

Community Benefit Plan Progress Report, 2011

Based on the Community Benefit Plan 2011 – 2013

Responding to the 2011 Needs Assessment



May 2012

Sutter Tracy Community Hospital Community Benefit Progress Report Prepared and Submitted by:

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Table of Contents

Sutter Health – Building Healthier Communities and Caring for Those in Need

Executive Summary

I.	2011 Progress Report on Community Benefit Plan (2011 – 2013)	1 - 17
II.	2011 Community Benefit Values	18 - 19
III.	2011 List of Community Benefit Partners	20
	Appendix 1 – Tracy Hospital Foundation Grant Report	21
	Appendix 2 – Charterhouse Center for Families Applications Report	22
	Appendix 3 – Children & Adolescents Summary	23
	Appendix 4 – Charity Care Program Policy & Procedure	24-26

Sutter Health:

Building Healthier Communities and Caring for Those in Need

Sutter Tracy Community Hospital is affiliated with Sutter Health, a not-for-profit network of 48,000 physicians, employees, and volunteers who care for more than 100 Northern California towns and cities. Together, we're creating for a more integrated, seamless and affordable approach to caring for patients.

It's better for patients:

We believe this community-owned, not-for-profit approach to health care best serves our patients and our communities – for multiple reasons. First of all, it's good for patients. According to the *Journal of General Internal Medicine* (April 2000), patients treated at for-profit or government-owned hospitals were two-to-four times more likely to suffer preventable adverse events than patients treated at not-for-profit institutions.

Our stockholders are our communities:

Investor-owned, for-profit health systems have a financial incentive to avoid caring for uninsured and underinsured patients. They also have a financial incentive to avoid hard-to-serve populations and "undesirable" geographic areas such as rural areas. In many Northern California's underserved rural locales, Sutter Health is the only provider of hospital and emergency medical services in the community.

Providing charity care and special programs to communities:

Our communities' support helps us expand services, introduce new programs and improve medical technology. Across our network, every Sutter hospital, physician organization and clinic has a special story to tell about fulfilling vital community needs.

Our Commitment to Community Benefit: Meeting the health care needs of our communities is the cornerstone of Sutter Health's not-for-profit mission. This includes directly serving those who cannot afford to pay for health care and supporting programs and services that help those in financial need.

In 2011, our network of physician organizations, hospitals and other health care providers invested a record \$756 million in benefits to the poor and underserved and the broader community. This includes:

- The cost of providing charity care
- The unpaid costs of participating in Medi-Cal
- Investments in medical research, health education and community-based public benefit programs such as school-based clinics and prenatal care for patients.

Sutter Health now provides \$2.7 million in charity care per week.

Executive Summary

Sutter Tracy Community Hospital and the Tracy Hospital Foundation are mutually determined to meeting the needs of the local community as highlighted by the San Joaquin Community Health Needs Assessment. Because of the partnership with the Tracy Hospital Foundation, Sutter Tracy Community Hospital is able to effectively support the community needs by avoiding duplication of services. The Foundation's Community Funding programs target either an identified need or assist the poor or underserved in Tracy. In recognition of these efforts, please reference the attached 2012 Tracy Hospital Foundation Grant Report, Appendix 1.

With the increased impact on access to care resulting from the economic recession, the focus of 2011 was to improve the level of health services to the uninsured and underinsured in the community through various access to care activities. Additional focus was placed on providing preventive health information and screenings, along with supporting prenatal and youth care, and the social/emotional health of the community. Addressing these key components was accomplished through the activities and services as highlighted below.

Community Benefit Activities funded in 2011 include, but are not limited to:

1. Access to care related activities

- Health Insurance Enrollment Assistance
- Indigent Care
- Resource and referral service and the PAPrx program through Healthy Connections Resource Center
- Workforce Development Programs - San Joaquin Delta College Nursing Program Expansion and CSUS Nursing Scholarships, Internships and Clinical Rotations
- Un-reimbursed Medical Care and Charity Care
- Financial and In-Kind support of free and low cost health clinics – Sutter Tracy Community Hospital was instrumental in assisting the Tracy Free Clinic with obtaining the 2011 Access to Care Grant from Sutter Health.

2. Support of Chronic Diseases & General Community Health Education

- Grant funding Diabetes education and support groups
- In-Kind donations supporting various local community support groups
- Community Health & Resource Fair
- Children's Health & Safety Fair
- Smoking Cessation Classes
- Prostate Cancer Screening
- Free Flu Shots for the community – targeting the underserved
- Cancer support services

3. Prenatal and Youth Care

- Lactation Education and Consultation
- Healthy Connections Resource Center Programs
 - Mommy & Me Support Groups

Executive Summary *(continued)*

- P.R.I.C.E Parenting Classes
- Parent & Me Playgroups
- Teen Support Group
- Cash donation supporting March of Dimes
- Coordinated Approach to Child Health (CATCH) programs in local schools for better health and fitness for Tracy children- Service provided by Tracy Hospital Foundation Funding
- CPR for Kids- Service provided by Tracy Hospital Foundation Funding

2011 Community Benefit Value	Sutter Central Valley Hospitals
Benefits for the Poor and Underserved	\$60,571,285
Benefits for the Broader Community	\$7,106,412
Total Quantifiable Community Benefit	\$67,677,697

The financial numbers above reflect the community benefit values for Sutter Central Valley Hospitals (SCVH), the legal entity that includes Sutter Tracy Community Hospital. Other Sutter Health affiliates that are a part of SCVH are Memorial Hospital Los Banos and Memorial Medical Center.

I. 2011 Progress Report on Community Benefit Plan

The following pages will provide a progress report on the community benefit programs and activities conducted during the reporting year at Sutter Tracy Community Hospital. These programs were created in response to the 2011 Community Needs Assessment – a collaborative report that helps our partners, other health providers, public agencies and leaders identify and prioritize needs as they relate to the health of our communities.

The priority needs for Sutter Tracy Community Hospital are:

1. Early Entry into Prenatal
2. Access to Health Care
3. Chronic Disease
 - a. Diabetes
 - b. Obesity
 - c. Asthma
4. Adolescent Mental Health
5. Breastfeeding

For more information about the **2011 Community Needs Assessment**, including quantitative and qualitative data, please visit www.healthiersanjoaquin.org.

For more information on the **Community Benefit Plan 2011 – 2013** that this progress report pertains to, visit our website at www.suttertracy.org.

Priority Need 1: Early Entry into Prenatal	
Link to Community Needs Assessment	The percentage of San Joaquin County women receiving first trimester prenatal care was consistently much lower than in California over the last decade.
Program Description	The Healthy Connections Resource Center Resource and Referral service provides early encounters with expecting parents through various programs. Programs such as Mommy & Me, P.R.I.C.E Parenting classes, Parent and Child Playgroups, along with the Health Insurance Enrollment Assistance service provide venues where expecting mothers are present. Thus, allowing staff to engage in the education of early prenatal care. Additionally, the Resource Center partners with several local agencies to improve first trimester medical care.
Goals and Objectives	<ul style="list-style-type: none"> • Improve a pregnant woman’s understanding of the importance of early prenatal care. • Reduce the risk of prematurity, birth defects, and the low birth weight of babies. • Improve the health of expectant mothers. • Provide the appropriate resources and referrals for mothers to obtain medical care and other prenatal support.
Strategy	<ul style="list-style-type: none"> • Hospital will continue to fund the Resource Center and will seek additional grants as needed to support current programs of the Resource Center. • Hospital will provide financial contributions on a case-by-case basis to organizations directly responding to the needs of educating the community on the importance of prenatal care. • Resource Center staff will increase communication with clients regarding importance of early prenatal care. • Continue collaboration with agencies providing care to pregnant women. • Continue to provide referrals to and local assistance with health insurance enrollment by offering in-kind donation of office space to both First Source and Charterhouse Center for Families agencies. • Continue to provide financial support to organizations that work to improve education and services to pregnant teens and adults in the community.
Baseline Information	73% of San Joaquin County mothers received first trimester prenatal care compared to 81% of California mothers in 2009. In 2010, the Resource Center referred 123 pregnant women to Charterhouse House Center for Families for local insurance enrollment assistance.

Priority Need 1: Early Entry into Prenatal *(continue from page 2)*

<p>Affiliate's Contribution or Program Expense</p>	<p>In 2011, the total cost related to operating the Resource Center was \$335,358. An undetermined portion of the amount is allocated to support the efforts of educating pregnant women on the importance of early prenatal medical care. Services include, but are not limited to:</p> <ul style="list-style-type: none"> • Insurance enrollment assistance referrals and service • Access to health care referrals • Social service referrals <ul style="list-style-type: none"> - WIC, Cash Aid, CalFresh, emergency food & shelter, and childcare
<p>Results</p>	<p>The Healthy Connections Resource Center provides pregnant women with resources to ensure early term medical care. Through collaboration with local clinics and agencies, the resource center has become recognized as the "go to" for assistance with having expecting mothers apply for low cost medical insurance, in addition to providing various referrals to support the pregnant women in all areas of their lives so that taking care of their unborn is a priority, and their health is maintained.</p> <ul style="list-style-type: none"> • From January 2011 through December 2011, the Resource Center referred 88 pregnant women to Charterhouse Center for Families to apply for insurance. 100% of them submitted applications and as of 3/26/12, 95% of those applications were either approved or pending approval. See Appendix 2 for details. • In 2011, the Resource Center provided services to 143 expecting mothers in the areas of prenatal medical care or social services.
<p>Amendment to Community Benefit Plan</p>	<p>The Resource Center remains as a source of assistance to pregnant women in the community and therefore no amendments to the current program are needed at this time.</p>

Priority Need 1: Early Entry into Prenatal	
Link to Community Needs Assessment	The percentage of San Joaquin County women receiving first trimester prenatal care was consistently much lower than in California over the last decade.
Program Description	Financial support of March of Dimes
Goals and Objectives	Through financial and fundraising contributions, Sutter Tracy Community Hospital seeks to support the mission of the March of Dimes organization, which is: <i>"To improve the health of babies by preventing birth defects, premature birth, and infant mortality. We carry out this mission through research, community services, education and advocacy to save babies' lives. March of Dimes researchers, volunteers, educators, outreach workers and advocates work together to give all babies a fighting chance against the threats to their health: prematurity, birth defects, low birth weight."</i>
Strategy	With the educational awareness of March of Dimes, this hospital hopes to outreach to several San Joaquin County Residents through their marketing and outreach efforts.
Baseline Information	73% of San Joaquin County mothers received first trimester prenatal care compared to 81% of California mothers in 2009.
Affiliate's Contribution or Program Expense	\$16,000 of expense related to March of Dimes fundraising. This includes direct financial contribution and some staff time related to fundraising efforts for the annual March for Babies Walk.
Results	Sutter Tracy Community Hospital as a team raised more than \$35,000 to support the March of Dimes mission.
Amendment to Community Benefit Plan	Hospital will offer continued support through financial contributions to March of Dimes with the focus on evaluating other programs with outcomes to address this specific priority need.

Priority Need 2: Access to Health Care

Link to Community Needs Assessment	The 2010 Healthier San Joaquin County survey revealed that 18% of telephone survey respondents and 27% of face-to-face survey respondents used the emergency department for their main source of health care, an increase since 2007.
Program Description	The Charity Care Program provides fair discounts and catastrophic protection to low income uninsured patients.
Goals and Objectives	<ul style="list-style-type: none"> • Provide emergency care for uninsured patients. • Provide discounted services for uninsured patients who meet eligibility guidelines of Charity Care Program. See Appendix 4 for program criteria.
Strategy	<ul style="list-style-type: none"> • Compensate physicians, specialists, and professional staff for time spent caring for providing emergency care to uninsured patients. • Continue to maintain this program to support indigent patients.
Baseline Information	Several patients are uninsured or lack the resources to afford the cost of hospital services. Additionally, the services rendered under the Charity Care program are specific to addressing an emergency health need and is a life saving safety net for many service area residents. In 2010, full or partial financial assistance totaling was provided to 1212 Sutter Tracy Community Hospital patients.
Affiliate's Contribution or Program Expense	Total cost of Charity Care for Sutter Tracy Community Hospital was \$9,144,244 in 2011.
Results	The Sutter Tracy Community Hospital assisted 1061 people through the Charity Care Program in 2011.
Amendment to Community Benefit Plan	This program will remain as a regular service provided by the hospital and will continue to offer discounted services to qualifying patients on a case by case basis. No amendment to the current plan required.

Priority Need 2: Access to Health Care

Link to Community Needs Assessment	The rate of health insurance coverage for adults in the County has been decreasing from 85% in 2003 to 81% in 2007.
Program Description	Health Insurance Enrollment Assistance through Sutter Tracy Community Hospital and the Hospital's Resource Center <ul style="list-style-type: none"> • Healthy Connections, provides uninsured patients and community members a local office to obtain assistance in accurately completing applications for low or no cost health insurance programs. • Sutter Tracy provides a full time representative to offer insurance application assistance on the hospital campus.
Goals and Objectives	<ul style="list-style-type: none"> • Provide a local site for community members to obtain assistance with applying for Medi-Cal, Healthy Families, and Kaiser Kids.
Strategy	<ul style="list-style-type: none"> • Increase the rate of health insurance coverage for children and adults in San Joaquin. • Improve community health through preventative care and regular office visits because individuals will see doctors more often when they have health insurance. • Reduce the risk of undetected illnesses.
Baseline Information	A total of 131 people were provided insurance enrollment assistance at the hospital and a total of 938 applications were submitted by Charterhouse in the outpatient setting in 2010.
Affiliate's Contribution or Program Expense	\$34,902 to staff representative at Sutter Tracy Community Hospital to provide application assistance. Additionally, the Hospital provides the in-kind donation of meeting space for service. The Tracy Hospital Foundation provides a \$15,000 grant to Charterhouse Center for Families to staff a part-time person at the Healthy Connections Resource Center for insurance enrollment assistance in an outpatient, community setting.
Results	<ul style="list-style-type: none"> • In 2011, Charterhouse Center for Families completed a total of 806 applications for either adults or children in the service area. • In 2011, First Source assisted a total of 166 uninsured people needing medical care.
Amendment to Community Benefit Plan	Increased community outreach on behalf of the Resource Center staff will take place in order to identify and refer individuals needing insurance application assistance in order to improve the rate of insured individuals in San Joaquin County.

Priority Need 2: Access to Health Care

Link to Community Needs Assessment	The rate of health insurance coverage for adults in the County has been decreasing from 85% in 2003 to 81% in 2007.
Program Description	Indigent Care Program- providing direct payments to physicians for care of the indigent, which are not included with the hospital's Charity Care billing process.
Goals and Objectives	<ul style="list-style-type: none"> • Provide professional compassionate care to everyone regardless of economic status. • Improve the health of our community.
Strategy	<ul style="list-style-type: none"> • Compensate physicians, specialists, and professional staff for time spent caring for providing emergency care to uninsured patients.
Baseline Information	Sutter Tracy Community Hospital is the sole facility in the city of Tracy with 24 hour emergency care services and provides service to anyone regardless of income and insurance status. With the rate of insured adults decreasing in the county, the Indigent Care Program provides the needed medical attention to individuals without insurance. Indigent care was provided to 208 persons with the expense of \$272,540 in 2010.
Affiliate's Contribution or Program Expense	Expense of this program was \$249,408 in 2011 which covers the cost of physicians, anesthesiologists, or other specialists as needed for care of uninsured, indigent patients.
Results	In 2011, the Indigent Care program provided medical care to 226 persons.
Amendment to Community Benefit Plan	This program will continue provide a safety net for the growing number of uninsured individuals in the hospital service area. The Resource Center staff will continue to outreach to hospital departments, local physicians and other agencies caring for the underserved to provide alternative, more affordable medical care along with additional resources to decrease the number of uninsured patients seeking care at Sutter Tracy Community Hospital.

Priority Need 2: Access to Health Care

<p>Link to Community Needs Assessment</p>	<p>The 2010 Healthier San Joaquin County survey revealed that 18% of telephone survey respondents and 27% of face-to-face survey respondents used the emergency department for their main source of health care, an increase since 2007.</p> <ul style="list-style-type: none"> • 31% of the face-to-face survey respondents reported going without the care they needed. • 18% of telephone survey respondents reported using the ER as their primary source of medical care. • 26% of telephone survey respondents did not receive preventative care.
<p>Program Description</p>	<p>The Resource Center Department is designed to provide the community with the needed resources related to access to health care along with other health and social service resources and is focused in improving access to health care.</p>
<p>Goals and Objectives</p>	<ul style="list-style-type: none"> • Increase staff outreach to community agencies to increase understanding and referrals to the Resource Center in order to provide access to health care assistance.
<p>Strategy</p>	<ul style="list-style-type: none"> • Through a streamlined referral process with the hospital's emergency and case management departments, the Resource Center hopes to intercept uninsured individuals upon discharge and work directly with them to identify resources for immediate follow-up visits and prescription assistance along with ongoing medical care and/or other social service resources. • Additionally, the Resource Center receives referrals from other agencies such as the local school districts and community health clinics that identify uninsured individuals.
<p>Baseline Information</p>	<p>In 2010, the Resource Center provided a total of 737 access to care referrals to 1178 people, both directly and indirectly, in the hospital's service area.</p>
<p>Affiliate's Contribution or Program Expense</p>	<p>In order to meet the many needs of the community, the Resource Center provides various in-kind donations to several organizations that provide services, support and education to both the underserved and broader community. The total operating cost of the Resource Center in 2011 was \$335,358.</p>
<p>Results</p>	<p>In 2011, a total of 1231 people were provided with access to health care resources, representing a total of 2264 referrals given to those individuals.</p>
<p>Amendment to Community Benefit Plan</p>	<p>The Resource Center staff plans to increase community outreach efforts in order to support those needing affordable medical care and/or medical insurance with the hope of reducing the amount of referrals and clients served for this need over time.</p>

Priority Need 2: Access to Health Care

Link to Community Needs Assessment	San Joaquin County is a designated medically underserved community, an area in which the number of medical providers is already too small to meet the needs of the community. In 2008, the San Joaquin Valley failed to meet the recommended minimum number of physicians and specialists for their population area, while the state of California exceeded both minimums.
Program Description	Through Workforce Development activities, Sutter Tracy Community Hospital is taking a proactive approach of fostering future health care professionals that are highly qualified and sensitive to the needs of the community. The various workforce development programs through Sutter Tracy include; <ul style="list-style-type: none"> • Nursing education • Internship training • Funding of local nursing college programs and scholarship programs
Goals and Objectives	Continue to provide opportunities to medical students needing clinical experience.
Strategy	Supporting the local nursing program will assist in meeting the needs of the community through offering physicians additional support in assisting with patient care.
Baseline Information	A total of 173 students were provided with clinical instruction and experiences in a medical setting in 2010, representing an expense of \$159,847.
Affiliate's Contribution or Program Expense	The 2011 total expense of \$231,325 supported 209 students through various Workforce Development experiences through Sutter Tracy Community Hospital.
Results	The above expense offered clinical experiences in 2011 to 189 students that plan to enter the health care workforce within the next four years.
Amendment to Community Benefit Plan	Responding to the future demands on health care is of important focus especially with the additional demands that will be placed on health care professionals through National Health Care Reform. Therefore, Sutter Tracy Community Hospital will continue to support Workforce Development in a certain capacity.

Priority Need 3: Chronic Disease- Diabetes

Link to Community Needs Assessment	In the Needs Assessment, the percentage of adult telephone survey respondents with diabetes rose from 11% in 2004 to 16% in 2010.
Program Description	Nutrition Studio and Diabetes Care Center Diabetes Education
Goals and Objectives	<ul style="list-style-type: none"> • Financial grant provided to the Nutrition Studio and Diabetes Care Center to provide a free community Diabetes Support Group monthly for Diabetic patients within the hospital’s service area. • Support group classes will educate diabetic community on healthy eating habits, exercise options, medication compliance, problem-solving, stress management, and healthy coping skills. • Provide annual community event, Diabetes Extravaganza, to increase community education and awareness on Diabetes care and management.
Strategy	Offering a community wide support group provides a venue for diabetic patients, caregivers and family members of this population to receive ongoing support, accountability and knowledge on how to manage their disease. Additionally, safe exercise and nutrition instruction along with trouble-shooting techniques are provided during the support group.
Baseline Information	A total of approximately 125 people attended the Diabetes support group in 2010.
Affiliate’s Contribution or Program Expense	<ul style="list-style-type: none"> • In-kind contribution of meeting space to be provided to Nutrition Studio & Diabetes Care Center. • Contribution of materials and staff time provided as needed for marketing, pre-screening, and operation of program. • Ongoing hospital staff support through program planning and modification as needed. <p>In 2011, a total of \$2,180 was contributed to the Nutrition Studio and Diabetes Care Center to provide the community support group and the annual Diabetes Extravaganza.</p>
Results	Approximately 200 people were served in 2011 through the support of this program.
Amendment to Community Benefit Plan	In addition to the current program, the hospital will support the Nutrition Studio and Diabetes Care Center to provide personalized diabetes management services to 12 patients within the hospital’s service area who are uninsured, underserved and have poorly controlled diabetes in 2012. These patients will be pre-screened through staff at the Healthy Connections Resource Center for this specialized service.

Priority Need 3: Chronic Disease- Diabetes

Link to Community Needs Assessment	According to the Needs Assessment, the percentage of adult telephone survey respondents with diabetes rose from 11% in 2004 to 16% in 2010.
Program Description	<ul style="list-style-type: none"> • Children’s Health & Safety Fair (CHSF) provides education and awareness of various topics focused on youth needs, with special emphasis on nutrition and fitness. • Community Health & Resource Fair (CHRF) offers the community the opportunity to obtain various free health screenings and consultations with physicians, along with support to the underserved for follow-up services.
Goals and Objectives	<ul style="list-style-type: none"> • Both events provide the Tracy community with diabetes, asthma, fitness and nutritional education for both children and adults. • Direct referrals to physicians, clinics and resources are provided as needed at both events. • Free Glucose finger-sticks to fairgoers of the CHRF are provided. • Free Laboratory processing to test fasting blood glucose levels provided for attendees of the CHRF. • Follow-up on any out of range screening results are provided for those at the CHRF and appropriate resources and referrals given as needed.
Strategy	Offering a free community health fair allows the opportunity to target several community members at one time to access screenings and resources which they may not consider receiving otherwise. Additionally, at the health fairs people of all ages and cultures are provided valuable information that may improve chronic illnesses, physical and mental health.
Baseline Information	In 2010, the CHRF provided 327 fasting glucose / cholesterol laboratory tests, and 210 glucose finger sticks to community members. Out of those tested, the hospital was made aware that 135 people were out of normal range for their laboratory tests and the staff at the Resource Center made personal contact by phone to 100% of those individuals to advise them of results and offer resources for care as needed.
Affiliate’s Contribution or Program Expense	The total cost of operating the two health fairs in 2011 was approximately \$54,847. An undetermined portion of that cost goes towards the awareness and education effort to address this priority need.
Results	<ul style="list-style-type: none"> • In 2011, 416 free glucose screens were provided at the CHRF and 100% of those tested received a follow-up call from staff to provide any additional resources and/or follow-up medical care as needed. • 120 people given personal physician consultations at 2011 CHRF. • An undetermined number of people were provided with fitness, nutrition and diabetes information at the CHSF.
Amendment to Community Benefit Plan	No amendment to the plan at this time.

Priority Need 3: Chronic Disease- Diabetes

<p>Link to Community Needs Assessment</p>	<p>In the Needs Assessment, the percentage of adult telephone survey respondents with diabetes rose from 11% in 2004 to 16% in 2010. Of these individuals, the highest percentage (24%) of respondents were first diagnosed between the ages of 51 and 60. Several individuals within that age range find themselves unemployed and also uninsured as they do not meet the criteria of qualifying for Medicare benefits and may have pre-existing conditions preventing them from qualifying for private insurance. The majority of current PAPrx clients fall within that age category.</p>
<p>Program Description</p>	<p>The Resource Center Patient Assistance Program for Prescriptions (PAPrx program) provides uninsured and underinsured patients that qualify for the pharmaceutical companies criteria, with brand names medications at low cost or free.</p>
<p>Goals and Objectives</p>	<ul style="list-style-type: none"> • Provide medications to those without prescription insurance. • Improves individual's health. • Reduces possible hospital admissions. • Improves medical attention and medicine compliance. • Will save patient money. • Will provide increase knowledge of purpose of patient medication. • Will help patient learn of other resources available to them and/or their family.
<p>Strategy</p>	<ul style="list-style-type: none"> • Continue to provide outreach via various venues and community agencies to increase the awareness of program. • Continue outreach to community medical clinics, and hospital departments. • Continue to prescreen every Resource Center client with question about daily medication use in their household on Welcome Form (tool used to assess client needs).
<p>Baseline Information</p>	<p>In 2010, 70 people were assisted and 201 prescription applications were submitted.</p>
<p>Affiliate's Contribution or Program Expense</p>	<p>PAPrx is a service provided by the Resource Center and an undetermined portion of the overall operating costs of the center is used to support this program.</p>
<p>Results</p>	<p>In 2011, 70 persons were assisted and 238 prescription applications were processed.</p>
<p>Amendment to Community Benefit Plan</p>	<p>Continuation of program and increased outreach to identify additional people needing this assistance.</p>

Priority Need 3: Chronic Disease - Obesity	
Link to Community Needs Assessment	More than 40% of adult telephone survey respondents were overweight in 2010. An additional 28% were obese, while 2% had a low BMI. The Healthy People 2010 Objective is that no more than 15% of the population is obese. Neither San Joaquin County nor California met this objective.
Program Description	Children's Health & Safety and Community Health & Resource Fair
Goals and Objectives	<ul style="list-style-type: none"> • Improve community understanding of the importance of fitness and nutrition. • Provide free BMI screenings to fair attendees. • Provide educational information regarding the meaning of BMI to persons of all ages.
Strategy	Offering a free community health fair allows the opportunity to target several community members at one time to access screenings and resources which they may not consider receiving otherwise. Additionally, at the health fairs people of all ages and cultures are provided fitness and nutritional information that may improve obesity, chronic conditions and overall general health.
Baseline Information	<p>The 2010 hospital health fairs offered a variety of health, fitness and nutritional information to various populations and cultures. Various booths at the fairs offer screenings and education to improve individual health awareness and improvement.</p> <ul style="list-style-type: none"> • 224 Body Mass Index assessments in 2010 at the CHRF. • Local health clubs, STCH Dietary & Nutritional Services, local medical clinics and City of Tracy Parks and Recreation are a few examples of the vendors participating in the events.
Affiliate's Contribution or Program Expense	The total cost of operating the two health fairs in 2011 was approximately \$54,847. An undetermined portion of that cost goes towards the awareness and education effort to address this priority need.
Results	In 2011, approximately 145 people were provided with body composition analysis and were offered consultation to improve physical / mental health and wellness.
Amendment to Community Benefit Plan	Continued outreach to assist the underserved population.

Priority Need 3: Chronic Disease - Asthma	
Link to Community Needs Assessment	San Joaquin County has consistently had a higher percentage of adults with asthma than California overall. In 2007, 15% of San Joaquin County residents had been diagnosed with asthma while the state was at 13%. Results from the Healthier San Joaquin County telephone survey showed an increase in the percentage of adults with asthma from 14% in 2007 to 17% in 2010.
Program Description	Children's Health & Safety and Community Health & Resource Fair
Goals and Objectives	<ul style="list-style-type: none"> • Both health fairs to provide the Tracy community with asthma awareness and education. • Direct referrals to physicians, clinics and resources are provided as needed at both events. • Follow-up on any out of range screening results are provided for those at the Community Health & Resource Fair and appropriate resources and referrals given as needed.
Strategy	Offering a free community health fair allows the opportunity to target several community members at one time to access screenings and resources which they may not consider receiving otherwise. Additionally, at the health fairs people of all ages and cultures are provided fitness and nutritional information that may improve obesity, chronic conditions and overall general health.
Baseline Information	In 2010, the CHRF provided pulmonary function tests to 80 individuals, and both events offered Asthma awareness and education in addition to smoking cessation information.
Affiliate's Contribution or Program Expense	The total cost of operating the two health fairs in 2011 was approximately \$54,847. An undetermined portion of that cost goes towards the awareness and education effort to address this priority need.
Results	An undetermined amount of Asthma and lung health information was provided at both events.
Amendment to Community Benefit Plan	Review and implementation of additional Asthma management and community education to be considered in future planning.

Priority Need 3: Adolescent Mental Health

<p>Link to Community Needs Assessment</p>	<p>Please see attachment titled Children and Adolescents Summary, Appendix 3. There are several markers in the Needs Assessment highlighting the need for mental health support for youth.</p> <ul style="list-style-type: none"> • Increased trends in usage of drugs, alcohol consumption, teen relationship violence, and homeless youth. • Downward trend related to youth suicide, however just one youth life lost signifies a community need.
<p>Program Description</p>	<p>Resource Center Case Management and Resource & Referral programs provide services to youth, individuals and families that have been identified to be in a high risk category. High risk is a loose term used to describe several concerns. Specifically, the Resource Center Case Management services offer support in the areas of truancy, gang affiliation, anger management, victim or victim witness, and substance abuse.</p>
<p>Goals and Objectives</p>	<ul style="list-style-type: none"> • Provide community members a local office to receive emotional support and guidance to the social services, counseling and programs needed to improve their specific situation. • Provided in-kind support for meeting space to agencies providing local mental health services in Tracy. • Give clients direction, accountability and support to reach individual goals and improve both mental and physical health.
<p>Strategy</p>	<ul style="list-style-type: none"> • Continue to fund the Resource Center department. • Identify qualified recipients for grants to support uninsured and underserved individuals in receiving subsidized mental health services . • Provide free meeting space to agencies offering mental health services (Mediation Center of San Joaquin and National Alliance for Mental Illness (NAMI)).
<p>Baseline Information</p>	<p>In 2010 the Resource Center provided services to 147 people seeking mental health support. 45% of those were children under the age of 18 years.</p>
<p>Affiliate’s Contribution or Program Expense</p>	<p>\$83,327 cost to fund a full time Case Worker at the Resource Center for Case Management services. An undetermined cost of the total expense to operating the Resource Center is being used to offer Resource & Referral services.</p>
<p>Results</p>	<p>A total of 104 people were assisted with mental health resources reflecting a total of 324 referrals to agencies and programs to support their needs. Of that population, 62.5% were children under the age of 18 years.</p>
<p>Amendment to Community Benefit Plan</p>	<p>Continue to offer free meeting space at the Resource Center for agencies to provide local mental health services, and seek recipients to offer grants in order to increase mental health services and programs locally.</p>

Priority Need 3: Adolescent Mental Health

Link to Community Needs Assessment	Please see attachment titled Children and Adolescents Summary, Appendix 3. There are several markers in the Needs Assessment highlighting the need for mental health support for youth.
Program Description	Resource Center Teen Support Group, <i>Build Your Teen Toolbox</i>
Goals and Objectives	Improve teen skills related to positive communication, healthy relationships, conflict resolution, education success, stress management, self esteem and life strategies.
Strategy	Provide Tracy teens ages 13 to 18 a psycho-educational and social group
Baseline Information	22 teens participated in support group in 2010.
Affiliate's Contribution or Program Expense	Program falls in a grant budget absorbed in the operating costs of the Resource Center.
Results	In 2011, a total of 37 youth participated in this program.
Amendment to Community Benefit Plan	Supporting the teen population is in high need, and therefore the hospital will continue to support this program and increase outreach efforts to increase teen participation.

Priority Need 4: Breastfeeding

Link to Community Needs Assessment	The American Academy of Pediatrics recommends that infants should be exclusively breastfed for at least six months after birth. In September of 2010, approximately 1 in 5 San Joaquin County and California WIC infants were being fed solely breast milk (20% and 19%, respectively). More than half of San Joaquin County and California WIC participants used formula in 2010 (64% and 62%, respectively).
Program Description	Outpatient Lactation Program
Goals and Objectives	<ul style="list-style-type: none"> • Improve infant and maternal health. • Reduce infant and maternal diseases. • Encourage mothers to exclusively breastfeed babies for at least first year of life. • Continue with San Joaquin County Breastfeeding Coalition partnership.
Strategy	<ul style="list-style-type: none"> • Offer local lactation support to new mothers. • Offer supplies and education to improve breastfeeding success.
Baseline Information	254 mothers were provided outpatient lactation support in 2010.
Affiliate's Contribution or Program Expense	\$20,271 cost to provide part time lactation consultants for either phone consultations or personal meetings with community members seeking breastfeeding support.
Results	This program supported 340 mothers and their infants in 2011.
Amendment to Community Benefit Plan	Continue with San Joaquin County Breastfeeding Coalition partnership to improve San Joaquin average and make breastfeeding exclusive form of feeding for infants. Implement hospital policy changes to promote exclusive breastfeeding during inpatient labor/delivery stay.

II. 2011 Community Benefit Values

Sutter Health affiliates and many other health care systems around the country voluntarily subscribe to a common definition of community benefit developed by the Catholic Health Association. Community benefits are programs or activities that provide treatment and/or promote health and healing as a response to community needs.

The community benefit value for Sutter Tracy Community Hospital is calculated in two categories: **Benefits for the Poor and Underserved** and **Benefits for the Broader Community**. Below are definitions for each community benefit activity:

Benefits to the Poor and Underserved

- **Traditional Charity Care** – Free or discounted health care services provided to the uninsured and underinsured populations.
- **Unreimbursed Cost to Medi-Cal** – The “shortfall” created when the facility receives payment below the costs of treating public beneficiaries.

Benefits for the Broader Community

- **Non-Billed Services** – Activities with no individual patient bill, therefore no deduction from revenue is shown in the traditional statement of revenues and expenses.
- **Cash Donations and In-Kind Donations** – Dollars and other items such as staff time and supplies donated by a facility to a community-based program or agency.
- **Education & Research** – All community, patient, and medical education such as community lectures, nursing student rotations and physician/clinician training.

Community Benefit Summary 2011

Sutter Central Valley Hospitals

Benefits for the Poor and Underserved	Community Benefit
Traditional Charity Care	\$14,674,937
Unreimbursed costs of public programs	
Medi-Cal	\$43,264,297
Other public programs	\$626,874
Other Benefits for the Poor and Underserved	\$2,005,177
Total Quantifiable Benefits for the Poor and Underserved	\$60,571,285

Benefits for the Broader Community	Community Benefit
Non-Billed Services	\$2,413,878
Cash and In-Kind Donations	\$432,848
Education & Research	\$4,242,865
Other Community Benefits	\$16,821
Total Quantifiable Benefits for the Broader Community	\$7,106,412

The financial information above reflects the community benefit values for Sutter Central Valley Hospitals. This includes the total benefits for the poor and underserved and broader community for the following hospitals:

- Sutter Tracy Community Hospital
- Memorial Hospital Los Banos
- Memorial Medical Center

For further detail regarding the community benefit values for Sutter Tracy Community Hospital specifically, please contact Tammy Shaff at (209) 833-2418 or shaffTL@sutterhealth.org.

III. 2011 List of Community Partners

At times, Sutter Tracy Community Hospital's community benefit efforts may involve investing in partnerships that fundamentally improve community health. In doing so, we acknowledge that our role goes beyond providing care or a service to supporting those organizations that have shown measurable impact in meeting an identified community need.

We are proud to support the following community organizations as we work collaboratively to help create healthier communities.

McHenry House Shelter for Families	VBR Foster Family Agency
City of Tracy Mayor's Community Youth Services Network (MCYSN)	Community Medical Centers - Care Links (Homeless Healthcare)
Tracy Police Department	CPSP
Tracy Interfaith Ministries	Charterhouse Center for Families
Tracy Unified School Services- Prevention Services	Counseling and More (CAM)
Lolly Hansen Senior Center	The Coalition of Tracy Citizens to Assist the Homeless
San Joaquin County Housing Authority	Tracy Family Practice medical Center
Tracy Adult School	Hawkins-Thompson, Child Development Center
Aguirre Insurance Services	North Preschool
Tracy Learning Center - Millennium High School	Charterhouse Center for Families-Nutrition educator
Mediation Center of San Joaquin	Nutrition Studio & Diabetes Care Center
Point Break Adolescent Services	CWL
Surtec Adopt-a-Family	Dr. Victoria Buccanfusso, Clinical Psychologist
San Joaquin County Mental Health Services	CPS Social Worker
Tracy Free Clinic	Pastor Mark with New Creation Bible Fellowship
North School	Headstart of San Joaquin
Women's Center of Tracy	We Care Medical Group
National Alliance on Mental Illness (NAMI)	El Concilio of San Joaquin
Tracy Home Inspections	Chiropractic Health Centers
Pregnancy Resource Center	Comfort Keepers
Tracy Chamber of Commerce	American Cancer Society
New Beginnings Recovery	Hearts of Harvest Foundation
Community Partnership for Families	San Joaquin County Public Health
First 5 of San Joaquin	
Planned Parenthood Mar Monte	
Valley Community Counseling Services	

Appendix 1



Focusing on the Big Picture

<i>Boosting our Community Foundation Community Funding</i>	2012 Grant Amount
Healthy Connections Resource Center	\$75,000
Cancer Support Services – Nurse Navigator	\$10,000
Senior Safety Partnership - making repairs in homes of seniors to provide a safe environment.	*Rollover From 2011
Tracy Interfaith Ministries - funding for formula, diapers and other infant needs.	\$18,000
Boys & Girls Club of Tracy - Inclusion Program for children with special needs.	\$10,000
Charter House for Families - for health insurance enrollment services.	\$15,000
Sutter Tracy Lactation Education Program - for new breastfeeding moms.	\$9,000
McHenry House - for family crisis intervention.	\$20,000
Central School Adoption and Coats for Kids Programs – funding for coats, clothing, PE equipment & medical supplies.	\$5,000
Coalition of Tracy Citizens for the Homeless (New request) Providing food & shelter for the homeless	\$5,000
CATCH Program – providing nutrition and physical education activities in more than a dozen elementary schools.	\$9,000
CPR for Kids Program - teaching children CPR and basic first aid skills	\$50,000
Project Fit America - a school-based comprehensive physical fitness & nutrition program (2010 funding 1 school @ \$30,000 unused from 2011).	\$0
Tracy Free Clinic	\$30,000
Total Funding	\$256,000

Appendix 2

Reporting Agency: Charterhouse Center For Families

Reporting Period: January 2011 – December 2011

Most adults Medi-cal apps are for denials for the MAP program.

	Applications Submitted	Approved	Pending	Denied
Medi-Cal				
Ages 0-5	96	59	21	16
Ages 6-21	191	110	85	25
Healthy Families				
Ages 0-5	68	46	12	10
Ages 6-19	162	137	7	18
	0	0	0	0
AIM				
KAISER KIDS				
Ages 0-5	8	8	0	0
Ages 6-19	40	35	1	4
PREGNANT	88	54	30	4
ADULTS	241	32	50	159

Appendix 3

Children and Adolescents

Healthier San Joaquin County Community Assessment—2011

Children and Adolescents Summary

Indicator	Measurement	Data	Year	Recent Trend	Direction	Page
Poverty	Children in poverty	20%	2009	—		126
Children's Health Insurance	Telephone survey respondents' children with health insurance	96%	2010	↑		127
Healthy Families Enrollment	Healthy Families enrollment	19,488	2009	↑		129
Annual Health Assessments	Telephone survey respondents' children who get annual health exams	90%	2010	↑		130
Access and Utilization	Children who have a usual place to go to when they are sick or need health advice	94%	2007	—		132
Dental Insurance	Telephone survey respondents' children with dental insurance	86%	2010	—		134
Births to Teens	Births to teens (ages 15–19)	11%	2009	↓		136
Teens – Low Birth Weight Babies and Adequate Prenatal Care	Teen mothers (ages 15–19) who received prenatal care in the first trimester	61%	2009	↑		137
Overweight and Underweight Youth	Children (ages 5-19) who are obese	23%	2009	↑		139
Youth Physical Activity	9 th graders who achieved 5 or more out of 6 fitness standards	58%	2008-2009	↑		142
Child and Adolescent Nutrition	Telephone survey respondents' children who ate fast food at least once in the past 7 days	60%	2010	↑		145
Free and Reduced Cost Meals	Free and reduced cost meals	59%	2009-2010	↑		148
Asthma	Telephone survey respondents' children diagnosed with asthma	34%	2010	↑		150
Childhood Diabetes	Telephone survey respondents' children diagnosed with diabetes or sugar diabetes	1.8%	2010	↑		152
Youth Tobacco Use	11 th graders who have ever smoked a whole cigarette	29%	2008-2009	↑		153
Youth Drug Use	11 th graders who have ever used marijuana	39%	2008-2009	↑		155
Youth Alcohol Consumption	11 th graders who have ever used alcohol	63%	2008-2009	↑		156
Youth Drug and Alcohol Related Arrests	Drug-related felony arrests per 1,000 youth (ages 10-17)	1.2	2009	↓		158
Youth Suicide	Number of youth (ages 5-24) suicides	7	2008	↓		159
Teen Relationship Violence	11 th grade teen relationship violence in the past 12 months	9%	2008-2009	↑		161
Homeless Youth	Homeless students enrolled in school	2,648	2009-2010	↑		162
Graduation Rate	High school graduation rate	74%	2008-09	↓		163
Dropout Rate	Four year high school dropout rate	27%	2008-09	↓		164

Appendix 4



SUTTER TRACY COMMUNITY HOSPITAL

STANDARD POLICIES AND PROCEDURES

Financial Assistance Program		INDEX NO: ADM 70.95.00-A
Charity Care		
HOSPITAL SVC: Administrative	DEPARTMENT:	Hospital-Wide

POLICY

Sutter Tracy Community Hospital affirms and maintains its commitment to serve as a Community Hospital with a philosophy which emphasizes the provision of optimal health care services to aid all persons regardless of age, sex, race, creed, disability, national origin or financial status. These beliefs support our policy of providing charity health care to the poor.

It should be recognized that the need for charity care is a sensitive and personal issue for recipients. Confidentiality of information and individual dignity will be maintained for all who seek charitable services. Competency and orientation of staff who will implement this policy and procedure shall be guided by these values.

DEFINITION

Charity care is defined as health care services provided at no charge or at a reduced charge to patients who do not have or cannot obtain adequate financial resources or other coverage to pay for their care. The distinction between charity care and bad debt is achieved through determination of the financial status of the patient and/or guarantor of the bill. Bad debt is defined as having the requisite financial resources to pay for healthcare services, but demonstrating an unwillingness to comply with the contractual arrangement to resolve a bill.

Partial and full charity care will be based on ability to pay and/or catastrophic illness and the consideration of associated hospital costs. Health care services, including inpatient and outpatient care, shall be available to all recipients under this policy.

Sutter Tracy Community Hospital and designated staff will actively assist patients and their families in pursuing alternative financial resources. Those patients who qualify for alternative payment programs but refuse to take advantage of these programs will not be covered by this policy.

Appendix 4 (continued from page 24)**GUIDELINES FOR PROCEDURE****A. Identification of Applicant**

Any individual who indicates the financial inability to pay a bill, including but not limited to medical staff, employees, patients and family and any responsible party may request charity care assistance. The following categories of people can be recipients of charity care:

1. Indigent illegal aliens.
 - a. Indigent non-residents of California
2. Certain types of short-term aliens.
3. Emancipated minors.
4. Persons eligible for the Medi-cal Program but whose eligibility status is not established for the period during which services were rendered.
5. Persons eligible for the Medi-cal Program who are treated for non-covered services under the Program guidelines.
6. Persons eligible for the Medi-cal Program with a share of cost. The share of cost amount can be considered under charity care.
7. Foreign visitors.
8. Members of MHA's Golden Health Plus Program and any senior citizen living on a fixed income.
9. Patients with financial liability after third party payment is made.
10. Individuals determined by the Bankruptcy Court to have the inability to pay all or a portion of their liabilities.

B. Eligibility and Income Guidelines:

Any hospital bill can be considered for full or partial charity care consideration as long as the following criteria are met:

1. Current income, including long and short term assets, fall at or below the minimum wage level. The prospect of future earnings being sufficient to meet the full or reduced obligation within a reasonable period of time will also be utilized.
2. The applicant is required to provide a written financial statement outlining current monthly income and expenses. The applicant may be asked to provide acceptable income verification, such as copies of tax returns, bank statements or recent payroll stubs. **See Attachment A.**
3. A credit report may be requested and reviewed as deemed necessary.

C. Non-Qualifying Cases

The following cases or situations will not be considered for full charity care:

1. The applicant is over the income and assets guideline or refuses to provide a written financial statement.
2. A Medi-cal recipients denied days will not be considered for charity care, however, non-covered days are eligible.

Appendix 4 (continued from page 25)

3. Administrative discounts, courtesy allowances and contractual allowances will not be eligible for charity care.
- D. Approval and Notification Process:
1. All charity care write-offs must be approved by the Charity Committee which is comprised of staff and management personnel. Write-offs are to be done only by the Business Services Managers.
 2. Each charity care write-off is authorized in writing by the Patient Accounting Director.
 3. The Hospital shall provide written notification to the applicant within 7 working days of approval or denial.
- E. Controls and Reporting:
1. The Patient Accounting Department or MHA Credit and Collections Department will generate monthly Charity Committee minutes and a case specific log including the following information:
 - a. Patient name and account number.
 - b. Total billed charges.
 - c. Brief description of patient history\prognosis.
 - d. Date of charity care approval or rejection.
 - e. Dollar amount of charity care write-off.
 - f. Information regarding other possible insurance or coverage.
 - g. Other pertinent information necessary to authorize charitable service.
 2. Meeting minutes and write-off amounts will be forwarded to each Committee member and the Hospital Chief Financial Officer on a monthly basis.
 3. To ensure this policy is being carried out as intended, the CFO will retrospectively review write-off transactions.
 4. All confidential applications and files will be maintained in the MHA Credit and Collection Department.

REFERENCES AVAILABLE UPON REQUEST

- A. Sources: N/A
- B. Policy Author: N/A
- C. Related Policies: N/A
- D. Cross-reference Manual: N/A
- E. Attachments:
 1. Attachment A: Statement of Financial Condition Schedule of Current Income and Expenditures
 2. Attachment B: Charity Committee Recommendation Summary
- F. LAST BOARD APPROVAL 04/26/04
- G. Policy Review By:
David M. Thompson, Chief Executive Officer 03/9/07
Board Approval: 03/26/0