



**Mark Twain Medical Center  
Community Benefit Report 2014  
Community Benefit Implementation Plan 2015**

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

The **Hello humankindness** campaign launched by Dignity Health is a movement ignited and based on the proven idea that human connection, be it physical, verbal, or otherwise, leads to better health. At Dignity Health the comprehensive approach to community health improvement recognizes the multi-pronged effort needed to meet immediate and pressing needs, to partner with and support others in the community, and to invest in efforts that address the social determinants of health.

At Mark Twain Medical Center we share a commitment to improve the health of our community and have offered programs and services to achieve that goal. The 2014 Annual Report and 2015 Implementation Plan for Community Benefit fulfills section 501 (r) of the Patient Protection and Affordable Care Act, where each hospital must complete a community health needs assessment every three years and develop a community health implementation plan to document how it will address the significant health needs of the community. We are proud to provide this report as a continuation of the work we have done over the past 63 years to better the health of the communities we serve.

In addition, California State Senate Bill 697 requires not-for-profit hospitals to annually report its community benefits efforts and measurable objectives as well as its plans for the coming year. Encouraged and mandated by its governing body, Dignity Health hospitals comply with both mandates at each of its facilities, including those in Nevada and Arizona, and are proud of the outstanding programs and services that have been offered to improve the health of the communities we serve.

In fiscal year 2014, Mark Twain Medical Center provided \$8.7 million in financial assistance, community benefit, and unreimbursed patient care. Including the unreimbursed cost of caring for patients covered by Medicare, the total expense was \$9,027,955

Dignity Health's Mark Twain Medical Center's Board of Directors has reviewed and approved the annual Community Benefit Report and Implementation Plan at their October 23<sup>rd</sup> 2014 meeting.

Thank you for taking the time to review our report and plan. If you have any questions, please contact us at 209.754.3521

(Signatures)

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Craig J. Marks  
President/CEO

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William M. Griffin, M.D.  
Chairperson, Board of Directors

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## EXECUTIVE SUMMARY

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

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

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

Access to care in the County is further supported by five MTMC'S Medical Centers located in Arnold, Angels Camp, Copperopolis, San Andreas, and Valley Springs. Services at these Ambulatory Centers include Immediate Care, Primary Care, Behavioral Health, Occupational Health, Pediatrics, General X-ray, Laboratory Draws and Health Education. Additionally, MTMC now also operates three Specialty Care Centers: in Angels Camp for Orthopedics and in San Andreas on the Medical Center campus for Cancer and Infusion Therapy, and Gastroenterology Specialty Care.

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

A Community Needs Assessment was conducted in 2014 in support of our stated mission - to improve the health of our greater community. The goal of the assessment is to continually improve the quality of health and health care for county residents by providing accurate and reliable information to community members and health care providers; raising awareness of health needs, changing trends, emerging issues, and community challenges; and providing research-based data for the hospital and the community to continue strategic planning efforts. The focus of the assessment is on health and the major factors that impact

health such as the economy, public safety and the natural environment. Compared to the state and the nation, community issues identified in the assessment include a higher percentage of children in Calaveras County who are obese, rates of child immunizations are lower, and a motor vehicle accidents that are higher than the state averages.

To address two of the more prevalent chronic care needs of the community, MTMC will continue to focus on providing education and instruction for the Congestive Heart Failure/Chronic Obstructive Pulmonary Disease and Diabetes Education programs. The goal of these programs is to improve quality of life for participants by increasing their self-efficacy and avoiding hospital admissions.

During fiscal year 2014, there were over 29,000 person-visits that benefited from our community health programs. Highlights included \$8,294,510 net benefit for programs and services for the vulnerable and \$435,191 for the broader community. The total value of community benefit for FY2014 is **\$8,728.591 at cost**. Including the shortfall from Medicare, the total expense for community benefits was **\$16,675,635**. Quantifiable Benefits included traditional charity care, unpaid costs of Medi-Cal and Medicare, community service donations, community health services and education, and community building activities.

# MISSION, VISION AND VALUES STATEMENT

## MISSION

The mission of Mark Twain Medical Center is to improve the health of our greater community by providing quality health care services, exceeding the expectations of those we serve.

## VISION

To become one of the top 100 Critical Access Hospitals in the country through the achievement of our Pillars of Excellence.

## VALUES

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

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

## ORGANIZATIONAL COMMITMENT

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

Each year the Mark Twain Medical Center's HealthCare Corporation Board of Trustees, Medical Staff Leadership, and Hospital Leadership help to develop the Community Benefit Plan as part of the annual Strategic Planning process. This process takes into consideration the most current Community Health Needs Assessment, the needs prioritized by the community and through a process that includes consideration of the organization's Mission, Vision and Values develops strategies and goals for the upcoming years. Hospital leadership then develops tactics to meet these goals and dedicates the resources during the budgetary process and program design. Performance measurements and accountabilities are established.

Mark Twain Medical Center participates in the Dignity Health Community Grants program and annually awards funding to other not-for-profit organizations in the community who share in the same Mission, Vision and Values. In FY2014, community grants totaling \$26,000 were given to the following agencies:

- **Arc of Amador and Calaveras** – provides support and services to persons with developmental disabilities to encourage mainstream life, work, learning and recreation
- **Disability Resource Agency for Independent** - supports the independence of individuals with disabilities through resources, advocacy and services
- **Ebbetts Pass Firefighters Association** - CPR classes and AED education community
- **San Andreas Community Covenant Church** - to provide free community meals every Wednesday for the homeless, the poor, the underserved in the community
- **Resource Connection - Food Bank** - serves 2,523 families, accounting for 17% of the population of Calaveras County
- **The Volunteer Center** - mileage reimbursement to volunteers that provide transportation to vulnerable citizens

## COMMUNITY

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

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

In Calaveras County, the poorest residents have been severely impacted by the recession and the elimination of programs and services that local governments are no longer able to fund. The growing gap in needed services has placed at risk the health of hundreds of underserved individuals and families who are now turning to emergency departments for basic non-acute medical services because they have lost or lack a primary care provider. Our 5 Family Medical Centers (rural health clinics) help to fill this gap. However, it is still estimated that 28% of the visits to the ED are for non-emergent care.

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

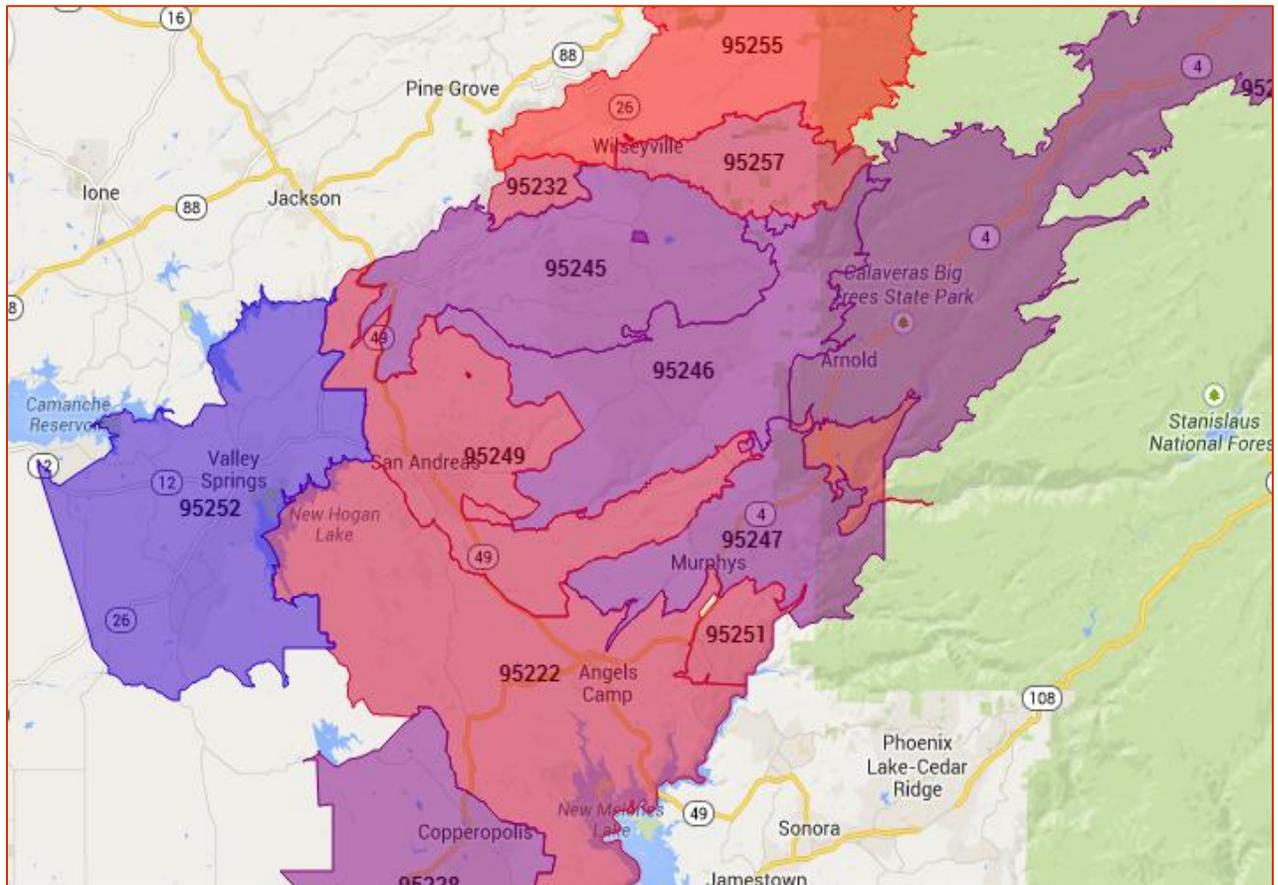
The population (2013) of Calaveras County was 44,932, down from a high of 45,702 in 2008. Other demographics include:

- The population by ethnic group is 83.3% White, 11% Hispanic, 1.2% Asian, 0.6% American Indian, and 0.4% Black and 3.9% Multi-Race.
- Median household income is \$54,070
- Uninsured is 18.42%
- Unemployment is 13.1%
- No High School Diploma is 1.8%
- Renter is 20.5%
- CNI Score is 3.3%
- Medicaid patients is 12.7%
- Other Area Hospitals: 0

Calaveras County is a Health Professional Shortage Area (HPSA) and portions of the County are Medically Underserved Areas (MUA). Besides Mark Twain Medical Center and its 5 ambulatory care centers, the following facilities and resources are available:

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

The current Community Needs Index is shown below, indicating the communities which have the highest needs based on socio-economic indicators of unemployment, lack of insurance, education level, cultural/language and housing. Median score is 3.3



CNI Median Score: 3.3

Zip Code	CNI Score	Population	City	County	State
95222	3.6	5140	Angels City	Calaveras	California
95223	2.6	6482	Dorrington	Calaveras	California
95228	2.6	3505	Copperopolis	Calaveras	California
95232	3.6	325	Calaveras	Calaveras	California
95245	3	3054	Mokelumne Hill	Calaveras	California
95246	3.2	1650	Mountain Ranch	Calaveras	California
95247	3	4779	Forest Meadows	Calaveras	California
95249	3.8	3826	San Andreas	Calaveras	California
95251	3.4	224	Vallecito	Calaveras	California
95252	2.4	14347	Valley Springs	Calaveras	California
95255	4.2	2109	West Point	Calaveras	California
95257	3.8	497	Wilseyville	Calaveras	California

# COMMUNITY BENEFIT PLANNING PROCESS

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

## Community Needs Assessment Process

A Community Needs Assessment was conducted in 2014, as required by State law (SB697) and federal ruling 501(r) of the Affordable Care Act. The needs assessment is a primary tool used by the hospital to determine its community benefit implementation plan, which outlines how the hospital will give back to the community in the form of health care and other community services to address unmet community health needs. This assessment incorporates components of primary data collection and secondary data analyses that focus on the health and social needs of the MTMC Service Area. The Primary Service Area encompasses the cities, towns and communities of Calaveras County that include 22 zip code areas.

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

### Health Issues

- 33% of Calaveras County students were overweight or obese in 2010, slightly lower than California overall at 38%.
  - The percentage of adults with diabetes is 7.8% and 8.4% in the rest of the state.
  - One-third of residents reported that they had been diagnosed with high blood pressure.
  - 19% of individuals in Calaveras County from ages 5 to 17 have a disability, compared to the state level of 10%.
  - Limited services and service providers make it difficult to access mental health, obstetrical and specialty care services.
  - The percentages of Calaveras County kindergartners with all required immunizations were 78% in 2012-2013 compared to the 90% state average.
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- There is a lack of mental health services in the county.
- Suicides are increasing at 25.2% over the state average of 10.2% per 100,000 population.

### Social Demographic Issues

- The area reflects an aging population with approximately 63% of the population over the age of 40, much higher than in the state at 44%.
- A declining economy is impacting the community by increased joblessness, decreases in employer-based health insurance, higher costs for transportation and decreased availability of affordable housing.
- The median household income is \$54,971 compared to the state median income of \$60,883.
- Persons below the federal poverty level are 10%.
- Home ownership rate is 51.0%.
- A lack of providers in Calaveras County (primary care, mental health, specialists) negatively impacts access to care and requires residents to travel outside of the County to obtain services.
- 1 in 558 houses in Calaveras County was in foreclosure in December 2013.
- Less than one-third of working parents have access to child care in Calaveras.
- Smoking among adults and teens is a concern.

### Assets Assessment

Throughout the community are important resources that everyone can benefit in times of need. Mark Twain Medical Center published a Community Resources brochure for residents to keep handy at home and in the car. The organizations in this brochure work with us to provide Community Resources that can make a difference.

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

## **DEVELOPING THE HOSPITAL'S IMPLEMENTATION PLAN**

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

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

The priorities decided upon for the hospital focus include chronic conditions as well as the future establishment of a mobile health clinic for the underserved populations in the more rural West county area where access to care is an issue, continuing support for Health Fairs in all communities and continued support of the Resource Connection's Food Bank which helps to fill an unmet nutrition need, including childhood obesity.

## **Planning for the Uninsured/Underinsured Patient Population**

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

## **Plan Report and Update**

The Strategic Plan for FY2015 is focused in six areas:

- Patient Loyalty: MTMC will provide outstanding customer service, aspiring to treat those we serve the way they want to be treated.
- Medical Staff Development: MTMC will respond to Medical Staff concerns and needs in a timely manner, pursue initiatives in collaboration with our Medical Staff and ensure the availability of the appropriate complement of providers for those we serve.

- Employee Development: MTMC will encourage and provide for the ongoing development of our employees. We will provide an atmosphere that values our employees and promotes: open communication, competitive wages and benefits; selection and retention of effective, caring personnel; utilization and development of talent throughout the organization; on-going education; and employee recognition.
- Quality: MTMC will develop and maintain a system of continuous improvement which is incorporated into the daily work of every employee and Medical Staff member.
- Services: MTMC will develop appropriate facilities, technology and services to meet the needs of those we serve.
- Financial Stewardship: MTMC will continue to strengthen its financial stewardship and position to enhance our ability to develop new services, obtain needed technology, modernize our facilities, recruit physicians and ultimately ensure long term viability.

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

- Reduce health disparities by addressing diabetes, COPD, and CHF among the general population with disproportionate unmet health-related need.
  - Continue to collaborate with Public Health on community education.
  - Enhance participation in Chronic Disease Management classes by 10% by FYE 2014 (baseline FYE 13)
- For RHC patient population continue to improve provider compliance of primary prevention measures for diabetes management (HgA1C) and enhancement of nutritional counseling. Continue to promote and improve the health status and quality of life of the community by partnering with others and serving the poor and disenfranchised
  - Work with the HealthCare District and other community stakeholders to review the 2014 Community Needs Assessment and identify the key issues to maximize the quality of the health initiatives.
- Evaluate opportunities for health improvement / addressing the health care needs of the elderly.
  - Re-admission rates at target
  - Participation in Chronic Disease Management classes increased by 10% by FYE 2013
  - HEDIS rates for HgA1C rates in FMCs

## Key Community Benefit Program Descriptions:

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

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

For FY2015, Mark Twain Medical Center has also identified five key community benefit programs. Significant efforts and resources will be focused with the expectation of clear and measurable outcomes.

Priority Focus Area	Program Outcomes	Possible Evaluation Measures
<b><i>Primary Prevention - Altering susceptibility or reducing exposure for susceptible individuals:</i></b>		
Medical Centers - Community Clinics	Increased rates of immunization/vaccination	Clinic clients/encounters. Decreased incidents of illness; decreased admissions and/or length of hospital stay for flu/pneumonia.
Diabetes Education/Management	Change in awareness, knowledge, attitudes and skills.	Increase in awareness, knowledge, attitudes, and skill development or acquisition.
Heart Disease Management	Decrease in utilization rates for chronic diseases.	Increased health outcomes, decreased admissions and/or length of hospital stay.
Pulmonary Disease Management	Decrease in utilization rates for chronic diseases	Increased health outcomes, decreased admissions and/or length of hospital stay.
<b><i>Healthcare Access/Reform:</i></b>		
Enhance geographic access for Medi-Cal and Healthy Families	Access to healthcare services	Number of persons enrolled, retained

## **Specific Community Benefit Program Descriptions:**

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

In October, MTMC'S conducted its 16th Annual Fall Health Fair on the hospital campus. Over 60 informational booths featured health, exercise, wellness, childcare, safety, traditional and alternative medicine, health foods, quality of life and recreation. Free Cholesterol and Osteoporosis screenings and Blood Pressure Checks were conducted, as well as flu (500+) and pneumonia vaccinations. Over 500 blood draws/tests were provided at a discounted price. Other benefits included a Child Car Seat Checkup.

In March 2014, MTMC'S conducted its 4<sup>th</sup> Annual Spring Health Fair at Ironstone Vineyards to accommodate the residents along the Highway 4 Corridor. Although not as large as our Fall Health Fair, it has grown dramatically in its four years.

**Summer Health Fair (Free Admission)** – As a result of the success at the Fall and Spring Health Fairs, and the need to provide the services to the North-West communities, MTMC now offers an annual Summer Health Fair in Valley Springs in June .This Summer Fair is funded by the Mark Twain Health Care District using the Fall and Spring health fairs as a their model.

### **Mark Twain Medical Center sponsors healthy heart activities at county fair -**

Mark Twain Medical Center (MTMC) teamed up with the American Heart Association to help provide a heart healthy focus at the Calaveras County Fair. "Rock it in Red – Happy Heart Day," was held on May 16 at the fair. MTMC sponsored the "Rock it in Red" 5K walk /run and the four day first aid booth at the fair. MTMC staff also assisted in demonstrating CPR at the event.

**Teddy Bear Clinic** – This annual activity brings all of the kindergartners in Calaveras County to our hospital to learn more about what happens at a hospital. The children are taken on a tour of the hospital and visit several departments where they can diagnose their "teddy bear wellness patient." The purpose of the clinic is to reduce some of the apprehension about the hospital and to remind the children that we are not always about pain and shots. The event also includes health promotion education for the children.

**Mini-Health Fairs** – A series of mini-health fairs were conducted in the community. Partnerships with the Music in the Parks, sponsored by the Calaveras County Arts Council; the Farmer's Market, sponsored by the Angels Camp Business Association; and the First Friday Concerts, hosted by the Murphy's Community Club, all provided venues for the Fairs. The Fairs include health information, blood pressure checks, strength testing, advice from

nurse/mid-level, etc. We also participated in an employee health fair at Black Oak Casino in neighboring Tuolumne County to provide health information to their 400+ employees.

**American Heart Association** – For this report, 360 persons benefited from our Life Support classes to community members and medical personnel. Partners included the San Andreas and Copperopolis Fire Departments.

**Baby Sitting Basics** – 27 boys and girls from ages 11-15 attended this class to educate our youth to responsibly care for young children.

**Disaster Preparedness** – During the year, over 400 persons in Calaveras County participated in communications workgroups and educational classes to coordinate communications between Public Safety, Public Health and MTMC... Partners include law enforcement, Fire, EMS, EMSA, Public Health and EMA. The goal is to improve processes and coordinate technologies for emergency service organizations.

**Medication Vouchers** – Without having access to proper medication at home, patients would need to remain hospitalized. This program provides medication vouchers to inpatients who cannot afford needed medications. The total benefit for this service in FY2014 was \$31,969.

**Pink In The Night** – This is a Cancer awareness group providing education to persons who have experienced a breast cancer related illness. There is also an annual lighting ceremony where over 5000 persons are in attendance including all area junior football teams. Various businesses in Calaveras County are provided strings of pink light bulbs which are kept on throughout October. In 2014, 60 watt bulbs were distributed to residences promoting the awareness of early breast cancer detection. The light bulbs are provided through the Mark Twain Health Care District.

**Immunizations** – Annual vaccination against influenza is the primary means for minimizing serious adverse outcomes from influenza virus infections. These infections result in approximately 20,000 deaths and 110,000 hospitalizations per year in the United States. The amount of trivalent inactivated influenza vaccine produced for distribution in the United States has increased substantially. During FY2014, over 1,700 influenza vaccinations were administered. Donations were accepted, but not required. Starting in 2007, the hospital began to offer pneumonia vaccinations at their annual Fall Health Fair and now offer them at all Health Fairs.

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

**Breast Cancer Early Detection Program** – Mark Twain Medical Center participates in the California State funded Breast Cancer Early Detection Program (BDECP) as a provider of clinical services and advanced diagnostics. Staff physicians and the hospital reach out to

women over 40 who, because of financial or insurance limitations, are not able to receive annual breast exams and mammograms. Actual number of participants is not tracked by MTMC.

**Take It To Heart** - For the eighth year in a row, the Soroptimist International of Calaveras County joined MTMC to offer free comprehensive cholesterol tests to all Calaveras County women during February. A total of 250 cholesterol tests were provided in this program. MTMC, The American Heart Association and Soroptimist also held a first annual 'Red Shoe Stroll' 5k Fun/Run with over 40 participants.

**Diabetes Education** – Diabetes touches every family. It is the leading cause of blindness among adults ages 20 to 74, and is the sixth leading cause of death in America. Education is the key factor to managing Diabetes. Our commitment is to provide the skills and techniques needed to self-manage the disease. Monthly one-on-one classes are provided to the community, serving about 169 people.

**Financial Assistance** – Our Financial Assistance expense in FY2014 amounted to \$314,674. 482 persons benefited, and there were 24,203 visits from our traditional Financial Assistance, Unpaid Costs of Medi-Cal and Medicare and other Public Programs.

**Calaveras County Fair** – MTMC supported the first aid station with registered nurses 24 hours a day to support those persons who stayed with their animals during the entire run of the Fair. We also were a major sponsor of the Fair. During the 2014 MTMC sponsored the first annual Fun/Run Heart Walk. This is a joint partnership with the Soroptimists and the American Heart Association.

**Sponsorships and Donations** - As a member of the community, Mark Twain Medical Center responds to requests for direct funding and goods and services to support community organizations and activities such as Grad Nite, Relay for Life, Youth Programs, and Habitat for Humanity, Cancer Support Group, etc.

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

In addition, Mark Twain Medical Center partners with others in the community to offer the following:

- **Community Health Education Substance Abuse** – Collaborative between the Calaveras County Health Services Agency, Mark Twain Medical Center and the Calaveras County Office of Education. The vision is to have a community free from substance abuse through better education.
  - **Calaveras County Chronic Disease Self-Management Program** - Collaborative between the Calaveras County Health Services Agency, Mark Twain Medical Center, and various agencies. Both the walk and the six-week workshop are projects funded
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through the Center for Disease Control and Prevention as part of the Community Transformation Initiative. Calaveras County was one of 12 rural California counties to receive grant funding to improve rural health disparities in key preventative areas – reducing exposure to second-hand smoke, facilitating healthy communities through reduced consumption of sugary-sweetened beverages and safe walking routes and the provision of increased clinical and community preventive services. Calaveras County Public Health Department and 11 other rural counties in California are receiving grant funds through the Affordable Care Act to improve the health and well-being of the community and to prevent chronic disease. Examples are high blood pressure, diabetes, depression, high cholesterol, unhealthy weight, and arthritis. The work is focused on change in the environment where we live, work, and play and pray. In partnership with local schools, students, service agencies, the faith community and community residents, the Calaveras County Public Health Department is working in four areas. “By reducing exposure to tobacco smoke in apartments, encouraging physical activity through healthy and safe communities, increasing healthy drink choices, and promoting skills to help manage chronic conditions, we can reach the goal to make healthy choices the easy choices in Calaveras County,” Dr. Kelaita, County Health Officer.

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

# PROGRAM DIGEST

## A. PROGRAMS

<b>Flu/Pneumonia Immunizations at Health Fairs</b>	
<b>Hospital CB Priority Areas</b>	<input type="checkbox"/> Chronic Conditions <input checked="" type="checkbox"/> Access to Primary Care Services <input type="checkbox"/> Preventive Care Services
<b>Program Emphasis</b>	Please select the emphasis of this program from the options below: <input type="checkbox"/> Disproportionate Unmet Health-Related Needs <input checked="" type="checkbox"/> Primary Prevention <input type="checkbox"/> Seamless Continuum of Care <input type="checkbox"/> Build Community Capacity <input type="checkbox"/> Collaborative Governance
<b>Link to Community Needs Assessment Vulnerable Population</b>	The rural service area for Mark Twain Medical Center is challenging for many of the residents. Public transportation is not accessible to all. Calaveras County is a Health Professional Shortage Area (HPSA) and portions of the County are Medically Underserved Areas (MUA).
<b>Program Description</b>	The hospital supports Health Fairs at three locations throughout the county, including Murphys, Valley Springs and San Andreas. Services provided include flu/pneumonia immunizations.
<b>FY 2015</b>	
<b>Goal 2015</b>	Improve access to primary care and preventive services for the residents of the Mark Twain Medical Center service area to sustain or improve health.
<b>2015 Objective Measure/Indicator of Success</b>	Residents obtaining immunizations at the Health Fairs will have decreased incidents of illness; decreased admissions and/or length of hospital stay for flu/pneumonia.
<b>Intervention Strategy for Achieving Goal</b>	Flu/pneumonia vaccines will be provided to residents who utilize the Health Fairs.
<b>Result FY 2014</b>	In FY2014, more than 1,475 persons received flu/pneumonia vaccines and health promotion materials at various health fairs held in the community.
<b>Hospital's Contribution/Program Expense</b>	Mark Twain Medical Center net expenses for participation in flu/pneumonia vaccination program amounted to \$21,000
<b>FY2015</b>	
<b>Plan for FY2015</b>	Continue with flu/pneumonia vaccinations and health promotion at various health fairs held in the community. Continue to provide vaccinations in RHC's.
<b>2015 Objective Measure/Indicator of Success</b>	Increase immunizations at the Health Fairs by 10% annually
<b>Baseline</b>	For FY 2014, 1,700 persons received flu/pneumonia vaccines at the MTMC'S Health Fairs. This is the baseline.
<b>Intervention Strategy</b>	Increase marketing about the Health Fairs. Provide additional immunizations in underserved areas with mini health fairs.
<b>Community Benefit Category</b>	A2 – Community Based Clinical Services

<b>Diabetes Management Program</b>	
<b>Hospital CB Priority Areas</b>	<input checked="" type="checkbox"/> Chronic Conditions <input type="checkbox"/> Access to Primary Care Services <input type="checkbox"/> Preventive Care Services
<b>Program Emphasis</b>	Please select the emphasis of this program from the options below: <input type="checkbox"/> Disproportionate Unmet Health-Related Needs <input checked="" type="checkbox"/> Primary Prevention <input type="checkbox"/> Seamless Continuum of Care <input type="checkbox"/> Build Community Capacity <input type="checkbox"/> Collaborative Governance
<b>Link to Community Needs Assessment Vulnerable Population</b>	Although the rate is unreliable (+ or – 23%), Mark Twain Medical Center’s last Community Health Needs Assessment indicates age-adjusted Diabetes is below the statewide rate, we believe the incidence is actually above the Health People 2020 objective of 15/100,000. A more recent thorough assessment report will probably indicate the prevalence of Diabetes in our county is 1 out of 10 adults and more prevalent among persons living below the poverty level and obese adults.
<b>Program Description</b>	The Diabetes Self-Management Education (DSME) program started in August, 2012 and is conducted by a Certified Diabetes Educator/Registered Dietitian who provides patient education within the hospital’s service community of Calaveras County. Patient assessments, consultations and education occur at MTMC’s Family Medical Centers (five locations within Calaveras County) to increase outreach and access. Self-management topics include, but are not limited to: Diabetes Overview, Monitoring, Physical Activity, Healthy Eating, Meal Planning, Problem Solving, and Reducing Risks.
<b>FY 2015</b>	
<b>Goal 2015</b>	The program goal is to avoid diabetes related hospital or ED admissions among 50% of participants served in the program within six months of the intervention.
<b>2015 Objective Measure/Indicator of Success</b>	Percentage of participants admitted to the Hospital or ED within six months of the intervention for diabetes related treatment.
<b>Intervention Strategy for Achieving Goal</b>	Provide Diabetes Self-Management Education to patients referred by community practitioners.
<b>Result FY 2014</b>	Results from FY 2014 showed 411 patients have been served since July 2013, vs 162 patients FY13. Follow-up data became available in the third quarter finding no participant from the program was admitted to the Hospital or ED for diabetes related treatment within six months of the intervention.
<b>Hospital’s Contribution/Program Expense</b>	The Diabetes Self-Management Education (DSME) program had an expense of \$124,100 for FY 2014.
<b>FY2015</b>	
<b>Plan for FY2015</b>	Certified Diabetes Educator Consultant contracted to provided diabetes education to patients within the communities of Calaveras County through referrals from practitioners. Patient consultations/education occur at MTMC’s Family Medical Centers (five locations within Calaveras County) to increase outreach and access.
<b>2015 Objective Measure/Indicator of Success</b>	Fifty percent of the participants or greater who received Diabetes Self Management Education (DSME) will avoid diabetes-related admissions to the hospital or emergency department for the three months following their participation in the program.
<b>Baseline</b>	Building new baseline for FY2015 by tracking the number of total patients participating in our DSME program;
<b>Intervention Strategy for Achieving Goal</b>	Certified Diabetes Educator providing Diabetes Self-Management Education to parents through individual consultation and group classes. Self-Management topics include but are not limited to: <ul style="list-style-type: none"> <li>• Diabetes overview</li> <li>• Monitoring</li> <li>• Physical Activity</li> <li>• Medications</li> <li>• Healthy Eating</li> <li>• Carbohydrate Counting</li> <li>• Meal Planning</li> <li>• Problem Solving</li> <li>• Reducing Risks</li> </ul> Data collected will aid in evaluating the effectiveness of our DSME program to help determine areas for growth and improvement for the next fiscal year.
<b>Community Benefit Category</b>	A1 – a Community Health Education – Lectures/Workshops

<b>Chronic Heart Disease and Pulmonary Disease Management</b>	
<b>Hospital CB Priority Areas</b>	<input checked="" type="checkbox"/> Chronic Conditions <input type="checkbox"/> Access to Primary Care Services <input type="checkbox"/> Preventive Care Services
<b>Program Emphasis</b>	<input checked="" type="checkbox"/> Disproportionate Unmet Health-Related Needs <input checked="" type="checkbox"/> Primary Prevention <input checked="" type="checkbox"/> Seamless Continuum of Care <input type="checkbox"/> Build Community Capacity <input type="checkbox"/> Collaborative Governance
<b>Link to Community Needs Assessment Vulnerable Population</b>	Residents of the community have a high mortality and morbidity rate from chronic diseases such as COPD and CHF.
<b>Program Description</b>	Mark Twain Medical Center initiated a heart disease management program to help improve health outcomes and decrease admissions and/or length of hospital stay for persons with CHF or COPD.
<b>FY 2015</b>	
<b>Goal 2015</b>	Mark Twain Medical Center will decrease inpatient utilization rates for persons with CHF or COPD who participate in the hospital's intervention program by at least 5%.
<b>2015 Objective Measure/Indicator of Success</b>	Decrease or avoid admissions of persons with CHF or COPD, particularly among the vulnerable populations of uninsured and dually eligible (Medicare/MediCal) community residents.
<b>Intervention Strategy for Achieving Goal</b>	With the addition of a fulltime Cardiologist- MTMC will continue to cultivate relationships with primary care physicians to partner in the care of patients with CHF or COPD. Provide short-term outpatient case management services for target population. Offer disease management education to program participants.
<b>Result FY 2014</b>	No participants were identified.
<b>Hospital's Contribution/Program Expense</b>	n/a
<b>FY2014</b>	
<b>Plan for FY2015</b>	Work with local providers to identify class participants. Begin classes.
<b>2015 Objective Measure/indicator of Success</b>	MTMC will be enhancing Cardiac Services with the addition of the fulltime Cardiologist and Specialty Care Center. MTMC will team up with Calaveras County Public Health to decrease the readmission rates among vulnerable population.
<b>Intervention Strategy for Achieving Goal</b>	Working in partnership with CCPH to create a framework for resources to be offered to the community. Attending monthly interdisciplinary meetings as we build up the references and resources needed to educate the community.
<b>Community Benefit Category</b>	A1. Community Health Education

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

# Community Benefit and Economic Value

## REPORT

190 Mark Twain Medical Center For period from 7/1/2013 through 6/30/2014  
Complete Summary - Classified Including Non Community Benefit (Medicare)

	Persons	Total Expense	Offsetting Revenue	Net Benefit	% of Organization Expenses	% of Organization Revenues
<b>Benefits for Vulnerable</b>						
Financial Assistance	482	314,674	0	314,674	0.5	0.5
Medicaid	24,203	13,335,209	7,132,695	6,202,514	10.3	10.5
Means-Tested Programs	3,314	2,025,710	813,239	1,212,471	2.0	2.1
<b>Community Services</b>						
Community Benefit Operations	2	54,678	0	54,678	0.1	0.1
Community Building Activities	10	114,386	0	114,386	0.2	0.2
Community Health Improvement Services	1,189	311,988	0	311,988	0.5	0.5
Financial and In-kind Contributions	307	83,799	0	83,799	0.1	0.1
<b>Totals for Community Services</b>	<b>1,508</b>	<b>564,851</b>	<b>0</b>	<b>564,851</b>	<b>0.9</b>	<b>1.0</b>
<b>Totals for Vulnerable</b>	<b>29,507</b>	<b>16,240,444</b>	<b>7,945,934</b>	<b>8,294,510</b>	<b>13.8</b>	<b>14.1</b>
<b>Benefits for Broader Community</b>						
<b>Community Services</b>						
Community Building Activities	40	1,173	0	1,173	0.0	0.0
Community Health Improvement Services	429	221,366	1,110	220,256	0.4	0.4
Financial and In-kind Contributions	394	212,652	0	212,652	0.4	0.4
Health Professions Education	10	0	0	0	0.0	0.0
<b>Totals for Community Services</b>	<b>873</b>	<b>435,191</b>	<b>1,110</b>	<b>434,081</b>	<b>0.7</b>	<b>0.7</b>
<b>Totals for Broader Community</b>	<b>873</b>	<b>435,191</b>	<b>1,110</b>	<b>434,081</b>	<b>0.7</b>	<b>0.7</b>
<b>Totals - Community Benefit</b>	<b>30,380</b>	<b>16,675,635</b>	<b>7,947,044</b>	<b>8,728,591</b>	<b>14.5</b>	<b>14.8</b>
<b>Medicare</b>	<b>28,746</b>	<b>26,484,224</b>	<b>26,182,718</b>	<b>301,506</b>	<b>0.5</b>	<b>0.5</b>
<b>Totals with Medicare</b>	<b>59,126</b>	<b>43,159,859</b>	<b>34,129,762</b>	<b>9,030,097</b>	<b>15.0</b>	<b>15.3</b>

Accounting Method: Note: These expenses were calculated utilizing a cost accounting

## **Telling the Story**

For FY2014 Mark Twain Medical Center staff provided many speaking engagements to the community through Service Organizations, to the County Board of Supervisor's meetings during Public Comment, the Health Fairs, mini-Health Fairs, and community benefit projects such as the Teddy Bear Clinic, Tele Health Demonstrations, Pink in The Night Event, Health Career Fairs and other activities during this fiscal period. In addition, the hospital now publishes a Quarterly Community Newsletter mailed to all Calaveras County Residents. The Community Benefit Report and Implementation Plan will also be posted on the hospital website and the Dignity Health website.

## **APPENDIX**

Payment Assistance Policy Summary  
Board of Trustees Roster

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

Policy Overview:

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

Eligibility for Patient Payment Assistance:

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

Determination of Financial Need:

- Financial need will be determined through an individual assessment that may include:
  - a. an application process in which the patient or the patient's guarantor is required to cooperate and supply all documentation necessary to make the determination of financial need;
  - b. the use of external publicly available data sources that provide information on a patient's or a patient's guarantor's ability to pay;
  - c. a reasonable effort by the Dignity Health facility to explore and assist patients in applying for appropriate alternative sources of payment and coverage from public and private payment programs; and will take into account the patient's assets and other financial resources.
- It is preferred but not required that a request for payment assistance and a determination of financial need occur prior to rendering of services. The need for payment assistance may be re-evaluated at each subsequent rendering of services, or at any time additional information relevant to the eligibility of the patient for payment assistance becomes known.
- Dignity Health's values of human dignity and stewardship shall be reflected in the application process, financial need determination and granting of payment assistance. Requests for payment assistance shall be processed promptly, and the Dignity Health facility shall notify the patient or applicant in writing within 30 days of receipt of a completed application.

#### Patient Payment Assistance Guidelines:

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

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

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

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

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

#### Budgeting and Reporting:

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

Relationship to Collection Policies:

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

Regulatory Requirements:

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

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