fiscal year 2013, Project Dulce provided 7,128 diabetes care and education visits for low-income and underserved individuals throughout San Diego and enrolled more than 821 new patients. The program also initiated four new projects: prevention for women with a history of gestational diabetes, replicating Project Dulce in Tijuana, diabetes peer care coordination at Scripps Mercy Hospital, Chula Vista and the diabetes gene bank program.

Scripps Whittier Diabetes Institute Professional Education and Training

Scripps Whittier Diabetes Institute professional education teams provide state-of-the-art education and training for people who wish to increase their diabetes management knowledge and skills. With the rise in diabetes, medication upgrades, nutritional adjustments and changes in diabetes-related devices, there is a great need to equip clinicians with the latest information and clinical skills. The institute's professional education program is led by a team of experts, including: endocrinologists, nurses, dietitians, psychologists and other diabetes specialists.

These individuals train practicing professionals to deliver the best possible care for their diabetes patients. Courses respond to the needs of allied health professionals seeking to understand new and complex clinical treatment options for type 1, type 2 and gestational diabetes. Professional education was provided for 253 people on insulin management, incretin therapy, the diabetes diet and diabetes basics. Participants came from local health institutions and throughout the United States to learn from the institute's most experienced diabetes experts. Over the last fiscal year, the institute's professional education department provided 19 separate programs for physicians, nurses, pharmacists, dietitians, midlevel providers and social workers.

Health-Related Behaviors

Health-related behavior is one of the most important elements in people's health and well-being. Its importance has grown as sanitation has improved and medicine has advanced. Diseases that were once incurable can now be prevented or successfully treated. Health-related behaviors, such as immunization, smoking cessation, improved nutrition, increased physical activity, oral health and injury prevention, have become important components of long-term health.

Understanding that personal behaviors play a significant role in an individual's overall health status, Scripps has developed a series of prevention and wellness programs that help people take charge of their own, and their families', health. During fiscal year 2013, Scripps sponsored a number of health behavior modification efforts.

Dementia and Alzheimer's Disease

Dementia is a clinical syndrome of decline in memory and other thinking abilities. It is caused by various diseases and conditions that result in damage to brain cells and lead to distinct symptom patterns and distinguishing brain abnormalities. Alzheimer's disease (AD) is a progressive brain disorder that gradually destroys a person's memory and ability to learn, reason, make judgments, communicate and carry out daily activities such as bathing and eating.

Alzheimer's is the 6th leading cause of death in the United States.

- AD is the most common form of dementia accounting for 70% of all causes of dementia.
- Most people with AD are diagnosed at age 65 or older.
- Women are more likely than men to have AD.
- People living with dementia are at greater risk for general disability and experience frequent injury from falls.
- Older adults with dementia are three times more likely to have preventable hospitalizations.

Financial burden:

- Payments for AD care are estimated at \$200 billion in 2012 within the United States.

Prevalence:

- There are more than 5.2 million people in the United States living with AD. As the population ages the number is expected to triple by 2050.
- In California there are 588,208 people 55 years and older living with AD. One-tenth of AD patients live in California.

During fiscal year 2013, Scripps engaged in the following Alzheimer's and dementia prevention and treatment activities.

Senior Health and Well-Being Programs

The goal is to increase health care, information and preventative services for seniors/older adults in the South Bay. Each month a variety of senior programs are held at local senior centers, churches and senior housing. Some of these activities included dementia, Alzheimer's and pain management. (Sponsored by Scripps Mercy Hospital, Chula Vista, Community Benefits.)

Obesity

Obesity is a medical condition in which excess body fat has accumulated to the extent that it may have an adverse effect on health. Overweight and obesity ranges are determined using weight and height to calculate a number known as "body mass index" (BMI). An adult with a BMI between 25 and 29.9 is considered overweight, while an adult who has a BMI of 30 or higher is considered obese. For children and adolescents aged 2-19, overweight is defined as a BMI at or above the 85th percentile and lower than the 95th percentile for children of the same age and sex, while obese is defined as a BMI at or above the 95th percentile for children of the same age and sex. In San Diego County, according to the 2009 California Health Interview Survey, 22.1 percent of adults aged 20 years and older were obese (BMI 30.0 or higher) based on their height and weight.

Some facts about obesity in the United States:

- In 2009, more than one-third of U.S. adults (35.7%) were obese and 16.9% of children

and adolescents were considered obese.

- Obesity-related conditions include heart disease, stroke, type 2 diabetes and certain types of cancer, which are some of the leading causes of preventable death.

Health consequences due to overweight and obesity:

Research has shown that as weight increases to reach the levels of “overweight” and “obesity,” the risks for the following conditions also increases:

- Coronary heart disease
- Type 2 diabetes
- Cancers (endometrial, breast, and colon)
- Hypertension (high blood pressure)
- Stroke
- Liver and gallbladder disease
- Sleep apnea and respiratory problems
- Osteoarthritis

Overweight and obesity associated costs:

In 2008, medical costs associated with obesity were estimated at \$147 billion; the medical costs for people who are obese were \$1,429 higher than those of normal weight.

Maternal Child Health & High Risk Pregnancy

Mothers, infants and children make up a large segment of the U.S. population and their well-being is a health predictor for the next generation. There is tremendous focus on maternal illness and death, and infant health and survival, including infant mortality rates, access to preventive care, and fetal, perinatal and other infant deaths.

Maternal and infant health issues include:

- Alcohol, tobacco and illegal substances during pregnancy, which are major risk factors for low birth weight and other poor outcomes.
- Very low birth weight associated with pre-term birth, spontaneous abortion, low pre-pregnancy weight and smoking.
- Infant death rates are highest among infants born to young teenagers and mothers 44 and older.

Being pregnant, or trying to become pregnant, is only a small portion of a woman’s life. Unintended pregnancy, either mistimed or unwanted at the time of conception, accounts for an estimated 49 percent of pregnancies in the U.S. These pregnancies are associated with increased morbidity, as well as behaviors linked to adverse health. Women who can plan the number and timing of their children experience improved health, fewer unplanned pregnancies and births, and lower abortion rates.

High-risk Pregnancy

High-risk pregnancy can be the result of a medical condition present before pregnancy or a medical condition that develops during pregnancy for either mom or baby and causes the

pregnancy to become high risk. A high-risk pregnancy can pose problems before, during or after delivery and might require special monitoring throughout the pregnancy.

Risk factors:

- Advanced maternal age: increased risk for mothers 35 years and older.
- Lifestyle choices: smoking, alcohol consumption, use of illegal drugs.
- Medical history: prior high-risk pregnancies or deliveries, fetal genetic conditions, family history of genetic conditions.
- Underlying conditions: diabetes, high blood pressure and epilepsy.
- Multiple pregnancy.
- Obesity during pregnancy.

United States general statistics:

- The number of births declined by 3% from 2009 to 2010.
- General fertility rate also declined by 3%.
- Teenage birth rate fell 10% from 2009 to 2010.
- The birth rate of women aged 40-44 years continued to rise.
- Cesarean delivery rate was down for the first year since 1996, to 32.8%.
- In San Diego County, the infant mortality rate was 4.4 deaths per 1,000 live births in 2009.

Scripps Health continued to enhance prenatal education for low-income women in San Diego County in fiscal year 2013. The following are some examples.

Scripps Memorial Hospital La Jolla Community Benefit Services

- Offered more than 1,000 maternal child health classes throughout San Diego County to enhance parenting skills. Low-income women in San Diego who were eligible attend classes at no charge or on a sliding-fee schedule.
- Maintained existing prenatal education services in all regions of the county, ensuring that programs continued to demonstrate a satisfaction rating above 90 percent.
- Provided and supported weekly breastfeeding support groups at five locations throughout San Diego County, including two with bilingual services.
- Offered a maternal child health education series in North County covering dogs and babies, safety, grandparenting and babysitter safety.
- Offered maternal child health classes at the Scripps Mende Well Being Center, such as basic training for dads, getting ready for the baby, infant CPR and safety, Parent Connection programs and redirecting children’s behavior.
- Offered the dogs and babies programs quarterly, with more than 40 attendees.
- Offered weekly “Mommy and me” yoga programs for new parents.
- Offered a prenatal yoga program for expectant women in San Diego County.
- Offered a pregnancy nutrition program quarterly at Scripps Memorial Hospital La Jolla.
- Offered classes in pelvic floor and pregnancy changes for expectant families at Scripps Memorial Hospital La Jolla. (Sponsored by Scripps Memorial Hospital La Jolla, Community Benefits.)

First 5 and Promise Neighborhoods

First-time mothers received more than 350 services, including home visits, referrals, data entry, follow-up calls, parenting classes and others. A total of 260 parents participated in parenting classes; 225 sessions provided. (Sponsored by Scripps Mercy Hospital, Chula Vista, Community Benefits.)

Scripps Mercy's Supplemental Nutrition Program for Women, Infants and Children (WIC)

Scripps Mercy Hospital is one of five regional organizations that administers the state-funded WIC program. The program serves six locations conveniently situated near community clinics and/or hospitals in the central San Diego area. WIC targets low-income pregnant and postpartum women, infants and children (ages 0 to 5). Scripps Mercy WIC serves approximately 9,000 women and children annually, 44 percent in the City Heights community.

In City Heights, clients are 91 percent Hispanic and include pregnant and postpartum women (24 percent), infants (20 percent) and children (56 percent). In fiscal year 2013, the program provided nutrition services, counseling and food vouchers for 100,380 women and children in south and central San Diego. The Scripps Mercy WIC program plays a key role in maternity care by reaching low-income women to promote prenatal care, good nutrition and breastfeeding. Nutrition staff educate women about the importance of breastfeeding during pregnancy and offer lactation support (one-on-one and group), as well as supplies — pumps and breast pads — during the postpartum period. (Sponsored by Scripps Mercy Hospital, San Diego.)

Unintentional Injury and Violence

In California, injuries are the No. 1 killer and disabler of people aged 1 to 44 (CDPH, 2010).

Unintentional injuries occur at home, at work, while participating in sports and recreation, on the streets and at school and are associated with motor vehicle accidents, falls, firearms, fire/burns, drowning, poisoning (including drugs and caustic substances), alcohol, gas, cleaners and many other causes.

The deaths associated with unintentional injuries are significant, yet represent only a small part of a much larger public health problem. Hospitalization data is a better measure of the injury problem than death data alone. In San Diego County during 2009, there were more than 949 deaths, more than 21,149 hospitalizations, and nearly 150,000 emergency department visits for unintentional injuries. The number of unintentional injuries treated in physicians' offices and clinics, while unknown, is likely much higher than the number of emergency department visits.

Unintentional injuries are one of the leading causes of death for San Diego County for residents of all ages, regardless of gender, race or region. Falls were the most common cause of unintentional injury in 2009, followed by motor vehicle injuries.

The following are a number of Scripps Health programs that addressed unintentional injuries and violence for fiscal year 2013.

AARP Driver Safety Program

A four-hour supervised trauma visitation program for young drivers ages 14 and up to show them the realistic consequences of driving under the influence. Participants visit the trauma room, ER, ICU, CAT scan area and other hospital areas. (Sponsored by Scripps Mercy Hospital)

Every 15 Minutes

Alcohol can be attributed to more than 100,000 deaths in the U.S. annually, including 41 percent of all traffic fatalities. The Every 15 Minutes program is a two-day immersion experience for teens on the realistic consequences of drinking and driving, which involves the schools, law enforcement, courts, emergency service providers and the mortuary. The “injured” students are taken to Scripps Mercy Trauma Center. This program is sponsored jointly by local high schools, county police and sheriffs departments, ambulance services, and emergency departments. (Sponsored by Scripps Mercy Hospital.)

Health and Wellness, Scripps Home Health Services

This program educates seniors about fall prevention (the primary cause of fractures) and fire safety. Home health nurses also teach seniors and their families about continuum-of-care options.

Sports Concussion Program, Rehabilitation Center at Scripps Memorial Hospital Encinitas

There are nearly 300,000 sports-related concussions in the U.S each year — 1,000 in football alone — and approximately 130,000 high school athletes suffer a concussion. A recent report showed that close to 40 percent of high school athletes who sustain a concussion return to play too soon. The Rehabilitation Center at Scripps Encinitas has developed a public education and community outreach program to raise awareness about concussion signs and symptoms, as well as how to avoid, treat and understand their consequences. Approximately 70 students have been served by this program. (Sponsored by Scripps Memorial Hospital Encinitas.)

San Diego Fall Prevention Task Force

This County HHS-Aging and Independence Service-supported Task Force seeks to reduce falls and their devastating consequences. The Task Force increases connections between physicians and other community fall prevention services, and increases awareness among older adults. Scripps Mercy Hospital Trauma Center participates in this task force.

Weight Status, Nutrition, Activity and Fitness

The numbers speak for themselves — 63 percent of American adults are either overweight or obese. Nationally, the prevalence of obese adults (those with a body mass index (BMI) of 30 or more) has increased by 68 percent since 1995, from 16 percent to almost 27 percent. During this same period, the prevalence of overweight adults (BMI between 25.0 and 29.99) has increased by only two percent, from 35.5 percent to 36.2 percent.

San Diego County Behavioral Risk Factor Surveillance System (BRFSS) data for 2009 indicates that almost 59 percent of adults are considered either overweight or obese. Since 2005, the first year BRFSS data was reported for San Diego County, the prevalence of obese adults has ranged from 20 percent in 2005 to 26.7 percent in 2006, with the most current measure at 21.6 percent. Since 2006, the prevalence of overweight adults in San Diego County has increased slightly from 36.5 percent to 37.7 percent.

At the national, state and county levels, obesity prevalence rates among Latinos and African Americans are significantly higher than those for whites.

Obesity rates by gender also varied significantly in the 2007 CHIS, the most recent county data by gender, with 25.4 percent of males and 18.1 percent of females having a BMI 30 or higher. Males were significantly more likely to be overweight than females, 40.5 percent and 25.8 percent, respectively.

Causes

Many factors play a role in obesity, making it a complex health issue to address. Factors include (DH&HS, 2010):

- Genetic predisposition
- Behavior (dietary patterns and physical activity)
- Environmental influences
- Cultural influences
- Socioeconomic status

To implement prevention strategies, it is important to understand the affect each of these factors has on obesity and which can be changed. The following are some examples of Scripps programs that address these health issues.

Nutrition Services and Physical Activity

According to the 2009 Behavioral Risk Factor Surveillance System (BRFSS) data for San Diego County, more than 59 percent of adults are overweight or obese. Obesity increases the risk for heart disease, type 2 diabetes, high blood pressure, stroke and some forms of cancer. The nation's low-income, minority populations are at even greater risk. In an effort to address this critical health concern, staff members at the City Heights Wellness Center have established a variety of nutrition education programs to meet the needs of low-income, minority populations.

The center uses a combination of approaches to address a broad array of community health priorities, including nutrition, access to services and community engagement. The "hub" of the Wellness Center is their teaching kitchen — a hands-on interactive setting for cooking demonstrations, weight management, meal preparation, nutrition education and counseling. During fiscal year 2013, nutrition education and counseling services at the City Heights Wellness Center received more than 6,000 visits. (Sponsored by Scripps Mercy Hospital, San Diego Community Benefit Services.)

Scripps Mercy's Supplemental Nutrition Program for Women, Infants and Children (WIC)

Scripps Mercy Hospital is one of five regional organizations that administer the state-funded WIC program, serving six locations conveniently situated near community clinics and/or hospitals in central San Diego. WIC targets low-income pregnant and postpartum women, infants and children (ages 0 to five). Each year, Scripps Mercy WIC serves approximately 9,000 women and children, 44 percent in City Heights. The client base in City Heights is 91 percent Hispanic and made up of pregnant or postpartum women (24 percent), infants (20 percent) and children (56 percent). In fiscal year 2013, the program provided nutrition services, counseling and food vouchers for 100,380 women and children in south and central San Diego. (Sponsored by Scripps Mercy Hospital, San Diego.)

Live Healthy Family Nutrition Program

Using the Cooperative Extension's research-based curriculums and bilingual staff, a registered dietitian implemented weekly nutrition education classes in Spanish. The program targets low-income people who use food stamps and offers a series of eight weekly classes. The program increases residents' knowledge, skills and motivation to help them practice healthy eating and related behaviors. Classes focus on nutrition, physical fitness, food safety, meal planning and food shopping. (Sponsored by Scripps Mercy Hospital, Community Benefit Services.)

Collaborate for Healthy Weight

Collaborate for Healthy Weight is a Health Resources and Services Administration (HRSA) and National Initiative for Children's Health Care Quality (NICHQ) program. This advisory group meets monthly to create partnerships among primary care, public health and community organizations to find sustainable ways to promote healthy weight and eliminate health disparities across the United States. All three sectors collaborate, using

evidence-based approaches, to reverse the obesity epidemic and improve the health of our communities. (Sponsored by Scripps Mercy Hospital, Chula Vista, Community Benefit Services.)

Mental Health and Illness

Mental health is defined as “a state of complete physical, mental and social well-being, and not merely the absence of disease.” Mental illness is defined as “collectively all diagnosable mental disorders” or “health conditions that are characterized by alterations in thinking, mood, or behavior (or some combination thereof) associated with distress and/or impaired functioning.”

Depression:

- Depression is the most common type of mental illness, affecting more than 26% of the U.S. adult population.
- It has been estimated that by the year 2020, depression will be the second leading cause of disability throughout the world, trailing only ischemic heart disease.

Disparities:

- Males commit suicide four times more than females.
- Younger American adults, aged 18-24 years, suffered the most mental health distress.
- Adults with the lowest income or education report more unhealthy days than those with higher income or education.
- Mental Illness is associated with chronic diseases such as cardiovascular disease, diabetes, and obesity.

Prevalence:

- About 25% of U.S. adults have a mental illness (BRFSS, 2004).
- Nearly 50% of U.S. adults will develop at least one mental illness during their lifetime.

Suicide and Suicide Attempts

Suicide is a major complication of depression and a leading cause of non-natural death for all ages in San Diego County, second only to motor vehicle accidents. In 2010, 372 San Diegans died by suicide, a rate of 11.5 per 100,000. This was higher than California overall (9.9 per 100,000) and slightly lower than the national rate (11.9 per 100,000).

Suicide deaths are only part of the problem; more people survive suicide attempts than die. Those who attempt suicide are often seriously injured and require medical and psychiatric care. Between 2000 and 2008, 2,896 San Diegans died from suicide. On average, one suicide affects the lives of at least six people, causing considerable grief, social stigma and, in some cases, elevated risk of additional suicides. In 2010, the County of San Diego Health and Human Services Agency (HHSA) launched a suicide prevention planning process, which was informed by the National Strategy for Suicide Prevention and the California Strategic Plan on Suicide Prevention. Scripps is a member of the Community Health Improvement Partners (CHIP), which collaborates with the county on this initiative.

Scripps offers both inpatient and outpatient adult behavioral health services at Scripps Mercy Hospital, San Diego. The behavioral health program at Scripps Mercy also supports community programs to reduce the stigma of mental illness and help affected individuals live and work in the community.

Scripps Health Behavioral Health Inpatient Programs

Individuals suffering from acute psychiatric disorders are sometimes unable to live independently or may even pose a danger to themselves or others. In such cases, hospitalization may be the most appropriate alternative. The Behavioral Health Inpatient Program at Scripps Mercy Hospital helps patients and their loved ones work through short-term crises, manage mental illness and resume their daily lives.

Challenges

- Like many behavioral health programs across the country, funding is difficult, as payment rates have not kept pace with the cost to provide care.
- In 2013, the Scripps Mercy Behavioral Health Program lost \$4.5 million.
- In 2013, 17% of patients in the inpatient unit were uninsured.

Scripps Health Behavioral Health Outpatient Programs

Scripps Mercy provides community-based adult psychiatric treatment at Scripps Mercy Hospital, San Diego. The intensive day program helps participants reduce their symptoms while they continue to live in the community.

The program provides two levels of care:

- The outpatient program offers patients one to four treatment days per week.
- The partial hospitalization program provides more intensive treatment five to six days per week.

Mental Health Outreach Services, A-Vision Service Program

Behavioral Health Services at Scripps Mercy Hospital, in partnership with the San Diego Mental Health Association, established the A-Vision Vocational Training Program (social rehabilitation and prevocational services for people living with mental illness) to help decrease the stigma of mental illness. The program provides vocational training for people receiving mental health treatment, potentially leading to greater independence. This year, Behavioral Health Services continued participating in the A-Vision program. In fiscal year 2013, 50 clients were served. Currently, two people are volunteering and 23 people are participating in supportive employment. The total expense for the A-Vision program for fiscal year 2013 was \$207,820.

Increasing Awareness of Mental Health and Geriatric Psychiatric Issues

In fiscal year 2013, Scripps Behavioral Health Services improved awareness of mental health and geriatric issues by providing information and supportive services for more than 1,000 people at community events.

Depression Screenings

Scripps Health implements mental health screenings and provides resources to raise awareness of mental health disease and its symptoms, and also provides referrals for those at risk for having mental health problems.

Emerging Mental Health Issues

Healthy People 2020 has identified several mental health issues that have emerged among special populations, including post-traumatic stress disorder (PTSD) among veterans and others who have experienced a traumatic event. These events may include war, rape, natural disasters, a car or plane crash, kidnapping, violent assault, sexual or physical abuse and medical procedures (especially in kids).

Scripps Memorial Hospital Encinitas offers a two-day course called "Brain Injury Rehabilitation Conference: Beyond the Hospital, Into the Community." This course on PTSD and stress disorders provides strategies and a framework to manage brain-injured patients both within and outside the clinical setting.

Treatments are focused on the total care continuum — physical, cognitive, perceptual, emotional and social — in a multidisciplinary format. This conference also provides participants with theoretical, practical and advanced applications in brain injury rehabilitation. The course is taught by an interdisciplinary team of specialists in brain injury rehabilitation at Scripps Memorial Hospital Encinitas. Approximately 281 people participated in this conference.

Acute Respiratory Infections/Pneumonia

Respiratory diseases, such as asthma and chronic obstructive pulmonary disease (COPD), are a significant public health burden in the United States. Asthma and COPD are among the 10 leading chronic conditions that restrict activity. After chronic sinusitis, asthma is the most common chronic illness in children. Death rates from COPD have declined from 2000 to 2009 at the national, state, and local levels.

Influenza, also known as the “flu,” is a contagious respiratory illness caused by influenza viruses that infect the nose, throat and lungs. It can cause mild to severe illness, and at times can lead to death. Complications of flu can include bacterial pneumonia (particularly for older and immunocompromised individuals), ear infections, sinus infections, dehydration, and worsening of chronic medical conditions, such as congestive heart failure, asthma or diabetes. Clinical symptoms include fever, cough, sore throat, chills, muscle and body aches, runny or stuffy nose, and congestion.

Some facts about acute respiratory infections and pneumonia:

- Acute respiratory infections, including pneumonia and influenza, are the 8th leading cause of death in the United States, accounting for 56,000 deaths annually.
- On average, influenza leads to more than 200,000 hospitalizations and 36,000 deaths each year.
- The 2009 H1N1 influenza pandemic caused an estimated 270,000 hospitalizations and 12,270 deaths (1,270 of which were of people younger than age 18) between April 2009 and March 2010.

The populations at higher risk for complications due to acute respiratory infections and pneumonia:

- Children younger than 5, but especially children younger than 2 years old.
- Adults 65 years of age and older.
- Pregnant women.
- Also, American Indians and Alaskan Natives seem to be at higher risk of flu complications.

Flu/Pneumonia-Associated Costs:

Pneumonia and the flu cost \$6 billion in direct medical care and another \$34.2 billion in projected lost earnings in 2007, according to the American Lung Association. This represented an increase of nearly 50 percent from 2003, the previously reported year.

Health Disparities in Influenza:

Hispanic children younger than 18 years of age account for 27 percent of 210 reported 2009 H1N1 influenza-associated deaths in the United States.³ Their representation in the US population is 21 percent.

Asthma

Asthma is a chronic breathing condition due to inflammation of the air passages in the lungs. Asthma affects the sensitivity of the nerve endings in the airways causing them to become easily irritated. During an asthma attack, the lining of these passages swell, causing the airways to narrow thereby reducing the flow of air in and out of the lungs. Asthma attacks can range in severity from mild to life-threatening. Clinical symptoms include coughing, shortness of breath, wheezing, and tightness or pain in the chest.

In 2009, 12.3 percent of San Diego County residents reported ever being diagnosed with asthma. The County age-adjusted asthma rates decreased slightly between 2001 and 2004, before increasing again in 2005. It then decreased again in 2006 and hit a new low in 2009.

Triggers of asthma attacks include:

- Allergens (like pollen, mold, animal dander, and dust mites)
- Exercise
- Occupational hazards
- Tobacco smoke
- Air pollution
- Airway infections

Some risk factors for developing asthma include:

- Demographic variables such as gender, age, race/ethnicity
- Educational level
- Income level
- Smoking
- Obesity

Asthma-Associated Costs:

In 2009, it was estimated that asthma-related costs exceeded \$56 billion dollars per year. The average yearly cost of care for a child with asthma was \$1,039 in 2009.

Asthma Prevalence:

U.S. age-adjusted prevalence rates for current diagnosed asthma for the year of 2010 were 8.6 percent, as compared to a rate of 7.3 percent in 2001. The state of California reported a rate of 7.7 percent for adults and 5.9 percent for children for the year of 2010.

During fiscal year 2013, Scripps engaged in the following respiratory disease prevention and treatment activities.

Hospitalized Patients Smoking Cessation Study

A total of 408 participants included in the Stay Quit Study, a partnership with the California Smokers Helpline. A total of 5,508 people have been screened for the study. The smoking cessation pilot and expanded study are respiratory disease prevention programs and respiratory therapists are central to the pilot, as well as to the larger NIH study. Many of the hospitalized smokers are admitted for pulmonary and respiratory diseases linked to smoking. (Sponsored by Scripps Mercy Hospital, Chula Vista.)

City Heights Wellness Center, Healthy Homes and Asthma Trigger Night Forum

Families with asthmatic children often face a number of challenges that can lead to anxiety, fear and conflict. The City Heights Wellness Center partnered with the Community Asthma Task Force (CAT Force) to present ways parents can overcome the many challenges presented by their child's condition. Topics included getting an asthma action plan from a doctor; recruiting school nurses and classroom teachers to follow the asthma action plan; ridding homes of mold, allergens and other asthma triggers; preventing asthma attacks and having homes or apartments renovated at no cost. (Sponsored by Scripps Mercy Hospital, Community Benefit Services.)

Fostering Volunteerism

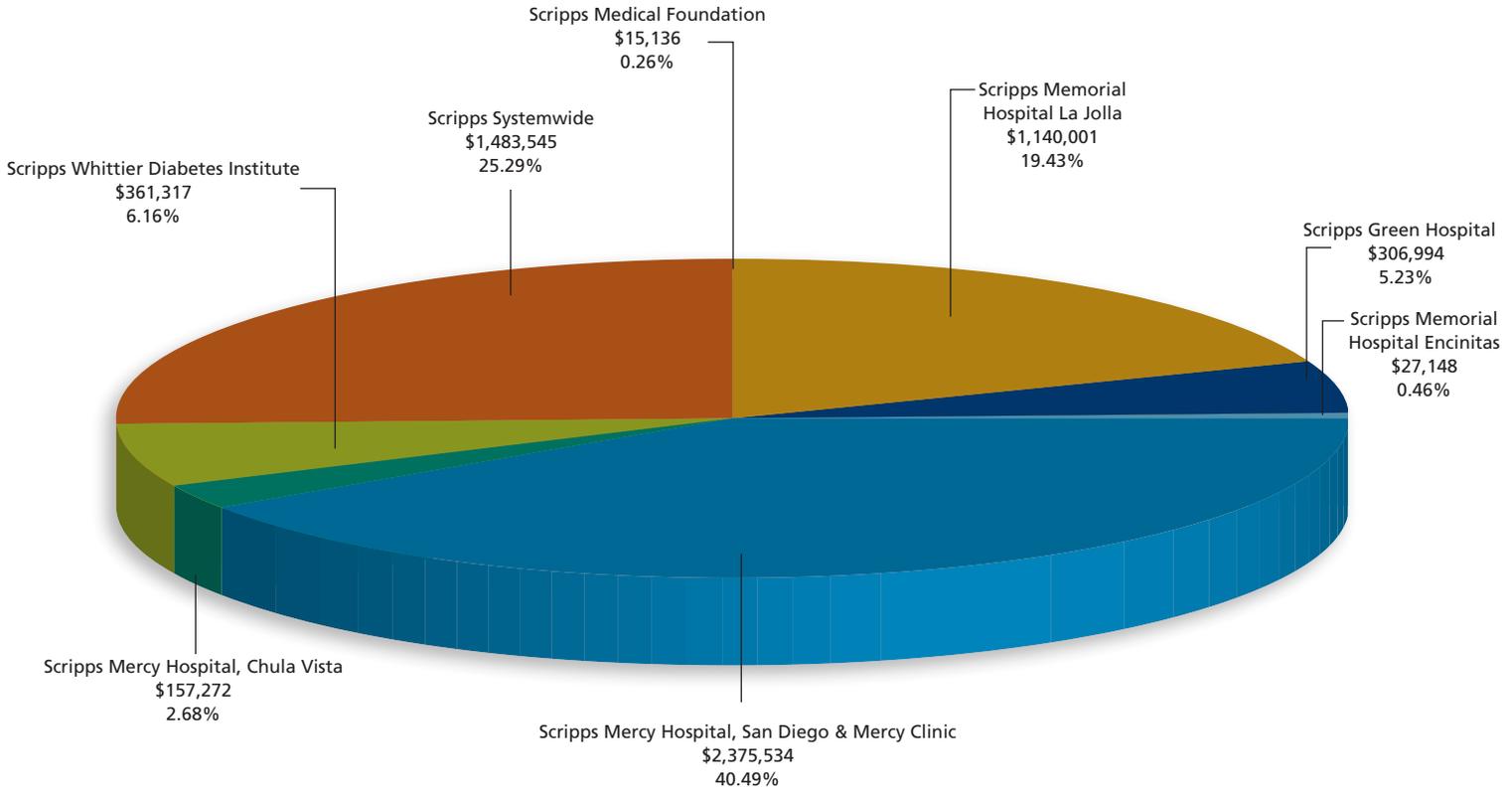
Scripps believes that health improvement begins when people take an active role in making a positive impact on their community. For this reason, Scripps supports volunteer programs for Scripps employees and affiliated physicians who want to make an even larger impact on their community. The ScrippsAssists employee volunteer club is one way Scripps matches the talents and interests of employees and physicians with community needs, such as mentoring partnerships with local schools and providing free medical and surgical care for patients in need.

In addition to the financial community benefit contributions made during fiscal year 2013, Scripps employees and affiliated physicians donated a significant portion of their personal time volunteering to support Scripps-sponsored community benefit programs. With close to 10,803 hours, the estimated dollar value of this volunteer labor is \$474,989.98, which is not included in the Scripps fiscal year 2013 community benefit programs and services totals.*

*Calculation based upon an average hourly wage for the Scripps Health system plus benefits.

FIGURE 4:1

FY13 Scripps Community Health Services by Operating Unit, \$5,866,944

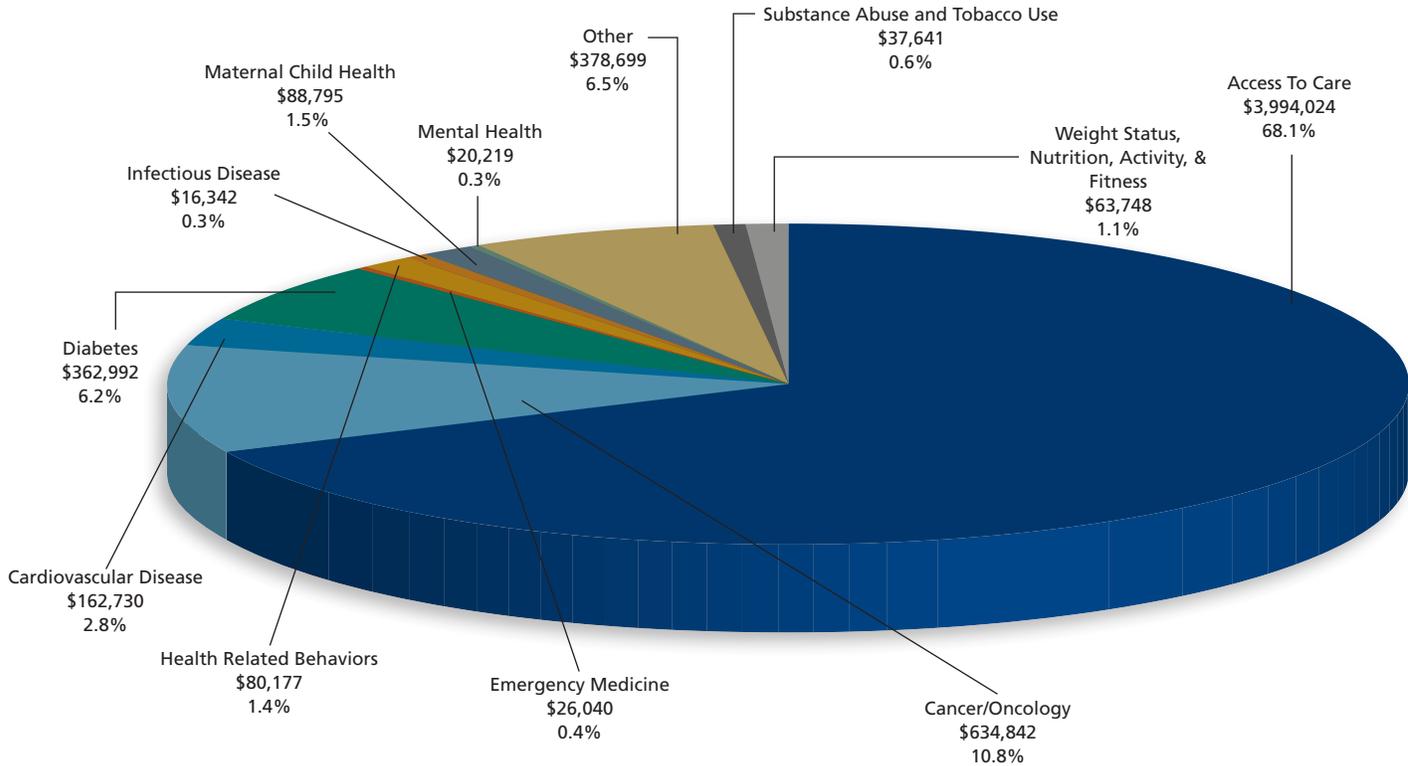


Community Health Services

These services include prevention and wellness programs, screenings, health education, support groups, health fairs and other programs supported by operational funds, grants and in-kind donations. Calculations are based on cost less direct offsetting revenue, which includes any revenue generated by the activity or program, such as payment or reimbursement for services provided to program patients. Direct offsetting revenue does not include restricted or unrestricted grants or contributions that the organization uses to provide community benefits. Community health services' expenses have increased substantially, beginning in fiscal year 2008, as Scripps does not offset for grants or contributions according to the Schedule H 990 IRS guidelines.

FIGURE 4:2

FY13 Scripps Community Health Services by Health Issue, \$5,866,944



Community Health Services

These services include prevention and wellness programs, screenings, health education, support groups, health fairs and other programs supported by operational funds, grants and in-kind donations. Calculations are based on cost less direct offsetting revenue, which includes any revenue generated by the activity or program, such as payment or reimbursement for services provided to program patients. Direct offsetting revenue does not include restricted or unrestricted grants or contributions that the organization uses to provide community benefits. Community health services' expenses have increased substantially, beginning in fiscal year 2008, as Scripps does not offset for grants or contributions according to the Schedule H 990 IRS guidelines.

SCRIPPS COMMUNITY HEALTH SERVICES

COMMUNITY BENEFIT SERVICES SUMMARY LIST

FY13 COMMUNITY HEALTH IMPROVEMENT SERVICES AND COMMUNITY BENEFIT OPERATIONS

Program Title	Volunteer Hours	Staff Hours	Financial Support*	Persons Served
Advanced Cardiac Life Support Heartcode	N/A	13	\$1,200	11
American Cancer Society Making Strides Against Breast Cancer	N/A	5	\$9,461	30,788
Base Hospital Continuing Education Session Emergency Room Trauma	N/A	1	\$48	1
Be The Match Bone Marrow Donation Registration	N/A	6	\$895	21
Beach Area Community Court Program	17	9	\$848	307
Bereavement Support Group Encinitas	N/A	28	\$1,297	93
Blood Drives for the American Red Cross	N/A	7,775	\$71,110	2,997
Breast Cancer Education and Support Group	N/A	87	\$8,713	454
Breastfeeding Support Groups - Scripps La Jolla Community Benefit Services	N/A	1,954	\$187,646	3,157
Cancer Center Heredity and Cancer Genetic Counseling Program	N/A	1,201	\$92,124	67
Cancer Center Nutrition Program	N/A	105	\$9,111	6
Cancer Center Outpatient Social Worker and Liaison Program	N/A	899	\$68,986	43
Cancer Center Registered Nurse Navigator Program	N/A	961	\$69,758	307
Cancer Center Support Groups	N/A	N/A	\$1,480	10
Cancer Center Transportation Program	N/A	884	\$66,168	52
Cancer Support Services and Educational Materials	5	2,044	\$164,871	112
Cardiac Education Programs	N/A	6	\$357	6
Cardiac Treatment Center Group Exercise Programs	N/A	787	\$31,300	3,868
Caring for Loved Ones with Dementia	N/A	N/A	\$422	70
Central Region Public Health Nurses	N/A	N/A	\$0	233

*" FINANCIAL SUPPORT" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer labor hours. In some instances, an entire community benefit program cost center has been divided between several initiatives. Categories are broken down in alignment with the new Schedule H 990.

Program Title	Volunteer Hours	Staff Hours	Financial Support*	Persons Served
City Heights Wellness Center Community Health Education	N/A	1,951	\$97,030	6,184
City Heights Wellness Center Health Care Support Services	N/A	345	\$18,373	1,251
Community Based Clinical Services	N/A	2	\$188	500
Community Health Education Programs	17	970	\$63,333	26,533
CPR Classes for Patients and Families of the Cardiac Treatment Center	N/A	16	\$1,365	27
CPR, Life Support, and Emergency Preparedness Courses	N/A	611	\$648	741
CPR/AED for Professional Rescuers and Health Care Providers	N/A	2	\$806	2
Diabetes Education Outreach Events	N/A	3,313	\$59,915	1,182
Disaster Preparedness Mobile Field Hospital Exercise	N/A	1,032	\$143,120	N/A
Emergency Medical Responder Training Course	N/A	40	\$16,110	182
Emergency Response and CPR/AED for the Professional Rescue and Health Provider Course	N/A	4	\$107	N/A
Eric Paredes Save a Life Foundation	N/A	3	\$826	300
Eric Paredes Save a Life Foundation Health Screenings	N/A	391	\$53,502	2,991
Family Health Centers of San Diego Spirit of the Barrio	N/A	1	\$275	400
Fiji Alliance	300	N/A	\$0	750
First Aid for Public Safety Personnel Course	N/A	5	\$1,812	5
HASD&IC Needs Assessment	N/A	240	\$51,205	N/A
Health and Wellness - Scripps Home Health Services	N/A	23	\$1,643	125
Health Education and Support Groups	14	976	\$71,173	666
HeartSaver CPR, AED, and Basic First Aid Course	N/A	35	\$492	20
Hepatitis C Support Group	N/A	60	\$5,626	60
Juvenile Diabetes Research Foundation Walk	N/A	N/A	\$186	N/A
Lebed Method - Focus on Healing Through Movement and Exercise	N/A	48	\$2,964	212
** " FINANCIAL SUPPORT" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer labor hours. In some instances, an entire community benefit program cost center has been divided between several initiatives. Categories are broken down in alignment with the new Schedule H 990.				

Program Title	Volunteer Hours	Staff Hours	Financial Support*	Persons Served
Managing Pelvic Health	3	3	\$185	12
Maternal and Child Health - Community Health Education Breast Health Programs	N/A	1,095	\$10,593	3,873
Maternal and Child Health - Community Health Education Programs	N/A	1,264	\$2,503	497
Maternal and Child Health - Community Based Clinical Breast Health Programs	N/A	N/A	\$0	4,431
Maternal and Child Health - Health Care Support Services Programs	N/A	1,264	\$2,503	370
Mercy Outreach Surgical Team (MOST)	640	1,498	\$298,373	397
Nine Girls Ask? for a cure for Ovarian Cancer	N/A	15	\$1,482	600
Nutrition Education Class	N/A	13	\$419	36
Official Physical Therapy Sportsmed Crew for Susan G. Komen 3-Day For The Cure Breast Cancer Walk	25	316	\$19,381	2,500
Organ Transplant Support Groups	N/A	2,156	\$5,254	1,085
Parent Connection	N/A	203	\$8,754	310
Parent Connection Community Resource Fund	N/A	20	\$841	30
Perinatal Education Classes - Scripps La Jolla Community Benefit Services	60	1,434	\$68,028	1,803
Prescription Drug Take Back Day	64	64	\$4,263	5,000
Project Dulce Diabetes Clinical Services	N/A	9,697	\$251,219	4,956
Project Dulce Diabetes Education	N/A	1,937	\$50,183	990
Rehabilitation Parkinson's Class and Stroke Exercise	N/A	103	\$6,340	740
San Diego Brain Injury Foundation	N/A	N/A	\$788	93
San Diego Festival of Science and Engineering	38	44	\$9,163	1,000
Scripps Green Hospital Medical Library	N/A	N/A	\$263,665	N/A
Scripps Health System Community Benefit Planning and Outreach	N/A	2,899	\$222,245	N/A
Scripps Memorial Hospital La Jolla Medical Library	N/A	2,089	\$135,415	N/A
Scripps Mercy Behavioral Health Services	40	195	\$15,695	3,405
Scripps Mercy Hospital Chula Vista Community Benefit Planning and Outreach	N/A	N/A	\$33,349	N/A

* " FINANCIAL SUPPORT" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer labor hours. In some instances, an entire community benefit program cost center has been divided between several initiatives. Categories are broken down in alignment with the new Schedule H 990.

Program Title	Volunteer Hours	Staff Hours	Financial Support*	Persons Served
Scripps Mercy Hospital, Chula Vista Rehabilitation Programs	N/A	204	\$12,810	253
Scripps Mercy Hospital, Chula Vista Senior Programs	N/A	226	\$9,669	311
Scripps Mercy Hospital, Chula Vista Stroke Programs	12	12	\$949	150
Scripps Mercy Hospital, Chula Vista Youth Programs	N/A	1,445	\$60,005	655
Scripps Mercy Hospital Community Benefit Planning and Outreach	N/A	1,917	\$169,413	N/A
Scripps Mercy Hospital, San Diego Medical Library	N/A	2,482	\$210,238	N/A
Scripps Polster Breast Care Center Education Seminars	N/A	2	\$109	4
Scripps Polster Breast Care Center Support Groups	N/A	53	\$5,558	149
Scripps Recuperative Care Program	N/A	80	\$176,024	18
SDSU Student Nurses	N/A	N/A	\$0	275
Senior Flu Shot Clinic	N/A	232	\$10,716	110
Strike Out Stoke	N/A	80	\$6,608	1,100
Stroke and Brain Injury Support and Education Group	N/A	46	\$2,339	328
Stroke Information and Blood Pressure Screenings	4	12	\$894	68
Survivors of Suicide Loss	N/A	N/A	\$270	225
Trauma Community Health Education	N/A	12	\$1,130	N/A
Trauma Community Health Improvement Services	N/A	22	\$7,061	250
Trauma Health Education	N/A	6	\$609	12
Trauma Health Improvement Services and Health Education	35	34	\$18,525	4,250
Understanding Alzheimer's and Dementia	N/A	15	\$4,939	215
Walk to End Alzheimer's	N/A	N/A	\$8,983	3,800
Women, Infants, and Children (WIC) Community Health Education	223	35,965	\$1,426,369	100,380
Women's Health EXPO	20	154	\$23,433	125
Young Leaders in Health care	32	24	\$4,597	375
<p>* " FINANCIAL SUPPORT " reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer labor hours. In some instances, an entire community benefit program cost center has been divided between several initiatives. Categories are broken down in alignment with the new Schedule H 990.</p>				

Program Title	Volunteer Hours	Staff Hours	Financial Support*	Persons Served
TOTAL FY13 COMMUNITY HEALTH IMPROVEMENT SERVICES AND COMMUNITY BENEFIT OPERATIONS	1,549	95,292	\$4,940,603	230,199

* " FINANCIAL SUPPORT" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer labor hours. In some instances, an entire community benefit program cost center has been divided between several initiatives. Categories are broken down in alignment with the new Schedule H 990.

FY13 SUBSIDIZED HEALTH SERVICES

Program Title	Volunteer Hours	Staff Hours	Financial Support*	Persons Served
Mercy Clinic, Scripps Mercy Hospital	N/A	N/A	\$3,122,033	N/A
Mercy Inpatient Behavioral Health	N/A	N/A	\$2,045,058	N/A
Mercy Outpatient Behavioral Health	N/A	N/A	\$2,504,448	N/A
Scripps Mercy Behavioral Health A-Vision Services Program	N/A	N/A	\$207,820	N/A
TOTAL FY13 SUBSIDIZED HEALTH SERVICES	N/A	N/A	\$7,879,359	N/A

*" FINANCIAL SUPPORT" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer labor hours. In some instances, an entire community benefit program cost center has been divided between several initiatives. Categories are broken down in alignment with the new Schedule H 990.

FY13 CASH AND IN-KIND DONATIONS

Program Title	Volunteer Hours	Staff Hours	Financial Support*	Persons Served
2-1-1 San Diego Annual Fundraising Event	N/A	N/A	\$5,000	N/A
Aloha Locks Cancer Wig Program	N/A	137	\$11,678	8
Alzheimer's Association	N/A	N/A	\$32,000	N/A
American Cancer Society Making Strides Against Breast Cancer Sponsorship	N/A	N/A	\$15,000	N/A
American Heart Association Heart Walk In-Kind Donation	N/A	N/A	\$30,481	N/A
American Heart Association Heart Walk Sponsorship	N/A	N/A	\$10,000	N/A
American Heart Association Saving Strokes Sponsorship	N/A	N/A	\$1,000	N/A
B'Nai B'rith International	N/A	N/A	\$7,500	N/A
California Health Foundation and Trust (CHFT) Donation	N/A	N/A	\$540,418	N/A
Chelsea's Light Foundation	N/A	N/A	\$25,000	N/A
Community Benefit Cash Donations	N/A	N/A	\$2,000	N/A
Community Benefit Fund - 2-1-1 San Diego	N/A	N/A	\$15,000	N/A
Community Benefit Fund - Catholic Charities	N/A	N/A	\$5,833	N/A
Community Benefit Fund - Legal Aid Society of San Diego - Consumer Center for Health Education and Advocacy (CCHEA)	N/A	N/A	\$120,000	N/A

Program Title	Volunteer Hours	Staff Hours	Financial Support*	Persons Served
Community Health Improvement Partners Crew Rendezvous	N/A	N/A	\$7,000	N/A
CONNECT Foundation	N/A	N/A	\$5,000	N/A
Donated Room Space for Non-For-Profit Organizations	N/A	59	\$44,366	8,135
e3 Civic High School	N/A	N/A	\$997	N/A
Eric Paredes Save a Life Foundation	N/A	N/A	\$15,000	N/A
Greater La Jolla Meals on Wheels	N/A	N/A	\$2,827	14,998
In-Kind Donations	N/A	63	\$3,339	205
Jewish Family Services Embrace A Family	N/A	N/A	\$0	143
Just Call Us Volunteers	N/A	N/A	\$850	N/A
Operation Home Front Adopt A Family Holiday Program	N/A	N/A	\$0	238
Operation Santa	N/A	N/A	\$0	38
San Diego Festival of Science and Engineering Sponsorship	N/A	N/A	\$5,000	N/A
San Diego Public Library Foundation	N/A	N/A	\$10,000	N/A
Scripps Mercy Hospital Administration	N/A	N/A	\$300	N/A
Stand Up to Cancer (SU2C) San Diego Padres Foundation Sponsorship	N/A	N/A	\$5,000	N/A
Susan G. Komen 3 Day Breast Cancer Walk	N/A	N/A	\$315	16
Susan G. Komen Race for the Cure	N/A	N/A	\$5,437	545
TOTAL FY13 CASH AND IN-KIND DONATIONS	N/A	259	\$926,342	24,326
TOTAL FY13 COMMUNITY HEALTH SERVICES	1,549	95,551	\$13,746,304	254,525

*" FINANCIAL SUPPORT" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer labor hours. In some instances, an entire community benefit program cost center has been divided between several initiatives. Categories are broken down in alignment with the new Schedule H 990.

FY13 COMMUNITY BUILDING ACTIVITIES

Program Title	Volunteer Hours	Staff Hours	Financial Support*	Persons Served
American Heart Association Heart Walk	5,129	5,550	\$312,842	1,700
American Heart Association Saving Strokes	N/A	18	\$1,307	75
CHIP Committees and Work Teams	N/A	35	\$3,297	N/A
City Heights Wellness Center Coalition Building	N/A	692	\$13,331	1,675
City Heights Wellness Center Community Support	N/A	1,087	\$57,961	3,788
City Heights Wellness Center Health Advocacy Project	N/A	304	\$749	591
Community Health Improvement Partners (CHIP)	N/A	75	\$25,568	N/A
Disaster Preparedness Community Outreach and Education	3	203	\$17,568	129
Economic Development	N/A	445	\$66,041	N/A
Foundation of the American College of Healthcare Executives	N/A	N/A	\$25,000	N/A
Health Care Public and Government Advocacy	N/A	2,240	\$401,695	N/A
In Lieu of Funds	N/A	N/A	\$1,339,757	N/A
Latinos y Latinas en Accion	N/A	N/A	\$900	320
San Diego Nursing Service/Education Consortium	N/A	N/A	\$1,500	N/A
Scripps Mercy Hospital Chula Vista Community Building	N/A	1,443	\$34,187	744
Scripps Military Mentoring Initiative	120	485	\$30,272	7
Trauma Coalition Building	N/A	47	\$4,428	N/A
TOTAL FY13 COMMUNITY BUILDING ACTIVITIES	5,252	12,625	\$2,336,403	9,029

*" FINANCIAL SUPPORT" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer labor hours. In some instances, an entire community benefit program cost center has been divided between several initiatives. Categories are broken down in alignment with the new Schedule H 990.

Community Building Activities, Bad debt and Medicare shortfall do not count as Community Benefits under the new Schedule H 990 but are still reportable outside the community benefit table.

Professional Education and Health Research

Quality health care is highly dependent upon health education systems and medical research programs. Without the ability to train and inspire a new generation of health care providers, or to offer continuing education to existing health care professionals, the quality of health care will be greatly diminished. Medical research also plays an important role in improving the community's overall health by developing new and innovative treatments.

Each year, Scripps allocates resources to advance health care services through clinical research, medical education and health professional education. During fiscal year 2013 (October 2012 to September 2013), Scripps invested \$37,652,958¹ in professional training programs and clinical research to enhance service delivery and treatment practices in San Diego County. This section highlights some of our professional education and health research activities.

Figure 5:1 and Figure 5:2 on the following pages have a more detailed overview of the fiscal year 2013 Scripps Professional Education and Health Research distribution.

(Refer to Scripps Professional Education and Health Research Summary for an individual breakdown of each activity, page 70-72.)

¹ Reflects clinical research as well as professional education for non-Scripps employees, including graduate medical education, nursing resource development and other health care professional education. Research primarily takes place at Scripps Clinical Research Services, Scripps Whittier Diabetes Institute, Scripps Genomic Medicine and Scripps Translational Science Institute.

Health Professions Training

Internships

Scripps' commitment to ongoing learning and health care excellence extends beyond our organization. Our internship programs help promote health care careers to a new generation, shape the future workforce and develop future leaders in our community.

Interacting with health care professionals in the field expands education outside the classroom. Scripps staff play an important role as preceptors by investing their time to create a valuable experience for the community. In fiscal year 2013, Scripps hosted 1,884 interns within our system and provided 256,773 development hours spanning nursing and ancillary settings. Table 5:1 provides a breakdown of interns by Scripps facility.

Figure 5:1 Scripps Health Internships for FY13

Scripps Health Location	Nursing			Ancillary		Total	
	Students	Group Hours	Precepted Hours	Students	Hours	Students	Hours
Scripps Green Hospital	94	7,719	5,566	53	10,678	147	23,963
Scripps Health Administrative Services	0	0	0	6	240	6	240
Scripps Home Health	1	0	48	5	300	6	348
Scripps Integrative Medicine	0	0	0	2	150	2	150
Scripps Medical Foundation (Clinic & SCMC)	30	0	2,252	114	23,318	144	25,570
Scripps Memorial Hospital La Jolla	574	37,178	14,619	62	14,183	636	65,980
Scripps Memorial Hospital Encinitas	123	9,973	468	66	15,056	189	25,497
Scripps Mercy Hospital, Chula Vista	165	24,546	2,669	70	13,298	235	40,513
Scripps Mercy Hospital, San Diego	435	51,777	6,021	84	15,292	519	73,090
Total	1,422	131,193	31,643	462	92,515	1,884	256,773

College and University Affiliations

Scripps collaborates with local high schools, colleges and universities to help students explore health care roles and gain firsthand experience as they work with Scripps professionals. Scripps is affiliated with more than 90 schools and programs, including clinical and nonclinical partnerships. Local schools include, but are not limited to, Point Loma Nazarene University (PLNU), University of California San Diego (UCSD), California State University San Marcos (CSUSM), San Diego State University (SDSU), University of San Diego (USD), Mesa College, San Diego City College, Grossmont College and Mira Costa College.

Scripps is regularly accepting new partnerships, based on community and workforce needs, and established an affiliation agreement committee to review all requests and provide a systemwide approach to securing new student placements. This interdisciplinary committee represents education and department leadership across the Scripps system, ensuring a proactive approach to building a career pipeline for top talent.

Research Students

Scripps supports graduate research for masters and doctoral students at universities with affiliation agreements. Scripps Center for Learning & Innovation oversees the student placement process. Non-physician students who conduct research at Scripps represent a variety of health care disciplines, including public health, physical therapy, pharmacy and nursing.

In fiscal year 2012, Scripps research included students from USD, Western Governors, SDSU, PLNU and postdoctoral pharmacy residency programs, including the PGY1 Pharmacy Residency Program.

College Collaborations

Scripps partnered with PLNU to create health care focus courses, including health care finance and health care operations. PLNU students (non-Scripps employees) may elect to take these courses toward their MBA.

High School Programs

Scripps is dedicated to promoting health care as a rewarding career, collaborating with a number of high schools to offer students opportunities to explore a role in health care and gain firsthand experience working with Scripps health care professionals. Here is a summary of the high school programs Scripps made available to the community.

Scripps High School Exploration Program and Regional Allied Health and Science Initiative (RAHSI)

This program reaches out to San Diego high school students interested in exploring a career in health care. In fiscal year 2013, Scripps hired 32 students to participate in the program. During their paid five-week rotation, the students work in different departments, exploring career options and learning valuable life lessons about health and healing.

UC High School Collaboration

UC High School and Scripps partnered to provide a real-life context to the school's "Health Care Essentials" course. For fiscal year 2013, 10 students were selected to rotate through three different Scripps locations, during the spring semester, to increase their awareness of health care careers. UC High students visited Scripps Mercy, San Diego, Scripps Memorial Hospital La Jolla and Scripps Green. The students were able to view surgeries and shadow health care professionals in the emergency department, cardiology, food services, physical therapy and trauma.

Young Leaders in Health Care

An outreach program at Scripps Memorial Hospital Encinitas, Young Leaders in Health Care targets local high school students interested in exploring health care careers. Students, grades 9–12, participate in the program, which provides a forum for high school students to learn about the health care system and its career opportunities. This combined experience includes weekly meetings at local schools facilitated by teachers and advisors, as well as monthly meetings at Scripps Encinitas. The program mentors students on leadership and provides tools for daily life challenges. Young Leaders in Health Care also includes a service project to meet high school requirements and make a positive impact on the community. The program closes the year with a presentation aligned with the yearly focus. More than 100 students, community members and health care specialists attended the Young Leader in Health Care final meeting, culminating with student presentations on sports injuries and prevention.

WorkAbility

Scripps partners with the San Dieguito Academy WorkAbility Program, which educates students and the community on health care career opportunities. Scripps provides firsthand tours of hospital facilities and educates participants about the complexities of hospital operations. The program is designed to provide pre-employment skills development, worksite training and follow-up services for youth (ages 12–22) with special needs who are making the transition from school to work. While students get classroom training, Scripps partners with the program to provide on site career training. In fiscal year 2013, two students participated in the program at Scripps Green Hospital and Scripps Memorial Hospital Encinitas.

New Graduate Residency Program

Designed for the newly graduated registered nurse (RN), this innovative program improves patient care quality and safety during the first year on the job. By training new nurses and building confidence at the bedside, the program helps make the initial year of a nurse's career a launch pad to success.

Military Mentorship

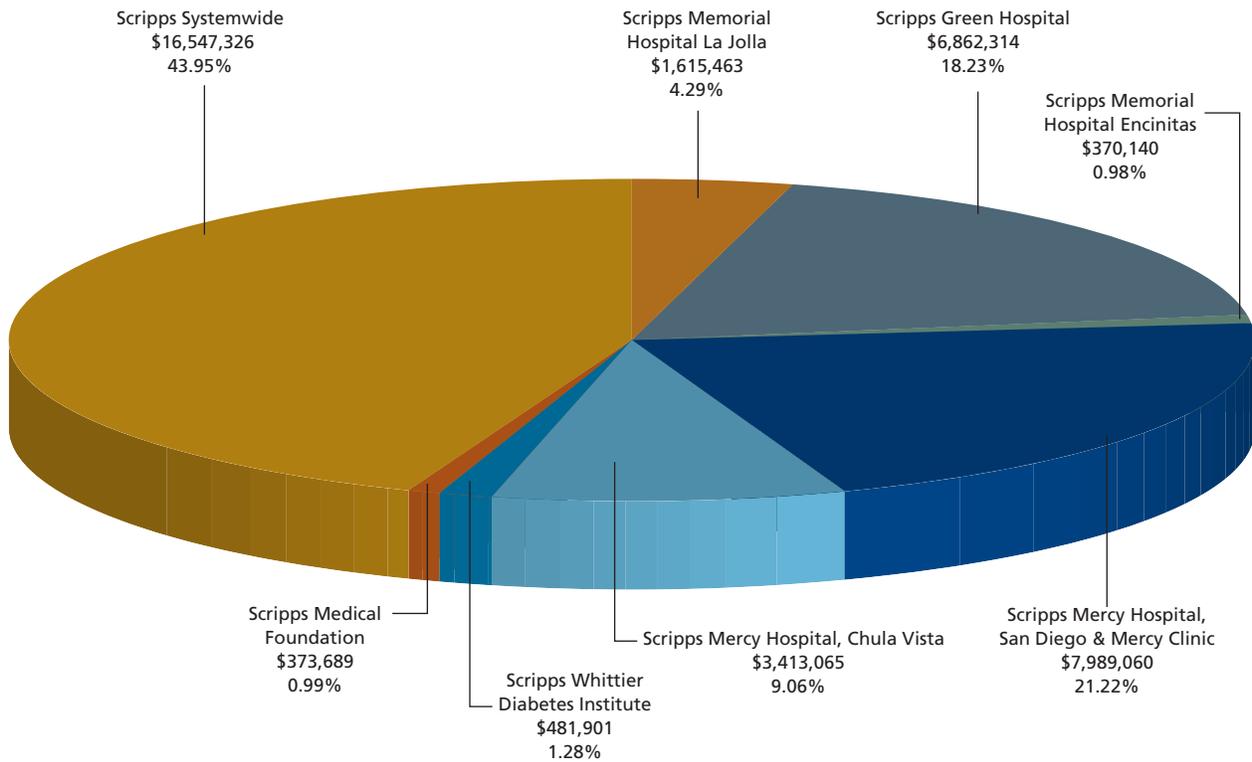
Scripps has partnered with Marine Corps Base Camp Pendleton and the Carlsbad Chamber of Commerce to provide job-shadowing experiences to active military members and their spouses as they prepare for discharge from the military.

The program is called "Military Mentoring Initiative," and its mission is to help active veterans learn about the business world so they can navigate their way toward successful careers. The goal is to have military members gain firsthand exposure in the civilian workforce through job-shadowing prior to their discharge from service. Military members are allowed up to 30 days of paid temporary assignment to be mentored to help them determine which occupations are a good fit, which companies and positions to apply for in their future, and what further education or training is needed to achieve their career goals.

Scripps hosted seven Marines throughout our hospitals. The Marines shadow various health care professions including physical therapists, nurses, physicians, and biomedical engineers. At the end of their shadowing rotation, the Marines meet with the talent development program to discuss their academic plan once they transition out of the military to start their second career in health care.

FIGURE 5:2

**Scripps Professional Education and Health Research
by Operating Unit, \$37,632,958**



Professional Education and Health Research

This table reflects clinical research, as well as professional education for non-Scripps employees, including graduate medical education, nursing resource development and other health care professional education. Research takes place primarily at Scripps Clinical Research Services, Scripps Whittier Diabetes Institute, Scripps Genomic Medicine and Scripps Translational Science Institute. Calculations are based on total program expenses less applicable direct offsetting revenue. Expenses are not offset by grant revenue or restricted funds according to the Schedule H 990 IRS guidelines.

SCRIPPS PROFESSIONAL EDUCATION AND HEALTH RESEARCH

COMMUNITY BENEFIT SERVICES SUMMARY LIST

FY13 PROFESSIONAL EDUCATION

Program Title	Volunteer Hours	Staff Hours	Financial Support*	Persons Served
Cancer Center Oncology Nursing Education Program	N/A	4,020	\$321,637	222
Clinical Rotations	N/A	51,023	\$3,703,436	N/A
Emergency Professionals Training	N/A	1,680	\$109,343	830
Health Professional Education	180	397	\$16,402	768
Neonatal Resuscitation Program	N/A	36	\$930	12
Nurses Now	N/A	N/A	\$0	164
Pharmacy Residency	N/A	10,694	\$511,174	N/A
Professional Education Diabetes Programs	N/A	2,194	\$229,724	253
Scripps High School Exploration Program	N/A	1,125	\$55,958	30
Scripps Mercy Health Professionals Training	3,428	1,480	\$57,252	660
St. Leo's Mission Medical Clinic	142	3,463	\$5,132	629
St. Vincent de Paul Village Medical Clinic and Mid City Clinic	182	4,439	\$6,577	310
Trauma Physicians Medical Education	70	14	\$6,710	1,500
UC High School Exploration Program	N/A	595	\$29,808	10
TOTAL FY13 PROFESSIONAL EDUCATION	4,002	81,160	\$5,054,082	5,388

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FY13 GRADUATE MEDICAL EDUCATION

Program Title	Volunteer Hours	Staff Hours	Financial Support*	Persons Served
Scripps Family Medicine Residency Program	N/A	64,771	\$2,673,840	N/A
Scripps Green Hospital Department of Graduate Medical Education	N/A	147,951	\$6,502,742	N/A
Scripps Mercy Hospital's GME Program	N/A	156,773	\$6,216,570	N/A
TOTAL FY13 GRADUATE MEDICAL EDUCATION	N/A	369,495	\$15,393,152	N/A

FY13 HEALTH RESEARCH

Program Title	Volunteer Hours	Staff Hours	Financial Support*	Persons Served
Cancer Registry	N/A	23,137	\$1,304,184	N/A
Clinical Research Services	N/A	83,398	\$8,084,482	N/A
Community Health Research - Smoking Cessation Study	N/A	2,254	\$93,842	5,658
LVAD National Registry Research - Congestive Heart Failure	N/A	N/A	\$0	8
Research: AAST Vascular Trauma Registry-Pro prospective Observational Vascular Injury Trial (PROOVIT)	N/A	17	\$1,602	N/A
Research: Blast Injuries and Gunshot Wounds of the Face	N/A	511	\$33,525	N/A
Research: Comorbidities and Injury: Implications and Impact on Outcome on Trauma Patients	N/A	383	\$25,558	N/A
Research: Consortium of Leaders in the Study of Traumatic Thromboembolism	N/A	80	\$6,145	N/A
Research: Effect of Specialty Training on Outcome of Operative Management of Extremity Vascular Trauma	N/A	68	\$5,935	N/A
Research: Impact of a More Conservative Approach to CT Scanning	N/A	716	\$51,465	N/A
Research: Is the Difference in Trauma Patient Mortality Between the Insured and the Uninsured Due to Co-Morbid Conditions?	N/A	1	\$94	N/A
Research: Measuring Workload at a Level I Trauma Center	N/A	41	\$3,752	N/A

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Program Title	Volunteer Hours	Staff Hours	Financial Support*	Persons Served
Research: The Impact of Comfort Care on the Trauma Service	N/A	769	\$61,124	N/A
Research: The Path to the OR-The Need for CT Scan of the Torso in Trauma Patients Requiring Laparotomy	N/A	222	\$14,527	N/A
Research: The Potential Mortality and Morbidity in Elderly Trauma Patients on Pre-Injury Direct Thrombin Inhibitor Therapy	N/A	333	\$22,810	N/A
Research: The Value of Ultrasound Imaging Surveillance for Venous Thromboembolic Disease in Trauma Patients	N/A	828	\$54,778	N/A
Research: Thoracic Endovascular Repair vs. Open Surgery for Blunt Aortic Injury	N/A	35	\$2,538	N/A
Research: Traumatic Brain Injury in Patients on ACAP Agents	N/A	804	\$58,170	N/A
Research: Trends in Trauma-Related Morality in the US from 2002-2010	N/A	150	\$10,254	N/A
Research: Trial of Effectiveness of Screening and Brief Intervention for Drug Users in the Trauma and Emergency Departments	N/A	3	\$283	N/A
Research: Venous Thromboembolic Prophylaxis after Major Trauma: A Randomized Controlled Trial of Three Times a Day Unfractionated Heparin versus Enoxaparin	N/A	535	\$42,959	N/A
Research: Venous Thromboembolism Multicenter Trauma Registry	N/A	109	\$8,608	N/A
Scripps Genomics Medicine and Translational Research	N/A	50,421	\$7,066,912	N/A
Scripps Whittier Diabetes Research	N/A	8,906	\$252,177	N/A
TOTAL FY13 HEALTH RESEARCH	N/A	173,722	\$17,205,724	5,666
TOTAL FY13 PROFESSIONAL EDUCATION AND HEALTH RESEARCH	4,002	624,377	\$37,652,958	11,054

*" FINANCIAL SUPPORT" reflects the cost (labor, supplies, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer labor hours. In some instances, an entire community benefit program cost center has been divided between several initiatives. Categories are broken down in alignment with the new Schedule H.

Scripps Memorial Hospital La Jolla

About Scripps Memorial Hospital La Jolla

Located in North Central San Diego County, Scripps Memorial Hospital La Jolla provides health care services for 19.5 percent of the inpatient population living in the hospital's 50 percent service area. Today, the hospital has 382 licensed beds and more than 2,181 employees.

Scripps La Jolla provides a wide range of clinical and surgical services, including intensive care, interventional cardiology and radiology, radiation oncology, cardiothoracic and orthopedic services, neurology, ophthalmology, and mental health and psychology services, as well as skilled nursing. As one of six designated trauma centers and one of 19 emergency departments in San Diego County, Scripps La Jolla is a critical part of the county's emergency service network.

Within the hospital's service area, Scripps La Jolla cares for 19.6 percent of Medicare patients, 7.0 percent of Medi-Cal patients, 22.3 percent of commercially insured patients and 16.4 percent of patients with other payment sources, including self-pay and charity care.

In addition to acute care services, a wide range of specialty services and programs are located on the hospital's campus, including the Cardiac Treatment Center, Imaging Center, Scripps Whittier Diabetes Institute and Scripps Polster Breast Care Center.

Distinguishing Programs and Services

- Crivello Cardiovascular Center
- Emergency Department
- Gamma Knife Center of San Diego
- Neonatal Intensive Care Nursery (operated by Rady Children's Hospital)
- Scripps Polster Breast Care Center
- Scripps Center for Women's Health
- Scripps Drug And Alcohol Treatment Center
- Scripps Mende Well Being Center
- Scripps Mericos Eye Institute
- Scripps Cancer Care (programs/services referenced in section 12)
- Trauma Center

Scripps Memorial Hospital La Jolla

2014 Community Benefit Plan, Fiscal Year 2014

The Scripps La Jolla 2014 Community Benefit Plan describes the overall Scripps community benefit goal and the hospital's objectives and strategies to support community health during fiscal year 2014 (October 2013 to September 2014).

The Scripps 2014 Community Benefit Goal

Make a measurable impact on the health status of the community through improved access to care, health improvement programs, and professional education and health research.

Scripps La Jolla Fiscal Year 2014 Community Benefit Objectives

Community Health Services

Cancer Outreach, Education and Support

The Scripps Polster Breast Care Center will offer a series of breast health education, support and treatment programs including:

- Continuing to offer a metastatic support group as an additional benefit for existing community support services.
- Continuing to provide education and support services for those who are experiencing, or are at risk for, lymphedema.
- Continuing to provide education and support for breast health by participating in community events and health fairs.
- Continuing to support the volunteer "Breast Buddy" support program, matching newly diagnosed breast cancer patients with breast cancer survivors trained to mentor.
- Supporting Young Women's Support Group bimonthly meetings for women under 40 in continuation of a Young Women's Survivor Coalition (YSC), San Diego Chapter. Funding assistance is given to YSC community education.
- Provide a "Music as Medicine" series to enhance the healing process for cancer patients. This community program will be offered free of charge to cancer patients and their loved ones.

Scripps Cancer Care

- Continue to offer genetic counseling and cancer risk assessment for individuals at high risk for hereditary and familial cancer syndromes, including education and assessment of family history and genetic testing based on the evaluation.
- Provide education outreach to physicians on the genetic risks associated with breast, ovarian and hereditary cancers.

- Outpatient oncology social worker provides psychosocial support services and community resources for individuals diagnosed with cancer, their family members, caregivers and health care workers in conjunction with other health care providers.
- Outpatient social worker provides counseling services and resource information to address emotional and social distress, including needs and risk assessments, transportation resources, financial and assistance programs and benefits, housing issues, and the challenges before, during, and after diagnosis and treatment.
- Continue to provide wig, head wrap and appearance programs with support from Aloha Locks.
- In conjunction with rehabilitation services, continue to support education and exercise classes, focusing on healing and recovery.
- In conjunction with Scripps Whittier Diabetes Institute, continue to support education and nutritional counseling for cancer treatment and recovery.
- Continue to work with community to develop patient cancer navigator role. Patient navigator provides clinical education and distributes resource information to both patients and their families.
- Continue to provide and develop evidence-based nursing continuing education curriculum based on community needs assessment that includes hospital staff, ancillary offices and other nurses in the community.
- Continue to foster relationships and participate with professional organizations and community outreach organizations at both the local and national level.
- Continue to foster academic affiliation and student support through preceptor experiences.
- Plan and develop community-based informational and celebratory events specific to patient populations and community needs.
- In conjunction with Community Health, participate in La Jolla events, such as Women's Health Expo and survivor breakfast and luncheons.
- Provide community support and education through gynecological support group, twice a month.

General Health Education and Wellness Initiatives

- Continue to sponsor community-based support groups for Partners for Adoption, parenting, Parkinson's, bereavement, breastfeeding, cardiac, cancer, ostomy, lymphedema, bariatrics, joint replacement, ovarian cancer, Multiple Sclerosis, Compassionate Friends, mental health, nutrition, postpartum depression, Huntington's, spine surgery, chronic pain, parenting and grandparenting, CPR and babysitting safety, Stroke Exercise, Parkinson's Voice Class, Parkinson's Exercise Class Dysphagia Education, and diabetes patients at the Scripps Mende Well Being Center and at Scripps Memorial Hospital La Jolla.
- Provide meeting space at the Scripps Mende Well Being Center for community groups, such as Mothers of Twins, Parent Connection, Everyone a Reader, San Diego City Schools, San Diego County Social Workers and Mental Health Alliance.

- Offer 30 to 40 educational programs on orthopedics, diabetes, osteoporosis, macular degeneration and other ophthalmological conditions, women's health issues, cancer, stroke, alternative and complementary medicine, heart health, exercise, nutrition, migraines, Parkinson's, weight loss, incontinence and bladder health, exercise and injury prevention, joint replacement, pain management, neurological disorders, stress reduction, depression, hearing, dermatological, health care reform, food allergies, back pain, gynecological updates, sleep disorders, and urology disorders.
- Continue to provide smoking cessation program for all Scripps La Jolla inpatients, cardiac and pulmonary outpatients and staff.
- Coordinate four blood drives at the Scripps La Jolla campus on behalf of the American Red Cross.
- Work with other nonprofit community organizations, such as American Heart Association and the March of Dimes to promote healthy behaviors.
- Work with the Lawrence Family Jewish Community Center to offer 12 health education seminars on a variety of health improvement topics focused on senior health issues.
- Provide health information and screenings (body fat and body mass index) at more than three health events in San Diego County.
- Offer daily blood pressure checks through the kiosk program at the University Town Center mall.
- Support school and Scripps nursing in-services and community-based medical outreach activities at Scripps Mende Well Being.
- Continue to offer monthly nutrition education programs on three weight management topics, pre-diabetes and eating tips for cancer patients.
- Offer an ongoing colorectal screening program.
- Support nursing school programs by offering observations of maternal child health programs for student nurses.
- Support Scripps audit and compliance by hosting monthly update meetings.
- Offer the annual Women's Health Expo to the community, providing guest speakers on health education and prevention.

Heart Health and Cardiovascular Disease

Enhance cardiac health education and prevention efforts in north central San Diego County by:

- Offering education targeting women to increase public awareness about the advances in women's health care.
- Offering cardiac education programs for the community, focusing on current heart treatment options and new screening technologies.
- Offering monthly cardiac screenings (blood pressure and body fat, lipid panel and cardiac risk assessment) at Scripps La Jolla.
- Offering cardiac screenings (blood pressure and body fat) at two to four health fairs throughout San Diego County.

- Offering an ongoing, seven-week cardiac education class (“Straight to the Heart”) for newly diagnosed patients.
- Offering a continuous twelve-week pulmonary education program.
- Offering a continuous course for cardiac heart failure (CHF) patients, “Taking Control of Heart Failure.”
- Providing monthly programs for heart patients, including lectures, dinner, grocery store tours, walks and social events through the Happy Hearts Club.
- Work with young women’s groups (sororities, civic clubs and volunteer organizations) to provide heart health information, screenings, etc.
- Continuing to hold the Cardiac Casino to provide education on heart health.

Maternal Child Health Education

- Continue to provide prenatal, postpartum and parenting education programs for low-income women throughout San Diego County.
- Offer 1,200 maternal child health classes throughout San Diego County to enhance parenting skills. Low-income women in the county of San Diego can attend classes at no charge or on a sliding fee schedule.
- Maintain the existing prenatal education services in the county, ensuring that programs demonstrate a satisfaction rating higher than 90 percent.
- Continue to offer six breastfeeding support groups throughout the county on a weekly basis (includes two with bilingual services).
- Offer 12 maternal child health education series covering issues such as grandparenting and babysitter safety in San Diego County.
- Offer prenatal and postnatal yoga classes at the Scripps Mende Well Being.
- Offer quarterly dogs and babies safety education program for expectant parents.
- Offer pelvic floor and pregnancy education program for expectant women.
- Offer postpartum pelvic floor wellness education for postpartum women.

Substance Abuse Prevention and Treatment Programs

Continue to provide substance abuse prevention and treatment programs throughout San Diego County. Scripps Drug and Alcohol Treatment Program will offer a series of drug and alcohol abuse prevention and treatment programs including:

- Continue providing countywide lectures and respond to speaking requests from the community.
- Promote awareness of alcoholism and chemical dependency and effective treatments.
- Maintain a speaker’s bureau to accommodate requests for presentations on drug abuse and prevention from community organizations throughout San Diego County.
- Offer monthly intervention trainings for people suffering from addiction.
- Maintain and enhance web-based, self-assessment tools for drug addiction and a list of care resources.
- Increase chemical dependency intervention and family systems education in the community and continue to speak to parents and school systems.
- Offer drug and alcohol intervention workshops at no cost to parents of adolescents.

Unintentional Injury and Violence

- Provide at least two safety education programs for students and teachers on bike, skateboard and car seat safety.
- Provide at least two safety education programs for older adults.

Professional Education and Health Research

- Continue to function as a premier site for nursing clinical rotations for all nursing programs in San Diego County; expand student exposure to outpatient and nontraditional patient care areas.
- Provide preceptor experiences to nursing students in several nursing practice roles: Educator, clinical specialist, manager, staff nurse.
- Continue to offer a robust student nurse extern program.
- Provide clinical education experiences for allied health students such as OT, PT, RCP, radiographers, surgical technicians and clinical social workers.

Uncompensated Health Care

Scripps La Jolla will continue to provide health care services for vulnerable patients who are unable to pay.

- Maintain, communicate and effectively administer the Scripps financial assistance policy in a manner that meets patients' needs.
- Assure that care is available through the emergency department and trauma center, regardless of a person's ability to pay.

Scripps Memorial Hospital La Jolla

2014 Community Benefit Report, Fiscal Year 2013

The Scripps La Jolla Community Benefit Report is an account of the hospital's dedication and commitment to improving the community's health, detailing programs that have provided benefit over and above standard health care practices in fiscal year 2013 (October 2012 to September 2013).

Fostering Volunteerism

In addition to the financial community benefit contributions made during fiscal year 2013, Scripps La Jolla employees and affiliated physicians donated a significant portion of their personal time volunteering to support Scripps-sponsored community benefit programs. With close to 350 volunteer hours, it is estimated that the dollar value associated with this volunteer labor is \$15,388.92.¹

Making a Financial Commitment

During fiscal year 2013, Scripps La Jolla devoted \$72,617,644 to community benefit programs, including uncompensated health care, community health services, professional education and health research. The programs offered by Scripps emphasize community-based prevention efforts and use innovative approaches to reach residents at greatest risk for health problems.

Scripps Memorial Hospital La Jolla Community Benefit Services Highlights (After Hospital Provider Fee)

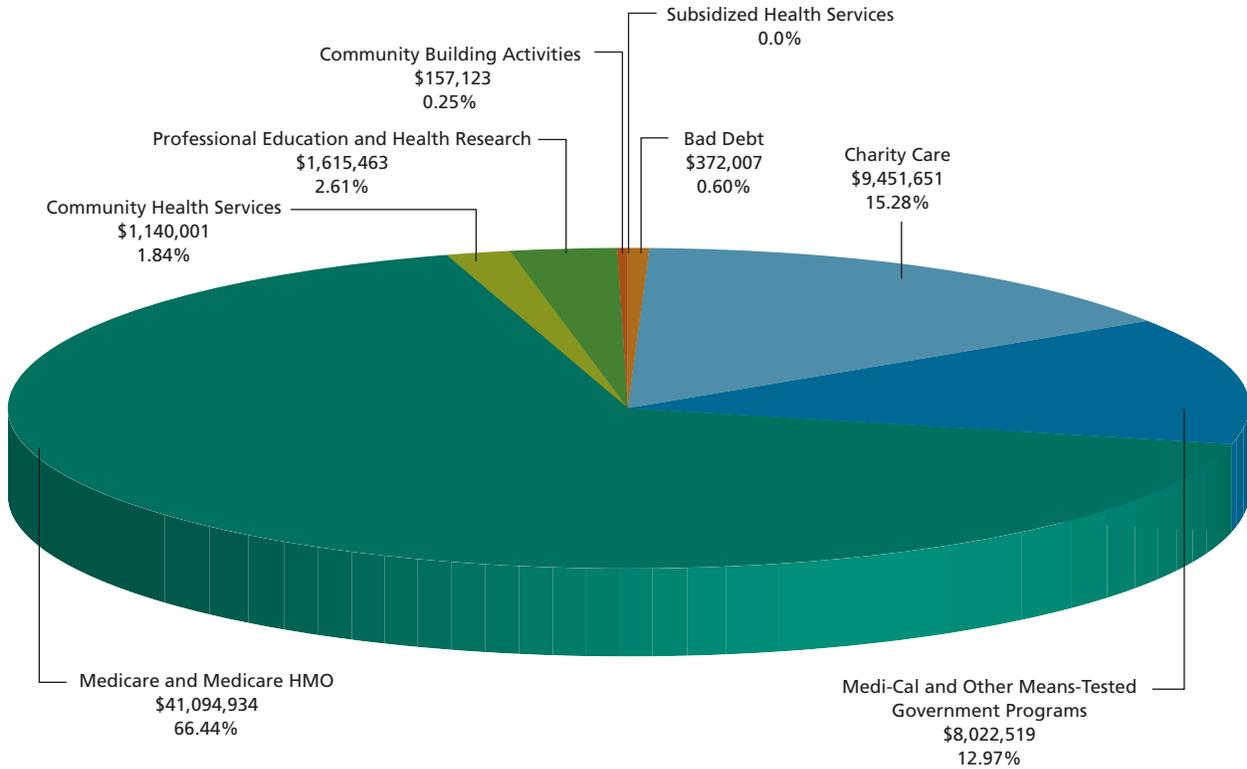
During fiscal year 2013, Scripps La Jolla contributed \$72,617,644 in community benefits, including \$9,451,651 in charity care, \$18,786,464 in Medi-Cal and other means-tested government programs, \$41,094,934 in Medicare shortfall, \$372,007 in bad debt, \$1,140,001 in community health services, \$0 in subsidized health services, \$1,615,463 in professional education and research and \$157,123 in community building activities.

Refer to Figure 6:1, presented on the following page, for a graphic representation of the fiscal year 2013 Scripps Memorial Hospital La Jolla Community Benefit Services distribution.

¹ Calculation based upon an average hourly wage for the Scripps Health system plus benefits.

FIGURE 6:1

FY13 Scripps Memorial Hospital La Jolla Community Benefit Services Distribution, \$61,853,699 (before provider fee)



Provider Fee Impact	Bad Debt	Charity Care	Medi-Cal & Other Means-Tested	Medicare & Medicare HMO	Community Health Svcs	Prof Ed and Health Research	Community Building	Subsidized Health Svc	Total
Community Benefit Services Before Provider Fee	372,007	9,451,651	8,022,519	41,094,934	1,140,001	1,615,463	157,123	-	61,853,699
Provider Fee			10,763,945						10,763,945
Net Community Benefit Services After Provider Fee	372,007	9,451,651	18,786,464	41,094,934	1,140,001	1,615,463	157,123	-	72,617,644

Community Benefit Services:

Community benefit services include programs offered to the community that go above and beyond normal patient care. Scripps places community benefit services in three categories: uncompensated health care, community health services, and professional education and health research. Uncompensated care includes charity care, bad debt, Medi-Cal and other means-tested government programs and Medicare shortfalls.

Scripps La Jolla Fiscal Year 2013 Community Health Services

Community Health Services Highlights

Community health services include prevention and wellness programs, such as screenings, health education, support groups and health fairs, which are supported by operational funds, grants, in-kind donations and philanthropy. These programs are designed to raise public awareness and understanding of, and access to, identified community health needs (refer to Section 2 — Community Health Needs Assessment).

During fiscal year 2013 (October 2012 to September 2013), Scripps La Jolla invested \$1,140,001 in community health services. This figure reflects the costs associated with providing community health improvement activities, including salaries, materials and supplies, minus billable revenue. This section highlights some of Scripps La Jolla's fiscal year 2013 community health services achievements.

Professional Education Highlights

Quality health care is highly dependent upon health education systems and medical research programs. Without the ability to train and inspire a new generation of health care providers, or offer continuing education to existing health care professionals, the quality of health care would be greatly diminished. Each year, Scripps La Jolla advances health care services through professional education programs. To enhance service delivery and treatment practices for San Diego County, Scripps Memorial Hospital La Jolla invested \$1,615,463² in professional training programs during fiscal year 2013 (October 2012 to September 2013). This section highlights some of Scripps La Jolla's professional education activities during fiscal year 2013.

Scripps La Jolla was a rotation site for nursing students in virtually all clinical areas of the hospital. Support training and clinical rotations were provided in radiation oncology, the cardiac treatment center, the intensive care unit, labor and delivery, Scripps Polster Breast Care Center, the emergency department, operating room and other areas. Scripps La Jolla supported clinical instruction and practice affiliations for non-nursing students one-day student observations, wound care lectures on the university's campus, and intensive care unit learning lab three times per year. In addition, Scripps La Jolla provided clinical and nonclinical experiences in rehab services, respiratory care, radiology, cardiovascular lab, social services, food and nutrition services, executive health, maternal child health education, lactation services and cardiac treatment center.

2 Reflects clinical research as well as professional education for non-Scripps employees, nursing resource development and other health care professional education. Calculations based on total program expenses.

Pharmacy Residency Program

Scripps Memorial Hospital La Jolla, with Scripps Green Hospital in La Jolla, offers three 12-month ASHP accredited postgraduate year one (PGY-1) resident positions focusing on pharmacotherapy, research and teaching in a decentralized pharmacy setting. Graduates of this program are prepared to practice in tertiary community hospital settings and adjunct faculty positions as well as pursue further training such as postgraduate year two (PGY-2) residency or other clinical venues.

Scripps Memorial Hospital La Jolla

Community Benefit Services Summary List

FY13

Program Title	Volunteer Hours	Staff Hours	Financial Support*	Persons Served
Aloha Locks Cancer Wig Program	N/A	137	\$11,678	8
Bad Debt**	N/A	N/A	\$372,007	N/A
Beach Area Community Court Program	17	9	\$848	307
Blood Drives for the American Red Cross	N/A	271	\$15,738	513
Breastfeeding Support Groups - Scripps La Jolla Community Benefit Services	N/A	1,954	\$187,646	3,157
Cancer Center Heredity and Cancer Genetic Counseling Program	N/A	1,201	\$92,124	67
Cancer Center Nutrition Program	N/A	105	\$9,111	6
Cancer Center Oncology Nursing Education Program	N/A	4,020	\$321,637	222
Cancer Center Outpatient Social Worker and Liaison Program	N/A	899	\$68,986	43
Cancer Center Registered Nurse Navigator Program	N/A	961	\$69,758	307
Cancer Center Transportation Program	N/A	844	\$66,168	52
Cancer Support Services and Educational Materials	5	2,044	\$164,871	112
Cardiac Education Programs	N/A	6	\$357	6
Cardiac Treatment Center Group Exercise Programs	N/A	787	\$31,300	3,868
Charity Care	N/A	N/A	\$9,451,651	N/A
Clinical Rotations	N/A	13,196	\$957,831	N/A
Community Based Clinical Services	N/A	2	\$188	500
Community Health Education Programs	17	906	\$53,127	21,443
CPR and Emergency Preparedness	N/A	194	\$7,187	284
CPR Classes for Patients and Families of the Cardiac Treatment Center	N/A	16	\$1,365	27
Donated Room Space for Non-For-Profit Organizations	N/A	59	\$8,832	1,129
Greater La Jolla Meals on Wheels	N/A	N/A	\$2,827	14,998
<p>*"FINANCIAL SUPPORT" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer labor hours. In some instances an entire community benefit program cost center has been divided between several initiatives.</p> <p>** Community Building Activities, Bad Debt and Medicare Shortfall do not count as community benefits under the new Schedule H 990 but are still reportable outside the community benefit table.</p>				

Program Title	Volunteer Hours	Staff Hours	Financial Support*	Persons Served
Health Education and Support Groups	14	976	\$71,173	666
Health Profession Education	180	397	\$16,402	768
In Lieu of Funds**	N/A	N/A	\$157,123	N/A
In-Kind Donations	N/A	63	\$3,339	205
Lebed Method - Focus on Healing Through Movement and Exercise	N/A	48	\$2,964	212
LVAD National Registry Research - Congestive Heart Failure	N/A	N/A	\$0	8
Medi-Cal (Shortfall)	N/A	N/A	\$14,373,579	N/A
Medicare and Medicare HMO (Shortfall)**	N/A	N/A	\$41,094,934	N/A
Nine Girls Ask? for a cure for Ovarian Cancer	N/A	12	\$656	N/A
Nutrition Education Class	N/A	13	\$419	36
Official Physical Therapy Sportsmed Crew for Susan G. Komen 3-Day For The Cure Breast Cancer Walk	25	316	\$19,381	2,500
Other Means-Tested Government Programs (Shortfall)	N/A	N/A	\$4,412,885	N/A
Parent Connection	N/A	203	\$8,754	310
Parent Connection Community Resource Fund	N/A	20	\$841	30
Perinatal Education Classes - Scripps La Jolla Community Benefit Services	60	1,434	\$68,028	1,803
Pharmacy Residency	N/A	6,609	\$319,594	N/A
Rehabilitation Parkinson's Class and Stroke Exercise	N/A	103	\$6,340	740
Scripps Memorial Hospital La Jolla Medical Library	N/A	2,089	\$135,415	N/A
Scripps Behavioral Health Services	8	4	\$553	75
Scripps Polster Breast Care Center Education Seminars	N/A	2	\$109	4
Scripps Polster Breast Care Center Support Groups	N/A	53	\$5,588	149
Stroke Information and Blood Pressure Screenings	4	12	\$894	68
Women's Health EXPO	20	154	\$23,433	125
TOTAL	350	40,115	\$72,617,644	54,748

*"FINANCIAL SUPPORT" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer labor hours. In some instances an entire community benefit program cost center has been divided between several initiatives.

** Community Building Activities, Bad Debt and Medicare Shortfall do not count as community benefits under the new Schedule H 990 but are still reportable outside the community benefit table.

Scripps Memorial Hospital Encinitas

About Scripps Memorial Hospital Encinitas

Scripps Memorial Hospital Encinitas, located along the coast of San Diego's North County, has 158 licensed beds, 1,214 employees and provides health care services for 20.3 percent of the inpatient population living within the hospital's North County West service area. Scripps Encinitas provides a wide range of acute clinical care services including, but not limited to, 24-hour emergency services, intensive care, cancer/oncology, nuclear medicine, radiology, orthopedics, neurology and urology. Within its service area, Scripps Encinitas cares for 23.6 percent of Medicare patients, 12.0 percent of Medi-Cal patients, 20.4 percent of commercially insured patients, and 17.6 percent of patients with other payment sources, including self-pay and charity care.

Distinguishing Programs and Services

- 24-hour emergency services
- Neurological care services
- Primary stroke center designated by The Joint Commission
- STEMI-receiving center designation from the American Heart Association
- Spine and joint replacement programs
- Palliative care program

Leichtag Family Birth Pavilion:

- Neonatal intensive care nursery (operated by Rady Children's Hospital)
- Perinatal support program
- San Diego County's first World Health Organization designated "baby-friendly" hospital

Rehabilitation Center:

- Rehabilitation center and brain injury treatment program accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF)
- Brain injury outpatient day treatment program
- Concussion management program
- Driving safety assessments
- Gait analysis
- Outpatient physical rehabilitation services

Women's Imaging Services:

- Digital mammography
- Bone density test (densitometry or DEXA scan)
- Ultrasound
- MRI (magnetic resonance imaging)
- BSGI (breast specific gamma imaging)

Scripps Memorial Hospital Encinitas

2014 Community Benefit Plan, Fiscal Year 2014

The Scripps Memorial Hospital Encinitas 2014 Community Benefit Plan provides a description of the overall Scripps community benefit goal and the hospital's objectives and strategies to support community health improvement during fiscal year 2014 (October 2013 to September 2014).

The Scripps 2014 Community Benefit Goal

Make a measurable impact on the health status of the community through improved access to care, health improvement programs and professional education and health research.

Scripps Encinitas Fiscal Year 2014 Community Benefit Objectives

Community Health Services

- Continue to coordinate quarterly blood drives on behalf of American Red Cross at the Encinitas hospital campus.
- Continue to offer bereavement support group, which is facilitated by a licensed professional, meets twice a month and is free and open to the community.
- Continue to offer breast cancer support group, which is facilitated by a licensed professional, meets twice a month and is free and open to the community.
- Continue to offer stroke and brain injury support group, which is facilitated by a licensed professional, meets twice a month and is free and open to the community.
- Continue to support the Young Leaders in Health Care program, which involves high school students from eight local area schools (San Dieguito Academy, La Costa Canyon, High Tech High San Marcos, Carlsbad High School, Torrey Pines, Canyon Crest Academy, Vista High and Pacific Ridge). The program gathers monthly at the hospital to discuss the American health care system, explore career opportunities, meet medical professionals and develop service projects to implement in their school communities.
- Continue to offer concussion clinics at area high schools. Sport activities leads to more concussions than ever before, and repeat concussions can lead to brain damage.

Professional Education and Research

- Support California State University San Marcos and Palomar College nursing school programs by providing a supportive educational environment for their clinical nursing rotations.
- Provide clinical education experiences for health students studying physical, occupational and speech therapy.
- Continue to host students from the Exploratory Work Experience Education program.

Uncompensated Health Care

Scripps Encinitas will continue to provide health care services for vulnerable patients who are unable to pay for services.

- Maintain, communicate and effectively administer Scripps' financial assistance policy in a manner that meets patients' needs.
- Assure that care is available through the emergency department, regardless of a person's ability to pay.

Scripps Memorial Hospital Encinitas

2014 Community Benefit Report, Fiscal Year 2013

The Scripps Encinitas Community Benefit Report is an account of the hospital's dedication and commitment to improving the health of the community, detailing hospital programs that have provided benefit over and above standard health care practices in fiscal year 2013 (October 2012 to September 2013).

Fostering Volunteerism

In addition to the financial community benefit contributions made during fiscal year 2013, Scripps Encinitas employees and affiliated physicians donated a significant portion of their personal time volunteering to support Scripps-sponsored community benefit programs and services. With close to 43 hours of volunteer time, it is estimated that the dollar value associated with this volunteer labor is \$1,890.64.¹

Making a Financial Commitment

During FY13, Scripps Memorial Hospital Encinitas devoted \$47,735,759 to community benefit programs, including uncompensated health care, community health services, professional education and health research. The programs offered by Scripps emphasize community-based prevention efforts and use innovative approaches to reach residents at greatest risk for health problems.

Scripps Memorial Hospital Encinitas Community Benefit Services Highlights (After Hospital Provider Fee)

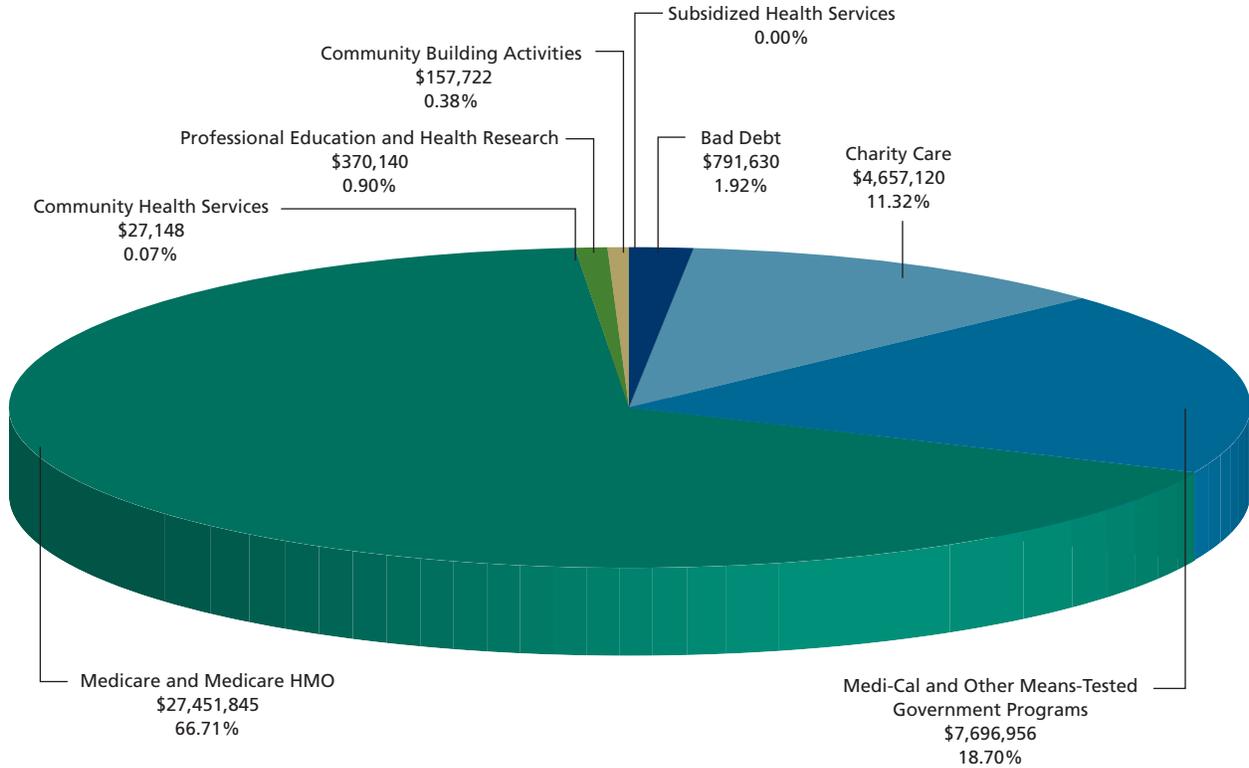
During fiscal year 2013, Scripps Encinitas contributed \$47,735,759 to community benefits, including \$4,657,120 in charity care, \$14,280,155 in Medi-Cal and other means-tested government programs, \$27,451,845 in Medicare shortfall, \$791,630 in bad debt, \$27,148 in community health services, \$0 in subsidized health services, \$370,140 in professional education and health research and \$157,722 in community building activities.

Refer to figure 7:1, presented on the following page, for a graphic representation of the fiscal year 2013 Scripps Memorial Hospital Encinitas Community Benefit Services distribution.

¹ Calculation based upon an average hourly wage for the Scripps Health system plus benefits

FIGURE 7:1

FY13 Scripps Memorial Hospital Encinitas Community Benefit Services Distribution, \$41,152,560 (before provider fee)



Provider Fee Impact	Bad Debt	Charity Care	Medi-Cal & Other Means-Tested	Medicare & Medicare HMO	Community Health Svcs	Prof Ed and Health Research	Community Building	Subsidized Health Svc	Total
Community Benefit Services Before Provider Fee	791,630	4,657,120	7,696,956	27,451,845	27,148	370,140	157,722	-	41,152,560
Provider Fee			6,583,199						6,583,199
Net Community Benefit Services After Provider Fee	791,630	4,657,120	14,280,155	27,451,845	27,148	370,140	157,722	-	47,735,759

Community Benefit Services:

Community benefit services include programs offered to the community that go above and beyond normal patient care. Scripps places community benefit services in three categories: uncompensated health care, community health services, and professional education and health research. Uncompensated care includes charity care, bad debt, Medi-Cal and other means-tested government programs and Medicare shortfalls.

Scripps Encinitas Fiscal Year 2013 Community Health Services

Community Health Services Highlights

Community health services include prevention and wellness programs, such as screenings, health education, support groups and health fairs, which are supported by operational funds, grants, in-kind donations and philanthropy. These programs are designed to raise public awareness, understanding of and access to identified community health needs (refer to Section 2 — Community Health Needs Assessment).

During fiscal year 2013 (October 2012 to September 2013), Scripps Encinitas invested \$27,148 in community health services. This figure reflects the costs associated with providing community health improvement activities, including salaries, materials and supplies, minus billable revenue. This section highlights some of the Scripps Encinitas fiscal year 2013 community health services.

Professional Education and Health Research Highlights

Quality health care is highly dependent upon health education systems and medical research programs. Without the ability to train and inspire a new generation of health care providers, or to offer continuing education to existing health care professionals, the quality of health care would be greatly diminished. Medical research also plays an important role in improving the community's overall health by developing new and innovative treatments.

Each year, Scripps Encinitas allocates resources to advance health care services through health professional education programs. To enhance service delivery and treatment practices for San Diego County, Scripps Encinitas invested \$370,140² in professional training programs and clinical research during fiscal year 2013 (October 2012 to September 2013). This section highlights some of the Scripps Encinitas professional education activities in fiscal year 2013.

- The stroke and brain injury support and education group is for survivors, caregivers and loved ones. Participants receive information and resources, reinforce inner strengths, learn self-care strategies, develop encouraging peer relationships and continue a life of meaning and purpose.
- The breast cancer support group recognizes the special needs of women who have suffered from breast cancer. Group members share experiences, information, hopes, fears and strengths in a relaxed setting.
- Young Leaders in Health Care is a forum for high school students to learn about the health care system and its career opportunities. High school students in grades 9 through 12 have the unique opportunity to discuss medicine and medical issues directly with medical professionals, to become involved in health-related community service programs and to learn about internship opportunities. The program mentors students on leadership, providing tools to meet daily life challenges, and assigns a service project to satisfy school requirements and make a positive impact on the community. In past years, students created public service announcements about teen safety and wellness, eating disorders, prescription drug abuse, cyberbullying and dating violence.

² Reflects clinical research as well as professional education for non-Scripps employees, nursing resource development and other health care professional education. Calculations based on total program expenses.

Scripps Memorial Hospital Encinitas

Community Benefit Services Summary List

FY13

Program Title	Volunteer Hours	Staff Hours	Financial Support*	Persons Served
Bad Debt**	N/A	N/A	\$791,630	N/A
Be The Match Bone Marrow Donation Registration	N/A	6	\$895	21
Bereavement Support Group Encinitas	N/A	28	\$1,297	93
Blood Drives for the American Red Cross	N/A	104	\$7,044	372
Breast Cancer Education and Support Group	N/A	87	\$8,713	454
Caring for Loved Ones with Dementia	N/A	N/A	\$422	70
Charity Care	N/A	N/A	\$4,657,120	N/A
Clinical Rotations	N/A	5,099	\$370,140	N/A
In Lieu of Funds**	N/A	N/A	\$157,722	N/A
Managing Pelvic Health	N/A	3	\$185	12
Medi-Cal (Shortfall)	N/A	N/A	\$10,591,980	N/A
Medicare and Medicare HMO (Shortfall)**	N/A	N/A	\$27,451,845	N/A
Other Means-Tested Government Programs (Shortfall)	N/A	N/A	\$3,688,175	N/A
San Diego Brain Injury Foundation	N/A	N/A	\$788	93
Scripps Behavioral Health Services	8	4	\$553	50
Stroke and Brain Injury Support and Education Group	N/A	46	\$2,339	328
Susan G. Komen 3 Day Breast Cancer Walk	N/A	N/A	\$315	16
Community Health Education Programs	17	906	\$53,127	21,443
Young Leaders in Healthcare	32	24	\$4,597	375
TOTAL	43	5,401	\$47,735,759	1,884

*"FINANCIAL SUPPORT" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer labor hours. In some instances an entire community benefit program cost center has been divided between several initiatives.

** Community Building Activities, Bad Debt and Medicare Shortfall do not count as community benefits under the new Schedule H 990 but are still reportable outside the community benefit table.

Scripps Mercy Hospital

Scripps Mercy Hospital

With 684 licensed beds and more than 3,620 employees, Scripps Mercy Hospital is San Diego's longest-established and only Catholic medical center. In addition, with two campuses, Scripps Mercy Hospital is San Diego County's largest hospital. Scripps Mercy provides health care services for 28.3 percent of the inpatient population living within the hospital's central services area. Scripps Mercy is designated a disproportionate share hospital, providing care to a large number of patients who either lack health insurance or are covered through a government subsidy program (30.7 percent are Medicare patients, 31.6 percent are Medi-Cal patients, 15.7 percent are commercially insured patients, and 34.3 percent have another payment source, including self-pay, CMS or charity care).

San Diego Campus

Scripps Mercy Hospital is San Diego's longest-operating and only Catholic hospital. Along with its tradition of caring for the underserved, Scripps Mercy features a shared decision-making culture that encourages staff input and participation. Located in Central San Diego County, Scripps Mercy Hospital, San Diego, has 501 licensed beds and 2,479 employees. As a major teaching hospital, Scripps Mercy Hospital, San Diego, provides a primary site for the clinical education of more than 140 residents per year. Scripps Mercy provides a wide range of acute medical care services including, but not limited to, intensive care, cancer care, cardiac treatment, endoscopy, neurology, nuclear medicine, orthopedics, radiology, rehabilitation, respiratory care and urology services, plus a variety of support services for low-income patients. As one of six trauma centers and one of 19 emergency departments in San Diego County, Scripps Mercy Hospital, San Diego, makes up a critical part of the county's emergency service network.

Chula Vista Campus

Located approximately four miles from the United States-Mexico border in South San Diego County, Scripps Mercy Hospital, Chula Vista, has 183 licensed-care beds and more than 1,141 employees. It became a Scripps Mercy Hospital campus in October 2004 and, together with the Scripps Mercy facility in Hillcrest, is growing to care for San Diego's Metro and South Bay communities. Scripps Mercy Hospital, Chula Vista, provides a wide range of acute clinical care services including, but not limited to, obstetrics and gynecology, rehabilitation (physical, occupational and speech therapies), cancer care services, inpatient and outpatient radiology, neurology and a full range of surgical services (orthopedic, thoracic/vascular, urology and general surgery).

Distinguished Programs — Scripps Mercy Hospital, San Diego

- Bariatric Surgery Program
- Behavioral Health Services
- Robotics Program
- Heart Care Center
- City Heights Wellness Center
- Graduate Medical Education
- Lithotripsy
- Mercy Clinic
- Robotic Surgery Program
- Maternal Child Health
- Neonatal Intensive Care Nursery
- Neurological Institute
- Orthopedic Center
- Spiritual Care Services
- Trauma Center
- WIC (Women, Infants and Children) Program

Distinguished Programs — Scripps Mercy Hospital, Chula Vista

- Breast Health Outreach and Education Services
- Neonatal Intensive Care Nursery
- San Diego Border Area Health Education Center (AHEC)
- Cultural Competency and Language Services
- Youth Health Careers Development Programs
- Health Education Programs
- Scripps Family Practice Residency Program
- Scripps Outpatient Imaging Center
- Scripps Rehabilitation Services
- Scripps Mercy Hospital, Chula Vista, Well Being Center

Subsidized Health Services

Subsidized health services are clinical programs that are provided despite a financial loss so significant that negative margins remain after removing the effects of charity care, bad debt and Medi-Cal shortfalls. Nevertheless, the service is provided because it meets an identified community need, which if no longer offered would either be unavailable in the area or fall to government or another not-for-profit organization.

Subsidized services do not include ancillary services that support lines, such as lab and radiology. (If these services are provided to low-income persons, they are reported as charity care/financial assistance.)

The total expense for subsidized health services for Scripps Mercy fiscal year 2013 was \$7,879,358. This includes Scripps inpatient and outpatient behavioral health services, Mercy Clinic and Scripps in-lieu of funds. Scripps offers both inpatient and outpatient adult behavioral health services at the Scripps Mercy Hospital, San Diego, campus. The Scripps Mercy Behavioral Health Program also actively supports community programs to reduce the stigma of mental illness and help affected individuals live and work in the community.

Behavioral Health Inpatient Programs

Individuals suffering from acute psychiatric disorders are sometimes unable to live independently or may even pose a danger to themselves or others. In such cases, hospitalization may be the most appropriate alternative. Scripps Mercy Hospital's Behavioral Health Inpatient Program helps patients and their loved ones work through short-term crises, manage mental illness and resume their daily lives.

Challenges

- Like many behavioral health programs across the country, funding is difficult, as payment rates have not kept pace with the cost to provide care.
- In 2013, the Scripps Mercy Behavioral Health Program lost \$4.5 million.
- In 2013, 17 percent of patients in the inpatient unit were uninsured.

Behavioral Health Outpatient Programs

Scripps Mercy provides hospital-based adult psychiatric treatment at Scripps Mercy, San Diego. The outpatient program is an intensive day program designed to help individuals reduce their symptoms while they continue to live in the community.

The program provides two levels of care:

- The outpatient program offers patients one to four treatment days per week.
- The partial hospitalization program provides more intensive treatment five to six days per week.

A-Vision Program

- The innovative A-Vision Vocational Training Program at the San Diego campus helps prepare patients for volunteer and employment opportunities by exposing them to a variety of work activities and training. The total expense for the A-Vision program for fiscal year 2013 was \$207,820.
- Currently, 50 clients were served, including two as volunteers and 23 as Scripps Mercy Hospital employees. A-Vision is now a systemwide initiative.

In-lieu of Funds

In-lieu of funds are used for unfunded or underfunded patients and their post-discharge needs. Funds are used for board and care, skilled nursing facilities, long-term acute care and home health. In addition, funds are used for medications, equipment and transportation services. The total subsidized expense for in-lieu of funds during fiscal year 2013 was \$1.3 million.

Mercy Clinic of Scripps Mercy Hospital, San Diego

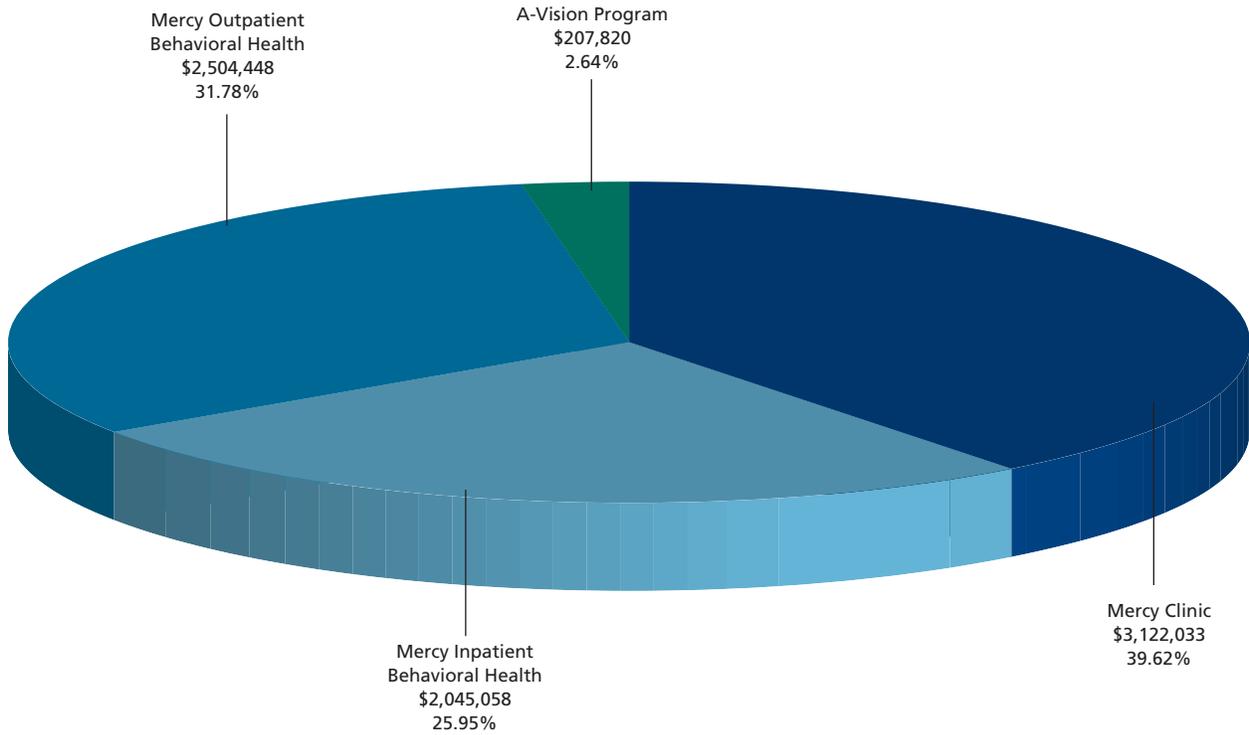
Founded in 1944 and adopted by the Sisters of Mercy in 1961, Mercy Clinic of Scripps Mercy Hospital is a primary care clinic that treats more than 1,000 patients each month. In fiscal year 2013, the clinic received 9,570 patient visits for primary and subspecialty care. Established to care for the underserved, Mercy Clinic is a medical care resource for San Diego's working and disabled poor. Each year, 90 percent of patient visits are paid through Medi-Cal, Medicare or some other insurance plan. The remaining 10 percent pay what, and if, they can. Thousands of people rely on Mercy Clinic. Most are low-income, medically underserved adults and seniors who would otherwise have no access to health care. The total subsidized expense for Mercy Clinic for fiscal year 2013 was \$3.1 million (excludes Medicare, Medi-Cal, bad debt and charity care).

A full-time clinic staff of nurses and other personnel work hand-in-hand with physicians from Scripps Mercy Hospital. As an integral part of treating its patients, Mercy Clinic serves as a training ground for more than 50 residents each year from the Scripps Mercy Hospital Graduate Medical Education Program.

Note: Mercy Clinic expenses are included within Scripps Mercy Hospital financials.

FIGURE 8:1

FY13 Scripps Subsidized Health Services Distribution by Category, \$7,879,358



Subsidized Health Services:

Subsidized Health Services are clinical programs that are provided despite a financial loss so significant that negative margins remain after removing the effect of charity care, bad debt and Medi-Cal shortfalls. This includes Scripps inpatient and outpatient behavioral health services, Mercy Clinic and the A-Vision Program.

Scripps Mercy Hospital, San Diego

2014 Community Benefit Plan, Fiscal Year 2014

The Scripps Mercy Hospital, San Diego, and Mercy Clinic 2014 Community Benefit Plan provides a description of the overall Scripps community benefit goal and the hospital's and clinic's objectives and strategies to support community health improvement during fiscal year 2014 (October 2013 to September 2014).

The Scripps 2014 Community Benefit Goal

Make a measurable impact on the health status of the community through improved access to care, health improvement programs and professional education and health research.

Scripps Mercy Hospital, San Diego and Mercy Clinic Fiscal Year 2014 Objectives

Community Health Services

Mercy Outreach Surgical Team (MOST) provides free reconstructive surgeries for more than 400 children (under 18 years of age) in Mexico with physical deformities caused by birth defects or accidents.

In 2002, Scripps Mercy Hospital and Rady Children's Hospital came together with the community to develop the City Heights Wellness Center. The center promotes health in mid-city San Diego by preventing disease, strengthening community partnerships, linking with existing services and providing opportunities for city residents to manage their own health. The center's continuing vision is to help ensure optimal health and safety for City Heights residents. The center addresses a broad array of community health priorities, including nutrition, access to services and community engagement. The center's hub is its' teaching kitchen — a hands-on interactive facility for cooking demonstrations, weight management, meal preparation classes, nutrition education and counseling. Key objectives for 2014 will be to:

- Promote healthy behaviors and positive health outcomes through educational activities and community projects.
- Provide the most current and reliable health education and information using local language and cultural preferences.
- Work with local schools, community groups, businesses and other entities to increase access to healthy foods and physical activity in City Heights.

Scripps Mercy's Supplemental Nutrition Program for Women, Infants and Children (WIC) has its largest distribution location based at the City Heights Wellness Center. The Scripps Mercy WIC Program, a federally funded nutrition program targeting pregnant and parenting women and their children (ages 0 to 5), is one of five WIC Programs operating in San Diego County. The Scripps Whittier Diabetes Institute's Project Dulce program utilizes the center to provide diabetes management services to community residents to educate and improve dietary practices for individuals with chronic health conditions. In addition, the center has received a contribution grant from the California Endowment Foundation to continue its health advocacy work with East African refugee families to help them with prevention strategies and health access. The primary objectives in 2014 will be to:

- Provide community-based leadership training to address local policy issues governing access to health care.
- Provide education and advocacy support for local community groups to execute health improvement initiatives.
- Provide resident-led advocacy on policy and environmental improvements. Through a grant from the California Endowment, the project will improve community health through resident leadership. The Resident Leadership Academy is a training project to strengthen resident-led advocacy on policy and environmental improvements to encourage more active and healthy lifestyle choices and reduce childhood obesity in City Heights.

WIC Services

Provide nutrition education, counseling services and food vouchers for at least 9,000 low-income women, infants and children monthly. Lactation education and support services are offered to improve breastfeeding among postpartum and parenting women.

Mercy Clinic

Provide preventive, primary and specialty health care for San Diego residents, serving as the outpatient clinical rotation site for Scripps Mercy Internal Medicine and Transitional Residency Program.

A-Vision Service Program

Behavioral health services at Scripps Mercy Hospital established the A-Vision Vocational Training Program, in partnership with the San Diego Mental Health Association, to help decrease the stigma of mental illness. The program helps people receiving mental health treatment by providing vocational training, potentially leading to greater independence. The A-Vision Service program is now a systemwide initiative throughout the Scripps system.

Mental Health and Geriatric Psychiatric Issues

Improve awareness of mental health and geriatric psychiatric issues by providing information and support services at community events.

National Depression Screening Day

For 2013, depression screening will be held at all Scripps Hospitals to increase the number of people assessed, educated and given referrals.

Community Education

Continue to educate the community on mental illness to reduce stigma and expand resources for the mentally ill. Provide at least one in-service per month.

- Participate in at least three Every 15 Minutes events, targeting more than 2,500 high school students in San Diego County.
- Participate in the Corrective Behavior Institute's Youthful Drinking and Driving Program, providing more than 50 teens with a trauma center visit.
- Increase injury prevention services availability (e.g., suicide prevention) throughout San Diego County.

Professional Education and Health Research

Scripps Mercy Hospital, San Diego, will continue to serve as a medical education training site for University of California, San Diego, medical students and residents, and San Diego Naval Hospital clinicians.

- Provide comprehensive graduate medical education training for 34 internal medicine residents, 18 transitional year residents and three chief residents.
- Nearly 100 percent of internal medicine resident graduates have successfully passed the American Board of Internal Medicine Certifying Examination on the first try for the past 18 years.
- Provide comprehensive graduate medical education training for seven podiatry residents.
- Provide a portion of graduate medical education training for up to six Palliative Care Fellows under a combined Scripps-UCSD Palliative Care Fellowship, still sponsored by Scripps Mercy Hospital.
- Provide a portion of undergraduate medical education training for approximately 75 third- and fourth-year medical students at the University of California, San Diego.
- Provide a comprehensive graduate medical education program in trauma and surgical critical care for 70 San Diego Naval Hospital surgery and emergency medicine physicians.
- Provide a comprehensive didactic and clinical nursing education program in trauma care for three San Diego Naval Emergency Department nurses.
- Provide a comprehensive training program in trauma and critical care for 17 Navy physicians assistants-in-training.

Uncompensated Health Care

Scripps Mercy Hospital, San Diego, and Mercy Clinic will continue to provide health care for vulnerable patients who are unable to pay for services.

- Maintain, communicate and effectively administer the Scripps financial assistance policy in a manner that meets the needs of patients.
- Assure that care is available through the emergency department and trauma center, regardless of a person's ability to pay.

Scripps Mercy Hospital, San Diego

2014 Community Benefit Report, Fiscal Year 2013

The Scripps Mercy Hospital, San Diego, Community Benefit Report is an account of the hospital's dedication and commitment to improving the health of the community, detailing the programs that have provided benefit over and above standard health care practices in fiscal year 2013 (October 2012 to September 2013).

Fostering Volunteerism

In addition to the financial community benefit contributions made during fiscal year 2013, Scripps Mercy Hospital employees and affiliated physicians donated a significant portion of their personal time volunteering to support Scripps-sponsored community benefit programs and services. With close to 976 hours of volunteer time, it is estimated that the dollar value associated with this volunteer labor is \$42,913.10.¹

Making a Financial Commitment

During fiscal year 2013, Scripps Mercy Hospital, San Diego, and Mercy Clinic devoted \$63,667,167 to community benefit programs, including uncompensated health care, community health services, professional education and health research. The programs offered by Scripps emphasize community-based prevention efforts and use innovative approaches to reach residents at greatest risk for health problems.

Scripps Mercy Hospital, San Diego, and Mercy Clinic Community Benefit Services Highlights (After Hospital Provider Fee)

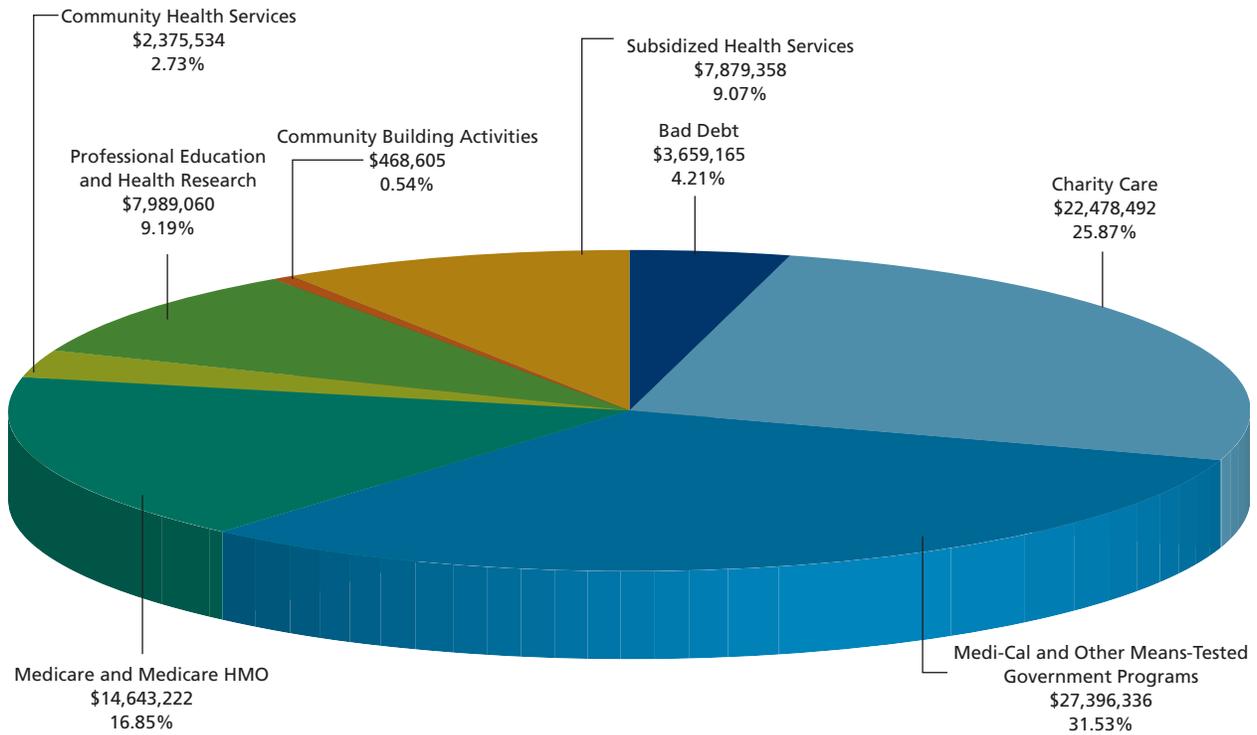
Scripps Mercy Hospital, San Diego, and Mercy Clinic contributed \$63,667,167 to community benefits, including \$22,478,492 in charity care, \$4,173,732 in Medi-Cal and other means-tested government programs (Scripps had to offset the provider fee income from Medi-Cal in fiscal year 2013), \$14,643,222 in Medicare shortfall, \$3,659,165 in bad debt, \$2,375,534 in community health services, \$7,989,060 in professional education and health research, \$7,879,358 in subsidized health services and \$468,605 in community building activities.

Refer to Figure 8:2, presented on the following page, for a graphic representation of the fiscal year 2013 Scripps Mercy Hospital, San Diego, and Mercy Clinic Community Benefit Services distribution.

¹ Calculation based upon an average hourly wage for the Scripps Health system plus benefits.

FIGURE 8:2

FY13 Scripps Mercy Hospital, San Diego and Mercy Clinic Community Benefit Services Distribution, \$86,889,772 (before provider fee)



Provider Fee Impact	Bad Debt	Charity Care	Medi-Cal & Other Means-Tested	Medicare & Medicare HMO	Community Health Svcs	Prof Ed and Health Research	Community Building	Subsidized Health Svc	Total
Community Benefit Services Before Provider Fee	3,659,165	22,478,492	27,396,336	14,643,222	2,375,534	7,989,060	468,605	7,879,358	86,889,772
Provider Fee			(23,222,604)						(23,222,604)
Net Community Benefit Services After Provider Fee	3,659,165	22,478,492	4,173,732	14,643,222	2,375,534	7,989,060	468,605	7,879,358	63,667,167

Community Benefit Services:

Community benefit services include those programs and services offered to the community that go above and beyond what is provided as a normal part of patient care. Scripps categorizes community benefit services in three categories, including uncompensated health care, community health services, and professional education and health research. Uncompensated care includes charity care, bad debt, Medi-Cal and other means-tested government programs and Medicare shortfalls.

Scripps Mercy Hospital, San Diego, and Mercy Clinic Fiscal Year 2013 Community Health Services

Community Health Services Highlights

Community health services include prevention and wellness programs, such as screenings, health education, support groups and health fairs, which are supported by operational funds, grants, in-kind donations and philanthropy. These programs are designed to raise public awareness, understanding of and access to identified community health needs (refer to Section 2 — Community Health Needs Assessment).

During fiscal year 2013 (October 2012 to September 2013), Scripps Mercy Hospital and Mercy Clinic invested \$2,375,534 in community health services. This figure reflects the cost associated with providing community health improvement activities, including salaries, materials and supplies, minus billable revenue. This section highlights some of Scripps Mercy Hospital's and Mercy Clinic's fiscal year 2013 community health achievements.

Professional Education and Health Research Highlights

Quality health care is highly dependent upon health education systems and medical research programs. Without the ability to train and inspire a new generation of health care providers, or to offer continuing education to existing health care professionals, the quality of health care would be greatly diminished. Medical research also plays an important role in improving the community's overall health by developing new and innovative treatments.

Each year, Scripps Mercy Hospital, San Diego, and Mercy Clinic allocate resources to advance health care services through clinical research and medical education. To enhance service delivery and treatment practices for San Diego County, Scripps Mercy Hospital and Mercy Clinic invested \$7,989,060² in professional training programs and clinical research during fiscal year 2013 (October 2012 to September 2013). This section highlights these activities.

Graduate Medical Education (GME) Program

Scripps Mercy Hospital, San Diego, is a major teaching hospital with the longest existing medical education program in San Diego County. The program has been recognized nationally for its impressive results and innovative curriculum. For the 16th consecutive year, Scripps Mercy's internal medicine residents achieved nearly a 100 percent pass rate on the American Board of Internal Medicine Certifying Examination — the best record in California by far, and one of the top three in the country.

Founded in 1949, Scripps Mercy Hospital, San Diego, and Mercy Clinic's Graduate Medical Education program has served as training ground for more than 1,000 physicians, many of whom have assumed leadership positions in the community. There are currently 34 internal medicine residents and three chief residents enrolled in the program, as well as 18 transitional year residents, 23 family medicine residents and seven podiatry residents.

2 Reflects clinical research as well as professional education for non-Scripps employees, including graduate medical education, nursing resource development and other health care professional education. Calculations based on total program expenses.

In 2006, the Internal Medicine Program at Scripps Mercy Hospital became one of 17 programs nationwide to be invited to participate in a multiyear educational innovation project, linking measurable improvements in resident education to measurable improvements in patient care.

The educational innovation project program continues to produce high quality research resulting in peer-reviewed publications in the areas of cardiovascular limited ultrasound examination; teaching cost-effective medicine to residents; employing ACGME milestones to evaluate resident readiness for indirect supervision in the ambulatory environment; and team training to enhance family communication in the Intensive Care Unit, among many other projects.

In 2008, Scripps Mercy Hospital became the sponsor for the Accreditation Council on Graduate Medical Education-Accredited Palliative Care Fellowship provided by San Diego Hospice and the Institute for Palliative Care. The program provides palliative care service for inpatients and outpatients at Scripps Mercy Hospital.

Since 1986, Scripps Mercy Hospital Trauma Services has provided graduate medical education in trauma and critical care for the Naval Medical Center (NMCS D) General Surgery Residency Program. In 1999, the Accreditation Council for Graduate Medical Education Residency Review Committee for Surgery officially integrated Scripps Mercy with the NMCS D General Surgery Residency Program. Today, the trauma service also provides training opportunities for residents in other programs, including: NMCS D oromaxillofacial surgery, otolaryngology, emergency medicine, transitional year residencies, Scripps Mercy Hospital transitional year residency, and Children's Specialists of San Diego Pediatric Emergency Medicine Fellowship. All these residents play a key role in managing and maintaining the continuity of care for patients in Central San Diego.

In addition to providing medical services for indigent and unassigned patients at Scripps Mercy Hospital, residents and interns act as primary care providers at Mercy Clinic, an outpatient primary and specialty care service of Scripps Mercy Hospital. With more than 10,000 patient contacts each year, Mercy Clinic provides adult care for underserved patients, as well as subspecialty care for clinic and community clinic patients. The clinic participates in multiple projects, including health screenings, the breast cancer early detection program (BCEDP) and Project Dulce, to name a few.

The fiscal year 2013 cost of operating the Scripps Mercy Hospital, San Diego, Graduate Medical Education Program and other professional education programs totaled \$7,989,060.³

³ GME calculations based on total program expenses plus overhead.

Other Professional Education Training Programs

In fiscal year 2013, Scripps Mercy Hospital, San Diego and Mercy Clinic served as a training site for San Diego Naval Hospital and UCSD clinicians by:

- Providing rotations in the internal medicine inpatient service for UCSD internal medicine and psychiatry residents and medical students, as well as to Mercy Clinic for psychiatry residents and medical students.
- Providing a comprehensive graduate medical education program in trauma and surgical critical care for 70 San Diego Naval Hospital surgery and emergency medicine physicians.
- Providing a comprehensive didactic and clinical nursing education program in trauma care for three San Diego Naval Emergency Department nurses.
- Providing a comprehensive training program in trauma and critical care for 14 physicians assistants-in-training.

Pharmacy Residency Program

The largest private teaching hospital in San Diego, Scripps Mercy Hospital offers three 12-month postgraduate year one (PGY-1) pharmacy resident positions. Accredited since 2002 by the American Society of Health-System Pharmacists (ASHP), the postgraduate program is designed to develop skilled clinicians that can deliver pharmaceutical care in a variety of health care settings.

The pharmacy practice residency program at Scripps Mercy Hospital focuses on pharmacotherapy, project management skills and teaching in a decentralized pharmacy setting. The pharmacy department is open 24/7 and includes a central pharmacy along with six inpatient satellite locations. Pharmacists provide a broad range of clinical services and work collaboratively with the health care team. Scripps Mercy is affiliated with five pharmacy schools and annually trains 12 to 15 pharmacy candidates.

SCRIPPS MERCY HOSPITAL AND MERCY CLINIC

COMMUNITY BENEFIT SERVICES SUMMARY LIST

FY13

Program Title	Volunteer Hours	Staff Hours	Financial Support*	Persons Served
Bad Debt**	N/A	N/A	\$3,659,165	N/A
Blood Drives for the American Red Cross	N/A	76	\$7,360	420
Central Region Public Health Nurses	N/A	N/A	\$0	233
Charity Care	N/A	N/A	\$22,478,492	N/A
CHIP Committees and Work Teams**	N/A	35	\$3,297	N/A
City Heights Wellness Center Coalition Building**	N/A	692	\$13,331	1,675
City Heights Wellness Center Community Health Education	N/A	1,951	\$97,030	6,184
City Heights Wellness Center Community Support**	N/A	1,087	\$57,961	3,788
City Heights Wellness Center Health Advocacy Project**	N/A	304	\$749	591
City Heights Wellness Center Health Care Support Services	N/A	345	\$18,373	1,251
Clinical Rotations	N/A	14,614	\$1,060,731	N/A
Community Benefit Fund - Legal Aid Society of San Diego - Consumer Center for Health Education and Advocacy (CCHEA)	N/A	N/A	\$120,000	N/A
Donated Room Space for Non-Profit Organizations	N/A	N/A	\$0	101
Emergency Professional Training	N/A	1,680	\$109,343	830
In Lieu of Funds**	N/A	N/A	\$387,938	N/A
Latinos Y Latinas en Accion**	N/A	N/A	\$900	320
Medi-Cal (Shortfall)	N/A	N/A	(\$11,911,390)	N/A
Medicare and Medicare HMO (Shortfall)**	N/A	N/A	\$14,643,222	N/A
Mercy Clinic, Scripps Mercy Hospital	N/A	N/A	\$3,122,033	N/A
<p>*"FINANCIAL SUPPORT" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer labor hours. In some instances an entire community benefit program cost center has been divided between several initiatives.</p> <p>** Community building activities, bad debt, In Lieu of Funds, and Medicare shortfall do not count as community benefits under the new Schedule H 990 but are still reportable outside the community benefit table.</p>				

Program Title	Volunteer Hours	Staff Hours	Financial Support*	Persons Served
Mercy Inpatient Behavioral Health	N/A	N/A	\$2,045,058	N/A
Mercy Outpatient Behavioral Health	N/A	N/A	\$2,504,448	N/A
Mercy Outreach Surgical Team (MOST)	640	1,498	\$283,373	397
Nurses Now	N/A	N/A	\$0	164
Mercy Outreach Surgical Team (MOST)	544	993	\$340,202	486
Other Means-Tested Government Programs (Shortfall)	N/A	N/A	\$16,085,121	N/A
Pharmacy Residency	N/A	4,085	\$191,580	N/A
Research: AAST Vascular Trauma Registry-Pro prospective Observational Vascular Injury Trial (PROOVIT)	N/A	17	\$1,602	N/A
Research: Blast Injuries and Gunshot Wounds of the Face	N/A	511	\$33,525	N/A
Research: Comorbidities and Injury: Implications and Impact on Outcome on Trauma Patients	N/A	383	\$25,558	N/A
Research: Effect of Specialty Training on Outcome of Operative Management of Extremity Vascular Trauma	N/A	638	\$42,829	N/A
Research: Consortium of Leaders in the Study of Traumatic Thromboembolism	N/A	80	\$6,145	N/A
Research: Effect of Specialty Training on Outcome of Operative Management of Extremity Vascular Trauma	N/A	68	\$5,935	N/A
Research: Impact of a More Conservative Approach to CT Scanning	N/A	716	\$51,465	N/A
Research: Is the Difference in Trauma Patient Mortality Between the Insured and the Uninsured Due to Co-Morbid Conditions?	N/A	1	\$94	N/A
Research: Measuring Workload at a Level I Trauma Center	N/A	41	\$3,752	N/A
Research: The Impact of Comfort Care on the Trauma Service	N/A	769	\$61,124	N/A
Research: The Path to the OR-The Need for CT Scan of the Torso in Trauma Patients Requiring Laparotomy	N/A	222	\$14,527	N/A
<p>*"FINANCIAL SUPPORT" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer labor hours. In some instances an entire community benefit program cost center has been divided between several initiatives.</p> <p>** Community building activities, bad debt, In Lieu of Funds, and Medicare shortfall do not count as community benefits under the new Schedule H 990 but are still reportable outside the community benefit table.</p>				

Program Title	Volunteer Hours	Staff Hours	Financial Support*	Persons Served
Research: The Potential Mortality and Morbidity in Elderly Trauma Patients on Pre-Injury Direct Thrombin Inhibitor Therapy	N/A	333	\$22,810	N/A
Research: The Value of Ultrasound Imaging Surveillance for Venous Thromboembolic Disease in Trauma Patients	N/A	828	\$54,778	N/A
Research: Thoracic Endovascular Repair vs. Open Surgery for Blunt Aortic Injury	N/A	35	\$2,538	N/A
Research: Traumatic Brain Injury in Patients on ACAP Agents	N/A	804	\$58,170	N/A
Research: Trends in Trauma-Related Mortality in the U.S. from 2002-2010	N/A	150	\$10,254	N/A
Research: Trial of Effectiveness of Screening and Brief Intervention for Drug Users in the Trauma and Emergency Departments	N/A	3	\$283	N/A
Research: Venous Thromboembolic Prophylaxis after Major Trauma: A Randomized Controlled Trial of Three Times a Day Unfractionated Heparin versus Enoxaparin	N/A	535	\$42,959	N/A
Research: Venous Thromboembolism Multicenter Trauma Registry	N/A	109	\$8,608	N/A
Scripps Mercy Behavioral Health A-Visions Service Program	N/A	N/A	\$207,820	N/A
Scripps Mercy Behavioral Health Services	8	80	\$13,483	3,130
Scripps Mercy Hospital Administration	N/A	N/A	\$300	N/A
Scripps Mercy Hospital Community Benefit Planning and Outreach	N/A	1,917	\$169,413	N/A
Scripps Mercy Hospital Medical Library	N/A	2,482	\$210,238	N/A
Scripps Mercy Hospital's GME Program	N/A	156,773	\$6,216,570	N/A
SDSU Student Nurses	N/A	N/A	\$0	275
Survivors of Suicide Loss	N/A	N/A	\$270	225
Trauma Coalition Building**	N/A	47	\$4,428	N/A
Trauma Community Health Education	N/A	12	\$1,130	N/A
Trauma Community Health Improvement Services	N/A	22	\$7,061	250
<p>*"FINANCIAL SUPPORT" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer labor hours. In some instances an entire community benefit program cost center has been divided between several initiatives.</p> <p>** Community building activities, bad debt, In Lieu of Funds, and Medicare shortfall do not count as community benefits under the new Schedule H 990 but are still reportable outside the community benefit table.</p>				

Program Title	Volunteer Hours	Staff Hours	Financial Support*	Persons Served
Trauma Health Education	N/A	6	\$609	12
Trauma Community Health Improvement Services and Health Education	35	34	\$18,525	4,250
Women, Infants, and Children (WIC) Community Health Education	223	35,965	\$1,426,369	100,380
TOTAL	976	229,324	\$63,667,167	125,976
<p>*"FINANCIAL SUPPORT" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer labor hours. In some instances an entire community benefit program cost center has been divided between several initiatives.</p> <p>** Community building activities, bad debt, In Lieu of Funds, and Medicare shortfall do not count as community benefits under the new Schedule H 990 but are still reportable outside the community benefit table.</p>				

Scripps Mercy Hospital, Chula Vista

2014 Community Benefit Plan, Fiscal Year 2014

The Scripps Mercy Hospital, Chula Vista, 2014 Community Benefit Plan describes the overall Scripps community benefit goal and the hospital's objectives and strategies to support community health improvement during Fiscal Year 2014 (October 2013 to September 2014).

The Scripps 2013 Community Benefit Goal

Make a measurable impact on the health status of the community through improved access to care, health improvement programs and professional education and health research.

Scripps Mercy Hospital, Chula Vista Fiscal Year 2014 Objectives

Community Health Services

The Scripps Mercy Chula Vista's Well-Being Center's goal is to increase health care access, provide preventative health education, offer youth introduction into health careers education, job training and placement in South Bay. Each month approximately 250-300 community members participate in classes, prevention lectures and support groups held at the center. Total programs and services combined reached more than 20,000 participants. Total funding of \$500,000 received from federal and local foundation sources were received this year for Scripps Mercy Hospital, Chula Vista, Community Benefits.

Community-Based Health Improvement Activities

Community members will participate in classes, prevention lectures and support groups. A total of 2,500 participants will take advantage of these programs.

Youth Activities

The goal is to implement a wide variety of School-to-Health career activities including: Camp Scripps, which introduces young students to health careers. This three-week camp educates them on the duties performed by professionals in various medical fields. Camp activities include a tour of the hospital, hands-on activities involving health care and speakers on health-related issues. Other activities include Health Professionals in the Classroom presentations and Health Professions Overview 101/hospital tour and puppet show. All of these activities are designed to pique the interest of students to pursue a career in health care. A total of 1,500 youth will participate in these programs.

Senior Health and Well-Being Programs

The goal is to increase health care, information and preventative services for seniors/older adults in the South Bay. Each month a variety of senior programs will be held at local senior centers, churches and senior housing. Some of these activities include: senior health chats, men's group, Senior Camp Scripps, flu events, health fairs and a widow support group. More than 700 seniors will participate in these programs.

Maternal and Child Health Programs

The goal is to improve the health of pregnant women, mothers and their babies in San Diego County. The program aims to enhance the capacity of the local maternal and child health service systems to improve birth outcomes. Home visiting will be offered together with family medicine residency and parenting education.

First Five and Promise Neighborhoods Home Visits

A total of 60 home visits will be provided and 300 services will be given to first-time and at-risk mothers, including: home visits, referrals, data entry, follow-up phone calls, and other support services.

First Five Parenting Classes

A total of 260 unduplicated parents will participate in parenting classes; 240 sessions will be provided.

Breast Health Outreach and Clinical Services

The goal is to increase education, outreach and access to early detection and screenings for breast health clinical services. A total of 4,000 women will be referred to clinical breast health services in the community and Scripps Mercy Hospital, Chula Vista, radiology services. A total of 3,000 services will be provided, including telephone reminders, outreach and education, case management and a variety of presentations.

Patient Continuity of Care with Scripps Mercy Hospital Chula Vista Radiology

Scripps Mercy Hospital, Chula Vista, Radiology Loss to Follow-Up Services

A total of 30 services will be provided including encouragement for patients to repeat exam, assisting patients in getting health insurance approval to repeat exam, social/emotional support and education about preventing breast cancer.

Scripps Mercy Hospital, Chula Vista, Radiology Positive Breast Cancer Patient Support

A total of 30 services will be provided. These include phone calls, home visits, resources and educational material packets, and social/emotional support.

Stay Quit Study - Hospitalized Patients Smoking Cessation

This is a partnership with the California Smokers Helpline. Participants were included in a randomized control trial to assess how best to assist hospitalized smokers to quit smoking. Recruitment is now complete and manuscript development and preparation is under way during the next year.

Professional Education and Research

Health Careers Promotion and Continuing Education (San Diego Border Area Health Education Center (AHEC))

The primary mission of the San Diego Border AHEC program is to build and support a diverse, culturally competent primary health care workforce in San Diego's medically underserved communities. The program improves health care access, education, job training and placement for youth and adults in southern San Diego County. A primary focus is implementing School to Health career activities, including mentoring, camps, job shadowing, health education classes, health chats, support groups, health fairs and others.

Health Professions Overview 101

Students from local schools tour the hospital and spend time in clinical departments to learn about a variety of health care professions. Students interact with the staff and ask questions. The tours are two hours and have a maximum of 12 students per tour.

Health Professionals in the Classroom

Health care professionals, such as medical residents, dieticians, nurses and doctors, enlighten students on health care careers and health related topics. These are interactive sessions such as Nursing 101, Doc 101, Health and Nutrition, Stroke Prevention, Breast Health, Teen Pregnancy, Substance Abuse, STD's and Health Professions 101. Students receive health career tools/brochures that include information on education requirements, scholarships and way to pay for college.

Health Professions Education, Resident and Student Training

The goal is to raise the numbers, types, diversity and retention of primary health and social service care professionals working in underserved areas.

- Expand community medicine opportunities for family practice residents to provide services and reach at least 300 individuals.
- Continue to work closely with Scripps Family Practice Residency Program to place medical students in community health activities.
- A total of 600 individuals will participate in Health Career Talks, Veterans Mental Health Training, community activities, internship programs, residency rotations and Balint support groups.
- Two articles will be published in peer-reviewed journals.
- Coordinate community experience for visiting/rotating doctors from the PACCT (Pediatricians and Community Collaborating Together) Program. Provide community experience for 10 pediatric residents.

Advisory Board Participation and Coalition Building Meetings

More than 700 individuals will participate in local advisory and coalition meetings.

The Chula Vista Community Collaborative

The Chula Vista Community Collaborative (CVCC) meets monthly and draws together the local community to develop strategies to protect resident health and safety, develop economic resources, promote local leadership, enhance the environment and contribute to the celebration of and respect for cultural diversity. The CVCC has more than 150 member organizations and 624 members. The CVCC is an umbrella for a variety of programs and committees, including the Family Resource Center, and acts as a platform to launch new initiatives to improve quality of life.

Collaborate for Healthy Weight

A program of the Health Resources and Services Administration (HRSA) and the National Initiative for Children's Health Care Quality (NICHQ), Collaborate for Healthy Weight meets monthly to create partnerships among primary care, public health and community organizations to discover sustainable ways to promote healthy weight and eliminate health disparities. All three sectors collaborate, using evidence-based approaches, to reverse the obesity epidemic and improve the health of our communities. Several manuscripts are under development.

School Readiness Committee

Quarterly meetings to ensure policies, programs and resources are available at the local level to increase interest in reading and ensure children are adequately prepared for school.

Uncompensated Health Care

Located near the United States-Mexico border, Scripps Mercy Hospital, Chula Vista, plays a pivotal role in the health care delivery network for the underserved in San Diego County. During fiscal year 2013, Scripps Mercy Hospital, Chula Vista, will continue to provide health care services for vulnerable patients who are unable to pay for services.

- Maintain, communicate and effectively administer Scripps' financial assistance policy in a manner that meets patients' needs.
- Ensure that care is available through the emergency department, regardless of a person's ability to pay.

Scripps Mercy Hospital, Chula Vista

2014 Community Benefit Report, Fiscal Year 2013

The Scripps Mercy Hospital, Chula Vista, Community Benefit Report is an account of the hospital's dedication and commitment to improving the health of the community, detailing the programs that have provided benefit over and above standard health care practices in fiscal year 2013 (October 2012 to September 2013).

Fostering Volunteerism

In addition to the financial community benefit contributions made during FY13, Scripps Mercy Hospital, Chula Vista, employees and affiliated physicians donated a significant portion of their personal time volunteering to support Scripps-sponsored community benefit programs and services. With close to 3,448 hours of volunteer time, it is estimated that the dollar value associated with this volunteer labor is \$151,602.84.⁴

Making a Financial Commitment

During fiscal year 2013, Scripps Mercy Hospital, Chula Vista, devoted \$27,358,372 to community benefit programs, including uncompensated health care, community health services, professional education and health research. The programs offered by Scripps emphasize community-based prevention efforts and use innovative approaches to reach residents at greatest risk for health problems.

Scripps Mercy Hospital, Chula Vista, Community Benefit Services Highlights (After Hospital Provider Fee)

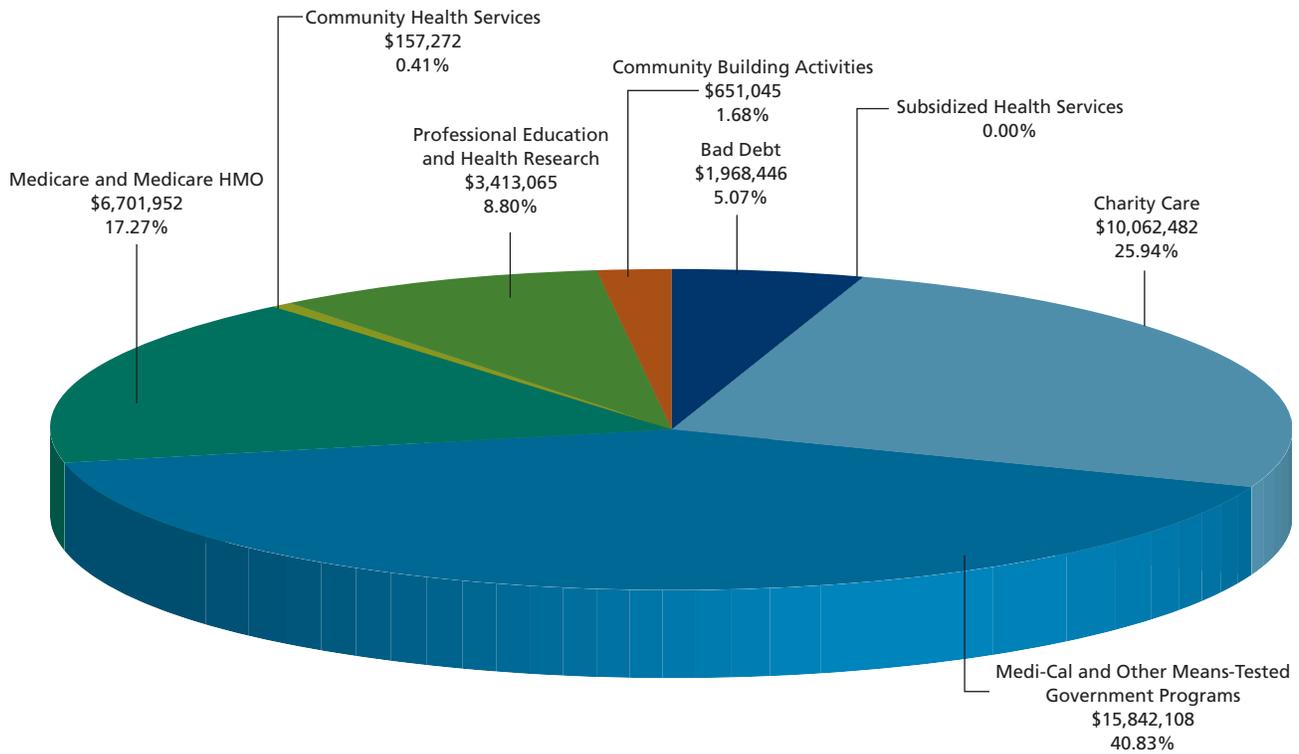
During fiscal year 2013, Scripps Mercy Hospital, Chula Vista contributed \$27,358,372 to community benefits, including, \$10,062,482 in charity care, \$4,404,109 in Medi-Cal and other Means-Tested Government Programs (Scripps had to offset the provider fee income from Medi-Cal in fiscal year 2013), \$6,701,952 in Medicare shortfall, \$1,968,446 in bad debt, \$157,272 in community health services, \$0 in subsidized health services \$3,413,065 in professional education and health research and \$651,045 in community building activities.

Refer to Figure 8:3, presented on the following page, for a graphical representation of the FY13 Scripps Mercy Hospital, Chula Vista Community Benefit Services distribution.

⁴ Calculation based upon an average hourly wage for the Scripps Health system plus benefits.

FIGURE 8:3

FY13 Scripps Mercy Hospital, Chula Vista Community Benefit Services Distribution, \$38,796,371 (before provider fee)



Provider Fee Impact	Bad Debt	Charity Care	Medi-Cal & Other Means-Tested	Medicare & Medicare HMO	Community Health Svcs	Prof Ed and Health Research	Community Building	Subsidized Health Svc	Total
Community Benefit Services Before Provider Fee	1,968,446	10,062,482	15,842,108	6,701,952	157,272	3,413,065	651,045	-	38,796,371
Provider Fee			(11,437,999)						(11,437,999)
Net Community Benefit Services After Provider Fee	1,968,446	10,062,482	4,404,109	6,701,952	157,272	3,413,065	651,045	-	27,358,372

Community Benefit Services:

Community benefit services include those programs and services offered to the community that go above and beyond what is provided as a normal part of patient care. Scripps categorizes community benefit services in three categories, including uncompensated health care, community health services and professional education and health research. Uncompensated care includes charity care, bad debt, Medi-Cal and other means-tested government programs and Medicare shortfalls.

Scripps Mercy Hospital, Chula Vista's Fiscal Year 2013 Community Health Services Highlights

Community Health Services Highlights

Community health activities include prevention and wellness programs, such as screenings, health education, support groups and health fairs, which are supported by operational funds, grants, in-kind donations and philanthropy. These programs are designed to raise public awareness, understanding of and access to identified community health needs (refer to Section 2 — Community Health Needs Assessment).

During fiscal year 2013 (October 2012 to September 2013), Scripps Mercy Hospital, Chula Vista, invested \$157,272 in community health services. This figure reflects the cost associated with providing community health improvement activities, including salaries, materials and supplies, minus billable revenue. This section highlights some of Scripps Mercy Hospital, Chula Vista's, fiscal year 2013 community health services achievements.

Professional Education and Health Research Highlights

Quality health care is highly dependent upon health education systems and medical research programs. Without the ability to train and inspire a new generation of health care providers, or to offer continuing education to existing health care professionals, the quality of health care would be greatly diminished.

Each year, Scripps Mercy Hospital, Chula Vista, allocates resources to advance health care services through professional health education programs. To enhance service delivery and treatment practices for San Diego County, Scripps Mercy Hospital, Chula Vista, invested \$3,413,065⁵ in professional training programs during fiscal year 2013 (October 2012 to September 2013). This section highlights some of Scripps Mercy Hospital, Chula Vista's, professional education and health research activities in fiscal year 2013.

Scripps Family Medicine Residency Program (2012–2013)

The Scripps Family Medicine Residency Program (SFMRP) is a community-based training program developed through a partnership between the UCSD School of Medicine, Scripps Mercy Hospital, Chula Vista, and the San Ysidro Health Center, Inc (SYHC). SFMRP was established with the support of the San Diego Border Area Health Education Center (San Diego Border AHEC) to increase access to quality health care for medically underserved communities along the California and Baja California border. SYHC is a federally-qualified health center (FQHC).

The majority of inpatient training takes place at Scripps Mercy Hospital, Chula Vista, the institutional base for the San Diego Border AHEC. SFMRP collaborates with the Community Benefits Department at Scripps Mercy Hospital, Chula Vista, and the San Diego Border AHEC to support a diverse, culturally sensitive primary health care workforce in San Diego's medically underserved communities. Currently, there are eight

⁵ Reflects clinical research as well as professional education for non-Scripps employees, nursing resource development and other health care professional education. Calculations based on total program expenses.

residents per class with a full complement of 24. A total of 76 residents have graduated since the program's inception in 1999.

SFMRP emphasizes community medicine throughout the curriculum. Through its partnership with SYHC and their satellite clinics, residents receive community experience during their rotations in pediatrics, adolescent medicine, women's health, behavioral medicine, HIV/AIDS, sports medicine and geriatrics. All rotations combine clinical and community training.

Community-based activities include childhood obesity prevention, home-based falls assessment in the elderly, maternal and child health outcomes studies and required Community Medicine Oriented Primary Care (CMOPC) Projects for residents. In response to local Healthy Border objectives, SFMRP has a curriculum to improve cultural and linguistic competence among residents. This longitudinal program incorporates teaching medical Spanish, cultural issues and health disparities in a clinically relevant context. SFMRP also runs two school-based clinics at Southwest and Palomar High Schools that address the health needs of vulnerable adolescents. Training in adolescent medicine also includes sports medicine physicals for more than 1,000 students each year.

Chula Vista Family Clinic, a satellite clinic of SYHC, is the family medical center for the SFMRP. In fiscal year 2013, there were more than 13,000 clinical visits and more than 10,000 community contact by residents and program faculty. Patient demographics reflect the San Diego Border region; 79 percent of patients are Latino, 86 percent live at or below 200 percent of the Federal Poverty Level, and 27 percent are uninsured and are offered a sliding fee program.

SFMRP has recruited and matched a diverse group of residents. More than 50 percent of residents and graduates are members of under-represented minority groups reflecting the cultural and ethnic mix of the region. More than 75 percent of graduates have stayed in San Diego County. More than 65 percent are specifically serving low-income populations by practicing in a community health center or National Health Service Corp (NHSC) site. All of those working in the community provide primary care and offer a medical home for patients who might otherwise receive no care or seek care through hospital emergency departments.

Scripps Mercy Hospital, Chula Vista

COMMUNITY BENEFIT SERVICES SUMMARY LIST

FY13

Program Title	Volunteer Hours	Staff Hours	Financial Support*	Persons Served
Bad Debt**	N/A	N/A	\$1,968,446	N/A
Blood Drives for the American Red Cross	N/A	35	\$1,966	45
Charity Care	N/A	N/A	\$10,062,482	N/A
Clinical Rotations	N/A	8,103	\$588,130	N/A
Community Health Research - Smoking Cessation Study	N/A	2,254	\$93,842	5,658
Donated Room Space for Non-Profit Organizations	N/A	N/A	\$11,655	2,087
In Lieu of Funds**	N/A	N/A	\$616,859	N/A
Maternal and Child Health - Community Health Education Programs	N/A	1,264	\$2,503	497
Maternal and Child Health - Community Health Education Breast Health Programs	N/A	1,095	\$10,593	3,873
Maternal and Child Health - Community Based Clinical Breast Health Programs	N/A	N/A	\$0	4,431
Maternal and Child Health - Health Care Support Services Programs	N/A	1,264	\$2,503	370
Medi-Cal (Shortfall)	N/A	N/A	(\$1,884,361)	N/A
Medicare and Medicare HMO (Shortfall)**	N/A	N/A	\$6,701,952	N/A
Other Means-Tested Government Programs (Shortfall)	N/A	N/A	\$6,288,470	N/A
Scripps Behavioral Health Services	8	4	\$553	100
Scripps Family Medicine Residency Program	N/A	64,771	\$2,673,840	N/A
Scripps Mercy Health Professionals Training	3,428	1,480	\$57,252	660

*"FINANCIAL SUPPORT" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer labor hours. In some instances an entire community benefit program cost center has been divided between several initiatives.

** Community building activities, bad debt and Medicare shortfall do not count as community benefits under the new Schedule H 990 but are still reportable outside the community benefit table.

Program Title	Volunteer Hours	Staff Hours	Financial Support*	Persons Served
Scripps Mercy Hospital Chula Vista Community Benefit Planning and Outreach	N/A	N/A	\$33,349	N/A
Scripps Mercy Hospital Chula Vista Community Building**	N/A	1,443	\$34,187	744
Scripps Mercy Hospital Chula Vista Rehabilitation Programs	N/A	204	\$12,810	253
Scripps Mercy Hospital Chula Vista Senior Programs	N/A	226	\$9,669	311
Scripps Mercy Hospital Chula Vista Stroke Programs	12	12	\$949	150
Scripps Mercy Hospital Chula Vista Youth Programs	N/A	1,445	\$60,005	655
Senior Flu Shot Clinic	N/A	232	\$10,716	110
TOTAL	3,448	83,834	\$27,358,372	19,944
<p>*"FINANCIAL SUPPORT" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer labor hours. In some instances an entire community benefit program cost center has been divided between several initiatives.</p> <p>** Community building activities, bad debt and Medicare shortfall do not count as community benefits under the new Schedule H 990 but are still reportable outside the community benefit table.</p>				

Scripps Green Hospital

About Scripps Green Hospital

Located on Torrey Pines Mesa in La Jolla, Scripps Green Hospital has 173 licensed beds, more than 1,427 employees and cares for 6.3 percent of the inpatient population living in the hospital's service area. Within the service area, Scripps Green cares for 9.8 percent of Medicare patients; 0.1 percent of Medi-Cal patients; 6.0 percent of commercially insured patients; and 1.5 percent of patients with other payment sources, including self-pay and charity care.

Scripps Green Hospital offers a wide range of clinical and surgical services, including intensive care, cancer/oncology, cardiothoracic and orthopedic surgeries. Specialty services include interventional cardiology, orthopedics, blood and bone marrow transplantation, solid organ transplantation and clinical research. Additionally, Scripps Center for Integrative Medicine was established in 1999. Scripps Green is a teaching facility, offering graduate medical education.

Distinguishing Programs and Services

- Bone Marrow Transplant Program
- Heart, Lung and Vascular Center
- Ida M. and Cecil H. Green Cancer Center
- Organ Transplantation, Caregiver Support Group, Living Organ Donor and Liver Disease Center
- Scripps Radiation Therapy Center
- Mohs Surgery and Cutaneous Oncology Center
- Scripps Shiley Center for Integrative Medicine

Scripps Green Hospital

2014 Community Benefit Plan, Fiscal Year 2014

The Scripps Green Hospital 2014 Community Benefit Plan describes the overall Scripps community benefit goal and the hospital's and clinic's objectives/strategies to support community health improvement during fiscal year 2014 (October 2013 to September 2014).

The Scripps 2014 Community Benefit Goal

Make a measurable impact on the health status of the community through improved access to care, health improvement programs, professional education and health research.

Scripps Green Hospital Fiscal Year 2014 Community Benefit Objectives

Community Health Services

- St. Vincent de Paul Village Medical Center — Staffed by internal medicine residents and attending staff, this clinic offers medical care to approximately 300 of the county's most vulnerable residents each year. (Sponsored by Scripps Green Hospital, Department of Graduate Medical Education.)
- St. Leo's Mission Community Clinic — Staffed by internal medicine residents and Scripps Clinic staff physicians, this clinic serves lower income and indigent people in North County San Diego. The clinic is operated one evening and Saturday morning each week, typically treating up to 25 patients at each session. (Sponsored by Scripps Green Hospital, Department of Graduate Medical Education.)
- Continue to conduct blood drives on behalf of the American Red Cross.
- Continue to provide physical, emotional and spiritual support for cancer patients during their treatment.
- Continue the Expressive Writing workshop series (two ,10-week sessions in 2013), which is open to all Scripps patients and the community. This is a free, activity-based support group, which helps cancer patients find artistic outlets for their emotions, and provides clinical benefits.
- Participate in the 21st Annual Cancer Survivors Day. Expect to have 250 participants.
- Continue to offer free risk-assessment consultations and education for women who are at high risk for the BRCA gene mutation.
- Provide support services and community resources for health care workers, families, caregivers and cancer patients.
- Provide psychosocial services and guidance on transportation, housing, homecare, financial benefits, emotional concerns and other issues.

- Continue to work with community resources to enhance patient cancer navigator role, and patient navigator education and resources.
- Continue to provide education and support for patients going through transplants, end stage liver disease and renal disease. Additional services for caregivers and those thinking about becoming an organ donor.

Professional Education and Health Research

- Fiji Alliance (School of Medicine Training) — Scripps Green and Scripps Clinic physicians will provide specialty medicine training and supervision to undergraduate and post-graduate students attending the Fiji School of Medicine.
- Maintain and improve the graduate medical education program at Scripps Green and the Clinic. With 36 residents and 32 fellows, the Scripps Clinic and Scripps Green Hospital Department of Graduate Medical Education serve more than 5,000 San Diegans each year, both inpatient and outpatient. All residents demonstrate a strong commitment to community service by maintaining an evening clinic at the St. Vincent De Paul Village Medical Clinic and weekly clinics at St. Leo's Mission Community Clinic.

Uncompensated Health Care

- Scripps Green Hospital will continue to provide health care services to vulnerable patients who are unable to pay.
- Maintain, communicate and effectively administer Scripps' financial assistance policy in a manner that meets the needs of patients.

Scripps Green Hospital

2014 Community Benefit Report, Fiscal Year 2013

The Scripps Green Hospital Community Benefit Report is an account of the hospital's dedication and commitment to improving the health of the community, detailing the hospital programs that have provided benefit over and above standard health care practices in fiscal year 2013 (October 2012 to September 2013).

Fostering Volunteerism

In addition to the financial community benefit contributions made during fiscal year 2013, Scripps Green Hospital employees and affiliated physicians contributed a portion of their personal time volunteering to support Scripps-sponsored community benefit programs. With close to 632 hours of volunteer time, it is estimated that the dollar value associated with this volunteer labor is \$27,787.99.¹

Making a Financial Commitment

During fiscal year 2013, Scripps Green Hospital devoted \$41,404,743 to community benefit programs, including uncompensated health care, community health services, professional education and health research. The programs offered by Scripps emphasize community-based prevention efforts and use innovative approaches to reach residents at greatest risk for health problems.

Scripps Green Hospital Fiscal Year 2012 Community Benefit Services Highlights (After Hospital Provider Fee)

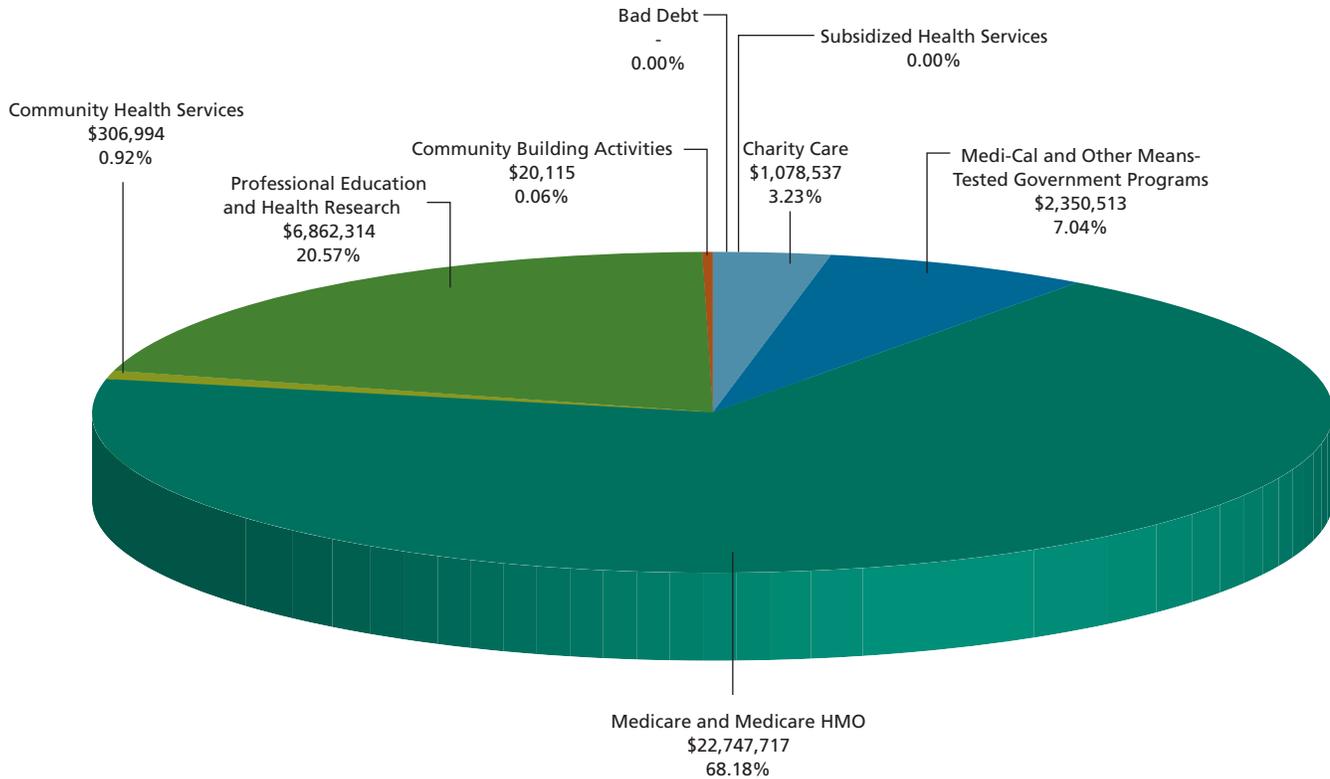
During fiscal year 2013, Scripps Green Hospital contributed \$41,404,743 to community benefits, including \$1,078,537 in charity care, \$10,389,066 in Medi-Cal and other means-tested government programs, \$22,747,717 in Medicare shortfall, \$306,994 in community health services and \$6,862,314 in professional education and health research \$0 in subsidized health services and \$20,115 in community building activities.

Refer to figure 9:1, on the following page, for a graphic representation of the fiscal year 2013 Scripps Green Hospital Community Benefit distribution.

¹ Calculation based upon an average hourly wage for the Scripps Health system plus benefit

FIGURE 9:1

FY13 Scripps Green Hospital Community Benefit Services Distribution, \$33,366,190 (before provider fee)



Provider Fee Impact	Bad Debt	Charity Care	Medi-Cal & Other Means-Tested	Medicare & Medicare HMO	Community Health Svcs	Prof Ed and Health Research	Community Building	Subsidized Health Svc	Total
Community Benefit Services Before Provider Fee	-	1,078,537	2,350,513	22,747,717	306,994	6,862,314	20,115	-	33,366,190
Provider Fee			8,038,553						8,038,553
Net Community Benefit Services After Provider Fee	-	1,078,537	10,389,066	22,747,717	306,994	6,862,314	20,115	-	41,404,743

Community Benefit Services:

Community benefit services include those programs and services offered to the community that go above and beyond what is provided as a normal part of patient care. Scripps divides community benefit services into three categories, including uncompensated health care, community health services, and professional education and health research. Uncompensated care includes charity care, bad debt, Medi-Cal and other means-tested government programs and Medicare shortfalls.

Scripps Green Hospital Fiscal Year 2013 Community Benefit Services Highlights

Community Benefit Highlights

Community health services include prevention and wellness programs, such as screenings, health education, support groups and health fairs, which are supported by operational funds, grants, in-kind donations and philanthropy. These programs are designed to raise public awareness, understanding of and access to identified community health needs (refer to Section 2 — Community Health Needs Assessment).

During fiscal year 2013 (October 2012 to September 2013), Scripps Green Hospital invested \$306,994 in community health services. This figure reflects the cost associated with providing community health improvement activities, including salaries, materials and supplies, minus billable revenue. This section highlights some of Scripps Green Hospital's fiscal year 2013 community benefit services achievements.

Professional Education and Health Research Highlights

Quality health care is highly dependent upon health education systems and medical research programs. Without the ability to train and inspire a new generation of health care providers, or to offer continuing education to existing health care professionals, the quality of health care would be greatly diminished. Medical research also plays an important role in improving the community's overall health through the development of new and innovative treatment options.

Each year, Scripps Green Hospital allocates resources to advance health care services through clinical research and medical education. To enhance service delivery and treatment practices for San Diego County, Scripps Green Hospital invested \$6,862,314² in professional training programs and clinical research during fiscal year 2013 (October 2012 to September 2013). This section highlights some of Scripps Green Hospital's professional education and health research activities in fiscal year 2013.

Internal Medicine Residency Program

With 36 residents and 32 fellows, the Scripps Clinic/Scripps Green Hospital Department of Graduate Medical Education serves more than 5,000 San Diegans each year. All residents and many attending physicians in the program demonstrate a strong commitment to community service by maintaining an evening clinic at the St. Vincent de Paul Village Medical Clinic and St. Leo's Mission Community Clinic. With a commitment to community health, these health care providers are working to improve the overall health of San Diegans.

² Reflects clinical research as well as professional education for non-Scripps employees, including graduate medical education, nursing resource development and other health care professional education. Calculations based on total program expenses.

Fiji/Scripps Alliance (School of Medicine Training)

Education is critical to the Fiji Alliance's mission. Through a formal agreement, volunteer specialists from Scripps Health provide academic training in the Fiji School of Medicine's post-graduate programs for anesthesia, surgery, internal medicine, pediatrics and obstetrics/gynecology. Scripps is one of only a few freestanding health systems in the U.S. to assist in such overseas academic training programs. In conjunction with other regional foundations the residents and faculty of the Scripps Clinic and Scripps Green Hospital Internal Medicine Program provided humanitarian medical services to the impoverished and isolated populations of the Solomon Islands. (Sponsored by Scripps Clinic/Green Hospital.)

SCRIPPS GREEN HOSPITAL

COMMUNITY BENEFIT SERVICES SUMMARY LIST

FY13

Program Title	Volunteer Hours	Staff Hours	Financial Support*	Persons Served
Blood Drives for the American Red Cross	N/A	6,746	\$12,163	318
Cancer Center Support Groups	N/A	N/A	\$1,480	10
Charity Care	N/A	N/A	\$1,078,537	N/A
Clinical Rotations	N/A	4,793	\$347,863	N/A
Donated Room Space for Non-Profit Organizations	N/A	N/A	\$23,879	4,818
Fiji Alliance	300	N/A	\$0	750
In Lieu of Funds**	N/A	N/A	\$20,115	N/A
Medi-Cal (Shortfall)	N/A	N/A	\$10,044,317	N/A
Medicare and Medicare HMO (Shortfall)**	N/A	N/A	\$22,747,717	N/A
Organ Transplant Support Groups	N/A	2,156	\$5,254	1,085
Other Means-Tested Government Programs (Shortfall)	N/A	N/A	\$344,749	N/A
Scripps Green Hospital Department of Graduate Medical Education	N/A	147,951	\$6,502,742	N/A
Scripps Green Hospital Medical Library	N/A	N/A	\$263,665	N/A
Scripps Behavioral Health Services	8	103	\$553	50
St. Leo's Mission Medical Clinic	142	3,463	\$5,132	629
St. Vincent de Paul Village Medical Clinic and Mid City Clinic	182	4,439	\$6,577	310
TOTAL	632	169,651	\$41,404,743	7,970

*"FINANCIAL SUPPORT" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer labor hours. In some instances an entire community benefit program cost center has been divided between several initiatives.

** Community building activities, bad debt and Medicare shortfall do not count as community benefits under the new Schedule H 990 but are still reportable outside the community benefit table.

Scripps Whittier Diabetes Institute

About Scripps Whittier Diabetes Institute

Scripps Whittier Diabetes Institute is dedicated to caring for and educating people with diabetes through diabetes management and support programs. Through leading-edge research, Scripps Whittier strives to find a cure for this chronic disease. The mission is to improve quality of life for people with diabetes through innovative education programs, clinical care, research and collaborations that pursue prevention and a cure.

Founded in 1982, Scripps Whittier stands alone as the San Diego region's leading comprehensive diabetes organization. The mandate at Scripps Whittier has always been to achieve excellence in diabetes care, research and education. The institute accomplishes its mission by being a resource and partner within Scripps Health and collaborating with other institutions, their researchers and physicians, including the University of California, San Diego; San Diego State University; Scripps Translational Science Institute; and San Diego Community Clinics.

Scripps Whittier Diabetes Institute — Distinguishing Programs

- Scripps Whittier is recognized as a comprehensive international center of excellence in diabetes care and prevention, professional education and research.
- Operates diabetes self-management education programs accredited by the American Diabetes Association. Nurses and dietitians certified in diabetes education provided hundreds of people with up-to-date and individualized diabetes training and education.
- Credited with the first successful replication of insulin-producing human islet cells outside the human body. Dr. Alberto Hayek's achievement is a milestone on the pathway to a cure. Led by five principal investigators, the Whittier-UCSD Stem Cell Islet Research Laboratory is engaged in several projects aimed at understanding pancreatic development for translational approaches to cell-based diabetes therapies. These scientists are significant contributors to the collaborative worldwide efforts to restore and/or maintain normal beta cell mass.
- For more than 15 years, Project Dulce has been internationally recognized as one of the most effective approaches to diabetes in low-income and diverse populations. Project Dulce has provided diabetes care and self-management education at community health centers, free clinics, community centers, churches, senior housing facilities and other locations. Nurse-led teams focus on achieving measurable improvements in the health of their patients, while peer educators help patients overcome cultural, economic or behavioral barriers to successfully managing their disease. Program results have been published in medical literature and have been recognized as innovative solutions to the diabetes epidemic.

- Retinal screenings detect vascular eye problems to prevent serious complications and blindness. Scripps Whittier provides retinal screenings for low-income people in Project Dulce.
- Scripps Whittier conducts community-based research programs, building on a long history of partnerships with San Diego County Health and Human Services Agency, federally qualified health centers and community clinics, Scripps Translational Science Institute (STSI) and San Diego State University, to prevent and treat diabetes in San Diego's multiethnic communities.
- Scripps Whittier is the community engagement arm for the Clinical Translational Science Award (CTSA) funded by the National Institutes of Health. In collaboration with the Scripps Translational Science Institute, the lead on the CTSA program, the scientific and community worlds are merged to develop community-driven research agendas in diabetes, wireless medicine and genomics.
- The Scripps San Diego Diabetes Genebank aims to establish a biobank to analyze the genetic predisposition to developing type 2 diabetes and associated metabolic abnormalities in the Mexican-American community. There have been tremendous advances in genomics medicine with minimal focus on minority groups, such as Latinos, who develop type 2 diabetes at much higher rates than other groups.
- With a commitment to growth and innovation, Scripps Whittier will build on the proven success of Project Dulce's chronic care model. Project Dulce 2.0 continues to reach out to patients using health technology and text messages, and focus on managing type 2 diabetes with healthy eating habits, physical activity and behavior management.
- Train health professionals locally and across the nation to provide the highest quality and most up-to-date diabetes care. Courses are designed for health care providers seeking to understand the new and complex clinical treatment options for type 1, type 2 and gestational diabetes. Scripps Whittier's professional education program is led by a team of experts that include endocrinologists, nurses, dietitians, psychologists and community health workers.
- By leading the diabetes care line at Scripps, Scripps Whittier is developing cohesive approaches to systemwide technical assistance. The institute is establishing standardized trainings in all Scripps hospitals and ambulatory care centers to foster optimal standards of diabetes care and glycemic management.

Scripps Whittier Diabetes Institute

2014 Community Benefit Plan, Fiscal Year 2014

Scripps Whittier Diabetes Institute 2014 Community Benefit Plan provides a description of the overall Scripps community benefit goal and Scripps Whittier Diabetes Institute's objectives and strategies to support community health improvement during Fiscal Year 2014 (October 2013 to September 2014).

The Scripps 2014 Community Benefit Goal

Make a measurable impact on the health status of the community through improved access to care, health improvement programs, and professional education and health research.

Scripps Whittier Diabetes Institute Fiscal Year 2014 Objectives

Scripps Whittier Diabetes Program

Scripps Whittier diabetes self-management training and education program has integrated the diabetes education services of two large primary care and multi-specialty groups: Scripps Clinic and Scripps Coastal Medical Group. This consolidation has expanded individual and group education and diabetes support groups to 14 sites.

Project Dulce

Scripps Whittier will continue to offer a comprehensive, culturally sensitive diabetes self-management program for underserved and uninsured populations.

During FY14, Project Dulce will:

- Continue to provide diabetes self-management education in community clinics and free diabetes education and support groups throughout San Diego County.
- Collaborate and train ethnic-specific organizations to provide health education and resources in their communities.
- Continue to train community health workers and health providers in Tijuana to implement the Project Dulce model within their national community clinic system.
- Collaborate with Scripps Mercy Hospital, Chula Vista, to reach patients with diabetes who need a medical home, reducing preventable hospital readmissions.
- Continue to identify and develop partnerships with community health providers, researchers and community stakeholders to promote bi-directional dialogues that foster equitable research agendas, discovery, application and dissemination of science that improves health and reduces disparities.
- Continue to pilot Project Dulce 2.0 to test the effectiveness of interactive text messaging to enhance medication adherence, self-care behaviors and improved clinical outcomes.

Community Education

- Scripps Whittier will continue participating in community health fairs and screenings in FY14 to expand public awareness about diabetes prevention, risk factors and the basic standards of care.
- Community events are planned in collaboration with the American Diabetes Association, the Juvenile Diabetes Research Foundation, Dia de La Mujer, Binational Health Week, Take Control of Your Diabetes (TCOYD) conference and Scripps Wellness Day.

Professional Education

- Scripps Whittier's education department will provide ongoing classes and programs tailored to the health care professional in communities throughout the United States.
- The Latino population exhibits a higher rate of type 2 diabetes, more frequent complications, greater disease severity and worse outcomes than non-Latino whites. People with Mexican and other Hispanic ancestry have not yet been adequately represented in genomic studies. The Scripps San Diego Diabetes Genebank will recruit participants from Project Dulce and Scripps Health to participate in the study, community genomics education sessions and surveys on their attitudes towards genomics.

Scripps Whittier Diabetes Institute

2014 Community Benefit Report, Fiscal Year 2013

The Scripps Whittier Diabetes Institute 2014 Community Benefit Report is an account of Scripps Whittier's dedication and commitment to improving the health of the community, detailing the institute's programs that have provided benefit over and above standard health care practices in fiscal year 2013 (October 2012 to September 2013).

Fostering Volunteerism

In addition to the financial community benefit contributions made during fiscal year 2013, Scripps Whittier Diabetes Institute employees and affiliated physicians donated a portion of their personal time volunteering to support Scripps-sponsored community benefit programs and services.

Making a Financial Commitment

During fiscal year 2013, Scripps Whittier Diabetes Institute devoted \$843,218 to community benefit programs, including uncompensated health care, community-based health improvement activities, and professional education and clinical research. The programs offered by Scripps Whittier emphasize community-based prevention efforts and use innovative approaches to reach residents at greatest risk for health problems.

During the past 10 years, the diabetes epidemic has permeated every facet of our community. The percentage of individuals entering hospitals with diabetes is rising; the number of children developing diabetes is growing; and larger numbers of people are experiencing complications from diabetes, such as renal failure and heart disease, at an earlier age. Developing unique, innovative clinical programs and community-based research is urgently needed to combat this epidemic. The diabetes and obesity epidemic have a disproportionate impact on low-income ethnic groups, yet there is little research demonstrating clinically and cost-effective care and treatment models for these highest risk populations. Diabetes leads to school and work absenteeism, elevated hospitalization rates, frequent emergency room visits, permanent physical disabilities and sometimes death.

According to a University of California Los Angeles health policy, both obesity and diabetes have grown significantly in California. Six million adults are obese and an additional 9.3 million are overweight. Diabetes prevalence increased 26 percent between 2001 and 2007. Obesity is a significant risk factor for diabetes; more than 2 million adults have been diagnosed with diabetes in California. Obesity and diabetes disproportionately affect people of color, the poor and those with the least education in California. In addition, according to the CDC from 1980 through 2009, the number of U.S. adults aged 18 years or older with diabetes has more than tripled (from 5.5 million to 19.6 million).

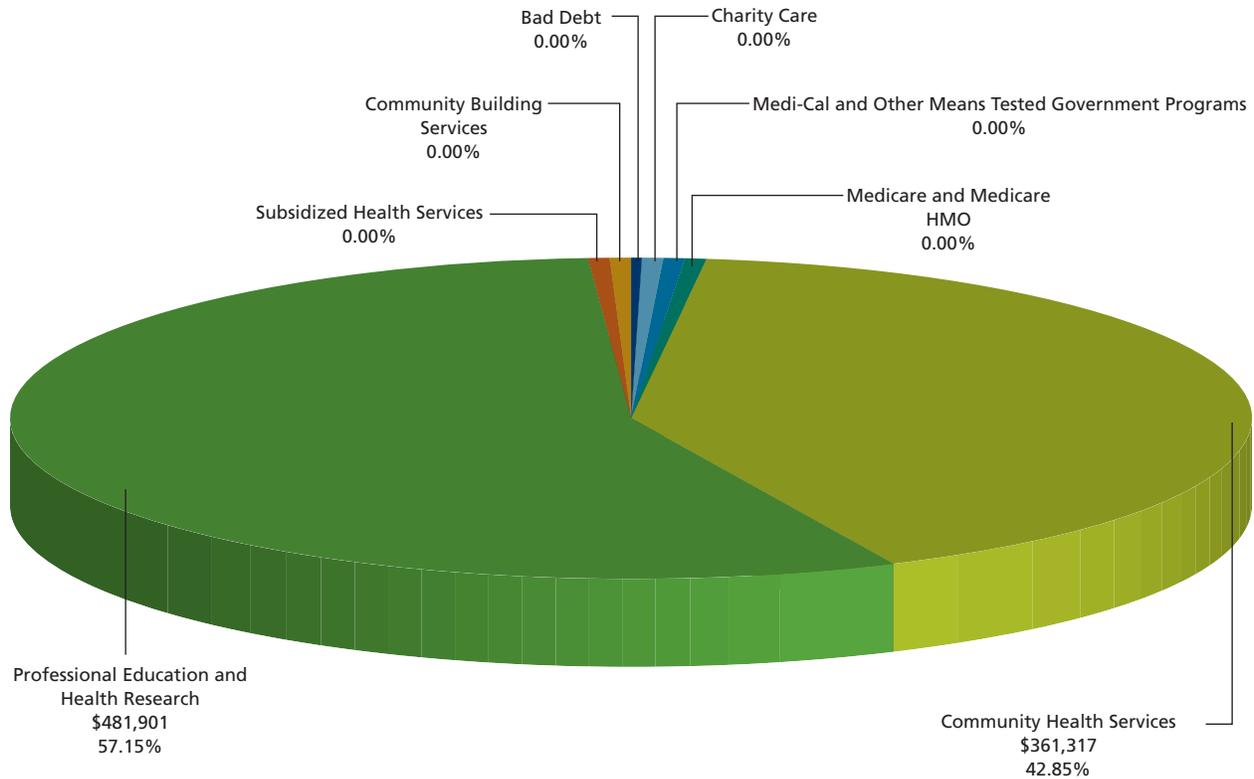
Project Dulce Model – 15 Years of Experience

The key elements of the Project Dulce Model are: multidisciplinary team approach (nurse-led), peer education (promotoras) and empowered patients. This model has improved clinical outcomes for glucose, blood pressure and LDL-c. It has improved behavior outcomes and patient satisfaction, and lowered costs to the health system through fewer ER visits and hospitalizations. More than 20,000 individuals have been treated.²

² Phillis-Tsimikas A, et al. Community-Created Programs: Clinical Diabetes, Fall 2012; 30;4; 156-163. Phillis-Tsimikas A. et al. Diabetes

FIGURE 10:1

FY13 Scripps Whittier Diabetes Institute Community Benefit Services Distribution, \$843,218



Community Benefit Services:

Community benefit services include programs offered to the community that go above and beyond what is provided as a normal part of patient care. Scripps divides community benefit services into three categories, including uncompensated health care, community health services and professional education, and health research. Uncompensated care includes charity care, bad debt, Medi-Cal and other means-tested government programs and Medicare shortfalls.

SCRIPPS WHITTIER DIABETES INSTITUTE

COMMUNITY BENEFIT SERVICES SUMMARY LIST

FY13

Program Title	Volunteer Hours	Staff Hours	Financial Support*	Persons Served
Diabetes Education Outreach Events	0	2,313	\$59,915	1,182
Professional Education Diabetes Programs	0	2,194	\$229,724	253
Project Dulce Diabetes Clinical Services	0	9,697	\$251,219	4,956
Project Dulce Diabetes Education	0	1,937	\$50,183	990
Scripps Whittier Diabetes Research	0	8,906	\$252,177	0
TOTAL	0	25,047	\$843,218	7,381

*"FINANCIAL SUPPORT" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer labor hours. In some instances, an entire community benefit program cost center has been divided between several initiatives. Categories are broken down in alignment with the new Schedule H 990.

Community building activities, bad debt and Medicare shortfall do not count as community benefits under the new Schedule H 990 but are still reportable outside the community benefit table.

Scripps Medical Foundation

About Scripps Medical Foundation

Scripps supports a number of programs and services that meet the health care needs of patients and community members throughout San Diego County. These include programs operated by Scripps Clinic, Scripps Coastal Medical Center and Scripps Cardiovascular and Thoracic Surgery Center.

About Scripps Clinic

Founded in 1924, Scripps Clinic is a multispecialty outpatient facility caring for patients at multiple locations throughout San Diego County, including Del Mar, Encinitas, Rancho Bernardo, San Diego, Rancho San Diego, San Marcos, Santee and La Jolla. Scripps Clinic and its physicians are world-renowned for research-driven care and medical specialty expertise. Scripps Clinic contracts with the Scripps Clinic Medical Group, Inc., which has 387 board-certified physicians in more than 50 fields of medicine and surgery. Scripps Clinic's main facility is located on Torrey Pines Mesa, adjacent to Scripps Green Hospital. Scripps Clinic offers the following services: Brain and Stroke Research and Treatment Center, Musculoskeletal Center, Scripps Center for Integrative Medicine and Scripps Clinic Center for Weight Management.

Scripps Coastal Medical Center

Scripps Coastal Medical Center is the name of the physician offices and outpatient centers created by merging Scripps Mercy Medical Group and Sharp Mission Park Medical Group. With more than 100 physicians in 13 locations throughout the San Diego region, Scripps Coastal Medical Center specializes in internal medicine, family medicine, gynecology and obstetrics, and pediatrics; and operates an urgent care center in Vista. In 2008, new locations in Carlsbad and Eastlake opened. In 2010, Scripps Health acquired three additional locations in Del Mar, Encinitas and Vista.

In 2011 the physicians of Del Mar Family Practice and La Jolla Radiology Medical Group joined Scripps Clinic Medical Group — a group that includes more than 400 physicians practicing in more than 50 areas of medicine and surgery.

Scripps Cardiovascular and Thoracic Surgery Group

The cardiovascular and thoracic surgeons from Scripps Memorial Hospital La Jolla, Scripps Clinic and Scripps Mercy Hospital joined together to create Scripps Cardiovascular and Thoracic Surgery Group. Scripps cardiovascular and thoracic surgeons have a wide range of expertise in chest and heart surgery, performing procedures to address cardiac and pulmonary disorders.

Scripps Medical Foundation

2014 Community Benefit Plan, Fiscal Year 2014

The Scripps Medical Foundation 2014 Community Benefit Plan provides a description of the overall Scripps community benefit goal and systemwide objectives/strategies to support community health improvement during fiscal year 2014 (October 2013 to September 2014).

The Scripps 2014 Community Benefit Goal

Make a measurable impact on the health status of the community through improved access to care, health improvement programs, and professional education and research.

Scripps Systemwide Program Fiscal Year 2014 Community Benefit Objectives

Community Health Services

- Scripps Coastal Medical Center will continue to provide a variety of screenings, such as body fat and blood pressure checks, at various health fairs.
- Scripps Coastal Medical Center will continue to provide a variety of health education classes for seniors.
- Scripps Coastal Medical Center will continue to provide health education to the community osteoarthritis class.
- Scripps Coastal Medical Center will continue to provide Hepatitis C support groups.
- Scripps Clinic will continue to provide hip and knee orthopedic surgery education for the general public.

Uncompensated Health Care

- Scripps Medical Foundation will continue to provide health care services for vulnerable patients who are unable to pay.
- Maintain, communicate and effectively administer Scripps' financial assistance policy in a manner that meets patients' needs.

Scripps Medical Foundation

2014 Community Benefit Report, Fiscal Year 2013

This section is an account of Scripps' dedication and commitment to improving the health of the community, detailing the Scripps Medical Foundation programs that have provided benefit over and above standard health care practices in Fiscal Year 2013 (October 2012 to September 2013).

Fostering Volunteerism

In addition to the financial community benefit contributions made during fiscal year 2013, Scripps Medical Foundation employees and affiliated physicians donated a portion of their personal time volunteering to support Scripps sponsored community benefit programs and services.

Making a Financial Commitment

During fiscal year 2013, \$80,215,329 was devoted by Scripps Medical Foundation programs to community activities, including uncompensated health care, community health services and professional education and health research. The programs offered by Scripps emphasize community-based prevention efforts and use innovative approaches to reach residents at greatest risk for health problems.

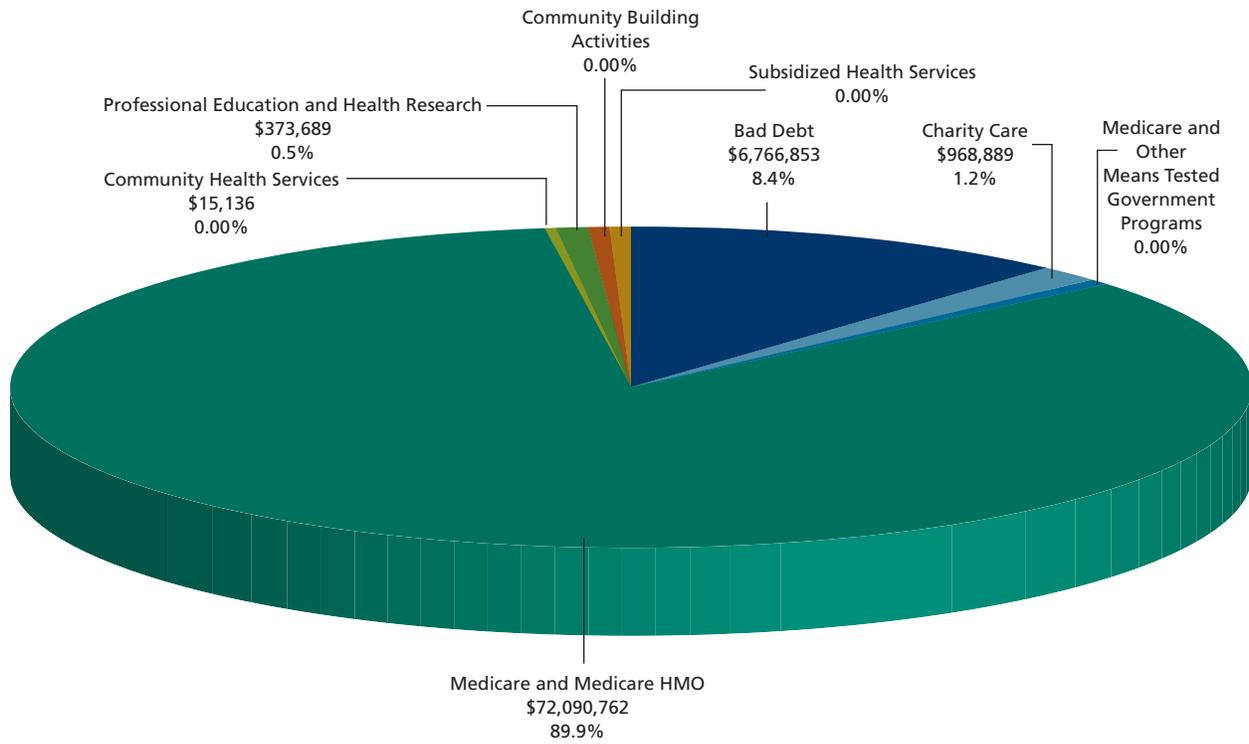
Scripps Medical Foundation Community Benefit Services Highlights (After Hospital Fee Provider Fee)

During fiscal year 2013, Scripps Medical Foundation contributed \$80,215,329 to community benefits, including \$968,889 in charity care, \$72,090,762 in Medicare shortfall, \$6,766,853 in bad debt and, \$373,689 in professional education and health research and \$15,136 in community health services.

Refer to Figure 11:1, presented on the following page, for a graphical representation of the FY13 Scripps Medical Foundation Community Benefit Services distribution.

FIGURE 11:1

FY13 Scripps Medical Foundation Community Benefit Services, \$80,215,329



Community Benefit Services:

Community benefit services include those programs offered to the community that go above and beyond what is provided as a normal part of patient care. Scripps divides community benefit services into three categories, including uncompensated health care, community health services and professional education and health research. Uncompensated care includes charity care, bad debt, Medi-Cal and other means-tested government programs and Medicare shortfalls.

Scripps Medical Foundation Fiscal Year 2013 Community Health Services

Community Health Services Highlights

Community health services include prevention and wellness programs, such as screenings, health education, support groups and health fairs, which are supported by operational funds, grants, in-kind donations and philanthropy. These programs are designed to raise public awareness, understanding of and access to identified community health needs (refer to Section 2 — Community Health Needs Assessment).

SCRIPPS MEDICAL FOUNDATION

COMMUNITY BENEFIT SERVICES SUMMARY LIST

FY13

Program Title	Volunteer Hours	Staff Hours	Financial Support*	Persons Served
Bad Debt**	N/A	N/A	\$6,766,853	N/A
Blood Drives for the American Red Cross	N/A	287	\$9,510	576
Charity Care	N/A	N/A	\$968,889	N/A
Clinical Rotations	N/A	5,148	\$373,689	N/A
Hepatitis C Support Group	N/A	60	\$5,626	60
Medicare and Medicare HMO (Shortfall)**	N/A	N/A	\$72,090,762	N/A
TOTAL	N/A	5,495	\$80,215,329	636

* "FINANCIAL SUPPORT" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer labor hours. In some instances an entire community benefit program cost center has been divided between several initiatives.

** Community building activities, bad debt and Medicare shortfall do not count as community benefits under the new Schedule H 990 but are still reportable outside the community benefit table.

Scripps Systemwide Programs

About Scripps Systemwide Programs

Scripps supports a number of programs that meet the health care needs of patients and community members throughout San Diego County. These include programs operated by Scripps Home Health Services, Scripps Cancer Care, Scripps Translational Science Institute (STSI), the Scripps Clinical Research Center and Scripps System Community Benefit Services.

Scripps Home Health Services

Scripps Home Health Care Services provides a range of health care services in people's homes. During fiscal year 2013, this multidisciplinary team of caregivers provided professional homecare services, as well as education on disease prevention and management, medications, diet and exercise, to approximately 5,000 patients throughout San Diego County. More than 160 nurses, therapists and support staff work closely with the patients' physicians and family to offer a variety of services, including nursing care, physical, occupational and speech therapy 365 days per year.

Scripps Home Health includes cardiovascular care, wound management, diabetic care, physical therapy, occupational therapy, speech therapy, dietary services and medical social services.

Scripps Hospice

Scripps Hospice is committed to providing compassionate in-home hospice care to patients with a serious life-limiting illness. We also coordinate hospice care services with other programs at Scripps, including home health and inpatient palliative care services. Designed to help reduce patients' physical pain and emotional suffering, our hospice care program is available to those who have made the decision to manage their pain and physical symptoms without seeking curative treatments. We work as a team to provide end-of-life care for adult and pediatric patients that not only brings patients comfort, self-respect and dignity, but also provides emotional, social and spiritual support for their family members. Scripps Hospice provides in-home hospice care throughout San Diego County — coastal cities, North County, East County, Central San Diego and the South Bay.

ScrippsCare

ScrippsCare was formed as a not-for-profit corporation governed by Scripps and seven physician groups. This collaboration promotes care coordination among patients, hospitals, providers and payers.

Scripps Mobile Medical Unit

Scripps operates a 40-foot Mobile Medical Unit that hosts diabetes prevention, screening and education services, as well as community disaster relief communications systems. The unit is equipped with two exam rooms, a lab and retinal camera. State-of-the-art telecommunications equipment enables staff to send test results to a physician's office for review in minutes. The unit is also equipped with triage and specialized communications systems so it can be used by the community during disasters.

Scripps Cancer Care

Scripps Cancer Care is a systemwide umbrella for cancer services across all Scripps hospital campuses and ambulatory care sites. Through Scripps Cancer Care, clinicians, scientists and health care professionals with expertise in research, treatment, education and prevention have come together to create a powerful cancer resource in San Diego County. Scripps adds 100 new clinical trials each year through its four hospitals, the Scripps Clinic medical group and Scripps Cancer Care. In addition, investigator-initiated research projects have produced new, state-of-the-art medical devices and technologies that are used worldwide. Scripps Cancer Care includes screening services, diagnostic services, ultrasound and ultrasound-guided breast biopsy, stereotactic-guided core breast biopsy, breast needle localization biopsy and computed tomography (PET).

Scripps Proton Therapy Center

In 2013, Scripps entered into a community collaboration with Rady Children's Hospital San Diego and the University of California San Diego Hospital for the provision of proton treatment at the newly opened Scripps Proton Therapy Center.

Scripps Clinical Research Center (SCRC)

Research and clinical discovery has been part of Scripps Health's mission since its founding in 1924. Scripps Clinical Research Center consolidates and expands access to clinical research for physicians and patients across the Scripps system and in all the communities Scripps serves. The research mission is to provide comprehensive, expert support for Scripps physicians and staff, so that they may provide patients with access to new treatment opportunities when appropriate. In addition, Scripps aligns its research objectives with ongoing continuing and graduate medical education programs.

In 2008, the Scripps Clinical Research Center was created to support clinical research throughout the Scripps system. The center has united more than 25 medical specialties under one roof. As a result, it accelerates the delivery of new technologies to patients by consolidating the components to conduct clinical investigation into one seamless, streamlined regulatory and administrative process.

Scripps is building on a strong foundation for clinical and translational research — from small pilot studies to large multicenter trials. All Scripps hospitals are engaged in research involving inpatient care. Ambulatory-based research is increasing across the system. Scripps currently supports more than 150 principal investigators and about 350 active clinical research protocols crossing broad interdisciplinary disease categories.

Scripps Clinical Research Trials

- Arthritis
- Cancer (various tumor sites)
- Cardiology
- Chronic Lung Disease
- Cosmetic Procedures
- Dermatology
- Epilepsy
- Eye Infections
- Eye – Macular Degeneration
- Eye – Cataracts
- Genomic Directed
- Growth Hormone Deficiency
- Hepatitis C
- High Cholesterol
- Joint Replacement
- Liver Disease
- Migraine Headaches
- Neuro-Imaging
- Obesity/Weight Loss
- Organ Transplant
- Osteoporosis
- Orthopedics
- Parkinson’s Disease
- Stroke

Scripps Genomic Medicine and Scripps Translational Science Institute (STSI)

In 2007, Scripps made substantial investments to establish the Scripps Genomic Medicine program and the Scripps Translational Science Institute (STSI). A year later, STSI was selected to receive a National Institutes of Health Clinical Translational Science Award. The five-year, \$20 million grant supports research, infrastructure and training. In 2013, STSI received a second CTSA award for \$33M for the next 5 years.

The Scripps Translational Science Institute is dedicated to accelerating the “translation” of basic laboratory discoveries into clinical trials and, ultimately, treatments. The institute, through seed funding, primarily supports collaborative opportunities between researchers at Scripps Health and The Scripps Research Institute (TSRI) to produce proof of concept studies. This funding allows collaborators to pursue promising and novel ideas by developing preliminary research findings in pilot studies that could lead to larger grants from National Institutes of Health or other funders. The institute also provides corollary support activities, such as biostatistics, bioinformatics, clinical trial staff, research training in clinical investigation and administrative support.

Scripps Genomic Medicine is a Scripps Health initiative in collaboration with TSRI. The work at Scripps Genomic Medicine dovetails with the Scripps Translational Science Institute, looking to advance personalized medicine based on an individual’s genetic code. Today, virtually all standards of care are based on a drug or therapy’s greatest common efficacy with the least amount of acceptable side effects, leaving significant numbers of patients unaffected by a drug or therapy (non-responders). These non-responders may end up taking expensive medications or undergoing medical testing needlessly in a financially strapped health care environment. By defining the genetic codes that underlie susceptibility to disease, and taking these findings from the laboratory to drug discovery and design to the patient’s bedside, Scripps Genomic Medicine seeks to usher in a new era of individualized care.

The program's work includes genotyping and sequencing individuals of diverse ancestry to identify and define the genes responsible for both major diseases and good health. Identifying these genes may lead to new drugs and gene-specific clinical trials.

Scripps Genomic Medicine is studying patients with idiopathic diseases (diseases with unknown diagnosis or causes). These patients still have no answers for their maladies after exhaustive and extensive medical work-ups. The patients and their relatives have their DNA sequenced and analyzed to hopefully discover a genetic reason for the disease. The analysis includes looking for possible therapies that otherwise would not be attempted. The Wellderly Study is still ongoing and looks at healthy elderly, 80 years of age or older, with no history of chronic diseases to help unlock the genetic secrets behind lifelong health. With close to 1,400 elderly people now participating, the study results are being developed into a reference data base that researchers worldwide can use to compare their case data against. This invaluable data will hopefully help scientists learn about the genetic differences between these people who live well into their 80s and 90s with few health problems and those who don't have the same health experience.

Scripps' genomic scientists have made significant strides in isolating and identifying circulating endothelial cells in the blood stream. These cells are extremely hard to find but are important predictors of impending serious heart attack as the heart vessel begins shedding these cells when a heart attack is eminent. The goal is to develop a diagnostic test easily administered in the doctor's office that will tell the physician when his/her patient is highly likely to experience a heart attack in the immediate future and take preventive action before the attack strikes. The rich diversity of San Diego's population — the Scripps Health care system's primary patient base — provides unparalleled opportunities for this research.

Scripps System Community Benefit Services

Scripps System Community Benefit Services provides oversight, support, guidance and coordination of Scripps community health and outreach programs, helping ensure that they are in accordance with the Scripps mission, values and strategic objectives. This program also supports the Strategic Planning Committee, a committee of the Scripps Board of Trustees, in assessing and planning to meet community need. Additionally, this program is responsible for developing the triennial health needs assessment and, through the Community Benefit Fund, supports community programs that address San Diego County's high-priority health needs.

Scripps Systemwide Programs and Services

2014 Community Benefit Plan, Fiscal Year 2014

The Scripps Systemwide 2014 Community Benefit Plan provides a description of the overall Scripps community benefit goal and the systemwide objectives and strategies to support community health improvement during fiscal year 2014 (October 2013 to September 2014).

The Scripps 2014 Community Benefit Goal

Make a measurable impact on the health status of the community through improved access to care, health improvement programs and professional education and research.

Scripps Systemwide Program Fiscal Year 2014 Community Benefit Objectives

Community Health Services

Community Benefit Fund

Provide a minimum of \$100,000 in grant funding to support community programs that address San Diego County's high priority health needs. (Funded by Scripps Health System, Community Benefit Services.)

Mobile Medical Unit

The Mobile Medical Unit (MMU) will continue to provide diabetes prevention, screening, diabetic retinopathy and education services directly to the communities Scripps serves. The MMU participates in community health fairs and will be available to respond to disasters as part of Scripps' overall preparedness efforts.

School Partnerships

- Partner with the San Dieguito Academy to offer job shadowing, mentoring, a speakers bureau, internships, volunteer opportunities, health facility tours, strategies for student success in health occupations, student portfolio reviews and/or senior exhibitions. (Initiative led by Scripps Health System, Community Benefit Services.)
- Continue to collaborate with Point Loma Nazarene School of Business to introduce health care business courses for MBA program and School of Nursing for their MSN program.
- In partnership with Point Loma Nazarene University create a Physician Leadership Development Certification Program.
- Host dean and faculty luncheons with CNOEs and CVPs to discuss community workforce and educational needs.
- Continue partnerships with the RN to BSN and MSN programs at Arizona State University and the University of Texas, Arlington.
- Partner with Simmons College to offer an online DPT program.

- Partner with Mira Costa College for CNA certification program.
- Provide on-site ESL courses for food service and environmental service workers through Mira Costa College.
- Expand collaborations with community and nationally recognized schools/universities that provide education in support of Scripps' strategic goals.

Disaster Preparedness: Community Outreach and Education

Having the ability to provide emergency services to those injured in a local disaster, while continuing to care for hospitalized patients, is a critical community need. Scripps, together with other first-responder agencies (public and private), will engage in a variety of training, outreach and planning initiatives during fiscal year 2014, including:

- Participating in San Diego County and State of California advisory groups to plan, implement and evaluate key disaster preparedness response and recovery plans.
- Collaborating with the State of California Emergency Medical Services Authority on state projects and state/federal grants supporting disaster preparedness and business continuity planning.
- Collaborating with Emergency Medical Services, County of San Diego, to provide disaster preparedness training curriculum to San Diego health care partners.
- Collaborating with community partners to monitor and analyze business continuity within the health care community, identifying potential disruption impact.
- Providing a Community Partner Disaster Planning conference and two, 16-hour decontamination response team trainings for health care partners.
- Participating in community education locally and nationally as an organizational leader in disaster preparedness and planning.
- Ready to deploy the Scripps Medical Response Teams and Scripps Hospital Administrative Support Teams to any domestic or international disaster. (Initiative led by the disaster preparedness program under the direction of the Scripps President/CEO)
- Develop an MOU with International Medical Corp; a non-governmental agency, to deploy as a medical response team for international disaster relief aid.
- Maintain a Medical Response Team in readiness state with the ability to respond within 24 hours.

American Heart Walk

Scripps Health Community Benefit Department will coordinate walker participation and fundraising efforts in support of the American Heart Association's Annual Heart Walk. Scripps Health will also allocate operational funds to support the American Heart Association's efforts to fight heart disease and stroke. (Initiative led by Scripps Health System, Community Benefit Services.)

Professional Education and Health Research

- Scripps High School Exploration Program and Regional Allied Health and Science Initiative (RAHSI). Continue to provide education internships for 35 students, offering five, weeklong paid internships, in which students rotate through clinical and non-clinical departments to learn about health care. (Funded by Scripps Health System Operations.)
- Expand UC High Internship Program systemwide to include Scripps Mercy Hospital, San Diego, Scripps Memorial Hospital La Jolla, Scripps Green Hospital and Scripps Clinic, Torrey Pines.
- Expand WorkAbility Program systemwide to include Scripps Health Administrative Services, Scripps Green Hospital and Scripps Memorial Hospital Encinitas.
- Expand systemwide internship program to include clinical and non-clinical placements.
- Expand physician shadowing opportunities through community awareness and process standardization systemwide.
- Continue to provide Scripps Health systemwide New Grad Residency and Training Programs.
- Continue to provide Specialty Training Programs, ICU, MCH, Peri-op, ED and SPD.
- Continue expansion of local college-based internship programs to include MBA, System Engineering, IT and Allied Services.
- Expand Young Leaders in Healthcare to employee dependents and school partnerships.

Community Mentorship Program for Health Sciences and Research

Continue to provide opportunities for local high schools and universities to expose students to the knowledge, skills and values necessary to pursue health and research careers. SCORE (Shiley Center for Orthopaedic Research and Education at Scripps Clinic) offers opportunities for students to observe live orthopedic surgeries and have an open interactive discussion with a surgeon and health care research team. Participants learn how aging affects the musculoskeletal system and about resulting diseases, including the role surgery plays in the treatment. A total of 17 surgery viewings were held at the Scripps Clinical Research Center (SCRC) during this past academic year.

Uncompensated Health Care

Scripps Home Health Care and Scripps Hospice Care will continue to provide health care services for vulnerable patients who are unable to pay.

Scripps Systemwide Programs and Services

2014 Community Benefit Report, Fiscal Year 2013

This section is an account of Scripps' dedication and commitment to improving the health of the community, detailing the systemwide programs and services that have provided benefit over and above standard health care practices in fiscal year 2013 (October 2012 to September 2013).

Fostering Volunteerism

In addition to the financial community benefit contributions made during FY13, Scripps system employees donated a significant portion of their personal time volunteering to support Scripps-sponsored community benefit programs and services. With 5,354 hours of volunteer time, it is estimated that the dollar value associated with this volunteer labor is \$235,406.49¹.

Making a Financial Commitment

During fiscal year 2013, \$21,463,925 was devoted by Scripps systemwide programs to community activities, including uncompensated health care, community health services, and professional education and health research. The programs offered by Scripps emphasize community-based prevention efforts and use innovative approaches to reach residents at greatest risk for health problems.

Scripps Systemwide Community Benefit Services Highlights (After Hospital Provider Fee)

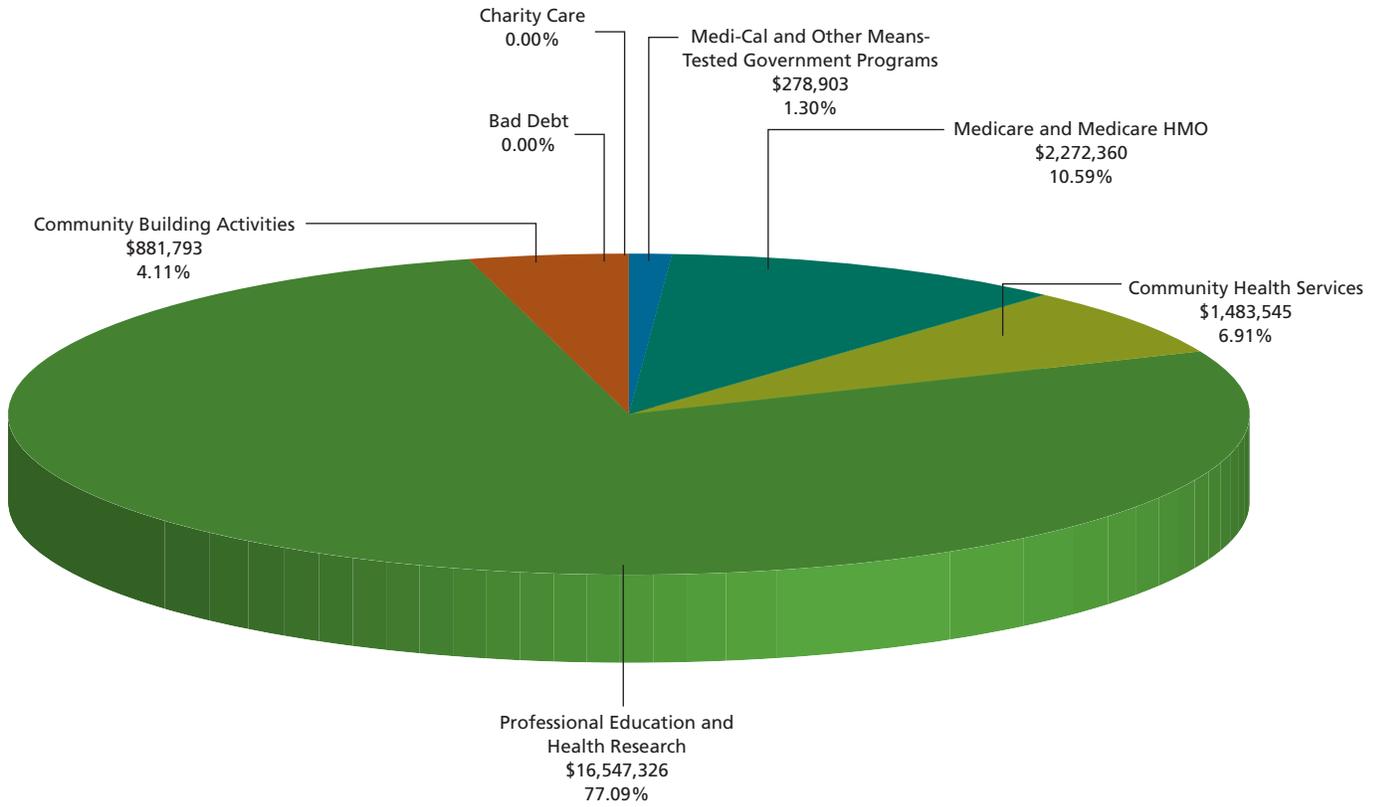
During fiscal year 2013, Scripps systemwide contributed \$21,463,925 to community benefits, including \$278,903 in Medi-Cal and other means tested government programs, \$2,272,360 in Medicare and Medicare HMO, \$1,483,545 in community health services, \$16,547,326 in professional education and health research and \$881,793 in community building activities.

Refer to Figure 12:1, presented on the following page, for a graphical representation of the FY13 Scripps Systemwide Community Benefit Services distribution.

¹ Calculation based upon an average hourly wage for the Scripps Health system plus benefits.

FIGURE 12:1

FY13 Scripps Systemwide Community Benefit Services Distribution \$21,463,925



Community Benefit Services

Community benefit services include those programs and services offered to the community that go above and beyond what is provided as a normal part of patient care. Scripps divides community benefit services into three categories, including uncompensated health care, community health services, and professional education and health research. Uncompensated care includes charity care, bad debt, Medi-Cal and other means-tested government programs and Medicare shortfalls.

Scripps Systemwide Fiscal Year 2013 Community Health Services Highlights

Community Health Services Highlights

Community health services include prevention and wellness programs, such as screenings, health education, support groups and health fairs, which are supported by operational funds, grants, in-kind donations and philanthropy. These programs are designed to raise public awareness, understanding of and access to identified community health needs (refer to section 2 — Community Health Needs Assessment).

During fiscal year 2013 (October 2012 to September 2013), \$1,483,545 was invested by Scripps systemwide programs in community-based health improvement activities. This figure reflects the cost associated with providing community health improvement activities, including salaries, materials and supplies, minus billable revenue. This section highlights some of the Scripps systemwide fiscal year 2013 community health services.

Scripps Health Community Benefit Fund

In 2013, Scripps awarded \$215,000 in community grants to programs throughout San Diego. Scripps awarded four grants ranging from \$10,000 to \$120,000 each. The projects that received funding address some of San Diego County's high-priority health needs. The goal is to improve access to vital health care services for a variety of at-risk populations, including the homeless, economically disadvantaged, mentally ill and others. Since the Community Benefit Fund began, Scripps has awarded \$2.7 million. Programs funded during fiscal year 2013 include:

- **Catholic Charities** — Funding was awarded to provide short-term emergency shelter for medically fragile, homeless patients being discharged from Scripps Mercy Hospital, San Diego, and to expand the program to Scripps Mercy Hospital, Chula Vista. Case management and shelter are provided for previously homeless patients discharged from Scripps Mercy Hospital who no longer require hospital care but still need a short-term, supportive environment. Patients demonstrating a readiness for change are assisted with one week in a hotel along with food and bus fare to pursue case plan. The focus of the case management is to stabilize the client by helping them connect to more permanent income sources, housing and ongoing support for self-reliance. The goal of this partnership is to reduce the incidence of ER recidivism and improve quality of life for the patients.
- **The 2-1-1 Health Care Navigation Program** — Funding was awarded for the 2-1-1 Health Care Navigation Program. There is an overwhelming need for a dependable service to help people navigate today's complex health care system. Since the inception of the Health Care Navigation Program, 2-1-1 has responded to more than 6,000 calls from clients specifically seeking health-related resources. In addition, 5,726 self-selected health as their need. More than 20 percent of adult San Diegans struggle to access health care. The Health Care Navigation Program addresses this need by serving as an entry point for clients.

The Health Care Navigation Program provides a wide arrange of support, including an assessment of need and eligibility, assistance in setting up medical appointments and help completing applications for Medi-Cal, Healthy Families and prescription assistance. 2-1-1 San Diego is the dialing code for information about community, health and disaster services. It connects people with resources over the phone, online and in print. 2-1-1 San Diego was launched in June 2005 as a multilingual and confidential service committed to providing access 24/7.

- **American Heart Association** — Funding awarded for the 2013 Heart Walk sponsorship. Heart disease and stroke are the No. 1 and No. 3 causes of death in the nation. Heart disease claims more than 950,000 American lives each year. Scripps partners with the American Heart Association on their annual Heart Walk, to raise funds for research, professional and public education, and advocacy.
- **Consumer Center for Health Education and Advocacy (CCHEA)** — Funding provides low-income, uninsured Mercy Clinic and behavioral health patients who need assistance obtaining health care benefits, SSI and related services, while simultaneously reducing uncompensated care expenses for Mercy. This project provides advocacy services for time-intensive government benefit cases. (Sponsored by Scripps Mercy Hospital Administration.)

Cancer/Oncology

Cancer is the second leading cause of death in the U.S., exceeded only by heart disease, and accounts for almost one-quarter of all deaths in San Diego County. The actual all-cancer death rate among residents of San Diego County was 148.6 per 100,000 in 2009.²

In response to this serious health concern, Scripps has developed a series of prevention and wellness programs to educate people on the importance of early detection and treatment for some of the most common forms of cancer. During fiscal year 2013, Scripps engaged in the following cancer programs and activities.

- **American Cancer Society Making Strides Against Breast Cancer** — Scripps Health participates in this fundraising event to raise money for breast cancer research. (Sponsored by Scripps Health Systemwide.)
- **Susan G. Komen Race for the Cure** — Scripps Health participates in this fundraising event to support breast cancer research and local breast health initiatives. The Komen Race for the Cure Series raises significant funds and awareness for the fight against breast cancer, celebrates breast cancer survivorship and honors those who have lost their battle with the disease. (Sponsored by Scripps Health Systemwide.)

² San Diego Hospital Association and Imperial Counties. 2013 Community Health Needs Assessment and the most recent San Diego County community health statistics (unless otherwise indicated). Retrieved from the World Wide Web: <http://www.hasdic.org/chna.htm>

- **Scripps Polster Breast Care Center Music as Medicine Program** — Patients and their support people participate in the Music as Medicine therapy class. The music therapist asks questions and tailors the therapy to the participants' emotional and physical needs. Sessions involve listening to music, writing songs, discussing what lyrics mean to the participants, using singing bowls, vocalization and drumming. Research has shown music can boost immune function, block pain stimuli, lower blood pressure and influence emotional well-being. (Sponsored by Scripps Polster Breast Care Center.)
- **Scripps Polster Breast Care Center Support Groups** — Scripps Polster Breast Care Center Support Groups provide a venue for women to come together, discuss issues relating to diagnoses and receive support. The groups are offered to women in the San Diego community. (Sponsored by Scripps Polster Breast Care Center.)

Cardiovascular Disease

Coronary heart disease and stroke are the No. 1 and No. 3 causes of death in the nation. Heart disease claims more than 950,000 American lives every year. Stroke is a leading cause of serious, long-term disability.³ During fiscal year 2013, Scripps engaged in the following heart health and cardiovascular disease prevention and treatment activities.

- **American Heart Walk** — Scripps allocated \$10,000 in operational funds and more than \$30,000 in in-kind donations to support the American Heart Association's efforts to fight heart disease and stroke. In addition, Scripps employees volunteered their time to coordinate walker participation and fundraising efforts. The San Diego Heart Walk raised more than \$1.19 million. In 2013, more than 1,700 Scripps Heart Walk participants — employees, families, and friends — walked to help raise more than \$142,000. Additionally, Scripps reached out to the community at the event and provided health education materials and giveaways.

Disaster Preparedness: Community Outreach and Education

Having the ability to provide emergency services for those injured in a local disaster, while continuing to care for hospitalized patients, is a critical community need. Scripps participated in San Diego County and State of California advisory groups to plan, implement and evaluate key disaster preparedness response plans and exercises. Scripps is an advisor to San Diego County for federal and state grant development and planning. Scripps participated in community education, providing educational opportunities for local and national partners. Scripps provided 1,112 hours of local community education.

Hospital Administrative Support Unit and Scripps Medical Response Team

Having the ability to provide emergency services for those injured in a State of California disaster, while continuing to care for hospitalized patients, is a critical community need. Scripps maintains active readiness for the Scripps Hospital Administrative Unit and the Scripps Medical Response Team. Both are lead teams for the State of California Mobile Field Hospital deployment. Both teams were on standby for deployment to Hurricane Sandy and the Philippines Typhoon. Scripps continues to participate with California in an advisory capacity, exercising and training with the Specialized Cal Mat Program. Scripps participated

³ Coronary heart disease and stroke are the number one and three causes of death in the nation. Heart disease claims more than 950,000 Americans every year.

in a one-week field exercise, leading medical response for the State of California Mobile Field Hospital and two full-scale state and county disaster exercises. Scripps provided 794 hours of volunteer staff time.

San Diego County and National Community Support and Outreach Education

The goal is to participate in community education locally and nationally as an organizational leader in disaster preparedness and planning. In fiscal year 2013, Scripps participated in the San Diego Business Consortium and led multiple lectures to government and community audiences:

- Scripps La Jolla Trauma Conference — Guest Lecture — May 2013
- California Hospital Association Disaster Conference 2013 Sacramento — Guest Lecture — Cal Mat Program Sept, 2013
- University of San Diego School of Nursing Master's Program Disaster Program — April 9, 2013 and Nov. 2013
- Golden Guardian Exercise 2013 Specialized Cal Mat Team, Moffett Air Field, San Jose — Aug. 23-25, 2013
- San Diego County Prescription Take Back Day — April 27, 2013 and Oct. 2013
- Incident Management Team — Scripps hosted annual meeting July 18, 2013
- Incident Management Team — 5 day, full-scale exercise, Oct. 2013

Professional Education and Health Research Highlights

Quality health care is highly dependent upon health education systems and medical research programs. Without the ability to train and inspire a new generation of health care providers, or to offer continuing education to existing health care professionals, the quality of health care would be greatly diminished.

Each year, resources are allocated by Scripps systemwide programs and services to advance health care services through professional health education programs and research. To enhance service delivery and treatment practices for San Diego County, \$16,547,326⁴ was invested by Scripps systemwide programs and services in professional training programs and research during fiscal year 2013 (October 2012 to September 2013). This section highlights some of the Scripps systemwide professional education and research activities conducted in fiscal year 2013.

Scripps High School Exploration Program and Regional Allied Health and Science Initiative (RAHSI)

Launched by Scripps Health, the program reaches out to young people to pique their interest on health care occupations in dire need of recruits. From the emergency room to marketing, the students rotate through numerous departments, exploring career options and learning life lessons about health and healing along the way. During fiscal year 2013, Scripps Health partnered with RAHSI to provide continuing education internships for their students. The program offered five, weeklong paid internships, in which 35 students

4 Reflects clinical research as well as professional education for non-Scripps employees, nursing resource development and other health care professional education. Calculations based on total program expenses. Clinical research includes the subsidy, which is the operating income/(loss) of Scripps' research entities: Scripps Clinical Research Services, Scripps Whittier Institute, Scripps Genomic Medicine and the Scripps Translational Science Institute.

rotated through clinical and non-clinical departments to learn about health care. In addition, Young Leaders in Healthcare participants were eligible for the five-week summer program. Ten students were selected to participate in the program. (Funded by Scripps Health System Operations.)

SCRIPPS SYSTEMWIDE

COMMUNITY BENEFIT SERVICES SUMMARY LIST

FY13

Program Title	Volunteer Hours	Staff Hours	Financial Support*	Persons Served
2-1-1 San Diego Annual Fundraising Event	N/A	N/A	\$5,000	N/A
Advanced Cardiac Life Support Heartcode	N/A	13	\$1,200	11
Alzheimer's Association	N/A	N/A	\$32,000	N/A
American Cancer Society Making Strides Against Breast Cancer	N/A	5	\$9,461	30,788
American Cancer Society Making Strides Against Breast Cancer Sponsorship	N/A	N/A	\$15,000	N/A
American Heart Association Heart Walk**	5,129	5,550	\$312,842	1,700
American Heart Association Heart Walk In-Kind Donation	N/A	N/A	\$30,481	N/A
American Heart Association Heart Walk Sponsorship	N/A	N/A	\$10,000	N/A
American Heart Association Saving Stokes**	N/A	18	\$1,307	75
American Heart Association Saving Strokes Sponsorship	N/A	N/A	\$1,000	N/A
Base Hospital Continuing Education Session Emergency Room Trauma	N/A	1	\$48	1
Blood Drives for the American Red Cross	N/A	236	\$17,329	753
B'Nai B'rith International	N/A	N/A	\$7,500	N/A
California Health Foundation and Trust (CHFT)	N/A	N/A	\$540,418	N/A
Cancer Registry	N/A	23,137	\$1,304,184	N/A
Chelsea's Light Foundation	N/A	N/A	\$25,000	N/A
Clinical Research Services	N/A	83,398	\$8,084,482	N/A
Clinical Rotations	N/A	70	\$5,052	N/A

*"FINANCIAL SUPPORT" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer labor hours. In some instances an entire community benefit program cost center has been divided between several initiatives.

** Community building activities, bad debt and Medicare shortfall do not count as community benefits under the new Schedule H 990 but are still reportable outside the community benefit table.

Program Title	Volunteer Hours	Staff Hours	Financial Support*	Persons Served
Community Benefit Fund - 2-1-1 San Diego	N/A	N/A	\$15,000	N/A
Community Benefit Fund - Catholic Charities	N/A	N/A	\$5,833	N/A
Community Health Education Programs	N/A	64	\$10,206	5,090
Community Health Improvement Partners (CHIP)**	N/A	75	\$25,568	N/A
Community Health Improvement Partners Crew Rendezvous	N/A	N/A	\$7,000	N/A
CONNECT Foundation	N/A	N/A	\$5,000	N/A
CPR, Life Support, and Emergency Preparedness Courses	N/A	611	\$648	741
CPR/AED for Professional Rescuers and Health Care Providers Course	N/A	2	\$806	2
Disaster Preparedness Community Outreach and Education**	3	203	\$17,568	129
Disaster Preparedness Mobile Field Hospital Exercise	N/A	1,032	\$143,120	N/A
e3 Civic High School	N/A	N/A	\$997	N/A
Economic Development**	N/A	445	\$66,041	N/A
Emergency Medical Responder Training Course	N/A	40	\$16,110	182
Emergency Response and CPR/AED for the Professional Rescuer and Health Provider Course	N/A	4	\$107	N/A
Eric Paredes Save a Life Foundation	N/A	3	\$826	300
Eric Paredes Save a Life Foundation Health Screenings	N/A	391	\$53,502	2,991
Eric Paredes Save a Life Foundation Sponsorship	N/A	N/A	\$15,000	N/A
Family Health Centers of San Diego Spirit of the Barrio	N/A	1	\$275	400
First Aid for Public Safety Personnel Course	N/A	5	\$1,812	5
Foundation of the American College of Healthcare Executives**	N/A	N/A	\$25,000	N/A
HASD&IC Needs Assessment	N/A	240	\$51,205	N/A
<p>* "FINANCIAL SUPPORT" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer labor hours. In some instances an entire community benefit program cost center has been divided between several initiatives.</p> <p>** Community building activities, bad debt and Medicare shortfall do not count as community benefits under the new Schedule H 990 but are still reportable outside the community benefit table.</p>				

Program Title	Volunteer Hours	Staff Hours	Financial Support*	Persons Served
Health and Wellness - Scripps Home Health Services	N/A	23	\$1,643	125
Health Care Public and Government Advocacy**	N/A	2,240	\$401,695	N/A
HeartSaver CPR, AED, and Basic First Aid Course	N/A	35	\$492	20
Jewish Family Services Embrace a Family	N/A	N/A	\$0	143
Just Call Us Volunteers	N/A	N/A	\$850	N/A
Juvenile Diabetes Research Foundation Walk	N/A	N/A	\$186	N/A
Medi-Cal (Shortfall)	N/A	N/A	\$278,903	N/A
Medicare and Medicare HMO (Shortfall)**	N/A	N/A	\$2,272,360	N/A
Neonatal Resuscitation Program	N/A	36	\$930	12
Nine Girls Ask? for a cure for Ovarian Cancer	N/A	3	\$826	600
Operation Home Front Adopt A Family Holiday Program	N/A	N/A	\$0	238
Operation Santa	N/A	N/A	\$0	38
Prescription Drug Take Back Day	64	64	\$4,263	5,000
San Diego Festival of Science and Engineering	38	44	\$9,163	1,000
San Diego Festival of Science and Engineering Sponsorship	N/A	N/A	\$5,000	N/A
San Diego Nursing Service/Education Consortium**	N/A	N/A	\$1,500	N/A
San Diego Public Library Foundation	N/A	N/A	\$10,000	N/A
Scripps Genomics Medicine and Translational Research	N/A	50,421	\$7,066,912	N/A
Scripps Health System Community Benefit Planning and Outreach	N/A	2,899	\$222,245	N/A
Scripps High School Exploration Program	N/A	1,125	\$55,958	30
Scripps Military Mentoring Initiative**	120	485	\$30,272	7
Scripps Recuperative Care Program	N/A	80	\$176,024	18
Stand Up to Cancer (SU2C) San Diego Padres Foundation Sponsorship	N/A	N/A	\$5,000	N/A
Strike Out Stroke	N/A	80	\$6,608	1,100
**"FINANCIAL SUPPORT" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer labor hours. In some instances an entire community benefit program cost center has been divided between several initiatives.				
** Community building activities, bad debt and Medicare shortfall do not count as community benefits under the new Schedule H 990 but are still reportable outside the community benefit table.				

Program Title	Volunteer Hours	Staff Hours	Financial Support*	Persons Served
Susan G. Komen Race for the Cure	N/A	N/A	\$5,437	545
UC High School Exploration Program	N/A	595	\$29,808	10
Understanding Alzheimer's and Dementia	N/A	15	\$4,939	215
Walk to End Alzheimer's	N/A	N/A	\$8,983	3,800
TOTAL	5,354	173,685	\$21,463,925	56,069

*"FINANCIAL SUPPORT" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer labor hours. In some instances an entire community benefit program cost center has been divided between several initiatives.

** Community building activities, bad debt and Medicare shortfall do not count as community benefits under the new Schedule H 990 but are still reportable outside the community benefit table.

Appendix A: Definition of Terms

Bad Debt — Unpaid costs for care that is provided to persons who do not meet the criteria for charity care, are not covered by a third-party payer or have a co-payment obligation that is not met.

Charity Care — The portion of patient care services provided by Scripps for which a third-party payer is not responsible and a patient has the inability to pay. Charity care does not include bad debt, contractual adjustments or under-reimbursed costs (payment shortfalls). Charity care may include unpaid coinsurance, deductibles and non-covered services if the patient meets the Scripps charity care eligibility criteria.

In-Lieu of Funds — Funds used for unfunded or under-funded patients and their post-discharge needs. Funds are used for board and care, skilled nursing facilities, long-term acute care, and home health. In addition funds are also used for medications, equipment, and transportation services.

Community Benefit Services — Programs/services offered to the community that go above and beyond what is provided as a normal part of patient care.

Uncompensated Health Care — Includes charity, under-reimbursed care and bad debt. Shortfalls are derived using the payer based cost allocation methodology. Bad debt and charity care are estimated by extracting the gross write offs of bad debt and charity care charges and applying the hospital RCC to estimate net uncompensated cost.

Community-Based Health Improvement Activities — Services and activities carried out to improve community health that usually do not generate a patient bill and are subsidized by the hospital. These activities are carried out to improve community health and must be supported by a community need. They extend beyond patient care activities. They include services directed to individuals and to a larger population. Includes prevention and wellness programs as well as other community health improvement services (screenings, health education, support groups, and health fairs) supported by operational funds, grants, in-kind donations and philanthropy. Calculations based on cost less direct revenue. Direct offsetting revenue includes any revenue generated by the activity or program, such as payment or reimbursement for services provided to program patients. Direct offsetting revenue does not include restricted or unrestricted grants or contributions that the organization uses to provide community benefit.

Community Benefit Operations — Includes costs associated with planning and operating community benefit programs, such as community health needs assessments and administration.

Subsidized Health Services — Patient care services the organization provides despite a financial loss, (even) after removing the effects of charity care and Medi-Cal shortfalls (and bad debt). Clinical programs provided at a loss because they are needed by the community. The service meets an identified community need if it is reasonable to conclude that if the organization no longer offered the service, the service would be unavailable in the community, the community's capacity to provide the service would be below the community's need, or the service would become the responsibility of government or another tax-exempt organization. Example of such services are: inpatient psychiatric units, satellite clinics serving low-income communities and burn units.

Cash and In-Kind Contributions — Contributions made by the organization to health care organizations and other community groups that are restricted to one or more community benefit activities. In-kind contributions include the cost of hours donated by staff to the community while on the organization's payroll, indirect cost of space donated to tax-exempt companies (such as for meetings), and the financial value (generally measured at cost) of donated food, equipment, and supplies.

Community Building Activities — Programs that address underlying causes of health problems in order to improve health status and quality of life. They focus on the root causes of health problems, such as poverty, homelessness and environmental problems but do not provide medical care. Examples of community building per the Schedule H are housing improvements, economic development, community support, environmental improvements, leadership development, coalition building, community health improvement advocacy and workforce development. These activities support community assets by offering the expertise and resources of the health care organization. According to the IRS, Community Building Activities do not count as Community Benefits under the new Schedule H 990 but are still reportable outside the community benefit table.

Professional Education and Health Research — Includes clinical research as well as professional education on non-Scripps employees including graduate medical education (GME), nursing resource development, and other health care professional training. Costs for medical residents and interns may be included as health professions education costs. Calculations based on total program expense.

Payer — Insurance companies, health care service plans, Medicare, Medi-Cal and other private or public entities that pay hospitals for health care provided to their sponsored patients.

Health Research — Health related research, such as studies and papers on alternative health care delivery methods, testing of medical equipment, and controlled studies of therapeutic protocols. Includes studies that are self-funded or receive funding from a tax-exempt government entity and have a goal of generating knowledge that is made available to the public.

Under-Reimbursed Care — Care that is reimbursed below cost by CMS (County Medical Services), Medi-Cal and Medi-Cal HMO, Medicare, Medicare PPO, Medicare HMO and SHPS Medicare.

Volunteer Hours — Includes the labor hours contributed by Scripps employees and affiliated physicians in support of Scripps-sponsored activities for which no compensation is received. The dollar value is not included in Scripps' "community benefit contribution."

Appendix B: Scripps Uncompensated Care Fiscal Year 2013 Methodology

Scripps continues to contribute resources to provide low-and no-cost health care services to populations in need. During FY13, Scripps contributed \$301,570,492 to uncompensated health care, \$48,697,171 in charity care, \$239,315,221 in Medi-Cal and other means-tested government programs and Medicare shortfall, and \$13,558,100 in bad debt.

Schedule H Methodology — Schedule H requires the uncompensated care to be divided into four categories: Charity care, under-reimbursed Medi-Cal and Other Means Tested Government Programs, Bad Debt, and under-reimbursed Medicare. Bad debt and Medicare shortfalls are reportable under the Schedule H guidelines but do not count toward the community benefit totals. Thus, the categories are reported in a specific order/hierarchy. Charity Care and under-reimbursed Medi-Cal and Other Means Tested Government Programs are counted first.

Charity Care Methodology — The uncompensated cost is estimated by applying ratio-cost-to-charge (RCC) percentages for the hospital to the gross charity adjustments. The following costs are excluded: Community health services, professional education and research, and expenses excluded in the Medicare cost report.

Medi-Cal and Other Means-Tested Government Programs–Hospitals — The shortfall is derived by computing operating margin at the patient level and summarizing the patients with Medicare, Medicare PPO, Medicare HMO, Medicare Capitated program at the hospitals, Medi-Cal, Medi-Cal HMO, and CMS primary insurance carriers. Operating margin is defined as net revenue less all variable, fixed and overhead costs. Profitability is estimated as follows: Net revenue is equivalent to payments plus an estimation of the account balance for all open accounts, plus revenue from uncompensated care pools including Medi-Cal DSH. Cost is derived using the relative value allocation methodology per the McKesson HPM system. The following costs are excluded: Charity adjustments at cost for Medi-Cal and CMS patients, community health services, professional education and research, and expenses excluded in the Medicare cost report.

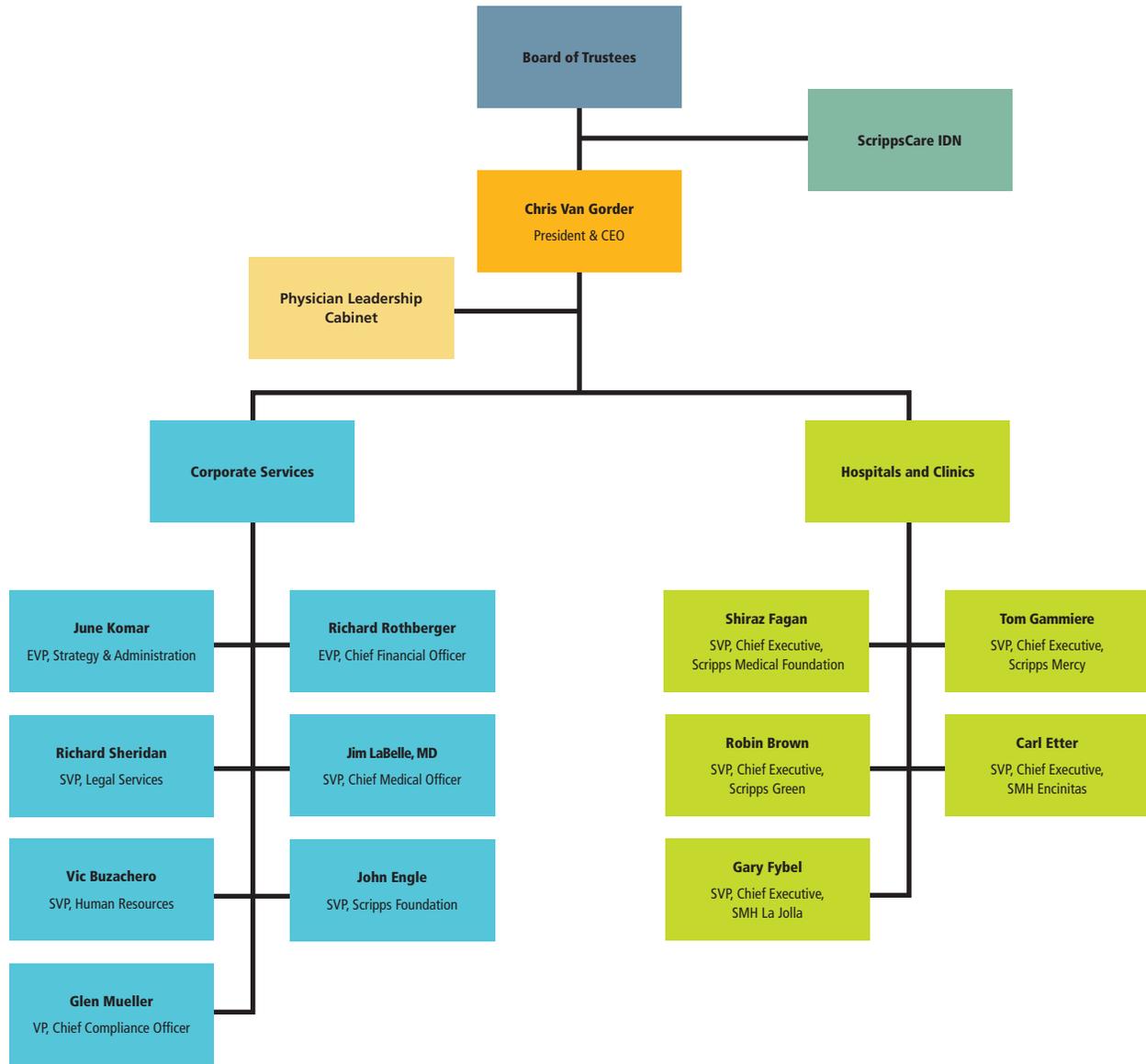
Hospital Provider Fee Program — The California Hospital Fee Program was signed into law effective January 1, 2010. During the year ended September 30, 2013, Scripps Health recognized supplemental provider fee amounts of \$100,947,000. This amount was recognized as net patient revenue in the consolidated statement of operations. Scripps Health recognized quality assurance fees of \$91,673,000. This amount was recorded as provider fee expenses in the consolidated statement of operations. In addition, Scripps Health was assessed and accrued charitable contributions to CHFT of \$540,418 in the statement of operations. The net operating income recognized by Scripps Health from provider fee was \$8,734,000 in fiscal year 2013.

Bad Debt Methodology — The uncompensated cost is estimated by applying ratio-cost-to-charge (RCC) percentages for the hospital to the gross bad debt adjustments less recoveries. The following costs are excluded: Bad debt adjustments at cost for Medi-Cal and CMS patients, community health services, professional education and research, and expenses excluded in the Medicare cost report.

Medicare and Medicare HMO–Hospitals — The shortfall is derived by computing operating margin at the patient level and summarizing the patients with Medicare and Medicare Senior primary insurance carriers. Operating margin is defined as net revenue less all variable, fixed and overhead costs. Profitability is estimated as follows: net revenue is equivalent to payments plus an estimation of the account balance for all open accounts, plus other revenue including IME and DSH. Cost is derived using the relative value allocation methodology per the Trendstar cost accounting system. The following costs are excluded: Charity and bad debt adjustments at cost for Medicare and Medicare Senior patients, community health services, professional education and research, subsidized health services provided to Medicare patients, and expenses excluded in the Medicare cost report.

Shortfall Methodology–Clinics — The shortfall was derived by extracting the Medicare, Medicare PPO, Medicare HMO, Medicare Capitated program, gross charges and net revenue from the patient billing system. The cost was estimated by applying the ratio-cost-to-charges for Scripps Clinic and Scripps Coastal Medical Centers to the gross charges. Shortfall is equal to Net Revenue less estimated cost using RCC methodology.

Appendix C



Appendix D

Wherever You Are in San Diego County, We're Here for You.

With Scripps, you have access to a comprehensive network of more than 2,600 physicians in over 50 specialties. In fact, we have outpatient centers and hospital campuses throughout San Diego County. And with three urgent care centers and four emergency departments, you can get care when, and wherever you need it. So whether you're at home, work or the baseball field, we're here for you.

LEGEND

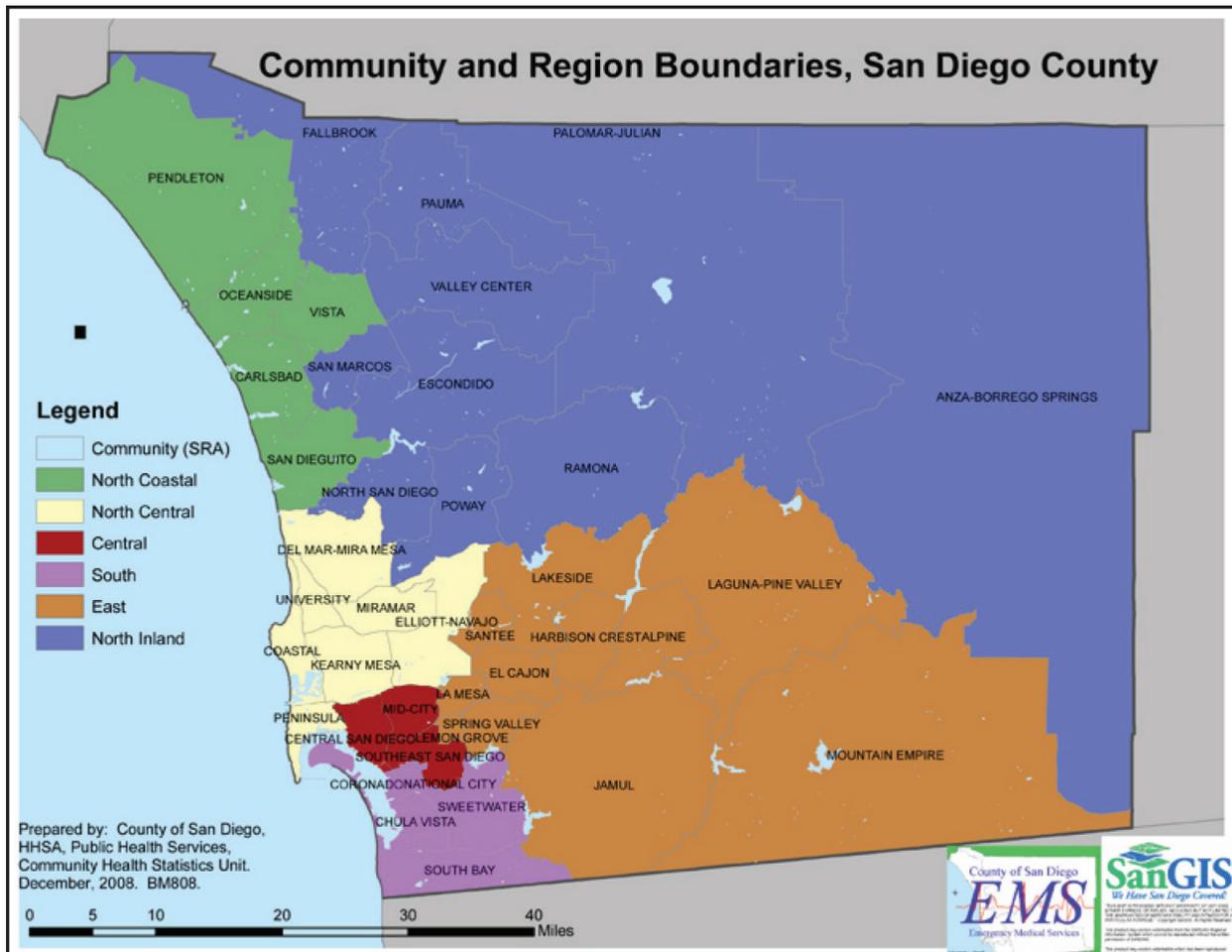
- ★ Scripps Health Corporate Office
- A** Scripps Memorial Hospital Encinitas
- B** Scripps Green Hospital
 - Scripps Center for Integrative Medicine
 - Scripps Translational Science Institute
 - Scripps Clinical Research Center
 - Scripps Cardiovascular and Thoracic Surgery Group
- C** Scripps Memorial Hospital La Jolla
 - Scripps Center for Executive Health
 - Scripps Polster Breast Care Center
 - Scripps Mericos Eye Institute
 - Scripps Cardiovascular and Thoracic Surgery Group
- D** Scripps Mercy Hospital, San Diego
 - Mercy Clinic
 - Scripps Mercy Surgery Pavilion
 - Scripps Cardiovascular and Thoracic Surgery Group
- E** Scripps Mercy Hospital, Chula Vista
- Scripps Clinic
- Scripps Coastal Medical Center
- ▲ Well Being Center
- ▲ Scripps Home Health Care
- ▲ Scripps Drug and Alcohol Treatment Program

Call 1-800-SCRIPPS (727-4777) or visit scripps.org for more information.

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Appendix E

San Diego County HHS Geographic Services Regions¹



CENTRAL

- Central San Diego
- Mid City
- Southeast San Diego

NORTH CENTRAL

- Coastal
- Elliott Navajo
- Kearny Mesa
- Mira Mesa
- Miramar
- Peninsula
- University

NORTH COASTAL

- Carlsbad
- Del Mar
- Oceanside
- Pendleton
- San Dieguito
- Vista

SOUTH

- Chula Vista
- Coronado
- National City
- South Bay
- Sweetwater

EAST

- Alpine
- El Cajon
- Harbison Crest
- Jamul
- La Mesa
- Laguna/Pine Valley
- Lakeside
- Lemon Grove
- Mountain Empire
- Santee
- Spring Valley

NORTH INLAND

- Borrego Springs
- Escondido
- Fallbrook
- North San Diego
- Palomar/Julian
- Pauma
- Poway
- Ramona
- San Marcos
- Valley Center

¹ These regions have been designated by the County of San Diego Health and Human Services Agency (HHS) for the purpose of service delivery. The regions include different sub-regional area (SRA) groupings than the regions designated by the San Diego Association of Governments (SANDAG).

For more information about the programs and services offered by Scripps Health, visit scripps.org/communitybenefit or contact the office of community benefit services at **858-678-7095**.

