

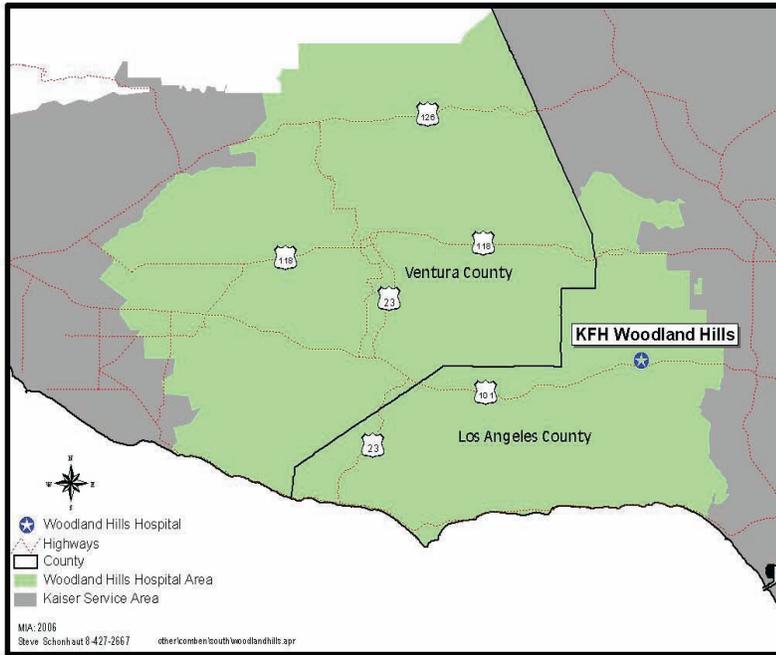
WOODLAND HILLS

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KAISER FOUNDATION HOSPITAL (KFH)-WOODLAND HILLS

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 Woodland Hills, CA 91367
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The KFH-Woodland Hills service area includes the San Fernando Valley and portions of the central and west valley and Ventura County, including the communities of Agoura, Calabasas, Camarillo, Canoga Park, Chatsworth, Encino, Fillmore, Moorpark, Newbury Park, Northridge, Oxnard, Porter Ranch, Reseda, Santa Paula, Sherman Oaks (west), Simi Valley, Tarzana, Thousand Oaks, Topanga, Ventura, Winnetka, and Woodland Hills.

COMMUNITY SNAPSHOT (2010 Community Health Needs Assessment for KFH-Woodland Hills)

Total population:	1,890,622	Latino:	41%
Median age:	35	Caucasian:	40%
Median household income:	\$42,500	Asian and Pacific Islander:	11%
Percentage living in poverty:	17%	Other:	4%
Percentage uninsured:	19.5%	African American:	4%

KEY FACILITY STATISTICS

Year opened:	1986	Total licensed beds:	262
KFH full-time equivalent personnel:	977	Inpatient days:	50,690
KFHP members in KFH service area:	205,919	Emergency room visits:	38,724

KEY LEADERSHIP AT KFH-WOODLAND HILLS

Cathy Casas	Executive Director
Richard Trogman	Chief Operating Officer
Marilou Cheung	Area Finance Officer
Shirley Suda, MD	Area Medical Director
Gail Knight	Medical Group Administrator
Susan Ng	Public Affairs Director
Jennifer Lopez	Community Benefit Manager

THE 2010 COMMUNITY HEALTH NEEDS ASSESSMENT SUMMARY AND FINDINGS

2010 COMMUNITY HEALTH NEEDS ASSESSMENT (CHNA) SUMMARY

KFH-Woodland Hills conducted the 2010 CHNA in collaboration with members of Valley Care Community Consortium (VCCC). VCCC's vision statement is the motivating force behind all joint projects and program development: "All residents of the San Fernando and Santa Clarita valleys will have access to comprehensive and coordinated health care to allow them to live and work as active participants in their communities." KFH-Woodland Hills supported the CHNA process by participating in surveys and planning meetings. *Assessing the Community's Needs: A Triennial Report on San Fernando and Santa Clarita Valleys* was published in June 2010. VCCC aims to provide organizations, institutions, social service agencies, government offices, and individual communities with an overview of the San Fernando and Santa Clarita valleys that make up Service Planning Area (SPA) 2. The CHNA findings serve as a chronology and index of health needs and issues prevalent among population groups, including children 0 to 17, adults 18 to 64, seniors 65 and older, poor/low income, and medically indigent/uninsured. Similar to the previous CHNA studies, the intent of the project focused on collecting both primary and secondary data that were relevant to the purpose of the investigation.

KEY FINDINGS FROM THE 2010 CHNA

Based on a review of the primary and secondary data collected, the key findings for the service area are as follows:

Health and Preventive Health:

- Affordable and accessible mental health services and prevention programs for low-income, homeless, and undocumented individuals and families are needed.
- More training is needed for workers to be culturally sensitive and language appropriate.
- Chronic disease prevention and intervention at an early age and affordable or low-cost medication for individuals with chronic disease(s) are needs.
- Early childhood dental prevention programs and low-cost dental services for the uninsured and disadvantaged are needed.

Mental Health:

- Attention-deficit/hyperactivity disorder was the number-one diagnosis for children; major depressive disorders and schizophrenia were the two leading diagnoses for adults and seniors.

Advocacy:

- Advocacy for public policy change for universal health coverage and more clinics accepting subsidized health insurance were identified as needs.

Hospital Admissions:

- For children 0 to 17 and adults 18 to 64, the number-one reason for hospital admissions was pregnancy and childbirth-related diagnoses; the number-one reason for hospital admissions for seniors 60 and older was heart failure.

Housing:

- Housing financial assistance programs for low- to middle-income families and seniors, and sufficient transitional housing for the homeless, reentry populations, and substance abusers are needed.

PRIORITIZED NEEDS IDENTIFIED FOR THE KFH-WOODLAND HILLS SERVICE AREA

1. Access to health insurance coverage and health care services
2. Healthy eating and active living
3. Develop and disseminate knowledge

2011 YEAR-END RESULTS

PRIORITIZED NEED I: ACCESS TO HEALTH INSURANCE COVERAGE AND HEALTH CARE SERVICES

Nearly 2 million Californians lost their health insurance in 2008 and 2009, years characterized by a deep recession and massive layoffs, bringing the total number of uninsured in the state to more than 8 million, according to estimates from the UCLA Center for Health Policy Research, which stressed that uninsured rates may have risen further since the data were collected in 2007. Los Angeles County legislative districts have the highest rates of uninsured residents 0 to 64. In 2009, SPA 2 had a total of 405,348 uninsured residents, including 382,387 in San Fernando Valley. Among the uninsured population in SPA 2, 86% was 18 to 64, 13% was under 18, and 1% was 65 years and older. More than 383,000 residents enrolled in Medi-Cal, and 221,000 residents enrolled in Medicare. According to the Department of Public Social Services (DPSS) 2009 data, 1,389,211 Medi-Cal cases benefited 3,015,953 persons in the San Fernando Valley. In 2009, about 2 million residents in Los Angeles County were eligible for Medi-Cal; 55% were female and 45% were male. Among all SPAs in Los Angeles County, SPA 2 had the highest percentage (18%) of Medi-Cal eligible individuals.

2011 GOALS

1. Increase the number of low-income people who enroll in or maintain health care coverage.
2. Increase access to health care services for low-income and uninsured individuals.

2011 STRATEGIES

1. Participate in KFHP/H Charitable Health Coverage Programs (STEPS and Kaiser Permanente Child Health Plan); participate in government programs (Medi-Cal and Health Families); and enroll individuals eligible for these products.
2. Provide charity care through the Medical Financial Assistance (MFA) program and maximize efficiencies.
3. Provide grant funding and in-kind resources to organizations that provide and/or support primary care, specialty care, and preventive care services in underserved areas.

TARGET POPULATION

Uninsured and underinsured adults and children.

COMMUNITY PARTNERS

Community partners include Grandparents as Parents, Inc., Conejo Free Clinic, Tarzana Treatment Center, ONEgeneration, Center for the Partially Sighted, Camarillo Hospice Corporation, Ventura County AIDS Partnership (United Way), and Westminster Free Clinic.

2011 YEAR-END RESULTS

- Tarzana Treatment Center received \$20,000 to expand its ability to provide quality medical care, including clinical visits, assessments, testing/lab work, medications, medical supplies, and recommended screenings to 22 new patients who have been diagnosed with hypertension and/or diabetes and have no access to primary care. In addition, the clinic provided 88 new primary care visits at a 27% higher rate due to the acuity of patients who had gone several months without their medication because of lack of insurance.
- Center for the Partially Sighted received \$20,000 to provide rehabilitation for people with low vision, including optometric care, computer and assistive technology, tools, techniques, training, and counseling to remain active in the workforce and independent in society. The center conducted 74 low-vision evaluations, prescribed 54 low-vision aids with training, and administered 41 rehabilitation sessions and 42 psychosocial assessments.
- Camarillo Hospice received \$15,000 to expand its senior patient and family counseling support services to 78 patient care volunteers and 23 bereavement volunteers providing in-home respite 2–4 hours a week

- ONEgeneration received \$20,000 to provide comprehensive case management, including in-home assessments and modifications to help 10 medically fragile, low-income seniors live independently.
- Northeast Valley Health Corporation received \$6,500 to provide case management to six patients who underwent free colonoscopies administered by KFH-Woodland Hills's Chief Gastroenterologist as part of Surgery Day. Eye surgery that was initiated during last year's Surgery Day with Westminster Free Clinic was also completed this year.
- In March, physicians from KFH-Woodland Hills' Family Medicine Residency Program were honored with an Outstanding Collaborative Award for providing care to underinsured and uninsured patients at Meet Each Need with Dignity (MEND), the San Fernando Valley's largest and most comprehensive nonprofit organization. This year the residency program expanded to the Conejo Free Clinic in Thousand Oaks.
- Kaiser Permanente Southern California Region funded quality improvement (QI) projects for safety net organizations to build stronger programs and infrastructure that improve service for patient populations at risk of racial and ethnic health disparities. The 2011 QI Initiative for public hospitals focused on the 1115 Medicaid waiver's Delivery System Reform Incentive Pool (DSRIP). The goal of the DSRIP is to support the efforts of California's public hospitals in meaningfully enhancing the quality of care and the health of patients and families they serve. Ventura County Medical Center received a \$250,000 grant over two years (\$125,000 in 2011) to form organization-wide QI task forces for each focus area that will implement training, hiring, and purchasing of equipment, including a DSRIP tracking tool.
- In 2007, Kaiser Permanente Southern California Region initiated funding for a Specialty Care Initiative (SCI) to address the problem of specialty care for the uninsured and underinsured through a number of community-based coalitions in Southern California. The SCI is a statewide effort that provides the means for a community to examine, coordinate, spread, and deepen community-based solutions to the challenges of specialty care access and demand. In 2011, a grant for Valley Care Community Consortium's C-SNAP will improve access to specialty care services through several efforts, including a physician training model, automated appointment phone system, and a volunteer specialty physicians network.

2012 GOALS UPDATE

The goals will remain unchanged for 2012.

2012 STRATEGIES UPDATE

The strategies will remain unchanged for 2012.

MONITORING PROGRESS OF 2012 STRATEGIES

KFH-Woodland Hills will continue to monitor progress made by community partners. Grantees are required to complete midyear progress interviews and video submission, year-end final reports, and expense reports on projects and services funded by KFH-Woodland Hills.

PRIORITIZED NEED II: HEALTHY EATING AND ACTIVE LIVING

In 2008, diabetes mellitus was the seventh leading cause of death in SPA 2 with 405 deaths, which calculates to 3.34% of all SPA 2 deaths. In 2004, 395 deaths in SPA 2 were due to diabetes mellitus. According to the 2010 CHNA, of the total population, the total number of estimated cases for hypertension in the San Fernando Valley was 358,215, the number of cancer cases was 52,893, the number of asthma cases was 142,951, the number of stroke cases was 32,901, and the number of diabetes cases was 117,383. Food insecurity and job loss continue to be concerns during the economic downturn. According to the DPSS Caseload Characteristics Report for the quarter ending December 2009, 26,868 children under 5 were helped. During the same quarter, 44,381 youth 6 to 18 were also helped.

2011 GOAL

Partner with neighborhood groups, government entities, educational institutions, and other community-based organizations to create lasting policy and environmental changes that support healthy eating and physical activity.

2011 STRATEGIES

1. Advocacy efforts to develop and enact new public policy to support access to nutritious foods and physical activity.
2. Implementation of evidence-based interventions in organizations or communities that increase access to nutritious foods and physical activity.

TARGET POPULATION

Low-income children and adults who lack access to affordable nutritious food and safe physical activity environments.

COMMUNITY PARTNERS

Community partners include Boys & Girls Club of Santa Clara Valley, Boys & Girls Club of the West Valley, CSUN Foundation, Shane's Inspiration, and Ventura Climate Care Options Organized Locally (VCCool).

2011 YEAR-END RESULTS

- Boys & Girls Club of the West Valley received \$10,000 to improve access to healthy food by creating a Kids Café run by youth who prepare healthy food for the 110 young people enrolled in the program. New kitchen equipment improved the capacity for youth tasting and experimentation in creating a cookbook with healthy recipes that club youth approved.
- VCCool received \$4,750 to increase affordable access to bicycles while teaching repair and safety skills, completing certification from the League of American Bicyclists. In addition, VCCool recruited volunteers to build its capacity in governance, marketing, web design, female mechanics, and bilingual radio outreach. A mentoring program was also developed for hard-to-reach youth to earn bikes while learning how to refurbish them. VCCool members served on the Citizen Advisory Committee for the Ventura County Transportation Commission, advocated before the SCAG Regional Transportation Plan, and won a \$500,000 federal Safe Routes to School grant.
- Shane's Inspiration received \$10,000 to increase social inclusion at its universally accessible programs for 430 children in 29 schools.
- Kaiser Permanente Southern California Region's HEAL (Healthy Eating Active Living) Zone initiative is designed to target a small, clearly defined community of 10,000 to 20,000 residents who have high rates of obesity and other health disparities. The initiative helps community stakeholders develop and implement evidence-based and prevention-oriented environmental strategies that are focused on reducing obesity rates and creating opportunities for residents to engage in healthy eating and active living. In the KFH-Woodland Hills service area, the County of Ventura Public Health received a \$100,000 grant.
- Kaiser Permanente Southern California Region's HEAL Partnership Grants are an extension of the HEAL Zone initiative. Like the HEAL Zones, Partnership Grants are a targeted investment in communities of 10,000 to 20,000 residents who have a high prevalence in obesity and other health disparities. The grants support projects led by community stakeholders that focus on improving community environments (e.g., parks, stores, and schools) to increase consumption of healthy food and beverages, decrease calorie consumption, and increase physical activity to combat obesity. In the KFH-Woodland Hills service area, Antelope Valley Partners for Health received \$150,000 over two years (\$75,000 in 2011) to improve access to healthy food and physical activity opportunities.
- Southern California Region's Healthy Eating in Hard Times (HEHT) initiative helps to ensure that eligible low-income families are participating in federal nutrition programs such as food stamps and free school meals, and that food bank/pantry patrons can obtain healthy foods such as fruits and vegetables from emergency food sources. In 2011, HEHT doubled its investment in food banks from the previous year. Food banks across the region received grants to acquire produce and distribute it to individuals in need, provide nutrition education, conduct food stamp (CalFresh) outreach, and make infrastructural improvements such as the repair or purchase of cold storage units and the purchase of food bins and produce. In the service area, Food Share received a \$60,000 grant.
- Kaiser Permanente Southern California Region's Operation Splash initiative provided grants to support swimming lessons and water safety in underserved areas. Since Operation Splash started in 2006, the grants have provided 58,187 swim lessons to participants and 3,143 junior lifeguards. In 2011, the City of Ventura received \$30,000.

- Kaiser Permanente Southern California Region funded a number of statewide healthy eating and active living grants. In the service area, Central Coast Alliance United for a Sustainable Economy was granted \$25,000 over one year to support the Growing Ponder Project in Santa Paula, which trains local leaders to advocate for policies to improve access to healthy foods and develop, advocate, and implement a school food/wellness policy for Santa Paula's public schools.

2012 GOALS UPDATE

KFH-Woodland Hills will continue to partner with neighborhood groups, government entities, educational institutions, and other community-based organizations to create lasting policy and environmental changes that support healthy eating and physical activity. For 2012 the goals are:

1. Increase consumption of fresh fruits and vegetables.
2. Decrease calorie consumption (e.g., soda/sugar-sweetened beverages, portion size, snacking).
3. Increase physical activity in community settings (e.g., safe walking and biking routes, schools, after-school, parks and hiking trails, joint use agreements, work sites).

2012 STRATEGIES UPDATE

The strategies will remain unchanged for 2012.

MONITORING PROGRESS OF 2012 STRATEGIES

KFH-Woodland Hills will continue to monitor progress made by community partners. Grantees are required to complete midyear progress interviews and video submissions, year-end final reports, and expense reports on projects and services funded by KFH-Woodland Hills.

PRIORITIZED NEED III: DEVELOP AND DISSEMINATE KNOWLEDGE

In Los Angeles County, the percentage of those living above 200% of the federal poverty level (FPL) decreased over the years, though most of the population continues to live on incomes above 200% FPL. The unemployment rate in Los Angeles County jumped from 4.7% in 2006 to a high of 11.4% in 2009 due to the recession. In SPA 2, 10.64% of San Fernando Valley households (67,807) have income levels under \$15,000, approximately 34% (641,533) of the total population is still in school or too young to attend school, and approximately 8.20% (154,964) of the population has not graduated from high school.

2011 GOAL

Partner with safety net providers, educational institutions, workforce development agencies, and other community-based organizations to build a health care workforce for the future.

2011 STRATEGIES

1. Partner with safety net providers, educational institutions, workforce development agencies, and other community-based organizations to improve development, cultural competency, and medical technology.
2. Leverage existing Kaiser Permanente work force development programs including, but not limited to, Hippocrates Circle, Summer Youth, and Inroads.

TARGET POPULATION

Low-income youth and adults who seek to work in the health care industry.

COMMUNITY PARTNERS

Community partners include Mixteco Indigena Community Organizing Project, El Centrito Family Learning Center, Northeast Valley Health Corporation, and Ventura College Foundation.

2011 YEAR-END RESULTS

- El Centrito Family Learning Center received \$20,000 to increase the number of Oxnard Latino students who achieve higher education and address educational inequities in schools through seven parent advocate promotores who reach out to fellow parents twice a week in their homes in an effort to change the disparity that exists in this community around higher education.
- Ventura College Foundation received \$10,000 to increase the number of nurses within Ventura County that come from first-generation college students through the Promise Program, which currently has 1,400 students enrolled. The foundation has also instituted a student-run Welcome Center to help emerging students navigate the educational system.
- Mixteco Indigena Community Organizing Project received \$9,656 to expand the use and employment of 22 Mixteco interpreters who were farm workers through leadership development, skills training, and placement in six Ventura County agencies. Interpreters also volunteered for additional Palliative Care and Medical Terminology training and became members of the California Health Interpreters Association.
- Kaiser Permanente Southern California Region supported School Wellness grants to improve school nutrition programs. Occidental College's Urban & Environmental Policy Institute received \$125,000 to replicate its Farm to Preschool program, which trains preschool staff to establish vendor relationships with local farmers and to establish buying practices. Students and parents are introduced to nutrition education and cooking lessons in school curriculum. Advocacy on how to improve school food policy is included in parent workshops to influence early childhood eating habits that maintain a healthy weight and prevent obesity.
- Kaiser Permanente Southern California Region gave the United Way a \$90,000 grant to end homelessness in Los Angeles County through dissemination of critical research and implementation of instrumental systems change strategies. This grant will work toward making large-scale changes in ending homelessness rather than managing the problem by conducting a study on child homelessness while developing recommendations for key stakeholders and policy makers.
- KFH-Woodland Hills supported Hippocrates Circle, a program designed to increase the number of minority physicians, especially in underserved communities, by instilling in young people from underrepresented minority groups the awareness that a career in medicine, specifically as a physician, is possible. Through the collaborative efforts of school districts, medical schools, and Kaiser Permanente physicians and staff, Hippocrates Circle strengthens the self-esteem of young people and empowers them to pursue their goals through mentorship, education, and facilitated experience in Woodland Hills and Oxnard.

2012 GOAL UPDATE

The goal will remain unchanged for 2012.

2012 STRATEGIES UPDATE

The strategies will remain unchanged for 2012.

MONITORING PROGRESS OF 2012 STRATEGIES

KFH-Woodland Hills will continue to monitor progress made by community partners. Grantees are required to submit midyear progress reports, year-end final reports, and expense reports on projects and services funded by KFH-Woodland Hills.

Table 1

KAISER FOUNDATION HOSPITAL-WOODLAND HILLS

2011 Key Community Benefit Program Metrics

(For more information about these and other CB programs and services, please see pages 10–20 in the Introductory Chapters Section.)

Charity Care: Medical Financial Assistance Program recipients	3,468
Charity Care: Charitable Health Coverage Program – Kaiser Permanente Steps Plan members	240
Charity Care: Charitable Health Coverage Program – Kaiser Permanente Child Health Plan members	2,055
Medi-Cal managed care members	2,428
Healthy Families Program members	6,245
Community Surgery Day patients	6
Health Research projects (new, continuing, and completed)	12
Nursing Research projects (new, continuing, and completed)	7
Educational Theatre – number of performances and workshops	83
Educational Theatre – number of attendees (students and adults)	11,900
Graduate Medical Education – number of programs	3
Graduate Medical Education – number of affiliated and independent residents	34
Nurse practitioner and other nursing training and education beneficiaries	6
Deloras Jones nursing scholarship recipients	1
Other health professional training and education (non-MD) beneficiaries	14
Hippocrates Circle students	78
Summer Youth and INROADS programs participants	21
Number of 2011 grants and donations made at the local and regional levels ¹	101

¹The vast majority of regional grants impact three or more hospitals. As such, a single regional grant may be included in the “Number of 2011 grants and donations” count for multiple hospitals.

Table 2

KAISER FOUNDATION HOSPITAL-WOODLAND HILLS

COMMUNITY BENEFIT RESOURCES PROVIDED IN 2011

Medical Care Services for Vulnerable Populations	
Medi-Cal shortfall ¹	\$2,081,910
Healthy Families ²	2,058,475
Charity care: Charitable Health Coverage Programs ³	1,451,518
Charity care: Medical Financial Assistance Program ⁴	6,489,674
Grants and donations for medical services ⁵	693,969
Subtotal	\$12,775,546
Other Benefits for Vulnerable Populations	
Watts Counseling and Learning Center ⁶	\$0
Educational Outreach Program	0
Summer Youth and INROADS programs ⁷	59,170
Grants and donations for community-based programs ⁸	317,772
Community Benefit administration and operations ⁹	430,684
Subtotal	\$807,626
Benefits for the Broader Community¹⁰	
Community health education and promotion programs	\$57,221
Educational Theatre Programs	311,423
Facility, supplies, and equipment (in-kind donations) ¹¹	0
Community Giving Campaign administrative expenses	5,585
Grants and donations for the broader community ¹²	44,890
National board of directors fund	17,874
Subtotal	\$436,993
Health Research, Education, and Training	
Graduate Medical Education	\$1,312,822
Non-MD provider education and training programs ¹³	560,878
Grants and donations for the education of health care professionals ¹⁴	134,503
Health research	1,121,150
Continuing Medical Education	161
Grants and donations for evidence-based medicine ¹⁵	0
Subtotal	\$3,129,514
Total Community Benefits Provided	\$17,149,677

ENDNOTES

- ¹ Amount includes cost-based unreimbursed inpatient expenditures for Medi-Cal Managed Care members and Medi-Cal Fee-for-Service beneficiaries.
- ² Amount includes cost-based unreimbursed inpatient expenditures for Healthy Families members.
- ³ Amount includes cost-based unreimbursed inpatient expenditures for Steps Plan members and the Kaiser Permanente Child Health subsidy.
- ⁴ Amount includes cost-based unreimbursed care provided at this facility to patients who qualify for Charity Care: Medical Financial Assistance Program.
- ⁵ Figures reported in this section for grants and donations for medical care services consist of charitable contributions to community clinics and other safety net providers; community health partnerships and collaboratives; community health care coverage enrollment efforts; and specific health initiatives that address specialty care access, HIV/AIDS, childhood obesity, and so on. The amount reported reflects hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the percentage of Health Plan members.
- ⁶ Watts Counseling and Learning Center's service expenses are divided among three hospitals: KFH-Los Angeles, KFH-West Los Angeles, and KFH-Downey.
- ⁷ Figures reported in this section are hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the percentage of Health Plan members, or a related denominator such as the number of Summer Youth students hired.
- ⁸ Figures reported in this section for grants and donations for community-based programs consist of charitable contributions made to external nonprofit organizations for a variety of programs and services that address the nonmedical needs of vulnerable populations. The amount reflects hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the percentage of Health Plan members.
- ⁹ The amount reflects the costs related to providing a dedicated Community Benefit department and related operational expenses.
- ¹⁰ Figures reported in this section are hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the percentage of Health Plan members, or several related denominators such as the number of Educational Theatre performances or health education programs.
- ¹¹ Amount represents the estimated value of, but is not limited to, donated surplus office and medical supplies, equipment and furniture, promotional giveaways, in-kind services, and conference meeting room usage, as recorded in the MicroEdge GIFTS database.
- ¹² Figures reported in this section for grants and donations for the broader community consist of charitable contributions made to external nonprofit organizations to educate health care consumers in managing their own health and making informed decisions when obtaining services and to develop, produce, or communicate health care-related public policy information for a variety of programs and services aimed at the general well-being of the community. The amount reflects hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the percentage of Health Plan members.
- ¹³ Amount reflects the net expenditures after tuition reimbursement for health care professional education and training programs.
- ¹⁴ Figures reported in this section for grants and donations for the education of health care professionals consist of charitable contributions made to external nonprofit organizations, colleges, and universities to support the training and education of students seeking to become health care professionals such as physicians, nurses, physical therapists, social workers, pharmacists, and so on. The amount reflects hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the percentage of Health Plan members.
- ¹⁵ Figures reported in this section for grants and donations for evidence-based medicine consist of charitable contributions made to external nonprofit organizations and academic institutions to develop, produce, or communicate evidence-based medical practices and research findings. The amount reflects hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the percentage of Health Plan members.