Fremont-Rideout Health Group $225 Million Expansion:

The approved construction of a $225 million expansion of Rideout Memorial Hospital will transform six square blocks in the historic small town of Marysville into a regional medical center.

The new six-story hospital building, which will be connected to the current structure, will include a two-story maternity center, a rooftop heliport for Life Flight operations and a major expansion of the Emergency Department, which is the only Level III Trauma and STEMI-receiving Center between Chico and Sacramento.

The expansion addresses the increasing needs of the greater Yuba-Sutter community for emergency and acute care (in 2011 Rideout ED handled more than 55,000 emergency room visits in a facility designed for less than half that number), and Fremont-Rideout’s growing number of specialty medical services for residents of the hospital’s five-county region (Yuba, Sutter, Colusa, western Nevada, southern Butte counties).

Already underway on the same campus is the expansion of The Fremont-Rideout Cancer Center that will open winter, 2013, and nearly double the size of the original facility. The Hospital also houses The Heart Center at Rideout, which offers the full range of cardiac care, from diagnostic and interventional to surgery and rehabilitation. Imaging and laboratory facilities, medical offices, parking, and a 24/7 urgent care clinic operated by Peach Tree Health are already part of the complex.

Fremont-Rideout Health Group, the largest non-government employer in both Yuba and Sutter Counties, is an independent, truly non-profit, community-based healthcare organization that creates jobs for nearly 2,000 Californians.
# Fremont-Rideout Health Group
## Fiscal Year 2011-2012

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Fremont-Rideout Health Group
Community Benefits Plan and Assessment Update

Fremont-Rideout Health Group (FRHG) is pleased to submit its annual community benefits report to the California Office of Statewide Health Planning and Development (OSHPD). The report includes activity conducted during the 2011-12 fiscal year.

FRHG has been in operation since 1983, when Fremont Medical Center in Yuba City and Rideout Memorial Hospital in Marysville merged to form a private, not-for-profit health system. FRHG’s Board of Directors have defined a vision to provide high quality, comprehensive health care to all residents of the Yuba-Sutter community, regardless of the ability to pay, while persistently working toward improvements to, and expansion of, health services and programs.

Values
We will fairly and accurately represent our capabilities and ourselves. We will not misrepresent our capabilities to the public.
We will provide services to meet the identified needs of our patients and will constantly seek to avoid the provision of those services that are unnecessary or inefficient.

Mission Statement
To provide compassionate and superior healthcare to everyone in our community and region.

Vision Statement
To be a regional leader in providing exceptional, patient-centered healthcare delivered with compassion, integrity and respect.

Fremont-Rideout Health Group
Summary: The service area of Fremont-Rideout Health Group is primarily comprised of the Northern California counties of Yuba and Sutter, with a combined population of approximately 167,500. Income in both counties is below the statewide average, and the poverty rate is higher than the statewide average, according to the following income and poverty statistics from the U.S. Census Bureau: The 2011 median per capita income for Sutter County was $22,464; for Yuba County $20,046. The statewide median per capita income was $29,634. The 2011 median household income for Sutter County was $50,010; for Yuba County $46,617. The statewide median household income was $61,632. The 2011 poverty rate in Yuba County was 20.3 percent, and in Sutter County 15.2 percent, both above the statewide poverty rate of 14.4 percent. High unemployment is chronic in Yuba and Sutter counties. In October of 2011, according to the United States Bureau of Labor Statistics, Yuba and Sutter counties’ combined unemployment rate of 15.4 percent was the third highest among the 370 Metropolitan Statistical Areas defined in the United States. The percentage of residents without health insurance is higher in Yuba and Sutter counties than the national average, according to the U.S. Census Bureau’s Small Area Health Insurance Estimates. According to the Census Bureau, 21.5 percent of Sutter County residents and 19.1 percent of Yuba County residents were without health insurance for all 12 months of 2009, compared to the California uninsured rate of 20.1 percent, and the national uninsured rate of 16.3 percent. FRHG provides community benefits to the communities we serve - demonstrating our commitment to the health of residents in our service area. We create access to health care in our region for individuals and families who struggle against poverty, disability and isolation.

FRHG Owns or Manages:
- Rideout Memorial Hospital (RMH), a 149-licensed-bed, acute-care facility, which includes a Level III Emergency Department.
- Fremont Medical Center (FMC), a 132-licensed bed, acute-care facility, which includes Perinatal and Labor/Delivery, Women’s Imaging Services and Radiology.
- Rideout Emergency Department, located inside Rideout Memorial Hospital, is the only emergency room between Southern Butte County and Sacramento. It is a Level III Trauma Center and Stermi-receiving center.
- The Fountains Skilled Nursing & Rehab Center, a 145-bed skilled nursing facility, which includes a 24-bed Rehabilitation unit.
- The Courtyard Assisted Living, a 54-unit residence for seniors.
- The Gardens, a 25-unit facility staffed with skilled and professional caregivers for Dementia and Alzheimer’s patients, which also offers an adult day care support center including six additional deluxe units.
- Fremont-Rideout Cancer Center, a partnership between Fremont-Rideout Health Group and UC-Davis Health System, is an 18,000 square foot, outpatient cancer treatment center. (2013 expansion will add 16,461 sq ft).
- The Heart Center at Rideout, a cardiac surgery and coronary intervention program, which offers complete cardiac care and surgical services.
- Feather River Surgery Center, a free-standing outpatient surgery center. Rideout Pain Management and Rideout Urology are housed in the Surgery Center.
- Sierra Health Care Center, a durable medical equipment and oxygen business. Fremont-Rideout Hospice and Fremont-Rideout Home Health are housed in the Sierra Health Care Center.
Fremont-Rideout Urgent Care Center to treat non-life-threatening illnesses and minor injuries. Fremont-Rideout Occupational Health, a comprehensive occupational health clinic, is housed inside the Urgent Care Center. Fremont-Rideout Specialty Care Clinic serves patients in Penn Valley, California.

Other Services or Programs Include:
- FRHG’s Community Health Education Program provides a variety of classes, seminars, support groups and events to help the residents of the Yuba-Sutter Communities to improve and maintain their health and lifestyle.
- Fremont-Rideout Cancer Center Clinical Trials
- Cancer Care Network
- Community Hospital Cancer Program
- Social Services
- Fremont-Rideout Cardiac Rehabilitation
- Fremont-Rideout Occupational Health, an occupational health clinic
- Fremont-Rideout Draw Stations, outpatient laboratory services
- Fremont-Rideout Outpatient Nutrition Program
- Sweet Success Diabetes in Pregnancy
- Fremont-Rideout Outpatient Rehabilitation Clinic
- Home Care Services, which includes Fremont-Rideout Home Health and Fremont-Rideout Hospice
- Imaging Services
- Respiratory Care Services
- Surgical Services
- Hospitalist / Intensivist / Surgicalist Program
- The Heart Center at Rideout: Cardiac Surgery, Cath Lab, Cardiology Services
- Fremont-Rideout Neurosurgery Center
- Fremont-Rideout Urgent Care Center

Community Benefits
In FY2011-2012 FRHG contributed the following:
Charity Care and Unreimbursed Care
FRHG provided $26,004,958 in charity care and unreimbursed hospital care to patients at Fremont Medical Center and Rideout Memorial Hospital

Medicare Payment Shortfalls
The total of government program costs provided was $14,400,632

Community Benefits
FRHG provided $258,359 in community benefits and services

On Call Physician Program
FRHG provided $2,345,491 for the On-Call Physician Program and $3,064,117 for the Intensivist/Hospitalist Program, and $1,600,400 for the Surgicalist Program. These programs provide physicians (inpatient) care for Emergency Room patients who have no physician and are indigent or on Medi-Cal.

Community Benefits provided to the community by FRHG include:
- Charity care and un-reimbursed medical care
- Financial and human resource assistance to a variety of local community organizations
- Donations of equipment and supplies
- Membership and volunteer involvement in local chamber of commerce, civic and service organizations
- Cancer awareness programs and support groups
- Heart Health Awareness programs and a free Bless Your Heart Fair and heart health screenings
- Diabetes education through free Community Health Education Classes
- Maternity education thru free Community Health Education Classes
- Maternity care for non-insured or Medi-Cal patients
- Hospice
- Hospice Volunteer Training program
- Community Health Education program
- Support group facilitation
- Physician recruitment to meet community needs
- Community event participation
- Nursing and clinical education program
- Health Fair participation
- Chico State University Nursing Program
Assessing Community Needs
Improving community health involves much more than simply providing health care services to the underserved populations. It requires commitment to, and community involvement with the community at all levels. FRHG strives to maintain that leadership role. In addition, the Quality Council, a subcommittee of the Fremont-Rideout Health Group Board of Directors, comprised of physicians, board members, hospital executive leaders, quality professionals and front-line staff review quality data as it relates to the patient population served and makes recommendations and allocates resources for quality improvement initiatives focusing on the processes and outcomes of care. And, FRHG representatives are active in community groups and collaboratives, including United Way, American Cancer Society, American Red Cross Northeastern, and Sutter and Yuba County public health, Cancer Care Network and UC Davis Health System, among others. These committees and programs, along with the Board of Directors, set the pace for assessing the communities’ needs in regard to health care.

Community Health Benefits Plan

Creation of the Plan
FRHG has a long history of providing substantial benefits to the community. The health group has assumed a leadership position in the community and provides future solutions for health care needs for the residents of the Yuba-Sutter and surrounding communities.

The Community Action Committee (CAC) was formed in 1995 from members of the FRHG Board of Directors, Foundation Board of Directors, FRHG administration and staff, and community members (including representation from physicians, educators, migrant farming and business). It’s charged with assessing the needs of the community and developing a plan of action to prioritize and meet those needs. The Committee gathers information and facts from a variety of sources within FRHG, community members, government and community agencies to develop the overall plan.

FY 2011-2012 Community Health Benefits Plan
Every three years, the CAC conducts a Community Needs Assessment to guide our Community Benefit Program. In formulating the FY 2011/2012 Community Health Benefits Plan, the Community Action Committee reviewed and used as a guide the Healthy Living 2009 Cancer Program Annual Report – Fremont-Rideout Cancer Center and health statistics from both Yuba and Sutter County Health and Human Services. In addition, the Community Action Committee set additional priorities that are not included in the reports. A 2010 Kaufman-Hall report was used as part of strategic planning related to scope and complexity of services needed to meet the needs of our region.

Needs were identified through the following areas:
- Healthy Living – Community Health Needs Assessment 2009.
- 2009 Economic & Demographic Profile Series for Sutter and Yuba Counties.
- Participation in United Way, including leadership in the needs assessment process and citizen’s review committee.
- Meetings with Sutter County Healthy Families, Rideout Emergency Disaster Preparedness, FREED (Helping individuals with Disabilities) Sutter County Safer Communities, Yuba County Safer Communities, Yuba County Chronic Disease Committee, and periodic projects with the Yuba and Sutter Health Departments
- Meetings with community groups, members and organizations; and government agencies in Yuba and Sutter counties
- Focus groups comprised of Yuba-Sutter residents
- Meetings with the UC Davis Athletics Dept., 2010

The identified needs in addition to those in the Needs Assessment Survey are:
- Critical nursing and clinical technicians shortage
- Expand Cancer Treatment services and facility (Completed, 2013)
- Expand the Rideout Emergency Department (to be completed, 2014)
- Perinatal Services and Education
- Cancer Research – Yuba County
- Mammogram Services
- Diabetes Education
- Nutrition and Fitness Education – Obesity in Adults and Children
- Heart Disease Education
- Yuba-Sutter Mental Health (24/7 Emergency Telepsychiatry Service in California launched, 2013)
- Development of a Sports Injury Program for area Soccer Coaches
Critical Nursing and Clinical Technician Shortage

Summary: FRHG continues to face challenges in regard to recruiting nursing and other clinical technical personnel to the Yuba Sutter area. Although the current economic downturn has led to an easing of the national shortage of registered nurses, regional factors as well as specific challenges faced by FRHG during the 2009-2010 fiscal year have led to the need for continued diligence as it relates to our recruitment efforts.

The national demand for healthcare professionals will continue to increase over the next 10-20 years despite the current economic downturn. According to the latest projections from the U.S. Bureau of Labor Statistics published in December 2010 Occupational Employment Projections to 2018, there will be a 22 percent increase in the number of registered nurse jobs by 2018. The number of nurses ages 40 and over has continued to increase and nurses 50 years of age or older represent a staggering 45 percent of the registered nurse workforce, according to the 2008 National Sample Survey of Registered Nurses published by the Department of Health and Human Services. Furthermore, the number of registered nurses younger than 40 is only 29.5 percent of all registered nurses. As nurses in older age groups begin to leave the workforce, the nation will struggle to educate and train enough nurses to keep up with demand. Projections in the American Hospital Association’s Trend Watch Chart book of 2010 predict a shortage of 1 million nurses by 2020. FRHG has been faced with many challenges due to the current recession and other regulatory changes. It is our desire to remain vigilant in our efforts to remain viable and to continue to provide superior healthcare to the community we serve. The consolidation of most of our acute care services into one campus occurred over three years ago. An unfortunate by-product of those decisions called for a reduction in workforce affecting approximately 200 employees. Although the downsizing did not decrease the number of positions available in clinical shortage areas, we did see an overall increase in turnover as a result of the culture of uncertainty. The uncertainty has stabilized, however, FRHG continues to implement many new recruitment and retention strategies.

Recruitment efforts as it relates to typical shortages are demonstrated below:

- Lab – FRHG has experienced shortage in certain areas of the lab and continues to enhance recruitment efforts to attract knowledgeable and professional candidates
- Radiology – FRHG has no staff shortages in this area
- Respiratory Therapy – FRHG has no staff shortages in this area
- Pharmacy – FRHG has experienced shortage in this area and continues to enhance recruitment efforts to attract knowledgeable and professional candidates
- Registered Nursing areas – FRHG continues to experience shortages in Critical Care nursing. We continue to aggressively tackle the difficult challenge of finding and recruiting experienced nurses. We have been successful in recruiting and training new grad nurses, but are limited in the numbers we can train in a given time period. We will continue to enhance recruitment and training strategies to combat the shortages in this area FRHG continues to address the challenge of the nursing shortage in the future and employs new and continued methods to create incentives for recruiting:
  - Throughout FY 2011-2012, FRHG offered competitive salaries and benefits, education loan repayment program, as well as relocation assistance to new hires. FRHG continues to provide an in-house registry program, free continuing education units and relocation assistance
  - FRHG provides assistance to employees through an education loan repayment plan and tuition reimbursement plan
  - The Fremont-Rideout Foundation loaned $16,250 to employees enrolled in a nursing program or other hard to fill health professions, the loan is forgiven if the employee remains an employee for a period of two-years (full-time equivalent) in the position they are going to school for. In addition six $1,000 scholarships were awarded to area high school seniors and college students pursuing a career in healthcare, two $3,000 scholarships were awarded to employees furthering their education to obtain a nursing leadership role and a total of $6,000 was awarded to Teen Leadership Council Alumni, furthering their education in healthcare.

Recruitment strategies and programs:

- FRHG maintains 2 full-time recruiters on staff who have focused on improving relationships with the local nursing schools. This has led to hiring 49 new grads - FY2011-2012 (and are looking to hire 36 additional, FY2012-2013) The department focuses on local grads, but will hire the most qualified, driven nurse, to provide the best care to our patients.
- FRHG hosts in-house job interview fairs in hard-to-fill areas and was successful in hiring many nurses to FRHG
- FRHG participates in job fairs in the greater No. Calif. area and several in other areas of the nation to enhance the pool of candidates considering employment
- FRHG has been able to recruit some of the most talented nurse travelers to permanent FRHG opportunities – many into critical care areas okay
- Dedicated program to recruit and train new graduate nurses in both Med/Surg and Critical Care areas
- Enhanced advertising efforts regionally and nationally to increase candidate pool and raise awareness of opportunities
- Educated and trained new and interim managers in the recruitment and hiring process to enhance the quality and expertise of new employees selected
- Our new and improved www.frhg.org site is a key marketing tool that shows FRHG as an excellent place to work
- FRHG offers successful preceptor programs to new graduates
- FRHG implemented an expanded training program for new graduate registered nurses joining our organization
• FRHG provided clinical training for several nursing programs to include precepting
• Through our Education Department, FRHG continues to offer specialized training in the Critical Care, Emergency and Perinatal areas

Retention Strategies:
Ongoing communication enhancement efforts to include:
• Enhanced intranet service provides an electronic communication tool through both regular email communication and an employee portal of new and archived information
• Regular employee forums provide ongoing face-to-face communication from our senior management team to employees throughout the organization
• Ongoing Leadership Development educational sessions hosted by Human Resources FY2011-2012 with Employee Engagement emphasis. Highlights include: Developing an Employee Value Proposition that details our commitment to proper and fair communication and dealings within our organization. This enables us to recruit and retain employees so long as leadership at all levels is committed to these values (Completed March 31, 2012)
• Salary Market Survey – market analysis conducted and recommendations for wage adjustments implemented FY2011-2012
• Developed and implemented a complete nursing restructure that has driven many quality initiatives and enhances the work environment at FRHG. Through this effort, we have been successful in mentoring current employees and also developing and training new employees in the organization, CEO Updates and “Appreciation Days”

Fremont-Rideout Health Group Physician Appointments From July 1, 2011 to June 30, 2012
A Raghavender Boothpur, MD,
Nephrology

Christopher Bradburn DO,
Emergency Medicine

Pranab K. Chattopadhyay, MD,
Nephrology

Diane H. Conley, MD,
Teleradiology

Gurbir S. Dhaliwal, MD,
Cardiovascular Disease

Joseph W. Dougherty, MD,
General Surgery

Serag Dredar, MD,
Gastroenterology

Hiba Hamdan, MD,
Internal Medicine

Misty D. Humphries, MD,
General Surgery

Alexander Kim, MD,
Gastroenterology

Mutuhi Mugo, MD,
Internal Medicine

John T. Owings, MD,
General Surgery

Varshita Pande, MD,
Pediatrics
In an effort to always strive towards FRHG’s mission to provide superior healthcare to everyone in our community, FRHG continues to recruit physicians in areas of great need. Some areas of focus have included Critical Care, Primary Care and Gastroenterology. Additional medical practices allow health care access to all patients including those patients with Medi-Cal or without insurance. Remote services for Teleneurology and Teleradiology were successfully added in the previous year and continue to ensure 24/7/365 coverage.

Access and Affordable Health Care

Summary: Income in both counties is below the statewide average, and the poverty rate is higher than the statewide average, according to the following income and poverty statistics from the U.S. Census Bureau: The 2011 median per capita income for Sutter County was $22,464; for Yuba County $20,046. The 2011 median household income for Sutter County was $50,010; for Yuba County $46,617. The statewide median household income was $61,632. The 2011 poverty rate in Yuba County was 20.3 percent, and in Sutter County 15.2 percent, both above the statewide poverty rate of 14.4 percent. High unemployment is chronic in Yuba and Sutter counties. In October of 2011, according to the United States Bureau of Labor Statistics, Yuba and Sutter counties’ combined unemployment rate of 15.4 percent was the third highest among the 370 Metropolitan Statistical Areas defined in the United States. The percentage of residents without health insurance is higher in Yuba and Sutter counties than the national average, according to the U.S. Census Bureau’s Small Area Health Insurance Estimates. According to the Census Bureau, 21.5 percent of Sutter County residents and 19.1 percent of Yuba County residents were without health insurance for all 12 months of 2009, compared to the California uninsured rate of 20.1 percent, and the national uninsured rate of 16.3 percent. FRHG identified difficulty with accessibility and affordability of health care. Children under the age of 18 – 16.5% in Sutter County and 24.3% Yuba County – live below the poverty level according to the US Census Bureau, Small Area Income and Poverty Estimates reported in the 2007 Yuba County Health Status Profiles. 50.7 percent of the counties public school students received free and/or reduced price meals in 2006/07. According to the 2010 Sutter County Nutrition and Food Insecurity profile 48% of the county public school students received free and/or reduced priced meals. The percentage of elderly, 65 and older, living below the poverty level in Yuba and Sutter counties closely mirrors the statewide figure at 7.8 percent and 7.7 percent, respectively.

- FRHG continues to screen infants born at Fremont Medical Center for possible hearing loss, regardless if insurance covers the procedure
- The physicians who choose to practice at Fremont Medical Center in such specialties as family practice, pediatrics, obstetrics/gynecology, and internal medicine meet the needs of the underserved in the community. These medical practices have increased health care access to all patients on Medi-Cal and without insurance
- FRHG funds the Community Health Education Program, which provides four free classes each month on health-related topics. Information is also given regarding access to health care. Class topics are determined by the results of a survey that participants are asked to complete on what classes they are interested in hearing about in the future and include smoking cessation and childbirth classes
- A specialty clinic in Penn Valley (Nevada County), The Fremont-Rideout Specialty Care Center brings specialty healthcare services, such as cardiology, urology, vascular and infectious disease, to the Penn Valley area
- Participation in the Ampla Health Fair in 2011: Provided prenatal education and resource information in Spanish
- Host of the Annual Fremont-Rideout Bless Your Heart Fair and Heart Walk, each February, provides screenings and heart education and information for the Yuba-Sutter community
- Hosted the Annual Diabetes Fair provided screenings and diabetes education and information for the Yuba-Sutter community

Cancer Needs of the Communities

Summary: Before opening the Fremont-Rideout Cancer Center with UC Davis Cancer Center, in Sept. 2000, FRHG identified that more than 600 patients traveled outside the Yuba-Sutter area each year to seek outpatient cancer treatment. In addition, Yuba County has an extremely high rate of all cancer deaths that exceeds both the state and Healthy People 2010 national objective. Sutter County’s rates, while not as high as Yuba County, exceed both California and Healthy People 2010 national objective.
FY 2011-2012

JULY 1, 2011 – JUNE 31 2012

Cancer Needs in the Community:
- American College of Surgeons Commission on Cancer (ACoS CoC) designated us as a “Community Cancer Program”, this accreditation requires that we follow high standards of care and provide a more comprehensive approach to cancer treatment. UCD announced their National Cancer Institute (NCI) had earned, “Designated Cancer Center”, which comprises research, clinical trials and the latest technology. Our partnership with the University of California, Davis Cancer Care Network provides our patients with quality care they might expect from a large university medical center with the compassion and personalization of a community based hospital. (March 2012)
- Virtual Tumor Boards
- Coping with Cancer, and Cancer & Fatigue lectures for patients and family
- Wellness Center, providing yoga, art and writing expression
- High Press Ganey Scores for Patient Satisfaction
- Senior Health Fair
- Lymphadema Referrals to Physical Therapy, Class Provided at Cancer Center (April 2012)

Plans for Healing Environment Donor Recognition Artwork throughout the Rideout Cancer Center through donations made to Rideout Foundation (Finalized, Dec. 2012)
- Cancer Center Expansion near completion, adding 11 new infusion bays, 6 more exam rooms, PET/CT Suite, TrueBeam Linear Accelerator, remodeled Pharmacy and additional offices. Marketing required to inform the public of new services. Brochures developed for Rideout Cancer Center, and PET/CT Services. Handout explaining U.C. Davis Clinical Trial Program
- 2nd Annual Boomers & Beyond Health Fair (May 2012)
- Sunsweet Employee Health Fair (May 2012)
- Valley Muffler Car Show benefitting Rideout Cancer Center (June 2012)
- American Cancer Society Strides Against Breast Cancer Kickoff (June 2012)
- Third Annual Cancer Survivor Luncheon (June 1, 2012)
- Peer Navigator Program
- Plans for 2nd Annual Home Run for Health & Cancer Survivor Celebration at Yuba-Sutter Gold Sox
- Patient & Family Advisory Council – New Goals to Improve Patient Care
- Skin Cancer Awareness Campaign – sunscreen and education brochures handed out to patients.
- Sutter Surgical Hospital-North Valley Sidewalk Community Health Fair
- Developed the Chemotherapy & You Class for New Chemotherapy Patients
- Opened the Patient Resource Center
- Treatment Options for Early Stage Lung Cancer Seminar by Dr. Royce Calhoun II, M.D., FACS, Director of Thoracic Oncology.
- Cancer Center Expansion nears completion.

Ongoing 2012:
- Medical License Social Worker
- Patient Discretionary Fund
- Public Resource Library
- Cancer Support Groups
- Peer Navigator Program
- Chemotherapy & You Classes (Every Wednesday)
- Wellness Center – provides Yoga, Art & Writing classes to cancer patients and caregivers
- Quarterly presentation, “Nutrition for Persons with Cancer”
- Fairway to Health Fundraising Event (May 2012)
- Monthly Tumor Conferences
- Virtual Tumor Boards w/UC Davis, daily Monday-Thursday
- Support for American Cancer Society’s Blossom Ball (May 2012)
- Patient and Family Advisory Council (Quarterly)

New for 2012:
- Cancer Expansion Construction Project, adding 11 Infusion Bays, remodeled Pharmacy, 6 exam rooms, PET/CT Suite, TrueBeam Linear Accelerator, and office space. (Completion, Dec. 2012)
New positions developed: New Radiation Oncology Supervisor, Administrative Assistant – Patient Resource Center, and Nurse Navigator/Patient Education
Updated website, social media & new brochures for Cancer Center, PET/CT Services, and Clinical Trials
Expanded Healing Garden
Patient Resource Center
First Annual Helping Hands Bowl-a-Thon, (March 31, 2012)
Sunsweet Employee Health Fair (May 2012)
2nd Annual Boomers & Beyond Health Fair (May 2012)
Developed the Chemotherapy & You Class for New Chemotherapy Patients

Unified in Patient Focused Cancer Care
The UC Davis Cancer Care Network is a collaboration of hospital-based cancer centers in Northern and Central California dedicated to providing first-rate care to patients close to home. Through the network, the expertise of a National Cancer Institute-designed cancer center is linked with the unique insights of the hospital-based community cancer centers. Oncology teams at participating sites are committed to working together to provide the latest diagnostic techniques and treatment approaches to their patients.

Cancer Care Network facilities interactions across network sites through “virtual tumor boards.” Using state-of-the-art telemedicine technology, teams of specialists in different locations meet via real-time videoconferencing, share medical information and agree on treatment plans. Patients then receive care in their own communities and from their own physicians. Virtual tumor boards also provide opportunities to assess patients’ needs for novel treatments available through clinical trials and for appropriate referrals to UC Davis for specialty care.

Key goals of the network
- Provide first-rate community-based medical care to cancer patients
- Broaden access to new treatments available through clinical trials
- Ensure ongoing interactions among medical teams at multiple locations who are involved in-patient care
- Increase the availability of the specialty and subspecialty cancer care available only at UC Davis
- FRHG hosts a booth at the annual Punjabi Festival in order to reach the East Indian population and to educate them about breast cancer awareness
- Monthly Tumor Conferences are offered to the physicians in the community for CME credit.
- The Fremont-Rideout Cancer Center has developed the “Cancer Network” newsletter for patients and family members in our community. This newsletter educates patients on the latest cancer treatments, nutrition and community resources
- The Fremont-Rideout Cancer Center hosts monthly programs of interest to all persons with cancer and their family, friends and/or caregivers
- The Fremont-Rideout Cancer Center offers space and support for the following Support Groups: Crossroads: Breast Cancer Support Group; Man to Man Prostate Support Group; Caregivers Support Group
- Coping with Cancer and Cancer and Fatigue lectures are held for patients and family
- Participation in the American Cancer Society Blossom Ball, May 2011
- Hosted the Second Annual Cancer Survivor Reception, June 4, 2011
- Participated with a team and information booth at Relay for Life
- Participated with Planning Committee to host the “Cancer Center 10th Anniversary Celebration” (Sept. 2010)
- Developed and implemented the Patient & Family Advisory Council
- Skin Cancer Awareness Campaign - sunscreen and educational brochures handed out to patients
- Cancer Center Expansion Final Changes & to City of Marysville for approval. (Sept. 2010 - Estimated start of construction - January 2011)
- Created, published and distributed the Cancer Center 2009/2010 Annual Report

Mental Health – Substance Abuse Services
Summary: Identified the need for education about substance abuse, including alcohol and tobacco as well as support for victims of trauma.

- FRHG provides sponsor funds to host Safe & Sober events for Yuba and Sutter county high school graduations
- FRHG’s Emergency Department at Rideout Memorial Hospital, continued to be involved in the annual “Every 15 minutes”, a mock event educating high school students about the dangers of drinking and driving
- FRHG participates monthly in the Yuba County Tobacco Coalition
- FRHG sponsors free Tobacco Cessation classes monthly for the public (January thru November)
- FRHG continues to support the local Trauma Intervention Program (TIP), where trained citizens offer emotional and practical support to victims, their family members, friends and bystanders at 911 emergency calls
- FRHG continues to provide assistance to the Yuba-Sutter Sexual Assault Response Team (SART) for equipment and training to help women and children of assault crimes
• FRHG Hospice staff continue their participation in Camp HUG, a camp for children who have lost a loved one. Held at Eagle Lake Ronald McDonald Camp, children learn how to deal with their grief in healthy ways. This camp is free for children ages 8-18 who have had a close friend or family member die within the last two years. Children have an opportunity to stay in cabins, make crafts, swim, play games, learn archery and hike.

New 2012
• Rideout Memorial Hospital and Specialists On Call now delivering 24/7 Emergency telepsychiatry service in California. Nation’s leading provider of Clinical Telemedicine Services helps Rideout Memorial Hospital with emergency psychiatric patients

Senior Services
Summary: Identified need for seniors to access medical information and screenings, transportation, adult day care and home health

• FRHG continues to support the Vial of Life Program
• FRHG participates in local Senior Health Fairs and provides free health screenings and healthcare information wherever and whenever possible
• FRHG provides a “Community Resources for Seniors” handbook to senior citizens
• FRHG continues a licensed Skilled Nursing & Rehabilitation facility, The Fountains; two Assisted Living facilities, The Gardens, Alzheimer’s and Dementia facility that includes an Adult Day Care Center and the Courtyard.

Perinatal Services
Summary: Identified the need for perinatal outreach education and services for all pregnant women in our community

• FRHG offers free perinatal classes, which include:
  - Childbirth Preparation: Signs of labor what to expect at the hospital, labor variations, comfort measures, breast feeding, pain relief options and cesarean birth
  - Lifesaver Baby: Parents are instructed in infant CPR and choking
  - Maternity Tours: Tours of the Perinatal Department
  - Breastfeeding: Education on how to, and why it is important
• The Sweet Success program began in February 2007 at Fremont Medical Center. Sweet Success is a diabetes-in-pregnancy program that is run by our own staff, but is supported and evaluated by the Department of Health Services. There are typically 45-50 women enrolled in the program annually and the numbers continue to increase

Outreach and Information/Education
Summary: The Community Action Committee identified a need to continually provide information on what health care services are available locally, how to access them and education on basic health care.

• FRHG supports the Trauma Intervention Program to train local volunteers working with traumatized victims
• FRHG continues to support help with identifying students in the school setting who may need to be evaluated for Marfan Syndrome and other clinical disorders
• FRHG continues to provide translation of vital written material into Spanish, Punjabi and Hmong languages, including drug-testing consent, home care consent, information for women on caring for their newborn, breast self exams and mammography
• FRHG hosts Bless Your Heart Fair/Walk each February
• FRHG hosts DASH for Diabetes each November, an educational event to encourage exercise and good health for Diabetics
• FRHG’s Teen Leadership Council (TLC): Thirty-six area high school students from six surrounding High Schools are recruited to attend the TLC designed to engage young adults who have demonstrated outstanding leadership skills and a strong desire to make a difference in our community and healthcare. Members attend monthly meetings, participate in seasonal activities, act as Foundation liaisons for their schools, job-shadow healthcare professionals, participate in philanthropic activities and health care events

Community Health Education
FRHG participates in community events and offers healthcare educational materials, free health screenings and healthcare professionals to answer questions based on their area of expertise. Participation included activities at the many local community events, speaking engagements, featuring health care professionals at the local Rotary clubs, senior citizens clubs and organizations (DOLS, SIRS), Soroptimist, Chamber of Commerce Business Connection, Home Health and Leisure Expo at the Yuba-Sutter Mall, Senior Fairs and as guests on local radio talk shows throughout FY 2011/2012.

FY 2011/2012 Community Health Education Classes (free to the community):
— Heart Walk/Heart Fair – Free screenings and Heart Health information
— Childbirth Preparation
— Maternity Dept. Tours
— Lifesaver Baby
— Clean Break – Smoking Cessation
— Breastfeeding, How to and Why to
— WeCare Peer Navigator Program – Fremont-Rideout Cancer Center
— Colorectal Cancer – Free Screening Kits, tests
— You Can Survive Alone – Designed to assist a surviving spouse/partner
— Cancer Survivor Party – Highlights and celebrates local cancer survivors
— Wellness Classes designed for individuals with, or recovering from, cancer
— Advances in Cardiac Surgery - Patrick Griffith, MD, Cardiothoracic Surgeon
— Your Amazing Heart - George Broder, MD, FACC, FAHA
— Aortic Stent Grafts - Andrew Macbeth, MD, Vascular Surgeon
— Women’s Health - Jay Sohal, MD, OB/GYN
— Men's Health - Lionel Foster, MD, Urologist
— Alzheimer’s Assn and Del Oro Caregiver Resource - Caregiver Workshop
— Managing Your Diabetes - Vineet Gupta, MD
— Diabetes and You - Jan Harrison-Beeler, RN, CDE
— Heart Fair - Cardiology Screenings

• FRHG offers free (CHE) perinatal classes, which include:
  Childbirth Preparation: Signs of labor, what to expect at the hospital, labor variations, comfort measures, breast feeding, pain relief options and cesarean birth; Early Pregnancy: Normal discomforts of pregnancy, comfort measures, body changes and nutrition; Lifesaver Baby: Parents instructed in infant CPR and choking; and Maternity Tours: Bi-monthly tours of the Perinatal Department

FRHG offers the following (CHE) outreach classes and support groups:
— Tobacco Cessation Classes: A free four-session series entitled Clean Break is offered monthly for tobacco users to learn behavior modification tools to effectively maintain a tobacco-free lifestyle
— Outpatient Cardiac Rehabilitation: A three-month monitored exercise and formal education program for a patient's recovery from coronary illness
— Support groups: FRHG provides meeting rooms for the following support groups: Grief Support Groups sponsored by Fremont-Rideout Hospice; Yuba-Sutter Children’s Type 1 Diabetes Support Group and Cancer Support Groups; TOPs (Take Pounds Off)
— Service Organizations: FRHG provides meeting rooms for the following service organizations and educators: Kiwanis, United Way, Yuba Community College, American Cancer Society, American Red Cross, Yuba Sutter Chamber of Commerce, Family Soup, LEAD Yuba-Sutter, Valley Quilt Guild, Fremont Medical Center and Rideout Memorial Hospital Auxiliary meetings

Disaster Preparedness
Disaster Preparedness, July 2011-June 2012

October 21, 2011 – Code Yellow Potential Bomb Threat occurred in the ER, wherein an unidentified male entered the ER through ambulance doors and set a purse on the nurses' station counter and refused to look at staff or answer their questions. He then quickly exited through the ambulance doors and pedals quickly away on a bicycle. Activation of Code Yellow was then implemented.

November 5, 2011 – Equipment Set Up Drill was held for set up of disaster equipment at Fremont Medical Center. Disaster supplies are contained in 3 disaster trailers located at the I street FRHG parking lot in Marysville. One truck is available at FRHG Facilities Department for pulling trailers. A list of contents in the trailers has been developed. All equipment was set up, some of which included decon tents, heaters, 6 medical surge tents (which each fits approximately 12 patient cots. The team set up the equipment in order to see what equipment is working, what is needed, etc. An action/exercise report was written on the drill.

November 17, 2011 – California Statewide Tabletop Exercise through FEMA. The situation was the disruption in public water service.

May 21, 2012 – Organic Phosphate Drill was held by Bi-County ambulance and FRHG participated in. Two members of the HERT Team attended disaster training in Anniston, Alabama , which provided healthcare personnel with basic training in healthcare emergency management. Three employees became certified instructors for HERT/Disaster Preparedness.

During summer 2012 there was six community members who were exposed to organic phosphates at separate times and they all went through the decontamination process successfully.

There are now 13 staff members at FRHG who are Nationally Certified Pro-Board Responders!
Comprehensive Benefits for the Community
As a leader in providing and identifying health services for the community, FRHG’s work extends throughout the Yuba-Sutter communities, in some cases corroboratively, to ensure accessible, affordable, quality health care.

Charity Care and Un-reimbursed Care, fiscal 2011-2012
FRHG provided $26,004,958 in charity care and un-reimbursed hospital care to patients at Fremont Medical Center and Rideout Memorial Hospital.

Medicare Payment Shortfalls
The total of government program costs provided was $14,400,632.

Community Benefits
RH provided $258,359 in community benefits and services.

Other Benefits for Under Served Populations
— Health and Community Services Directory
— Translations: FRHG provided translation services for vital written material into Spanish, Punjabi and Hmong languages, including drug-testing consent, home care consent, caring for newborns, breast self exams and mammography
— FRHG provided $2,345,491 for the On-Call Physician Program and $3,064,117 for the Intensivist/Hospitalist Program, and $1,600,400 for the Surgicalist Program. These programs provide physicians (inpatient) care for Emergency Room patients who have no physician and are indigent or on Medi-Cal.

Other Benefits for the Greater Community

SART Program
FRHG provides assistance to the Yuba-Sutter Sexual Assault Response Team (SART) for equipment and training to help women and children of assault crimes. FRHG collaborated with law enforcement and Women’s Advocacy Groups to establish in May 1996 the Yuba Sutter Sexual Assault Response Team.

TIP Program
FRHG provided support to train volunteers for a Trauma Intervention Program (TIP). This program has more than 25 local citizens who provide comfort and support to those in distress.

Community Health Education
FRHG funded $38,156 for a comprehensive Community Health Education Program, providing health care related classes free to the public.

Community Organizations
FRHG provided $28,335 in financial support and additional in-kind support to other organizations dedicated to improving the health of the community. Some of the organizations are listed as follows:

Community Support FY 2011/2012 includes:
- 285-CHP Squad Club Widows and Orphans Fund
- Active 20/30 Club
- American Cancer Society
- American Red Cross
- Autism Speaks
- Beale Liaison Group
- Bear River Renaissance Partnership
- Calif State Pipe Trades Scholarship Foundation
- Calvary Christian Center: Bandaids & SaniWipes for Mission
- Casa de Esperanza
- County of Yuba Sponsor-Perspectives luncheon
- Family SOUP
- FREED
- Friends of YC Parks & Recreation
- Gold Country Bank – Kids Zone for Holiday Stroll
- Gold Country Youth Benefit Education Foundation
- Jacques Dance Studio
- Kiwanis Club of Marysville
Education and Training: Medical Staff Education
Fremont-Rideout Health Group challenges itself to be a catalyst, advocate for, and a provider of education that promotes change, development and improvement.

Our CME program sees its purpose as providing high quality, evidence-based educational opportunities that are designed to advance physician competence, enhance practice performance, promote patient safety and wherever possible, improve patient outcomes in the populations served by our physicians and healthcare providers.

We seek to serve not only the educational needs of healthcare professionals with privileges at Fremont-Rideout Health Group but the needs of other local and regional providers as well.

As an acute-care facility, our educational activities include department-specific and specialty-specific conferences and symposia. These events take the form of live courses and live regularly scheduled series. The educational design, instructional method and learning format for each event is chosen to best serve the educational needs and learning objectives of the planned educational activity. Methods for each activity will depend upon the identified need. They will include but not be limited to didactic lectures, workshops and panel discussions which include attendee interaction and case presentations.

Included among our educational offerings are updates in clinical medicine and basic scientific research and reviews of current or best practice recommendations for clinical care.

We expect improved application in our approach to clinical problems and newly acquired strategies, effective use of targeted skills with improvement or a favorable impact on patient outcomes.

2011
August 9  Jagraj S. Nijjar, MD – Infectious Disease Specialist – Antibiotic Update
September 13  James E. Turner, MD – Medically Induced Hypothermia
September 21  Gustavo Sosa, MD – Neonatologist, Sutter Memorial Hospital - Pulmonary Hypertension
September 23  Elinore McCance-Katz, MD, Ph.D., - Prescription Drug Abuse Summit
October 4  Jennifer Yang, MD – Management of Vesicoureteral Reflux
October 19  Jorge Rosas, MD – Apnea
October 27  Richard Atkinson, MD - Early Stroke Management
November 1  Eric Hassid, MD, Psychiatrist, Neurologist – Pain Management
November 16  William Gilbert, MD – Management of Infections in OB/GYN
December 6  Davinder Dhillon, MD – Managing Acute Sepsis

2012
January 17th  Terri Poehland, RN, CPHQ, Director of Quality Management – TJC Survey Results –
February 14th  Ashley Christensen, DPT – Physical Therapy for Pelvic Floor Disorders –
February 23  Richard Atkinson, MD – Stroke Update 2012
March 13th  Bruce Hilger, MD – Vaginal Bleeding, Menopausal and non-menopausal (fertile women)
March  Moderate Sedation Video and Test (available in the physician Portal, timeframe for completion was 2/15/12 -3/9/12)
March 23  Jasbir Kang, MD, Program Director - Diabetes Symposium
April 10  Larry Ozaran, MD – Internet Security
May 2 & May 3  Tom Peterson, MD - Tobacco Use and Secondhand Smoke Exposure – “Ask, Advise and Refer” Protocol
May 16  William Gilbert, MD – Rare Obstetric Emergencies: How to Diagnose and Treat
June 12  Reginald Low, MD – UC Davis – TAVR (Transcatheter Aortic Valve Replacement)
June 23  Daniel Brink, MD, Program Director - Primary Care Update

Staff Education
FRHG provides ongoing training on site for its nursing and clinical staff as well as various non-clinical staff. On-site education for FRHG employees is provided free of charge to the employee. In addition, FRHG pays for staff attendance at approved training from outside sources when appropriate.

Non-Quantifiable Benefits
FRHG Auxiliary provided more than 3,800 hours of volunteer service at Fremont Medical Center and Rideout Memorial Hospital in Fiscal Year 2011-2012 and can expect the same level of volunteerism next fiscal year. Both auxiliaries are dedicated to rendering service to the hospitals, patients and families. Since 1959, the Fremont Medical Center Auxiliary members have served more than 578,000 volunteer hours, and the Rideout Memorial Hospital Auxiliary members have served more than 735,000 volunteer hours since 1958. The Auxiliary’s various fundraising efforts throughout the year enable them to fund scholarship awards and grant wishes to several FRHG departments for equipment and projects.

- FRHG provides leadership representation to the following groups and organizations:
  - American Cancer Society
  - American Society of Healthcare Human Resources Association (ASHHRA
  - Beale Air Force Base Community Council
  - Bridging the Gap
  - Healthy Kids Health Board
  - Healthcare Human Resources Management Association of California (HHRMAC - Board - Membership Chair)
  - Pink October / Breast Cancer Awareness
  - Rotary, Kiwanis and Soroptomist Civic Clubs
  - Society for Human Resource Management (SHRM)
  - Sutter County Domestic Violence & Child Abuse Prevention Council
  - Teen Leadership Council
  - United Way
  - Sutter County Chronic Disease Prevention
  - Yuba City Downtown Business Association
  - Yuba Sutter Chamber of Commerce
  - Yuba Sutter Economic Development Corporation
  - Yuba Sutter Legal Center for Seniors
  - Yuba County Children & Families Commission
  - Yuba-Sutter Homeless Consortium
  - Yuba City Unified School District Wellness Committee
  - Yuba City Unified School District Educational Advisory Committee
  - Yuba-Sutter Healthcare Council
  - Fremont-Rideout Teen Leadership Council
  - Yuba-Sutter Middle School, Avid Programs

- FRHG participates in the Marysville Joint Unified School District's Senior/Mentoring Project. This participation allows high school students to talk to and shadow hospital staff, as an introduction to health care careers
• FRHG also participates in the Tri-County Regional Occupational Program in Health Care for high school students, allowing students work-site experience
• A variety of FRHG employees function as volunteers at local schools, as well as participate as guest speakers or lecturers at local schools about health topics and career opportunities
• FRHG provides speakers in the GAIN Program, the Job Training and Partnership Act and the Tri-County Regional Occupational Program in Health Care to stimulate business and economic development
• The Fremont-Rideout Teen Leadership Council began in March 2009. More than 30 High School students from eight local High Schools participate in the program where they job shadow, learn about health care, participate in philanthropic events and more
• FRHG hosts a tour for the Sutter County Business Workforce Program, Services for individuals with disabilities. 8th Grade Students from Central Gaither School learn about careers in housekeeping, materials management and nutritional services
PURPOSE
   The purpose of this policy is to define patient eligibility for Financial Assistance, and to provide administrative guidelines for the identification and classification of patient accounts as Financial Assistance.
   
   This policy identifies circumstances under which Fremont-Rideout Health Group will extend assistance to patients whose financial status makes it impractical or impossible to pay for necessary and/or catastrophic costs of medical services. Non-elective services and procedures offered by the Hospital will be eligible for Financial Assistance consideration. Evaluation of the necessity for medical treatment of any patient will be based upon the clinical judgment of the patient's personal physician or the Emergency Department staff physician. Where an emergency medical condition exists, the Hospital will address financial requirements only after urgent medical evaluation, treatment and stabilization have been rendered. In any event, stabilization treatment will not be delayed when requesting financial information from the patient.
   
   Confidentiality of information and individual dignity will be maintained for all that seek charitable services. The handling of personal health information will meet all HIPAA requirements.

Definition:
Financial Assistance is defined as: Healthcare services provided at no charge or at a reduced charge to patients who do not have or cannot obtain adequate financial resources to pay for their services. A patient requiring Financial Assistance is a patient who demonstrates through financial screening and financial means testing, an inability to pay for hospital services versus a patient who demonstrates the ability to pay but is not willing to pay.

PROCEDURES
At the time of service all uninsured or underinsured patients will be provided with a statement of the Hospital's discounting and Financial Assistance Policies. They will also be provided, upon request, with a copy of a Medi-Cal/CMSP, Healthy Families, and any other applications for third party coverage. As a last resort, a patient should be financially screened for the Financial Assistance Program.

Financial Counselors, Credit & Collection Representatives, and/or external collection agency employees will perform Financial Assistance screening and means testing. A patient may be granted either: full, partial, or no financial relief depending upon their financial situation and account balance.

Credit & Collection Representatives will screen patients who are covered by private insurance, Medi-Cal or Medicare after the time of service if the patient reports that he/she is unable to pay the account balance resulting from deductibles, co-pays, or non-covered services.

At the time the patient is provided with an application for Financial Assistance (FA Application), it is important to advise them of the additional attachments required (Pay stub(s), Tax Return, Medi-Cal/CMSP denial, etc.- (FA Required Info Letter)

All potentially eligible patients, whose balance exceeds $5,000, will be required to apply for assistance through State, County and other programs prior to application of Financial Assistance discounts. Other accounts may require proof of denial at the discretion of Fremont-Rideout Health Group.

Patients should be informed that it is their responsibility to properly complete all applications and return them to the appropriate agency and/or department for follow-up. Medi-Cal/CMSP eligibility packets may be mailed directly to the County office.

Enter that the information was provided to the patient into the Hospital Information System, then: “Financial Assistance application forwarded to Patient Financial Services for date(s) of service.

If information is incomplete, the patient will be sent a letter (FA Missing Info Letter).

Once the application is completed, the Credit & Collections staff prepares the Financial Assistance worksheet (FA Worksheet/Matrix) and will forward to the appropriate level of management for review and approval as noted on the Write-Off Matrix. (See text box on following page)

If an application is approved, the Patient Financial Services Supervisor will obtain authorization for account adjustment from the Director of Patient Financial Services. Adjustments that exceed $10,000 must be approved by the Chief Financial Officer. The financial screening and means test will be valid for up to three full calendar months beginning the first day of the month following approval. Patients are required to report any change in their financial information within 10 days of the change. A copy of the approved application will be filed and kept on file.

Only a Family Unit's gross income and 50% of any monetary assets over $10,000, excluding retirement funds, will be considered when qualifying patients for Financial Assistance. In addition, any person(s) under the age of 21 may be considered a minor under Fremont-Rideout Health Group's Financial Assistance Policy.

For the purposes of Financial Assistance, once a patient has qualified by the above means testing, payment will be limited to no greater than the expected amount from Medicare (including outliers) for all Inpatient services. Furthermore, no patient attempting to qualify for Financial Assistance will not have collection activity reported on their credit report prior to 150 days from initial billing or while the patient is still in an actively qualifying period. All Bad Debt referrals will commence on the authority of the Director of Patient Financial Services or the Chief Financial Officer.
The patient's signature will certify that information contained in the documents is accurate and complete. The Hospital may halt the application process at any time that the patient and/or family becomes uncooperative, refuses to supply essential documents, or fraudulent activity is suspected.

If an application is approved for full or partial Financial Assistance, a letter of notification (FA Approval Letter) will be sent to the patient. Approvals will be documented in the Hospital Information System and the appropriate adjustment performed. A copy of the application will be filed and kept on file. **The Hospital reserves the right to negotiate extended payment terms with patients, interest free, depending on the balance of the account and length of the repayment period.**

If an application is denied, a letter of denial (FA Denial Letter) will be sent to the patient. Denied applications will be documented in the Hospital Information System. A copy of the denied application will be filed and kept on file.

If any patient wishes to dispute the outcome of their Financial Assistance screening, they may do so in writing within 30 calendar days of their written notification. All disputes will be reviewed by the Patient Financial Services Supervisor and/or the Director of Patient Financial Services.

All written requests may be submitted to: Fremont-Rideout Health Group – Patient Financial Services, Financial Assistance Reconsideration, 319 G Street, Marysville, CA 95901

Collection activity will be deferred for patients regardless of the number of days outstanding on the account as long as the patient continues to cooperate in the completion of documentation of Financial Assistance eligibility or the application for government programs. However, many patients eligible for Financial Assistance or government programs show no interest in completing the process. Therefore, once patient cooperation ceases, collection activity within existing billing and collection policies and procedures will commence at the discretion of the Hospital.

Collection activity will cease when a patient is declared eligible for Financial Assistance or qualifies for government programs and the Hospital is within timely filing guidelines as determined by the payor.

All outside agencies used by the Hospital comply with State regulations, such as AB774, regarding collection activity.

The Financial Assistance Policy will be communicated to hospital patients through posted signs in the hospital admitting and Patient Financial Services departments as well as through billing statement messages and Financial Counseling brochures provided to patients.

Amounts previously paid to the Hospital by the patient, guarantor, or from any payor will not be refunded in the event of subsequent approval for Financial Assistance.

If a patient's hospitalization spans more than one calendar month and Medi-Cal or CMSP was granted for one of those months, and the other month is denied due to non-retroactive coverage; then the denied month's charges should be treated as Financial Assistance since the patient met the guidelines for Medi-Cal or CMSP. No formal application will be required.

There is a category of patients who qualify for Medi-Cal, but do not receive payment for their entire stay. Under the Financial Assistance Policy definition, these patients are eligible for Financial Assistance write-off. In addition, the hospital specifically includes as Financial Assistance the charges related to denied stays, denied days of care and non-covered services. These Treatment Authorization Request (TAR) denials and any lack of payment for non-covered services provided to Medi-Cal patients are to be classified as Financial Assistance. These patients are receiving services for which they have no ability to pay.

Patients with Medicare as a primary payor, and with Medi-Cal coverage for their co-insurance/deductibles, for which Medi-Cal does not make payment, and Medicare does not ultimately provide bad debt reimbursement will also be included as Financial Assistance. These medically indigent patients are receiving services for which a portion of the resulting bill is not being reimbursed.

If a patient can be adequately documented as 'homeless' or as 'transient'; then further financial screening and income verification is not necessary. Patients without a payment source may be classified as Financial Assistance if they do not have a mailing address, residence or insurance. Consideration must also be given to classifying emergency room only patients who do not provide adequate information as to their financial status.

If a patient can be adequately documented as unemployed (unemployment verified by patient), bankrupt, or deceased and without assets, the account will be determined to qualify for Financial Assistance.

Patients who are sent to an outside collection agency and are then found to have no resources, no current and correct contact information, or are otherwise deemed uncollectible shall be written off as Financial Assistance for up to one prior year by the Director of Patient Financial Services or the appropriate Administrative representative or their designee without a formal Financial Assistance application.

Financial Assistance discounts may also be granted for patients who receive either Federal or State assistance who cannot pay for share of cost amounts in extenuating circumstances or in instances of catastrophic allowance. For the purpose of this policy, "catastrophic allowance" will be defined as: When any account or combination of account balances, exceed more than one (1) month's family gross income. Catastrophic allowances will require validation by prior year's tax return or the three (3) most recent pay stubs and will be discounted on a tiered basis based on the number of months' gross income that the account balance(s) exceed (See Financial Assistance Matrix).

Fremont-Rideout Health Group uses the federal poverty level ceilings, and will consider up to 350% of those poverty levels on a tiered basis for eligibility determination (See Financial Assistance Matrix). Prompt pay discounts or extended payment terms for those patients receiving partial assistance may be offered at the discretion of the Hospital.

Accounts being written off either in whole or in part as Financial Assistance require complete documentation of the circumstances, including all necessary forms and copies of required documents. In addition the appropriate Hospital employee, determined by approval level, must approve all Financial Assistance.