

CHOC Children's

SB697
Community Benefit Plan

2013-2014



Prepared by:

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Section 1

Executive Summary



Children's HealthCare of California (CHC) is the not-for-profit, tax-exempt parent corporation of Children's Hospital of Orange County (CHOC Children's or CHOC Orange) and Children's Hospital at Mission (CHOC Children's at Mission Hospital or CHOC Mission), herein after collectively referred to as the "Hospitals", "CHOC Children's", "CHOC" or the "Organization." The Hospitals are the principal tertiary and quaternary pediatric hospitals serving Orange County and are the only hospitals exclusively serving infants, children and adolescents.

CHOC has evolved from a community hospital to a world-class, integrated pediatric health care system affiliated with the University of California, Irvine (UC Irvine). The organization is steadfastly committed to the tens of thousands of children and families who depend on CHOC for care, as well as leading the charge in advancing pediatric medicine on a national level. CHOC's brand identity - CHOC Children's - asserts the institution's position in the community and nationally. CHOC's legal name (Children's Hospital of Orange County) remains unchanged.

The organization is comprised of two pediatric hospitals; a pediatric sub-specialty medical foundation, multiple primary and specialty clinics, programs and services, a health plan, CHOC Health Alliance (which is a physician hospital consortium in the CalOptima program); and four centers of excellence, the CHOC Heart, Neuroscience, Orthopaedic and Hyundai Cancer Institutes. CHOC also has a Research Institute performing basic science and clinical research. Through its pediatric residency programs, including a combined physician residency program with UC Irvine, CHOC train tomorrow's pediatric physicians, RNs, pharmacists and therapists.

This community benefit plan for the fiscal year ended June 30, 2014, describes the benefit planning process, the benefits provided, and the economic value of the benefits. Community benefits are free or subsidized programs and services provided to meet identified community needs and to serve the public interest.

The majority of the benefit the organization continues to provide is that of a safety-net hospital, caring for any and all children in our community regardless of the ability to pay. Like many other California children's hospitals, CHOC has for many years been paid for such services by state Medi-Cal programs at rates less than the cost of providing care. Beginning in 2010, California implemented a series of Hospital Provider Fee Program to supplement Medi-Cal reimbursement, bringing total reimbursement closer to actual costs. The amount of net provider fee revenue recognized in fiscal years 2014 and 2013 do not necessarily correspond to services in those fiscal years due to accounting recognition rules. The table on page 4 demonstrates the impact of these programs.

Report Organization

The community benefit plan satisfies the requirements of California's community benefit legislation, and reflects the spirit of SB697. The community benefit plan addresses all the information suggested in the state's "Checklist for Hospital Community Benefit Plans" dated April 2000.

Section 1 provides an executive summary of key report findings and data.

Section 2 documents organizational commitment and participation, including the Hospitals' board of directors and staff (also referred to as associates) participation and community involvement. It describes non-quantifiable benefits and a patient financial assistance policy.

Appendix A contains a copy of the Hospitals' Patient Financial Assistance Program policy.

Section 3 describes the communities served, community demographic and target groups served by community benefit programs and services.

Section 4 describes the Community Health Needs Assessment (CHNA) conducted by CHOC Children's. This section describes both current needs and progress made in improving health status in recent years.

Section 5 briefly describes the role of the Hospitals' community benefit plan process that was used to develop the community-benefit goals and strategies, listing the goals with the strategies.

Section 6 describes data collection on benefits, tabulates benefits provided by SB697 categories, benefit plan goals and collaborative benefit activities. The annual organization-wide survey of community benefits for fiscal year 2014 identified 100 benefit services provided by the hospitals.

Section 7 summarizes the dollar value of benefits provided by legislative category, linking the dollars to identified community needs. The section shows financial assistance and unpaid costs of public programs (government payor shortfalls) separately. The principal measure for monitoring community benefit services is the dollar value of benefits returned to the community per dollar of tax exemption value received.

The economic value of the 100 benefit services provided by CHOC in fiscal year 2014 was \$150.5 million. Of these dollars, 81.5% (\$122.7 million) served the economically disadvantaged. The economic value of savings from not-for-profit status is \$6.4 million. Thus, in fiscal year 2014 the hospitals returned \$23.37 in community benefits for each \$1.00 saved from tax-exempt status.

During fiscal year 2014, CHOC was the beneficiary of proceeds from the Hospital Provider Fee Program totaling \$8.3 million, net of applicable expenses. The program revenue was applicable to service dates from July 1 to December 31, 2013. The following table provides economic value information compared to the previous year's report:

Economic Value of Benefit Services Provided:	Fiscal Year 2013	Fiscal Year 2014
As Reported	\$83.9 million	\$150.5 million
Provider Fee Net Revenue	\$52.3 million	\$8.3 million
Economic Value Excluding Provider Fee	\$136.2 million	\$158.8 million

As stated earlier, the amount of net provider fee revenue recognized in fiscal years 2014 and 2013 do not necessarily correspond to services for those fiscal years due to accounting recognition rules. In addition to the \$150.5 million in benefits provided for by the hospitals referenced above, board members, physicians, associates and volunteers contributed approximately 34,000 hours of volunteer service to the community. A summary of benefit services and volunteer hours by community focus area is summarized on the following page. This summary shows percentages of total benefit dollars and dollars for economically disadvantaged. It also shows the percentages of services that are collaborative.

CHOC Community Benefit Goals

1. **Healthcare Access:** increase access to quality pediatric healthcare resources and information to families, especially low-income and medically underserved, throughout Orange County.
2. **Behavioral Health Access:** enhance the community's access to behavioral health information and social and emotional services, targeting the underserved.
3. **Disease Prevention:** increase awareness of disease prevention and promote early intervention of major diseases that affect the community.
4. **Information Resource:** provide the community with resources for information and education on health risk behaviors.
5. **Injury Prevention:** actively contribute to reducing the number of unintentional injuries to young children, especially targeting low-income, diverse and medically underserved populations.
6. **Community Action:** actively recruit, recognize and advocate for the importance of volunteer leadership and community assistance in providing care for children.

Summary of Community Benefits by Community Benefit Goal

Community Benefit Goals	Benefit Dollars				Benefit Services		Volunteer Hours (b)
	CHOC Dollars	CHOC Mission Dollars	Total Dollars	Percent for Economically Disadvantaged (a)	Total Services	Percent Collaborative	
1. Healthcare Access	\$136,071,395	\$5,799,884	\$141,871,279	86.3%	25	64.0%	31,200
2. Behavioral Health Access	3,922,845	8,283	3,931,128	-	21	57.1%	1,068
3. Disease Prevention	3,109,685	-	3,109,685	0.1%	6	50.0%	222
4. Information Resource	457,381	66,542	523,923	3.1%	16	37.5%	162
5. Injury Prevention	613,570	-	613,570	20.6%	11	63.6%	978
6. Community Action	467,089	33,007	500,096	0.7%	21	90.5%	230
All Benefit Services	\$144,641,965	\$5,907,716	\$150,549,681	81.5%	100	63.0%	33,860

(a) Broader Community Services are also available to the Economically Disadvantaged

(b) Volunteer hours include 31,200 volunteer physician hours from the CHOC Graduate Medical Education Program

Medicare Disclosure

Office of Statewide Health Planning and Development (OSHPD) regulations require that the Medicare payment shortfalls be included in the community benefit totals. However, the Catholic Health Association of the United States, the Voluntary Hospitals of America and the American Hospital Association have agreed that the unreimbursed costs (payment shortfalls) associated with Medicare patients should not be reported as a community benefit as serving Medicare patients is not a true, differentiating feature of not-for-profit health care. Also, Medicare is one of the best adult payers in many communities and Medicare payments can be higher than for managed care payers. Therefore, OSHPD has requested that hospitals report community benefits both with and without the Medicare payment shortfall.

This report does not include unreimbursed costs for Medicare. Medicare is not a significant payer for CHOC Orange and CHOC Mission.

Section 2

Mission and Commitment



This section describes CHC's organizational structure, and the mission, vision and values, which guide its commitment to the communities served. This section also summarizes key elements of organizational commitment and participation in the community benefits programs. It concludes with an overview of organizational responsibility for benefit planning.

Organizational Structure

CHC, established in July 1986, is the not-for-profit, tax-exempt parent corporation of an integrated pediatric healthcare system, which includes the following corporations⁽¹⁾:

- Children's Hospital of Orange County (CHOC Orange)
- Children's Hospital at Mission (CHOC Mission)
- CHOC Foundation
- CRC Real Estate Corporation

⁽¹⁾ CHOCO Realty Corporation, formerly a member of the healthcare system, was merged with CHOC Children's effective June 30, 2012.

CHOC Orange and CHOC Mission operate the two principal tertiary and quaternary pediatric hospitals serving Orange County.

CHOC Orange

CHOC Orange is a California nonprofit public benefit corporation formed in 1964 and operates a 279-bed, acute-care hospital located in Orange, California. CHOC Orange serves the residents of Orange County as well as surrounding counties. Celebrating 50 years of caring for children, the organization is an active member of the community, providing compassionate, quality health care services in a patient and family-centered care environment.

CHOC Orange operates outreach programs to serve the community outside the hospital. These outreach programs include the CHOC Orange Clinic, Clínica CHOC Para Niños, CHOC Clinic at the Boys & Girls Club of Santa Ana, CHOC Costa Mesa Clinic, and CHOC Garden Grove Clinic. Two CHOC Breathmobiles bring asthma education, prevention and diagnosis to community centers and schools throughout Orange County.

CHOC's commitment to the highest standards of patient care and safety, as well as performance excellence, earned the organization several accolades – ranked as one of the nation's best children's hospitals by *U.S. News & World Report*; 2014 Top Hospital designation by the Leapfrog Group; Magnet designation, the highest honor bestowed to hospitals for nursing excellence; Gold Level CAPE Award from the California Council for Excellence; and CHOC Orange's Pediatric Intensive Care Unit (PICU) earned the Pediatric Beacon Award for Critical Excellence.

CHOC Mission

CHOC Mission is a California nonprofit public benefit corporation formed in 1991 and operates a 54-bed acute pediatric hospital located in Mission Viejo, California. CHOC Mission is located on the fifth floor of Mission Hospital, a member of the St. Joseph Health System.

CHOC Children’s Foundation

CHOC Children’s Foundation is a California nonprofit public benefit corporation formed in 1964 to help support clinical and non-clinical medical education, research and allied fields of pediatric care exclusively at CHOC Orange and CHOC Mission.

CRC Real Estate Corporation

CRC Real Estate Corporation is a nonprofit public benefit corporation that provides property and real estate services in support of CHOC.

Mission, Vision and Values

In June 2013, the Hospitals’ boards of directors affirmed the mission established in April 1999 and approved a new vision statement and updated values statement. The statements emphasize the Hospitals’ historical community focus, and guide ongoing planning and development efforts.

Exhibit 2.1
CHOC Children’s Mission, Vision and Values
Mission: To nurture, advance, and protect the health and well-being of children.
Vision: To be the leading destination for children’s health by providing exceptional and innovative care.
Values: <u>Excellence:</u> Setting and achieving the highest standards. <u>Innovation:</u> Advancing care through new ideas and technology. <u>Service:</u> Understanding and exceeding customer expectations. <u>Collaboration:</u> Working together to achieve our Mission. <u>Compassion:</u> Caring with sensitivity and respect. <u>Accountability:</u> Serving as dedicated stewards of the lives and resources entrusted to us.

Link to Strategic Planning

Listed below are the strategic goals developed as part of the CHOC 2020 strategic plan:

1. Create CHOC’s pediatric system of care.
2. Deliver high-quality, safe care and exceptional experience.
3. Expand CHOC’s geographic footprint and grow clinical programs.
4. Enhance research, innovation and teaching.
5. Optimize CHOC’s organizational infrastructure.

Organizational Commitment

Community Benefits

The Organization operates the only two tertiary, pediatric safety-net hospitals in the county that are vital members of the Orange County community. Both hospitals continue their steadfast organizational commitment to excellence in children's healthcare and community benefits. Specific commitments to community benefits include:

- The large economic value, depth, and breadth of community benefit services
- A history of collaboration with other community organizations
- Continued leadership and participation in community needs assessments
- Negative margin services provided to the community, including:
 - CHOC Orange Clinic
 - CHOC Specialty Clinics
 - CHOC Clinic at the Boys & Girls Club of Santa Ana
 - Clínica CHOC para Niños
 - CHOC Costa Mesa Clinic
 - CHOC Garden Grove Clinic
 - Child Life (Recreational Therapy) Services
 - Community Education
 - Breathmobile

In addition to the above services, the Hospitals also provide financial assistance for families that qualify for services at reduced or no cost.

Patient Financial Assistance Program Policy

The Hospitals do not deny necessary medical services to patients due to inability to pay (*see Appendix A for the Patient Financial Assistance Program Policy*). Both hospitals provide financial assistance, which is budgeted and distributed annually, to assist identified patients in need. The granting of financial assistance is based solely on the ability to pay, regardless of age, gender, sexual orientation, ethnicity, national origin, disability or religion. This funding covers a portion or all required hospital services as determined by a financial screening process. The Patient Financial Assistance Program Policy provides for up to 400% of poverty guidelines, increasing the number of patients that qualify for financial assistance.

Financial Assistance Implementation: The Hospitals continually update all department managers on changes in hospital policies and procedures, and they are responsible for ensuring that staff is familiar with the same. Changes in policies and procedures are communicated in monthly department head meetings, through bi-monthly internal newsletters; and through specific memos, intranet postings and administrative releases. Staff who interact specifically with assisting in the determination of financial assistance eligibility on a patient-by-patient basis are given additional in-service training.

Financial Assistance Communication: As part of the Hospitals' ongoing public awareness campaigns, the mission statements are included wherever possible on program brochures, facility brochures, medical education information, community education materials, conference invitations and admission materials. Additionally, the Hospitals' financial assistance policy is emphasized in public relations and media relations efforts, foundation campaigns, and selected marketing campaigns. These policies are posted in key areas such as the emergency department and admitting.

Pediatric Health for the Community

Being a community information resource is a high priority at CHOC Orange and CHOC Mission. The community education department is entirely devoted to this purpose. Other departments also contributing to community education include the following: public relations, psychology, marketing, cord blood bank, social services, and the Neuroscience, Orthopaedic, Heart and Hyundai Cancer Institutes.

The following table shows that community education services served 512,533 persons in fiscal year 2014. Additionally, newsletters and websites providing health information about children reached an additional 30,075,000 people. These efforts allowed the health education program to reach over 30,587,533 individuals and families.

	Number of Services	Volunteer Hours	Staff Hours	Persons Served
Community Education	54	33,218	341,224	512,533
Television and Newsletters	2	-	75	30,075,000
Total	48	42,211	360,740	12,557,862

Organizational Participation

Organizational participation in community benefits occurs at all levels and takes many forms, both formal and informal. Ultimate responsibility and oversight for the implementation of the community benefit plan resides with the hospitals' board of directors and executive management team.

Board Participation

The Hospitals' board of directors reaffirmed their commitment with the adoption of the strategic plan and mission, vision, and values statements emphasizing community outreach and community benefits. Members of the board of directors annually review the community benefit plan, act as ambassadors for the hospitals, and serve on a variety of board committees.

Staff Participation

The Hospitals' staff is involved in the community benefit planning process through the annual survey of community benefits. In addition, the hospitals' staff serves on many community boards, committees and task forces. They also volunteer at many

community events and health fairs. Staff participation helps the hospitals identify emerging community needs, develop new benefits to meet these needs and make improvements to existing benefit services.

Physician Participation

Physicians actively participate in benefit programs and collaborate with other providers through community-based organizations and advisory groups. As participants in outreach programming and implementation, physicians provide numerous hours of volunteer work within the hospitals, clinics, and the community. CHOC's Community Physician Advisory Panel conducts quarterly physician forum meetings. In these meetings, community-based physicians provide input and feedback on hospital programs and community needs.

Collaboration with Community Organizations

A guiding principal of SB697 is to strengthen non-profit hospital community-benefit collaborations with other community organizations. Community benefit activities at the hospitals strongly embrace this principal in several ways.

Community Programs

The Hospitals' staff members, as well as physicians, and administrators are actively involved in ongoing community-based organizations, coalitions and programs.

The team provides expertise, information, support and the hard work needed to make programs, such as the following, successful.

- Boys & Girls Club of Santa Ana
- CalOPTIMA
- Child Abuse Prevention Council of Orange County
- Drowning Prevention Network
- Local Law Enforcement Agencies
- Orange County Child Care and Development Planning Council
- Orange County Children and Families Commission (Prop 10)
- Orange County Coalition of Community Clinics
- Orange County Healthcare Agency
- Orange County Healthy Tomorrows Committee
- Orange County Ronald McDonald House and Charities
- Orange County Child Passenger Safety Task Force
- Latino Health Access
- Garden Grove Boys & Girls Club
- South Orange County Family Resource Center
- Various Orange County School District Programs

Community Communication

The hospitals publish the complete community benefit plan on its website, as submitted to the state. A variety of other resources are used to communicate both internally and externally.

➤ **Internal Communication Resources:**

- Monthly department head meetings
- Staff and committee meetings
- *Bearfacts*, bi-weekly associate newsletter
- E-mail, bulletin board postings, and policy memos, as needed
- Quarterly associate forums with the CHOC Executive Management Team
- Bi-monthly new associate and quarterly management orientation meetings
- PAWS (internal website)
- CHOC Portal
- Senior Leader Rounding
- *Manager's Messenger*, monthly manager strategic news email
- *Physician Connection*, physician eNewsletter
- Physician Town Hall Meetings

➤ **External Communication Resources:**

- CHOC Annual Report
- Choc.org website, including choc.org/health section
- CHOC social networking sites (Facebook, Twitter, You Tube, Pinterest and CHOC Blog)
- *KidsHealth*, eNewsletter
- *Physician Connection*, physician eNewsletter

Section 3

Communities Served



This section describes the criteria used to define the communities served, summarizes community demographics, and specifies target populations within the communities.

Community Definition

The Hospitals serve all of Orange County and a limited, although significant, number of patients from the western rim of Riverside County and southeast areas of Los Angeles County.

Factors considered in defining the community for benefit planning include:

- Community reliance on the Hospitals for benefit services and care, as measured by market share.
- The Hospitals' reliance on the community served, as measured by patient origin.
- Ongoing community benefit services in conjunction with our long-standing relationships and collaborations with community organizations.
- Desires and perspectives of community groups and hospitals involved in the community needs assessment.

CHOC Orange's Service Area

Based on the factors listed above, the overall service area for CHOC Orange is the central-northern portion of Orange County. (See *Exhibit 3.1 for Service Area Map.*)

The Primary Service Area is in the central-northern portion of Orange County, and is the source of approximately 72% of its patients. Significant cities in this area are: Santa Ana, Anaheim, Fullerton, Orange, and Garden Grove.

The Secondary Service Area includes all cities and unincorporated areas shown on the service area map.

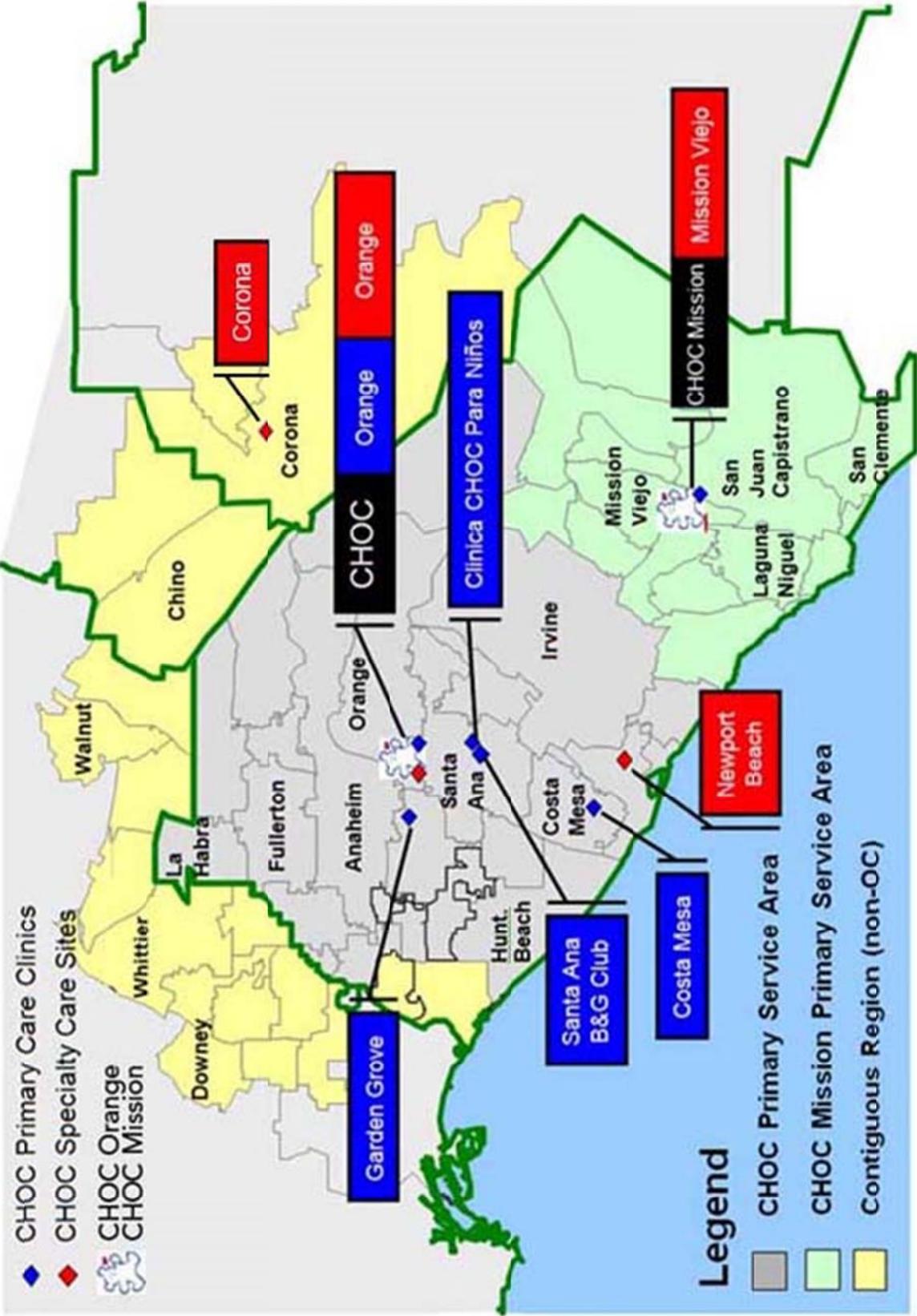
CHOC Mission's Service Area

Based on the same factors listed above, the overall service area for CHOC Mission is the southern half of Orange County. (See *Exhibit 3.1 for Service Area Map.*)

The Primary Service Area is the southern half of Orange County and is the source of over 84% of its patients. Significant cities in this area are: Mission Viejo, Laguna Niguel, Rancho Santa Margarita, Laguna Hills, Lake Forest, San Clemente and San Juan Capistrano.

The Secondary Service Area includes all the other Orange County cities and unincorporated areas shown in the service area map.

Exhibit 3.1 Service Area Map



Community Characteristics

Population and socioeconomic data projections for 2013-2014 were collected from a variety of local county and state sources representing community demographics, social and economic factors, health access and utilization, and resources available in the community for the CHNA report.

Total Population: Orange County's population is 3.114 million, making it the third most populous county in California. The median age is 36.2 years, and children up to 17 years of age make up 25% of the total population.

Socioeconomic Profile: Orange County's unemployment rate of approximately 5% has improved significantly since 2010. The median household income in the county is \$56,867. In the CHOC service area, 14.6% of children under age 18 live in poverty, compared to 23% of California's children. This indicator varies across the county, with 26.9% of children in Santa Ana living in poverty compared to 4.8% of children in Mission Viejo (CHOC Mission's service area). These low income adult residents, when compared to higher income respondents, are less likely to have any form of health coverage. Children of low income families will be eligible for Medi-Cal and potentially CCS (California Children's Services) if they have a qualifying medical condition.

Racial/Ethnic Profile: Orange County's population is diverse, with 43% of the population being Caucasian; 34% being Hispanic/Latino; almost 13% being Asian/Pacific Islander; 6.3% being Black; and the remaining 3.7% other.

Barriers to Healthcare Access: include cost, lack of available transportation, difficulty finding acceptable and affordable childcare, discrimination, lack of respectful, friendly and helpful health provider's front office staff, and long waiting periods to get appointments and long waits in the waiting room, even with an appointment.

Health and Lifestyle Characteristics reported in the CHOC CHNA included the following:

- **Mental Health**: A large number of children in Orange County require support and treatment for mental health concerns. There is a dramatic paucity of services available and there is a lifelong impact of the lack of treatment on affected individuals, their families and the community. Consequences of untreated mental illness can range from an increased risk of violence to substance abuse or suicide.
- **Obesity**: Approximately 39% of children in Orange County have an unhealthy body composition and more than 25% are far outside the healthy range. Overweight and obese children and teens suffer from increased rates of depression and anxiety. Excess weight acquired during childhood and adolescence may persist into adulthood and increase the risk of chronic diseases such as sleep apnea, musculoskeletal problems, diabetes, cardiovascular disease and hypertension.
- **Developmental Disabilities, specifically Autism**: The number of children diagnosed with developmental disabilities increased by 20.1% between 2003 and 2012. The number diagnosed with autism in Orange County increased by 24% between 2004 and 2013. Approximately six of every 1,000 children born are diagnosed with an autism spectrum disorder (ASD). ASD is a lifelong, developmental disability defined by diagnostic criteria and includes deficits in social communication and social interaction; and restricted, repetitive forms of behavior, interests and activities.

These and other characteristics described by the assessment provide valuable insight into community needs and priorities and serve to direct community benefit planning efforts, as described in Section 3.

Community Target Populations

The Hospitals' primary target population is children, both the economically disadvantaged as well as the general community. The Hospitals' experience and research indicate that the care of children is most effective within the context of the family and the community. Therefore, many of the community benefit services are focused on children and their parents together as a family unit. Some benefit services are directed at the training and support of health professionals. As a result, the community needs assessment and benefit planning process identify and use seven target groups. These target groups are:

- **General Community**
 - Children
 - Parents
 - Family

➤ **Economically Disadvantaged**

- Children
- Parents
- Family

Other Special Populations, e.g., health professionals

Section 4

Health Needs Assessment



Community Health Needs Assessment

CHOC conducted its CHNA process independently, with input from over 30 community-based organizations gathered through a series of interviews and focus groups facilitated by an independent third-party. CHOC's CHNA report, developed in fiscal year 2014, includes both primary and secondary data analyses that focus on the health and social needs of the population in the hospital's primary service area.

Further, the report was developed to meet the requirements of California SB697, the Patient Protection and Affordable Care Act (PPACA), and Internal Revenue Service section 501(r)(3).

In previous years, CHOC participated in the Orange County Health Needs Assessment (OCHNA), a collaborative effort jointly funded by the Orange County Healthcare Agency and other community hospitals and organizations. The agency dissolved in 2013, with their latest survey results reported in CHOC's fiscal year 2011.

Key Highlights – CHNA

Access to Healthcare for Children

- Health insurance coverage is a key component of health care access. More than 93 % of Orange County residents under 18 have some form of health insurance. The percentage of children with insurance varies by community of residence, from a low of 67.5% in Santa Ana to a high of 91.7% in Mission Viejo.
- Dietary habits and exercise are among the most significant behaviors affecting health. Nearly 20% of children in Orange County consume fast food three to four times per week. Additionally, 35% of children do not engage in any vigorous physical activity at least three times days per week, contributing to 33.3% of Orange County children being overweight or obese, as measured by Body Mass Index.
- Access to dental care is inadequate in Orange County, particularly for those in lower-income families. The PPACA requires that all health plans sold through the Exchanges include pediatric dental benefits. However, there is a shortage of pediatric dental providers. The Orange County Denti-Cal roster listed only 13 pediatric dentists, and only four practices will see children ages 0-5 years for sedation.
- In general, access to health care services for children is better in Orange County than in the state and country as a whole. 91% of children use a doctor's office or community clinic as their primary source of care, less than 1% use the emergency room, and just over 7% have no routine source for care. Only 2.7% report delayed/no medical care and 4.9% report a delay or not receiving prescription medicine.

Health Status Concerns

- Participants in focus groups and individuals interviewed identified several lifestyle-related issues impacting the health of children, including, overweight and obesity, alcohol and drug abuse, and teen sexual health.
- Participants believed that mental and behavioral health services are lacking for children and adolescents. Further, they were concerned about the developmental delays in young children and the high rate of Autism in Orange County children.
- Participants were also concerned about oral and dental health for those on public assistance programs.

Future Health Needs Assessment

Future data collection and information gathering in support of community benefit planning and services will be continued by CHOC through its CHNA process, and will include the following topics.

- Extent of type of healthcare coverage
- Health care utilization
- Dental coverage, vision coverage
- Mental/behavioral health
- Maternal and infant health
- Nutrition, obesity and exercise
- Health status and quality of life, including injury and disease prevention, and academic achievement

Section 5

Goals and Strategies



This section describes the community benefit plan process that was used to develop the Hospitals' community benefit goals and strategies, the goals and strategies themselves and progress summaries for each goal for fiscal year 2014.

Community Benefit Planning Goals

Executive management utilized the OCHNA health needs findings to develop the hospitals' goals for meeting the needs identified in six broad areas.

- 1. Healthcare Access:** increase access to quality pediatric healthcare resources and information to families, especially low-income and medically underserved, throughout Orange County.
- 2. Behavioral Health Access:** enhance the community's access to behavioral health information and services, targeting the underserved.
- 3. Disease Prevention:** increase awareness of disease prevention and promote early intervention of major diseases that affect the community.
- 4. Information Resource:** provide the community with resources for information and education of health risk behaviors.
- 5. Injury Prevention:** actively contribute to reducing the number of unintentional injuries to young children, especially targeting low-income, diverse and medically underserved populations.
- 6. Community Action:** actively recruit, recognize and advocate for the importance of volunteer leadership and community assistance in providing care for children.

Strategies

Specific strategies for each community benefit planning goal were established, which are summarized in the following table.

Summary of Benefit Planning Goals and Strategies	
Goal	Strategies
1. Healthcare Access	<ul style="list-style-type: none">• Community clinics and Mobile Health Program• Financial assistance for patients• Enrollment in public insurance programs• Physician recruitment and training• Specialty clinics
2. Behavioral Health Access	<ul style="list-style-type: none">• Utilize CHOC Psychology Department• Utilize CHOC Social Services• Collaborate with other community services and providers
3. Disease Prevention	<ul style="list-style-type: none">• CHOC Breathmobile• Community education on wellness
4. Information Resource	<ul style="list-style-type: none">• <i>KidsHealth</i> eNewsletter• Parent Advice Line (PAL)• Physician Education: Cancer, Neuroscience, Orthopaedic and Heart Institutes• <i>Physician Connection</i> eNewsletter• CHOC Annual Report• choc.org website• CHOC social networking sites

<p>5. Injury Prevention</p>	<ul style="list-style-type: none"> • Lead Orange County SAFE KIDS Coalition • Offer neighborhood-based injury prevention programs • Collaborate with community coalitions to enhance injury prevention efforts • Offer hands-on training to reduce home-related injuries • Provide injury prevention information to general community and professionals • Drowning prevention and education program • Car seat education for community, patients and families
<p>6. Community Action</p>	<ul style="list-style-type: none"> • Board members' dedication and activities • Associate volunteering • Assist community organizations

Section 6

Benefit Services



This section summarizes benefit activities by SB697 category, organization, benefit plan goals, and target group. A complete alphabetical master list of benefit services and descriptions is in Appendix B.

Benefits Data Collection

Benefits data collection begins with an annual, organization-wide update of the hospitals' inventory of community benefit activities. The person responsible for each identified benefit service receives and completes a benefit data form for that service. Information requested includes the following:

- Service title, description, and objectives
- Target groups and community needs served
- Collaborative partners
- Occurrences and number of persons served
- Staff and volunteer hours and costs

Lyon Software's computer program, CBISA Online, serves as the basic data management tool of the completed annual community benefit survey forms returned by the department managers.

Benefit Service by Tabulations

Each benefit service's SB697 category and the hospitals' focus area are identified using standard Lyon Software. These reports are exported and summarized to produce tables and cross-tabulations for the following categories.

- SB697 category
- Organization (CHOC Orange and CHOC Mission)
- Hospitals community benefit plan goals (community need)

The Hospitals' community benefit plan goals encompass community needs identified in the community assessment, while reflecting its own community benefit program vision.

Services by Organization

The community benefit survey for 2014 identified 100 community benefit services. The following table shows the distribution of service by organization.

Organization	Number of services 2013	Number of Services 2014
CHOC Orange Services	80	91
CHOC Mission Services	9	9
Total Services	89	100

Services SB697 Category

The table below summarizes the number of 2014 benefit services for each SB697.

SB697 Category	Number of Services 2013	Number of Services 2014
A. Medical care services	14	16
B. Other benefits: broader community	23	35
C. Other benefits: vulnerable populations	5	4
D. Health research, education, and training	47	45
Total Services	89	100

Services by Benefit Planning Goals (Community Need)

The distribution of community benefit services by focus area is reflected below. Appendix C contains a complete listing of services by goal.

Goals	Number of Services 2013	Number of Services 2014
1. Healthcare Access	27	25
2. Behavioral Health Access	15	21
3. Disease Prevention	5	6
4. Information Resource	9	16
5. Injury Prevention	10	11
6. Community Action	23	21
Total Services	89	100

Collaboration with Other Organizations

As part of the organizational mission, the hospitals are firmly committed to collaborative efforts that improve the health and well-being of children. Of the 100 benefit services, 63.0% or 63 have one or more collaborators. Appendix C lists these collaborative partners.

Section 7

Economic Value of Benefits



This section presents the dollar value of community benefits and the total number of volunteer hours. The dollars are shown in total and by organization, SB697 category, and focus area. In addition, for each focus area, the section includes value of benefits for economic group and target audience.

Value by Organization

The following table presents cost of benefit services and paid hours at each of the hospitals. The dollars shown are net hospital cost, excluding volunteer hours.

Organization	Dollar Value ¹
CHOC Orange services	\$144,641,965
CHOC Mission services	5,907,716
Total Services	\$150,549,681

The value of community benefits shown below includes only free, discounted, subsidized, or negative margin services, and the unpaid cost of public programs. These dollars are hospital costs only, excluding funds received from any other source. Unpaid cost of public programs is calculated using the cost-to-charge ratio for each hospital. Costs for all services, except unpaid costs, include indirect costs. Employee benefits are included for paid staff-hour costs.

Value by SB697 Category

The dollars for each SB697 category are shown below.

SB697 Category	Dollar Value ¹
Medical care services	\$120,451,763
Other benefits: broader community	7,877,307
Other benefits: vulnerable populations	566,998
Health research, education, and training	21,653,613
Total Services	\$150,549,681

¹The economic value of benefits in 2014 was reduced by \$8.3 million due to the California Hospital Provider Fee Program, further described on pages 3 and 4 of this report.

Services by Benefit Planning Goals (Community Need)

The distribution of community benefit services by focus area is as follows:

Benefit Planning Goal	Dollar Value ¹
1. Healthcare Access	\$141,871,279
2. Behavioral Health Access	3,931,128
3. Disease Prevention	3,109,685
4. Information Resource	523,923
5. Injury Prevention	613,570
6. Community Action	500,096
Total Services	\$150,549,681

Value by Community Goal and Economic Group

The summary of dollars by goal and economic group confirms the prominence of providing a continuum of care to the economically disadvantaged (81.5%).

Goals	Broader Community	Economically Disadvantaged (a)	Total Value ¹
1. Healthcare Access	\$19,367,483	\$122,503,796	\$141,871,279
2. Behavioral Health Access	3,931,128	-	3,931,128
3. Disease Prevention	3,107,601	2,084	3,109,685
4. Information Resource	507,938	15,985	523,923
5. Injury Prevention	487,170	126,400	613,570
6. Community Action	496,601	3,495	500,096
Totals	\$27,897,921	\$122,651,760	\$150,549,681
(a) Broader community services are also available to the economically disadvantaged			

¹The economic value of benefits in 2014 was reduced by \$8.3 million due to the California Hospital Provider Fee Program, further described on pages 3 and 4 of this report.

Volunteer Hours

In addition to the 495,293 paid staff hours, board members, physicians, hospital associates and auxiliary volunteers contributed another 33,860 volunteer hours. These individuals donate their personal time and effort with no reimbursement or payment. Their personal contributions to community benefit activities are an indispensable component to the Hospital's contribution and dedication to the community. A large portion of volunteer hours is time donated by staff and community physicians to the education of pediatric residents and fellows.

Evaluating the Economic Value

A benchmark for evaluating the cost of community benefits is the dollar value of the hospitals' tax-exempt status. A desirable community benefit dollar-value

exceeds the value of tax-exemption. Elements included in calculating the value of tax-exempt status include:

- Interest rate differential on tax-exempt financing for long-term debt
- Property tax on assessed value
- State income tax obligation without tax exemption
- Federal income tax obligation without tax exemption

The following table shows that CHOC Orange and CHOC Mission returned \$23.37 in community benefits for each \$1.00 of tax exemption.

Hospital cost of community benefits ¹	\$150,549,681
Value of tax exemption	\$6,441,674
Benefits per dollar of tax-exemption value	\$23.37

¹The economic value of benefits in 2014 was reduced by \$8.3 million due to the California Hospital Provider Fee Program, further described on pages 3 and 4 of this report.

Benefit Value versus Marketing Value

Community benefit activities are those with uncompensated cost and which address community needs. Health promotion and wellness are the primary goals of community benefits. While some positive marketing value may occur, this benefit plan does not attempt to separate benefit value and marketing value. Estimates of marketing value would be highly subjective and non-informative, since there is no objective way to separate benefit and marketing values.

Non-quantifiable Community Benefits

In addition to quantified benefits described in this plan, many intangible and non-quantified benefits arise from both hospitals' presence. The Hospitals indirectly support local businesses in the areas of construction, linen services, parking, medical supply and pharmaceutical distributors, among others. The Hospitals' board, executives, management, staff and physicians are active community leaders, and the Hospitals are major employers in their communities, employing approximately 3,107 associates. Additionally, the Hospitals are significant purchasers of goods and not exempt from sales and use taxes, which support city, county and state activities.

Appendices

Appendix A: Patient Financial Assistance Program Policy Statements

Appendix B: Alphabetical Master List of Benefit Services

Appendix C: Collaborators by Type

Appendix D: Services by Community Benefit Goal

Appendix A



Manual: Administrative and Patient Care

Section: Finance

Number: L3003

Policy **Procedure**

Title: Patient Financial Assistance and Discount Payment Program Policy

Originator: Janne Gish Current Content Expert: Department Head: Kerri Ruppert Schiller	<table border="1"> <thead> <tr> <th style="text-align: left;"><u>Committee Approval(s)</u></th> <th style="text-align: left;"><u>Date(s)</u></th> </tr> </thead> <tbody> <tr> <td>Standards</td> <td>06/28/12</td> </tr> <tr> <td>Joint Leadership</td> <td>09/06/12</td> </tr> </tbody> </table>	<u>Committee Approval(s)</u>	<u>Date(s)</u>	Standards	06/28/12	Joint Leadership	09/06/12				
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Standards	06/28/12										
Joint Leadership	09/06/12										
Executive Management Team Member: Kerri Ruppert Schiller <input type="checkbox"/> New <input checked="" type="checkbox"/> Revised <input type="checkbox"/> Reviewed (no changes) Track: <input type="checkbox"/> A <input checked="" type="checkbox"/> B <input type="checkbox"/> C Replaces: 12/07, 12/10, 01/12	<table border="1"> <tbody> <tr> <td>Medical Executive Committee</td> <td></td> </tr> <tr> <td>Date:</td> <td>09/12/12</td> </tr> <tr> <td>Board of Directors</td> <td></td> </tr> <tr> <td>Date:</td> <td>09/27/12</td> </tr> <tr> <td>Effective Date:</td> <td>09/27/12</td> </tr> </tbody> </table>	Medical Executive Committee		Date:	09/12/12	Board of Directors		Date:	09/27/12	Effective Date:	09/27/12
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Date:	09/12/12										
Board of Directors											
Date:	09/27/12										
Effective Date:	09/27/12										

I. PURPOSE:

- A.** Children’s Hospital of Orange County (CHOC Children’s) is committed to providing quality healthcare to all patients regardless of the patient’s financial status. Patients who meet the established Financial Assistance Program criteria may be eligible to receive financial assistance to cover all or portions of the patient’s healthcare costs. CHOC Children’s also provides benefits for the broader community in terms of medical education and medical research.
- B.** Under this policy, Financial Assistance may be provided to patient’s who are uninsured or underinsured and cannot afford to pay for their own medical care. Eligibility for the Financial Assistance Program shall not be based in any way on age, gender, sexual orientation, ethnicity, national origin, disability or religion.
- C.** In some cases, Financial Assistance may be extended to patients whose financial status makes it impractical or impossible to pay for necessary medical services. The evaluation of the necessity for medical treatment at CHOC Children’s will be based upon clinical judgment. The clinical judgment of the patient’s physician or the Emergency Department staff physician will be the sole determining criteria for the patient’s receiving services at CHOC Children’s.
- D.** This policy is applicable to all CHOC Children’s Inpatients and Outpatients (including CHOC Children’s Medical Foundation patients.)

II. DEFINITIONS:

- A. Patient Data:** Medical record number, patient name, birth date, insurance status, eligibility for other support.
- B. Patient’s family:** For purposes of this policy is as follows:

For persons 18 years of age and older, spouse, domestic partner as defined in Section 297 of the California Family Code; and dependent children under 21 years of age, whether living at home or not;

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For persons under 18 years of age, parent, caretaker relatives and other children under 21 years of age of the parent or caretaker relative.

III. POLICY:

- A. It is the policy of CHOC Children's to determine eligibility for Financial Assistance at the time of registration to CHOC Children's, through a financial screening process for all patients not able to meet the deposit requirements of CHOC Children's.
- B. This policy distinguishes a bad debt patient from an eligible Financial Assistance patient by the patient's or patient's family unwillingness to pay versus a demonstrated inability to pay. Failure of the patient and/or patient's family to comply with requests for information to substantiate an inability to pay may result in forfeiture of the right to be considered for the Financial Assistance Program.
- C. It is the goal of CHOC Children's to identify an eligible Financial Assistance patient at the time of registration however; if complete information regarding the patient's insurance or financial situation is unavailable due to emergency treatment, or if the patient's/guarantor's or patient family's financial condition changes, the designation as a Financial Assistance patient may be established after the rendering of services, and in some instances even after the production of a patient bill.
- D. Should a staff physician or clinician wish to prospectively pursue Financial Assistance for a known patient, the protocol for requesting Financial Assistance can be found on Paws located under the on-line form bank.
- E. CHOC Children's will refer a patient or patient's family to alternative programs, (i.e., Medi-Cal, California Children's Services or any other government sponsored health program of health benefits in which Hospital participates). Failure of the patient and/or patient's family to comply with the referral process may result in forfeiture of the right to be considered for the Financial Assistance Program for the visit or admission in question. Confidentiality of information and the dignity of the patient will be maintained for all that seek or are provided Financial Assistance services.
- F. Patient receiving services in the Hospital Emergency Room may also be eligible for Financial Assistance in paying for the Emergency Room physician fees.

IV. PROCEDURE:

A. Eligibility

The identification of Financial Assistance is achieved through determination of the financial status of a patient or patient's family. Such determination should be made at or before the time of registration, or as soon thereafter as is possible. In some cases, such as emergency admissions, it may not be possible to establish eligibility for the Financial Assistance Program until after the patient is discharged. In these instances, or instances where events occur during or after a patient's stay which change the patient's or patient family's financial status, the patient's eligibility for the Financial Assistance Program shall in no way be affected by the timing of the determination that the patient meets the eligibility criteria.

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The responsibility for identifying a patient's eligibility for the Financial Assistance Program at, or before, the time of the patient visit to CHOC Children's shall be the responsible of the department registering the patient. This will require the patient or patient's family to complete a "Financial Disclosure" statement. This may also include copies of pertinent documentation (recent pay stubs, income tax returns or other documents to verify monetary assets) to determine the annual family income and personal assets of the patient or patient's family. In those instances described above, where eligibility cannot be established at the time of service, the Patient Financial Services Department shall work with the patient or family to determine eligibility.

Patient or patient's family having insurance may also be eligible for the Financial Assistance Program for that portion of the bill not covered by insurance. This may include deductibles, coinsurance, and non-covered services. The determination of a patient's eligibility shall be subject to the same guidelines as an uninsured patient.

Calculating the amount of Financial Assistance.

- a. CHOC Children's will obtain information on the patient's family income including wages and salary, welfare payments, social security payments, strike benefits, unemployment benefits, child support, alimony, dividends and interest. The total family income will be compared with the table (see Schedule A) to determine a patient's eligibility for Financial Assistance under the Federal Poverty Guidelines. Any uninsured patients or patients with high medical costs whose annual household income is at or below 400% of the Poverty Guidelines shall be eligible to apply for Financial Assistance. Financial Assistance may be considered on a partial basis for patients with incomes more than 200% of Poverty Guidelines and less than 400%. Those families with an annual income of 200% or less of the Federal Poverty Guidelines would be eligible for a 100% Financial Assistance adjustment. Uninsured or underinsured patients whose household income, as determined in accordance with the Assistance Application, is less than or equal to 200 % of the poverty guidelines, will receive care free of charge.
- b. CHOC Children's Community Clinic patients are eligible for financial assistance as outlined in this policy utilizing Schedule B to calculate the sliding scale per visit co-pay for patients falling below 200% of the Federal Poverty Guidelines.
- c. Patients applying for Financial Assistance and who are receiving full or partial approval will have their approval for assistance forwarded to the Emergency Room physician billing company for consideration.

Discount Payment Policy

- a. For patients with household incomes between 201 percent and 300 percent of the Federal Poverty Level, the Hospital may provide a discounted Private Pay Fee Schedule, whereby the allowable medical expense would be equivalent to a 75% discount off billed

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charges. At this level, the reimbursement that CHOC Children's would receive shall not exceed the payment that CHOC Children's would receive for the same service or set of services from the Greater of Medicare, Medi-Cal, Healthy Families, or any other government sponsored health program of health benefits in which CHOC Children's participates.

- b. For patients with household incomes between 301% and 400% of the Federal Poverty Level, CHOC Children's may provide a discounted Private Pay Fee Schedule, whereby the allowable medical expense would be equivalent to a 50% discount off billed charges. At this level, the reimbursement that CHOC Children's would receive shall not exceed the payment that CHOC Children's would receive for the same service or set of services from the Greater of Medicare, Medi-Cal, Healthy Families, or any other government sponsored health program of health benefits in which CHOC Children's participates.

CHOC Children's Financial Assistance Program Eligibility Guidelines

The following Financial Assistance Program Eligibility Guidelines are based on the most recently published Federal Poverty Guidelines. Schedule A delineates the household income thresholds according to the Federal Poverty Guidelines, published April 1, 2012.

Personal Assets

- a. If a patient meets the "Household Income" in Schedule A and is found to be eligible for the Financial Assistance Program, a CHOC Children's representative will further review the patient's or patient family's Financial Disclosure Statement to determine if he/she has significant personal assets. It would not be consistent with the intent of this policy to grant Financial Assistance to patients with a significant portfolio of either liquid assets, or other assets against which the patient or patient's family could borrow the amount required to pay his/her indebtedness. For this reason, the CHOC Children's representative should consider and evaluate such assets as bank accounts, the patient's or patient's family entitlement to tax refunds, stocks, bonds and other investments.
- b. This policy will not include in determining eligibility a patient or patient's family retirement or deferred compensation plans qualified under the Internal Revenue Code, or nonqualified deferred compensation plans. Furthermore, the first ten thousand dollars (\$10,000) of a patient's or patient's family monetary assets shall not be counted in determining eligibility nor shall 50% of a patient's monetary asset in excess of ten thousand (\$10,000) be counted in determining eligibility.

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- c. Any patient or patient's family that qualifies and is approved under the Financial Assistance Program for a partial discount of charges will also be eligible to make monthly payments. CHOC Children's and the patient may negotiate the terms of the payment plan, however the payment plan must be approved by the manager of Patient Financial Services or in the case of a Community clinic patient, the manager of the community clinic. During the approved repayment period CHOC Children's will apply no interest to the discounted account balance.
- d. An extended discount payment plan could be declared inoperative after the patient or patient's family fails to make consecutive payments due during a 90 day period. Prior to declaring an extended payment plan inoperative, CHOC Children's, or its collection agency, or assignee must make a reasonable attempt to notify the patient or patient's family by phone or at the last known phone number and in writing at the last known address, that the extended payment plan may become inoperative and there might be an opportunity to renegotiate, if requested by the patient or patient's family.

B. Exceptions:

It is understood that extenuating circumstances will arise that might require special consideration in approving Financial Assistance for patients who do not meet the established criteria, or to grant an increase in the amount of Financial Assistance to be extended to a patient that does not meet the criteria. CHOC Children's representatives should be aware of this when evaluating individual patient cases for the Financial Assistance Program. While it is not possible to provide a definitive or complete listing of all extenuating circumstances that may arise, some important factors to consider would include:

- a. The amount owed by the patient or patient's family in relation to his/her total income. If the total patient out of pocket expenses at CHOC Children's exceed 10% of the patient's or patient family's annual income for the prior 12 months.
- b. The medical status of the patient or of his/her family's provider
- c. The patient's or patient family's willingness to work with CHOC Children's in exhausting all other payment sources

Any circumstances that are considered to fall into the "extenuating circumstances" category should be brought to the attention of the Executive Director of Patient Financial Services. Cases falling into this category may require the approval of the Vice President of Finance or Chief Financial Officer.

International Patients:

The Financial Assistance Program does not apply to international patients seeking non-emergent care. CHOC Children's will follow routine operating procedures in providing care at our standard published prices. If

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any international patient is in need of financial assistance for elective or non-emergent care they may apply to CHOC Children's for consideration.

C. Financial Assistance Program Approval/Denial/Appeal Process

Any patient account recommended for partial or total Financial Assistance adjustment, after meeting the guidelines set forth in this policy require the following signature approval process to be followed:

a. **CHOC Children's (Hospital and Clinics)**

\$.01- \$5,000	Manager
\$5,001 - \$50,000	Executive Director PFS
\$ 50,001. - \$100,000	VP of Finance
\$100,001 – to all appeals	Senior Vice President and Chief Financial Officer

b. **CHOC Children's Medical Foundation**

\$0 - \$500	Business Office Supervisor
\$501 - \$2,500	Business Office Manager
\$2,501 - \$10,000	Business Office Director
> \$10,001	Chief Financial Officer (or designee)

At the time a decision is made to approve or deny a patient account for the Financial Assistance Program, a letter will be sent to the patient as a notification of the decision made. If an application for the Financial Assistance Program is denied, a CHOC Children's representative will contact the patient or patient's family to make payment arrangements on the account.

Appeal Process:

If at any point in the Financial Assistance approval process the application is in dispute the patient or patient's family has the right to request reconsideration of the application at the next level of the approval process. The final determination for denial of Financial Assistance will reside solely with the Senior Vice President and Chief Financial Officer, and their, determination will be considered final.

Patient or patient family's appeal must be submitted in writing to the Patient Accounting Director within thirty (30) days of notification of original denial.

Provision of the Financial Assistance Program does not eliminate the right to bill, either retrospectively or at the time of service, for all services, when fraudulent, inaccurate or incomplete information has been given in the application process. In addition, CHOC Children's reserves the right to seek all remedies, including by not limited to civil and criminal damages from those who have provided false, inaccurate or incomplete information in order to qualify for the Financial Assistance Program.

D. Financial Assistance Program: Notification to Patient or Patient's Family

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CHOC Children's patient statements will provide notification in English and Spanish advising the patient of CHOC Children's Financial Assistance Program policy, and the contact information to obtain additional information about assistance.

A summary of the Financial Assistance Program along with contact information shall be posted in both English and Spanish in high traffic areas of CHOC Children's, such as Admitting, Emergency Room, Clinics, Outpatient Registration and Patient Accounting Offices.

CHOC Children's will provide to all self pay patients at point of service, notice of the Financial Assistance Program and contact information.

E. Collection Process:

If a patient qualifies for assistance under the Financial

- a. Assistance Program and is making every effort to settle an outstanding bill within a reasonable time period, CHOC Children's or its agent shall not send, nor intimate that it will send, the unpaid account to an outside agency if doing so may negatively impact a patient's credit. If CHOC Children's is forced to send the account to an outside collection agency, the amount referred to the agency shall reflect the reduced payment level for which the patient was eligible under the Financial Assistance Program. At no time will a patient account be referred to an outside collection agency if the account is less than one hundred fifty (150) days from original billing.
- b. In the event the patient makes payments on their CHOC Children's account in excess of total amount of patient responsibility, CHOC Children's will refund any over payment to the patient with interest accrued at the rate set forth in existing law beginning on the date the hospital receives patient payment and it is identified as a patient credit. CHOC Children's however is not required to reimburse the patient or pay interest if the amount owing is under \$5.00. The hospital will recognize the \$5.00 credit for a minimum of 60 days against any patient balance incurred during that period of time.

CHOC Children's shall not, in dealing with identified uninsured patients at or below 400% of the Federal Poverty Level, use wage garnishments or liens on patient's or patient family's primary residence as a means of collecting unpaid CHOC Children's bills. This requirement does not preclude CHOC Children's from pursuing reimbursement from third party liability settlements.

F. Documentation for Financial Assistance Program Discounts

In cases where it has been determined that a patient qualifies for the Financial Assistance Program, it is important that the patient's file be properly documented in order to facilitate easy identification of the patient, as well as to maintain a proper record of the facts that resulted in the determination of the eligibility for Financial Assistance. The minimum documentation that may be required for each Financial Assistance case may be limited to one of the following:

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Copy of the patient's or patient family's completed Financial Disclosure Worksheet, including any supporting documentation to same (i.e., prior year tax returns (preferred documentation), W-2 Forms, or current pay stubs.)

Copies of any additional documentation, notes, etc. that outline extenuating circumstances that were considered in the determination of eligibility for the Financial Assistance Program (if available or needed).

A copy of the "Approval for Financial Assistance" signed by the appropriate Hospital representative(s) (if available).

Bankruptcy within the last year (automatic qualification for the Financial Assistance Program).

G. Reports

Financial Assistance shall be logged with the following information:

Patient data consisting of Protected Health Information (PHI) will be maintained in a manner that protects the privacy and confidentiality of such information, and will only be logged as necessary for implementation of the Financial Assistance Program.

- a. Inpatient or outpatient status
- b. Total patient charges
- c. Financial Assistance expenditures, approved and denied
- d. Date of approval/rejection
- e. Rationale for any rejection

All application files are confidential and will be maintained in a secure location for a minimum of three years after the date of the application and the completion of CHOC Children's fiscal yearend audit. All Financial Assistance Program logs will be maintained for a period of seven (7) years. At the end of the respective period, all information will be destroyed or maintained in a manner to protect the privacy and confidentiality of the patient.

V. EVIDENCE BASED REFERENCES/BIBLIOGRAPHY:

- A.** Revenue Cycle Management, Zimmerman and Associates: December 2002.
- B.** SJHS Charity P&P 03/0/04
- C.** California Hospital Association, Voluntary Principles and Guidelines for Assisting Low-Income Uninsured Patient February 06,2004
- D.** American Hospital Association, Statement of Principles and Guidelines on Hospital Billing and Collection Practices, April 27, 2004
- E.** Assembly Bill 774 Chan-Hospitals: fair pricing policies
- F.** California Hospital Association, Charity Care Requirements Implementation AB 774 November 3, 2006
- G.** Barclays California Code of Regulations, Title 22, Chapter 7, Section 75049
- H.** Department of Health and Human Services, Federal Poverty Income Guidelines., <http://coverageforall.org/pdf/FHCEFedPovertyLevel.pdf>. March 1, 2010
- I.** Health Center Program Statute: Section 330 of the Public Health Services Act (42 U.S.C.254b)
- J.** Program Regulations 42 code of Federal Regulations (CFR) Part 51c And 42 CFRParts 56.201-56.604 for Community and Migrant Health Centers

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Schedule A				
Published Federal Poverty Guidelines		04/01/12		
Number in Household	Up to 100%	Up to 200%	Up to 300%	Up to 400%
1	\$11,172	\$22,344	\$33,516	\$44,688
2	\$15,132	\$30,264	\$45,396	\$60,528
3	\$19,092	\$38,184	\$57,276	\$76,368
4	\$23,052	\$46,104	\$69,156	\$92,208
5	\$27,012	\$54,024	\$81,036	\$108,048
6	\$30,972	\$61,944	\$92,916	\$123,888
7	\$34,932	\$69,864	\$104,796	\$139,728
8	\$38,892	\$77,784	\$116,676	\$155,568
Discount	100% - except for copayments		75%	50%

Schedule B

Community Clinic Sliding Fee Schedule Gross Monthly Poverty Income Guidelines

Health Plan Code	Charity Care	Self Pay-Special arrangements	Self Pay
Poverty Level	Under 100%	Between 100 and 200%	Above 200%
# of persons in family			
1	\$0-931	\$932-1862	Above \$1863
2	\$1261	\$1262-2522	Above \$2523
3	\$1591	\$1592-3182	Above \$3183
4	\$1921	\$1921-3842	Above \$3843
5	\$2251	\$2252-4502	Above \$4503
6	\$2581	\$2581-5162	Above \$5163
7	\$2911	\$2912-5822	Above \$5823
8	\$3241	\$3242-6482	Above \$6483
Visit Co_Pay	\$10	\$60 New \$40 Established	\$100 Well visit \$85 non well visit

Charity Application Instructions

The following information and supporting documents must be provided to evaluate this application for a possible reduction of hospital expenses provided by CHOC Children's and CHOC Children's at Mission Hospital.

Please complete all sections of the application and attach copies of the applicable documents. Return the application by mailing to the Patient Financial Services Department at the address listed below:

CHOC Children's
Attn: Patient Financial Services
1201 W. La Veta Ave.
Orange, CA 92868-3874

If you should need to contact the hospital regarding your application, please call 714-532-7860.

The current published federal poverty guidelines are used in determining eligibility.

Below is a list of documents required to complete Charity Application:

Proof of Income

Check Stubs or/
Employers statement of earnings or
Previous Year Income Tax Returns

Other Income Sources/Assets

Bank Statements (past 2 months)
Tax Refund entitlements
Stocks
Bonds
Trust Funds
Property (other than primary residence)

Other Income Sources

Social Security
Workers Compensation
Welfare/AFDC
Alimony
Child Support
Rents
Support from family members or someone not living in the household

Please note: This application is valid for 60 days from date of services are rendered.

Personal Information

A

Patient Name:		
Sex: Male Female		Patients SS#
Patients date of birth:		Account Number
Guarantor Name:		
Address:		
Does the patient have medical insurance?	Yes No	
Has patient applied for Medi-Cal or CCS?	Yes No	
Total Number of Family Members: (Include all children 21 and under)		Family Members Ages:
Is Patient a California Resident?	Yes No	
Is this for an Emergency Room Visit?	Yes No	

I certify that the information provided is true and accurate to the best of my knowledge. Further, I have or will apply for any assistance (Medi-Cal, Healthy Families, insurance, etc.) which may be available for payment of medical services, and that I will take any action reasonably necessary to obtain such assistance and will assign or pay to the hospital the amount recovered for medical services.

I understand that this application is a tool for the hospital to evaluate eligibility for financial assistance services. I also understand that the hospital will verify the information, which may include obtaining a credit report. If the information I have given proves to be untrue, or if I fail to comply with the referral process for MediCal, Medicare, California Children's Services, or other identified programs this may result in forfeiture of the right to be considered for the Financial Assistance Program.

Today's Date: _____ Date(s) of Service: _____

Signature: _____

Name: _____

Address: _____

Telephone
Number: _____

Assets/Income/Resources

B

Employee/Employer Name	Employer Information	Monthly Income (prior to taxes)	Hire Date
(Mother) Employee Name:	Address:		
Telephone Number:		\$	
(Father) Employee Name:	Address:		
Telephone Number:		\$	
(Other Employment Income)	Address:		
Telephone Number:		\$	

Annualized Income: \$

Assets and Resources			
Funds	Description	Value	
Checking:	Account Number:		
Savings:	Account Number:		
Investments	Description	Value	
Money Market Funds:	Type:		
Stocks:	Type:		
Bonds:	Type:		
Personal Property	Description	Value	Equity
Property (other than primary residence)	Type:		
	Type:		
Assets and Resources:	Type:		

APPENDIX B

Alphabetical Master List of Benefit Services

SERVICE TITLE	DESCRIPTION
AMERICAN HEALTH JOURNAL/PBS	A health program that airs on PBS to provide healthcare information to general public.
ASTHMA BREATHMOBILE	The Breathmobile van program is a collaborative effort between CHOC and Orange County schools to provide comprehensive asthma care and management services to underprivileged children of the community.
ATHLETIC TRAINING PROGRAM	Provide trainers (2 FTE's) to work with student athletes in the Irvine Unified School District.
AUTISM CENTER - ADVISORY BOARD AND EXECUTIVE COMMITTEE	Community access to care and education for patients with autism and other neurodevelopmental disorders.
BEHAVIORAL AND MENTAL HEALTH	Behavioral and Mental Health Advocacy as part of broad coalition including HASC, CalOptima, the Orange County Health Care Agency, St. Joseph Hoag Health, Saddleback Church.
BEHAVIORAL HEALTH SERVICES-MENTAL HEALTH INTERVENTIONS	Psychology provides assessment, treatment planning and case management service to CHOC Children's patients in the ED who are presenting with suicidal ideation or need a suicide assessment. The treatment planning and case management time is not billable so those hours are donated to best serve these patients.
BEREAVEMENT SUPPORT GROUPS & DAY OF REMEMBRANCE	Support groups for parents and siblings who have lost a child. Annual memorial service to honor children who have died.
BIKE AND BIKE HELMET SAFETY	Interactive bicycle safety program for students K-6, including a low-income helmet distribution program for clinic patients.
BRANDMAN UNIVERSITY-CNO ADVISORY GROUP FOR SKILLS LAB	Serve on CNO Advisory working group for Skills Lab for Brandman University.

BRINGING BABY HOME INFANT CLASS	Bringing Baby Home for parents of NICU babies. This class is to equip new parents with some basic parenting skills when they bring their Neonate home from the hospital. How to prepare their environment (temperature, pets, tobacco smoke, visitors), when to call the doctor, and general care reminders for bathing and feeding. There is also time allowed for skill practice such as diaper changing, temperature taking, bathing, calming techniques and swaddling.
BUCKLE BEAR	Preschool and kindergarten program that teaches children the importance of wearing a seat belt and riding safely in a car.
CAL STATE UNIVERSITY, FULLERTON PHILANTHROPIC FOUNDATION	CHOC's CFO is a member of the California State University, Fullerton Philanthropic Foundation board of directors and chairs its nursing initiative.
CALIFORNIA CHILDREN'S HOSPITAL ASSOCIATION	California Children's Hospital Assoc. participation by the CEO, the CFO and Government relations leadership including participation in board meetings, CCS Access issues, Public Policy and Governance Best Practices meetings.
CALOPTIMA BOARD AND BOARD COMMITTEES	CFO and chief governmental relations officer participation with CalOptima board and related committees. CalOptima is a county organized health system for low-income families.
CANCER SURVIVORS DAY-COURAGEOUS KIDS CELEBRATION	Annual event for patients and families to celebrate cancer survivors.
CAREPAGES	Enable patients and family to create their own individual web sites to post information on their progress, keep family and friends updated, share information about their treatment, etc.
CHARITY CARE	Charity care provided to families with children who are uninsured or underinsured and cannot afford to pay for their medical care.
CHILD LIFE BOATING TRIP	Boating and whale watching trip for CHOC patients and families to encourage socialization in a non-hospital setting.

CHILD LIFE INTERNSHIP PROGRAM	A comprehensive structured internship (15 week duration) that, upon completion, will fulfill eligibility requirements for child life certification.
CHILD LIFE PRACTICUM PROGRAM	A comprehensive structured practicum program for students interested in pursuing a degree related to (or in) Child Life.
CHILD PASSENGER SAFETY	Four-part program designed to reduce automobile-related childhood deaths and injuries; provides car seat giveaways, low-cost purchases, loans, and rentals; program works with local police department to provide ongoing car seat check off points.
CHOC CLINIC - GARDEN GROVE	Community-based clinic and outreach services that respond to the health care needs of high-risk and disadvantaged populations.
CHOC EDUCATION CENTER	Donation of CHOC Education center for community organization meetings, classes and support groups.
CHOC FISHING TRIP TO IRVINE LAKE	Fishing trip for CHOC patients and families to encourage socialization in a non-hospital setting.
CHOC NURSE ADVISE (KIDWISE)	24-hour bilingual information phone line providing health information, advice, triage, community services referrals and physician referrals.
CHOC RESIDENCY PROGRAM ADVOCACY ROTATION	Provide advocacy training and experience to pediatricians-in-training to prepare them to help influence public policy to support the health care needs of children in the community.
CLINICA CHOC PARA LOS NINOS	Community-based clinic and outreach services that respond to the health care needs of high-risk and disadvantaged populations.
CLINICAL EDUCATION FOR NEURODIAGNOSTICS	Clinical education for EEG students.
CLINICAL RESEARCH - EPILEPSY & HRSA GRANT & PAPERS FOR JOURNALS	To conduct clinical research and share with the larger community to benefit the community by providing better care to children and their families.
COMMUNITY BENEFIT PLAN - PREPARATION	Delineate and quantify community benefits outreach provided in response to

	SB 697
COMMUNITY BUILDING - RECRUITMENT OF UNDERREPRESENTED MINORITY	Recruit staff from diverse backgrounds for position to work with children with Autistic Spectrum Disorders & to work with children with hematologic disorders and participate in a mental health strategic plan.
COMMUNITY BUILDING - COALITION BUILDING MENTAL HEALTH PLANNING	Working with community members to develop a mental health strategic plan for Orange County such that the children of OC will have their mental health needs met in a comprehensive manner.
COMMUNITY COMMITTEE HOURS: COMMUNITY EDUCATION	Provide representation and advocacy for children's health and safety issues at vital coalition meetings at local, state and national levels.
COMMUNITY OUTREACH AND EDUCATION	Provide educational curriculum and outreach services to children & families, schools and health care agency providers to enhance community awareness, identification and treatment of asthma and Chronic Lung Disease
COMMUNITY OUTREACH HEALTH FAIRS	Participation in health fairs; community events.
COSTA MESA CLINIC	Primary care clinic serving children 0-18 years of age.
CPR EDUCATION	CPR training for patients, families, teachers and community members.
DOWN SYNDROME ASSOCIATION OF ORANGE COUNTY	Down Syndrome Association provides support for those with down syndrome and their families.
EDUCATION EVENTS SPONSORED BY THE CHOC INSTITUTES	Provide primary care physicians and clinicians with education regarding the evaluation, management and treatment of pediatric illnesses and disorders. Lecture program topics included adolescent sports injuries, scoliosis, emergency medicine, respiratory obstruction in pediatric patients, disease specific presentations, and updates on pediatric vaccines.
EPILEPSY AWARENESS DAY	Coordinated by the Epilepsy Awareness Day Foundation, raises awareness of epilepsy, provides psychosocial support for patients with epilepsy and their families, and builds connections between families and healthcare providers and agencies to

	promote well being.
EPILEPSY WALK	Coordinated by the Epilepsy Support Network (ESN) of Orange County. Raises awareness of epilepsy, provides psychosocial support for patients with epilepsy and their families, and builds connections between families and healthcare providers and agencies to promote well-being. The walk raises money for ESN activities and programming. CHOC neurologists are regular speakers at ESN forums.
FAMILY LEGAL ASSISTANCE AT CHOC CHILDREN'S	This is a medical-legal partnership clinic which meets twice per month to offer advice and services to CHOC patients in need of conservatorships and guardianships.
FAMILY RESOURCE CENTER	The Miracles for Kids Family Resource Center enhances CHOC Children's Patient and Family Centered Care standards by assisting patients, families, visitors and staff with access to resources and information. The Resource Center has an extensive library of books and resources covering a wide range of diagnoses, illness, stress management as well as general health and wellness. Monthly themes help to educate patients and families with important health information.
FAMILY SUPPORT GROUPS FOR FAMILIES WITH MEDICALLY COMPLEX CHILDREN	Small group support for parents and caregivers of children discharged from NICU at CHOC or seen in multiple specialties at CHOC. Provides a forum for parents/caregivers to discuss the common challenges of balancing life and managing the multiple medical needs of their child and provide psychosocial support for one another. Parents share experiences about support from community agencies so other families learn what is available to them. The time together offers an opportunity for problem solving in a group

	format. Support groups are offered in Spanish and English.
GERM BUSTERS/NUTRITION/MEDIA PROGRAMS	In-school programs teaching preschool and school age children awareness related to strangers and personal safety/hygiene and infection prevention/good food choices and food groups.
HEALTH PROFESSIONAL EDUCATION - DIETARY	Affiliations with CSULB and Cal Poly, Pomona plus 1-2 other Dietetic internship to offer undergraduate training for clinical dietitians students.
HEALTH PROFESSIONAL EDUCATION - PHARMACY	Provide pediatric pharmacy practice and pharmacology education to physicians and pharmacy students.
HEALTH PROFESSIONS EDUCATION - PSYCHOLOGY	Orientation, conferences and supervision costs of psychology practicum students, interns and post docs.
HEART HOLIDAY EVENT	To support heart patients and their families with social and education interaction with their surgeons, cardiologists, nurses, social workers and community health educators in a non-clinical setting.
HEART REUNION	Event for patients and families who had heart surgery at CHOC.
HOME SAFETY	A program designed to demonstrate the importance of safety measures in the house.
HOSPITAL ASSOCIATION OF SOUTHERN CALIFORNIA	Participation in Hospital Association of Southern California Executive and Planning Committee meetings which advocates for legislation to improve access to health services and to mental health services. It also works on preparations for natural disasters.

KIDSHEALTH eNEWSLETTER	Bi-monthly eNewsletter distributed throughout the community that provides information on parenting, wellness, healthcare and injury prevention, special events and hospital programs/services.
KIDSHEALTH - CLINICAL ON-LINE REFERENCE SYSTEM	Web based tool offering more than 1100 pediatric health and wellness topics for the community.
LACTATION CONSULTS	Certified lactation consults provide education, assistance and information to lactating mothers on Peds, PICU and NICU. Assist with increasing milk supply, provide encouragement and education on the benefits and importance of breast feeding.
LEAPS COMMUNITY ECG SCREENING	High School sports pre-participation ECG screening to 1) prevent sudden cardiac arrest by identifying "silent" risk factors such as hypertrophic cardiomyopathy and Long QT Syndrome; 2) gather data on the prevalence of these risk factors in preparation for a retrospective health services study of the hypothesis that ECG screening can effectively reduce SCA in student athletes; 3) field training for new grad RNs in the correct acquisition of research-quality 12-lead ECGs; and 4) training of resident physicians in health service field research methodologies.
LIFE REMEMBRANCE	Annual event for all of CCMH families who have lost a child/baby.
MENTAL HEALTH SCREENING	Behavioral health screening in ED and CCS, team centered care clinics and adolescent medicine clinic.
NATIONAL ASSOCIATION OF CHILDREN'S HOSPITALS	Board member of both National Association of Children's Hospitals and National Association of Children's Hospitals and Related Institutions and member of Audit Committee for both institutions.
NEURO ONCOLOGY FAMILY EDUCATION DAY	Family education seminar focusing on rehabilitation and featuring speakers on aural rehab, vision rehab, and cognitive rehabilitation.
NURSING STUDENT PRECEPTORSHIPS	Provides clinical experience for nursing students.

NUTRITION EDUCATION FOR THE COMMUNITY	Provide necessary nutrition education to children and their families in the community. Emphasis has been on general healthy eating and obesity prevention. However, presentations targeted for patients dealing with certain diagnoses such as diabetes or epilepsy have also been conducted. Another area of focus has been proper nutrition for the student athlete.
ONCOFERTILITY GIRLS ACADEMY	Participation in the BEWISE (Better Education for Women in Science and Engineering) a program for high school girls to explore the basic science, clinical applications and career options in reproductive science, cancer biology and oncofertility.
ONCOLOGY PATIENT / FAMILY SUPPORT GROUP	Support group facilitated by oncology social workers and child life specialists for parents and siblings of oncology patients. The support group is held every other month and dinner is provided.
ORANGE CHAMBER OF COMMERCE PARTICIPATION	Participate on legislative action and government affairs committees of the Orange Chamber of Commerce.
ORANGE COUNTY BUSINESS COUNCIL (OCBC)	Participate at meetings and events of the Orange County Business Council to promote well-being of OC residents.
ORANGE COUNTY RONALD MCDONALD HOUSE PLANNING MEETINGS	Participate in planning meetings for the Orange County Ronald McDonald House.
ORANGE COUNTY SAFE KIDS AND PROMOTION	Coalition focusing on grass roots efforts and collaboration of injury prevention efforts in Orange County following the National SAFE KIDS guidelines.
ORANGE PRIMARY CARE CLINIC	Community-based clinic and outreach services that respond to the health care needs of high-risk and disadvantaged populations.
PACEMAKERS IN CHILDREN AND YOUNG ADULTS ANNUAL REUNION	Annual reunion among Pacemakers/ICD patients to express their experience and ask questions in regards to the device.
PARENTING CLASSES AND WORKSHOPS	Provide parents with the tools and tips for raising healthy children.
PHARMACEUTICAL INDIGENT PROGRAM	To provide medications to patients who cannot afford them.
PHARMACY EDUCATION TO PATIENTS	Pharmacy education to patients & families

AND FAMILIES	in the community.
PODER AND KID'S FIT CLUB - DIABETES AND OBESITY PREVENTION CLASSES	The Endocrine division and clinic offers free education/health promotion classes to the community with the goal of decreasing lifestyle risk factors for developing type II diabetes and obesity in our local pediatric population. Referrals come from community pediatricians and community programs (such as faith based partner organizations and the YMCA). Classes are offered in Spanish (PODER) and English (Kid's Fit Club).
PROM NIGHT FOR TEENS WITH CANCER	Prom held at CHOC Children's for cancer patients who are not able to attend their school's prom.
PROPOSITION 10 COMMISSION AND SUBCOMMITTEE MEETINGS	CEO and CMO participation in the Prop 10 Commission (to allocate funding for community health care, quality child care and education programs for young children and families) including participation in commission meetings, retreats and subcommittee meetings.
PEDIATRIC RESIDENT EDUCATION PROGRAM	Residency education program providing pediatric medical specialty education across the continuum of care.
RESPIRATORY THERAPY STUDENT EDUCATION	Respiratory therapy students rotate through CHOC to gain basic understanding required to care for neonatal and pediatric patients. Also, supplement the bedside clinical education provided to Nursing Students by the staff RN.
SAFE SITTER	A medically accurate instruction series teaching boys and girls ages 11-13 how to handle emergencies when caring for young children, including basic lifestyle techniques, safety precautions to prevent accidents, and tips on basic child care.
SANTA ANA BOYS AND GIRLS CLUB CLINIC	Healthcare services provided to the economically disadvantaged.
SANTA ANA CHAMBER BOARD AND COMMITTEE PARTICIPATION	Participate as a member of the Santa Ana Chamber of Commerce Board of Directors and Government Affairs Committee with the goal of building coalition of community leaders and elected officials to support improvements in access to preventive, primary and specialty care for children in

	Santa Ana.
SCAN COMMITTEE	Review and evaluate suspected child abuse cases, share information about prevention and available community resources.
SCHOOL REINTEGRATION	Program to help the medically fragile re-enter the regular school program.
SOCIAL SERVICES	Counseling, screening and advocacy to obtain medical care and other support resources for patients/families; psychosocial assessments for patient/family functioning; patient/parent support groups; crisis intervention; coordination.
SPECIAL CHILDREN'S DAY	Offer outdoor activities to children with special needs who otherwise not have the opportunity to participate.
SPOT A SPOT - SKIN CANCER AWARENESS	Spot a Spot Program is a community education program for middle, high school and college students, taught by volunteer medical school students at the school site and at health fairs.
STAYWELL HEALTH INFORMATION ONLINE LIBRARY	Web based tool offering health care topics to patients, families and the community.
STUDENT RELATIONS PROGRAM	Program designed to meet our community's and CHOC's need for future healthcare providers by promoting student clinical placements in the following disciplines: registered nurses, licensed vocational nurses, physical therapists, respiratory care practitioners, radiology technology, dietary, occupational therapy, speech therapy, nursing assistants and medical/clerical.
TEEN DRIVING SAFETY	Provide education on distracted driving to teens in waiting room of Ambulatory Care Clinic and at community health events. Includes a safety tip sheet, parent/teen passenger agreement, interactive demonstration and social media messages.
TILLY'S LIFE CENTER: TEEN EMPOWERMENT PROGRAM	Conference for teen cancer patients to educate school and college personnel and parents on the effects of childhood, adolescent and young adult cancer treatment to improve the learning experience during and after cancer

	treatment.
UC IRVINE ADMISSIONS COMMITTEE	Participation in review of applications for UC Irvine School of Medicine.
UC IRVINE CHILD LIFE INTERN SYMPOSIUM	Symposium presented to Child Life interns on the topic of how to prepare children for surgeries and procedures.
UC IRVINE SCHOOL OF BIOLOGICAL SCIENCES MENTORING PROGRAM	Program provides mentoring for undergrad students in the School of Biological Sciences who are interested in healthcare careers including public health.
UNFUNDED BASIC AND CLINICAL RESEARCH	Various basic science and pediatric clinical research projects not funded by outside grants or donations. Research areas include oncology, neurology, hematology, stem cell and biomedical optics as performed by CHOC Research faculty.
UNREIMBURSED CLINICAL RESEARCH	Pharmacy provides support to seven under-funded research studies in FY09. The Department develops dispensing protocols and procedures, dispense investigational agents, maintain inventory of investigational agents and assist in other aspects of investigational drug protocols.
UNREIMBURSED COSTS OF MEDICAL/CCS/CALOPTIMA	Unreimbursed cost of care for Medi-Cal, CCS and Cal OPTIMA recipients.
WATER SAFETY	Multi-segmented program for pre-schoolers, children, parents, care givers, grandparents, health care professionals, and the community to increase awareness of the risks of drowning and the action steps to be taken to prevent drowning.

Appendix C

Collaborators by Type

Businesses

Active Parenting Publishers
AllState Insurance Company
American Health Journal
Anaheim White House Restaurant
BCBG Max Azria
Clint Tux Shoppe
Edwards Life Sciences Corp.
Irvine Lake
Karate for All
Kenny the Printer
MAC Cosmetics
Public Broadcasting Service (PBS)
R.W.B. Party Props
State Farm Insurance

Community Organizations

American Heart Association
Bass Clubs of Southern California
Boys & Girls Club of Garden Grove
Boys & Girls Club of Santa Ana
California Children Services
California Children's Hospital Association
Child Abuse Prevention Council of Orange County
Child Abuse Services Team
Child Passenger Safety Task Force
Children and Families Commission of Orange County
Children's Hospital Association
Coalition of Orange County Community Health Centers
Costa Mesa YMCA
Drowning Prevention Network
Epilepsy Awareness Day Foundation
Epilepsy Support Network of Orange County
Family Violence Project
Health Options
Hospital Association of Southern California
John Wayne Cancer Foundation
Latino Health Access
Leukemia and Lymphoma Society
Long Beach Boat & Ski Club
Make a Wish
Maternal Outreach Management Services (MOMS)
National Drowning Prevention Network
Orange County Business Council
Orange County Chamber of Commerce
Orange County Foundation for Oncology Children and Families
Orange County Heart Institute
Orange County Safe Kids
Partners for Health Committee

Ronald McDonald House Charities of Southern California
Safe from the Start
Safe Kids Orange County
San Diego Science Alliance
Suspected Child Abuse & Neglect Committee (SCAN)
Violence Prevention Coalition of Orange County
We Can Foundation

Educational Institutions

Alliant University
Anaheim City School District
Azusa Pacific University
Biola University
Brandman University
California State Polytechnic University, Pomona
California State University, Dominguez Hills
California State University, Fullerton
California State University, Long Beach
Centralia School District
Cypress College
Foothill High School
Garden Grove Unified School District
Gates School
Golden West College
Irvine Unified School District
La Verne University, Volunteer Services Dept.
Magnolia School District
Mount Saint Mary's College
Mt. San Antonio Community College
Orange Coast College
Pepperdine University
Pio Pico Elementary School
Rea School
Saddleback College
San Joaquin Valley College School of Respiratory Therapy
San Juan School
Santa Ana College
Santa Ana Unified School District
Tustin Unified School District
University of California, Irvine School of Biological Sciences
University of California, Irvine School of Medicine
University of California, Irvine Center for Autism and Neurodevelopmental Disorders
University of California, Irvine
University of California, Los Angeles
University of Iowa
Veeh School

Other Healthcare Providers

American Academy of Pediatrics
CalOPTIMA
Children's Center at Sutter Medical Center, Sacramento
Children's Hospital & Research Center at Oakland
Children's Hospital Central California
Children's Hospital Los Angeles
Cincinnati Children's Hospital
College Hospital PET Team
GE Healthcare
Health Dimension, Inc.
Healthy Smiles For Kids of Orange County
Hoag Memorial Hospital Presbyterian
Loma Linda University Children's Hospital
Loma Linda University Medical Center
Lucile Salter Packard Children's Hospital at Stanford
Mattel Children's Hospital at UCLA
Miller's Children's Hospital
Presbyterian Intercommunity Hospital
Rady Children's Hospital San Diego
San Antonio Community Hospital
St. Joseph Health /Covenant
University of California, Irvine Medical Center
University of California, Davis Children's Hospital
University of California, San Diego Children's Hospital
University of California, San Francisco Children's Hospital

Public Sector Agencies

Children and Youth Services (CYS) Clinics
Children's Hospital Association
Consumer Product Safety Commission
Department of Social Services
Health Resources and Services Administration (HRSA)
Irvine Police Department
National Institute of Allergy & Infectious Diseases (NIAID)
National Institute of Child Health & Human Development ((NICHD)
National Institutes of Health/Collaborative Antiviral Study Group (NIH/CASG)
Orange County Child Passenger Safety Task Force
Orange County Department Education Bell Campaign
Orange County Department of Education
Orange County District Attorney's Office
Orange County Fire Association
Orange County Health Care Agency
Orange County Mental Health Agencies
Orange County Sheriff's Department
Orange County Social Services Agency
Orange Police Department
Regional Center of Orange County
Santa Ana Chamber of Commerce

APPENDIX D

Services by Benefit Goal

Goal 1: Healthcare Access

Asthma Breathmobile
CalOptima Board and Board Committees
Charity Care: CCMH
Charity Care: CHOC
CHOC Clinic - Garden Grove
CHOC Nurse Advise (Kidwise)
Clinica CHOC Para Los Niños
Costa Mesa Clinic
Education Events sponsored by the CHOC Institutes
Health Professional Education - Dietary
Health Professional Education - Pharmacy
Nursing student preceptorships-CCMH
Oncofertility Girls Academy
Orange Primary Care Clinic
Pediatric Resident Education Program
Pharmaceutical Indigent Program
Pharmacy Education to patients and families
Respiratory Therapy Student Education
Santa Ana Boys and Girls Club Clinic
Student Relations Program
Tilly's Life Center: Teen Empowerment Program
UC Irvine Child Life Intern Symposium
Unreimbursed Clinical Research
Unreimbursed costs of MediCal: CCMH
Unreimbursed costs of MediCal: CHOC

Goal 2: Behavioral Health Access

Behavioral and Mental Health
Behavioral Health Services-Mental Health Interventions
Bereavement Support Groups & Day of Remembrance
Child Life Boating Trip
Child Life Internship Program
Child Life Practicum Program
CHOC Fishing trip to Irvine Lake
Clinical Education for Neurodiagnostics
Community Building - Recruitment of Underepresented Minority
Community Building-Coalition Building Mental Health Planning
Family Support Groups for Families with Medically Complex Children
Health Professions Education - Psychology
Heart Holiday Event
Life Remembrance
Mental Health Screening

Oncology Patient / Family Support Group
Parenting Classes and Workshops
Prom Night for Teens With Cancer
School Reintegration
Social Services
Special Children's Day

Goal 3: Disease Prevention

Community Outreach & Education
Community Outreach Health Fairs
Neuro Oncology Family Education Day
Nutrition Education for the Community
Spot a Spot - Skin Cancer Awareness
Unfunded Basic and Clinical Research

Goal 4: Information Resource

American Health Journal/PBS
Autism Center - Advisory Board and Executive Committee
Bringing Baby Home-Infant Class
CarePages
Clinical Research-Epilepsy & HRSA Grant & Papers for Journals
CPR Education
Down Syndrome Association of Orange County
Epilepsy Awareness Day
Epilepsy Walk
Family Resource Center
Heart Reunion
KidsHealth eNewsletter
KidsHealth-Clinical On-line Reference System
Lactation Consults
PODER and Kid's Fit Club - Diabetes and Obesity Prevention Classes
Staywell Health Information Online Library

Goal 5: Injury Prevention

Athletic Training Program
Bike and Bike Helmet Safety
Buckle Bear
Child Passenger Safety
Germ Busters/Nutrition/Media Programs
Home Safety
LEAPS Community ECG Scening
Orange County Safe Kids and promotion
Safe Sitter
Teen Driving Safety
Water Safety

Goal 6: Community Action

Brandman University-CNO Advisory Group for Skills Lab
Cal State University, Fullerton - Philanthropic Foundation
California Children's Hospital Association
Cancer Survivors Day-Courageous Kids Celebration
Children and Families Commission of Orange County
Children's Hospital Association
CHOC Education Center
CHOC Pediatric Residency Program Advocacy Rotation
Community Benefit Plan preparation
Community Committee Hours: Community Education
Family Legal Assistance at CHOC Children's
Hospital Association of Southern California
Orange Chamber of Commerce Participation
Orange County Business Council (OCBC)
Orange County Ronald McDonald House Planning Meetings
Pacemakers in Children and Young Adults Annual Reunion
Proposition 10 Commission and Subcommittee Meetings
Santa Ana Chamber Board and Committee Participation
SCAN Committee
UC Irvine Admissions Committee
UC Irvine School of Biological Sciences Mentoring Program