

Community Benefit Plan 2012

Being the hospital in our community that physicians prefer, patients request, and employees choose

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Dameron Hospital

Dameron Hospital is an accredited, 202-bed, not-for-profit community hospital providing exceptional healthcare to generations of San Joaquin County residents for over 100 years. Dameron is known for its personalized, outstanding care and is a leader in quality and safety. Dameron strives to promote healing and wellness through compassionate, quality and cost-effective care to meet the identified needs of the communities we serve.

Dameron Hospital offers a broad array of medical, surgical and health maintenance services for emergency and acute care. Both not-for-profit and non-sectarian, Dameron exists solely to serve the healthcare needs of the greater Stockton area and San Joaquin County, providing the community with advanced technology and state-of-the-art diagnostic and therapeutic equipment, as well as facilities for inpatient, outpatient and occupational patient care. Service areas include cardiology, orthopedics, emergency/urgent care, radiology and occupational health. Dameron Hospital continues to make great strides toward staying at the forefront of both medical technology and patient services. Our full focus is on the residents of San Joaquin County. Our goal is to be the hospital in our community that physicians prefer, patients request and where employees choose to work.

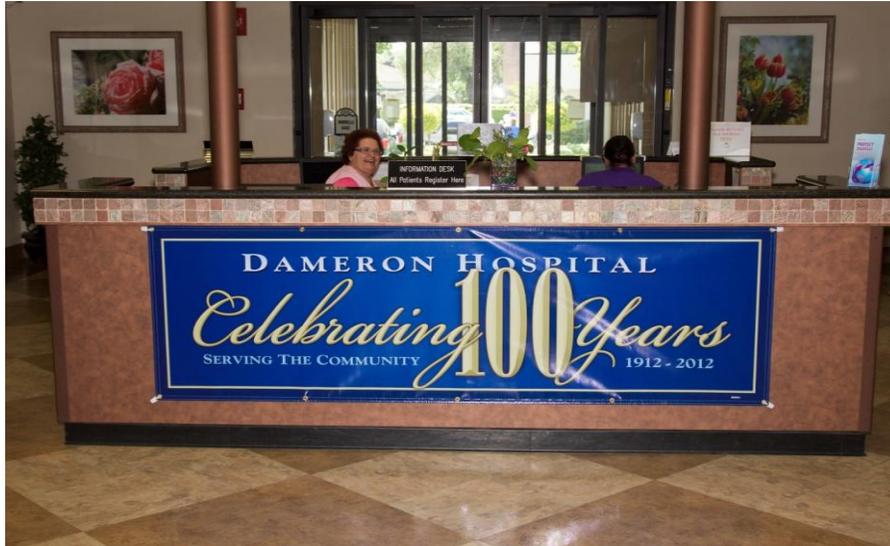
Dameron Hospital celebrated its 100th year of service to the community in 2012. The public was invited to several different events to help the hospital celebrate the hospital's 100 Years of Caring. Dameron is proud of its past and is dedicated to providing acute care hospital services to the community for the next hundred years.

Dameron Hospital has a Governing Board of Directors which meets on a monthly basis. Lorraine P. Auerbach, FACHE, is President and Chief Executive Officer of Dameron Hospital. A detailed organizational chart for Dameron Hospital can be found in Appendix A.

Dameron Hospital is a member of the San Joaquin County Community Health Assessment Collaborative (SJC₂HAC), which is responsible for producing and releasing the *Healthier San Joaquin County Community Assessment* every three years. The assessment is used to inform and engage local stakeholders and community members to promote collaborative efforts based on data, community input and group consensus in order to improve the health of community residents. The most recent assessment was released in June 2011, and the SJC₂HAC is currently working on a community health needs assessment which will be publicly released in 2013. Based on needs identified in the 2011 *Healthier San Joaquin County Community Assessment*, Dameron Hospital's 2012 Community Benefit Plan focuses on the following needs:

- Improving access to care
- Preventing chronic disease and increasing wellness
- Workforce development

The following Community Benefit Plan will describe how Dameron Hospital meets the community needs listed above and provide additional information on community benefit activities and programs at Dameron Hospital.



Medical Services

Dameron Hospital offers the following medical services:

Medical Care Services:

Anesthesia
Bariatric Surgery
Cardiology
Cardiothoracic Surgery
Dental Surgery
Emergency Medicine
Gastroenterology
General Surgery
Gynecology
Hematology/Oncology
Maxillo-Facial Surgery
Medicine
Neonatology
Nephrology
Neurology
Nuclear Medicine
Obstetrics
Occupational Medicine
Oncology
Ophthalmology
Orthopedics
Otorhinolaryngology
Otolaryngology
Pathology
Pediatrics
Plastic Surgery
Pulmonology
Radiology
Urology
Vascular Surgery
Wound Care

Nursing Services:

Medical/Surgical Nursing Services
Telemetry Nursing Services

Specialized Nursing Services:

Acute Dialysis Services
Basic Emergency Medical Services
Cardiac Catheterization Laboratory
Cardiovascular Surgery
Coronary Care Services
Radiological Services
Endoscopic Services
Intensive Care Newborn Nursery Services
Intensive Care Services (Adult)
Pediatric Services
Perinatal Service
 -Labor and Delivery
 -Post partum
 -Normal Infant Nursery

Surgical Services:

Preadmission Department
Preoperative Unit
Operating Room
Ambulatory Operating Room
Post Anesthesia Care Unit
Perfusion Services

Supplemental Services:

Radiation Therapy-Brachytherapy Services
Echocardiographic and Electrocardiographic Services
Neurodiagnostic Services
Nuclear Medicine Services
Occupational Therapy Services
Physical Therapy Services
Respiratory Care Services
Care Management/Social Services
Speech Therapy Services

Other Services:

Pathology and Clinical Laboratory
Pharmaceutical Services
Dietetic Services

Community Benefit and Outreach Services Provided by Dameron Hospital

In addition to the medical services and programs we offer, Dameron Hospital also offers the following community benefit and outreach services:

- Classroom use for community education and support groups
- A program for adults to volunteer their time in a health care environment
- Sponsorship of health-related community events and activities
- Donations of materials, equipment and supplies to community groups
- Employee volunteer time
- Transportation
- Continuing medical education for community physicians
- Community education classes
- Diabetic outpatient education program
- Hearing-impaired interpreting services
- Outpatient endoscopy center
- Outpatient surgery
- Unreimbursed Medi-Cal, Medicare, and charity care
- Uninsured patient discount
- Pastoral care
- Participation in a program exposing high school students to health care careers to encourage youth to give back to the community and consider a career in medicine (Decision Medicine)
- On-site interpreting services for: Arabic, Bengali, Bosnian, Cambodian, Cantonese, Chinese, Farsi, French, Haitian Creole, Hmong, Italian, Japanese, Korean, Mandarin, Polish, Portuguese, Russian, Somali, Spanish, and Vietnamese speaking patients
- Free wireless internet access
- Workforce development
- Hospitalist program for inpatients admitted through Dameron Hospital Emergency Room who do not have access to a primary care physician
- Health professional education
- Management staff participation in local leadership programs
- An online health center
- Management participation in local school mentoring programs
- Physician recruitment in a medical shortage area
- Staff participation in conducting community health needs assessments
- Multilingual education classes
- Junior volunteers
- A variety of support groups
- Providing a clinical setting for undergraduate/vocational training to students enrolled in an outside organization

Mission, Vision and Values

Dameron Hospital is your community hospital. Dameron's mission and promise to our patients is to support physicians and our employees in providing quality patient care in a safe and caring environment. Our mission, in part, is carried out by meeting the community's health needs by developing and participating in innovative, cost effective and high quality health care services for our patients and the communities we serve.

Vision

Dameron's vision is being the hospital in our community that physicians prefer, patients request, and employees choose to work.

Values

- **Leadership:** exists throughout all levels of the organization in alignment with our vision and mission
- **Integrity:** means consistently demonstrating the following by individual and collective actions
- **Teamwork:** a committed team working collaboratively to ensure that we support each other to fully reach our effectiveness
- **Service Excellence:** we are in the ultimate people business. Everything we do is based upon respect and appreciation for the individuality of physicians, patients, families, co-workers, and vendors
- **Financial Stability:** deliver high quality services in an effective, efficient and economical manner to meet the hospital's long-term commitment to our community



What is Community Benefit?

Community benefits are programs or activities that provide treatment or promote health and healing as a response to identified community needs and meet at least one of the following community benefit objectives:

- Improve access to health services
- Enhance population health
- Advance increased general knowledge
- Relieve or reduce the burden of government to improve health

Community benefit also includes charity care and the unreimbursed costs of Medicaid and other means-tested government-funded insurance programs for the indigent, as well as health professional education, research, efforts to build upon the community's capacity and the costs associated with community benefit operations.

Dameron Hospital provides numerous community benefits in many forms, including our community outreach and education programs and providing care to the uninsured and underinsured.

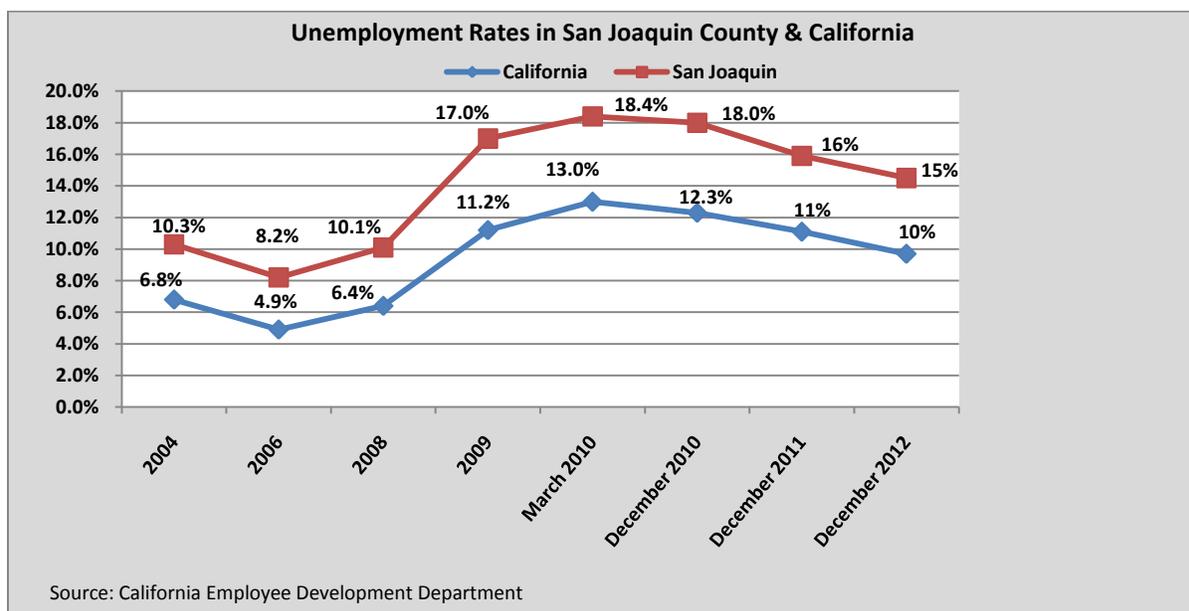
The hospital has an overall responsibility for ensuring that the Community Benefit Plan is implemented and followed. However, implementation of individual components of the plan rests with the appropriate Department Directors and Managers and their staff. Implementation of the plan also comes from the numerous collaborative partnerships and relationships Dameron has with other community agencies and organizations in order to improve the health and overall wellbeing of San Joaquin County residents. Some collaborative partnerships Dameron participates in include the San Joaquin County Healthier Communities Coalition; the San Joaquin County Asthma and COPD Coalition; the Breastfeeding Coalition of San Joaquin County; the San Joaquin County Obesity and Chronic Disease Prevention Task Force; the Association of California Nurse Leaders; and the San Joaquin County Community Health Assessment Collaborative.

Community

San Joaquin County is one of the original counties of California, created in 1850. San Joaquin County offers its residents affordable housing, abundant recreational facilities, excellent educational opportunities, and diverse cultural resources. As the northernmost county in the Central Valley, San Joaquin County includes the cities of Stockton, Lathrop, Lodi, Manteca, Ripon, Tracy, and Escalon, as well as numerous planned communities, census-designated areas, small towns, and unincorporated areas. Dameron Hospital is located in the city of Stockton, the county seat and the largest city in the county.

Employment

Recovery from the Great Recession of 2007 through 2009 has been slow in San Joaquin County. The county continues to face economic hardship. The Great Recession caused unemployment to spike sharply throughout California. The duration of unemployment has also risen.¹ According to the California Employee Development Department, the unemployment rate in San Joaquin County was 14.5% in December 2012, compared to the statewide unemployment rate of 9.7% for the same timeframe. While it is an improvement from the December 2011 rate, which was 15.9%, it continues to be above the state unemployment rate, which was 11.1% in December 2011. 2012 marked the first year of job growth since the Great Recession. The largest gains in employment in San Joaquin County were found in the trade, transportation and utilities sectors. Professional and business services also showed a gain in employment in 2012.²



¹ Bohn, S., & Schiff, E. (2011). *The Great Recession and Distribution of Income in California*. Public Policy Institute of California.

² Fujii, Reed. (2013, March 23). Unemployment Rate Rises in S. J. *The Record*. Retrieved from <http://www.recordnet.com>.

Foreclosure Crisis

San Joaquin County has attracted worldwide attention due to being the epicenter of the nation's foreclosure crisis. The city of Stockton was disproportionately affected by the collapse of the sub-prime market in 2007, and led the nation in foreclosures for that year, with one out of every thirty homes posting for foreclosure. San Joaquin County as a whole experienced a similar trend in foreclosure rates, with the number of default notices increasing 308% between 2006 through 2009. In 2008, the county experienced the highest number of default notices at 15,430. Foreclosures in San Joaquin County dropped overall during the fourth quarter of 2011, with the state experiencing a similar decrease in the number of default notices. Foreclosure activity in the county decreased again in September 2012 and was down by nearly a third from the level a year earlier.³

Homelessness

Increasingly, families and children constitute a large portion of the homeless population. Children are especially adversely affected by homelessness, and they are more than likely to have poor health compared to low-income children who have housing. Homeless mothers are also more likely to report that their children experienced various health problems such as fevers, ear infections, diarrhea, bronchitis, and asthma. The homeless population, especially children, suffers from a lack of consistent preventative care and experience more health problems. More than 6% of telephone and 5% of face-to-face *Healthier San Joaquin County Community Assessment* survey respondents reported they had been without housing in San Joaquin County during 2010. Almost 11% of telephone and 7% of face-to-face survey respondents reported that they had someone staying at their address on a temporary basis, who may otherwise be considered homeless, during the same year.⁴

Population

The U.S. Census Bureau estimates that the population of San Joaquin County was 702,612 people in 2012.⁵ The U.S. Census Bureau anticipates that San Joaquin County's population will reach 789,000 by 2020.⁶ Results from the 2010 Census show that San Joaquin County's population increased by 121,000 (21.6%) since the 2000 Census. By comparison, California's population grew to 37.25 million people in 2010, up from 33.87 million people in 2000, a 10% increase.⁷

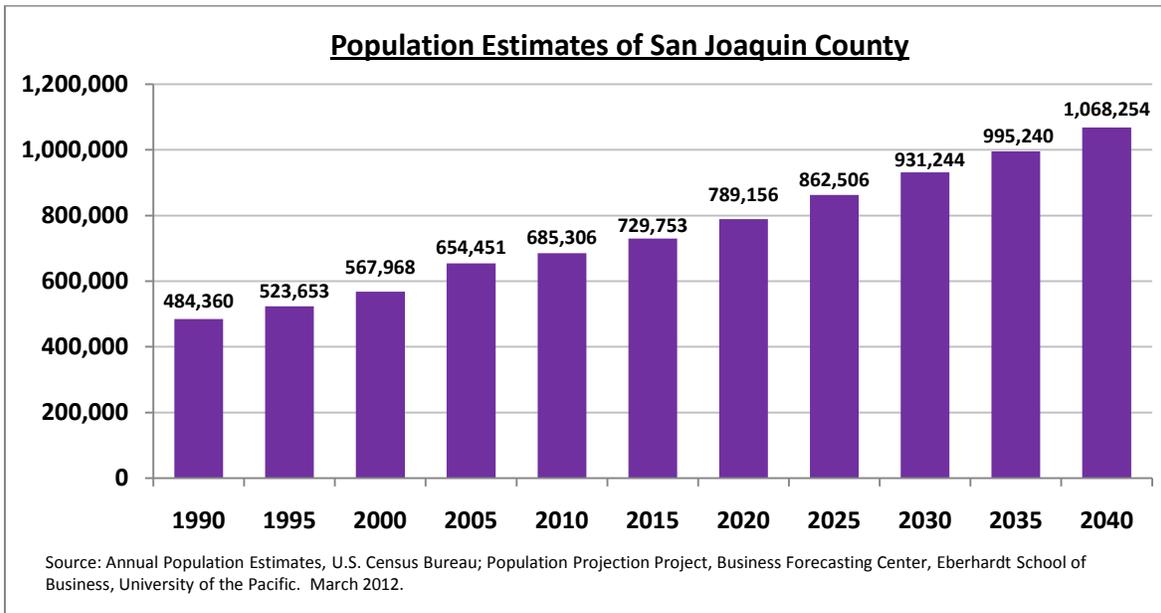
³ Grunder, Eric. (2012, November 15). S.J. Foreclosures Fall 31% From a Year Ago. *The Record*. Retrieved from <http://www.recordnet.com>.

⁴ 2011 *Healthier San Joaquin County Community Assessment*, Economy-Homelessness, page 46.

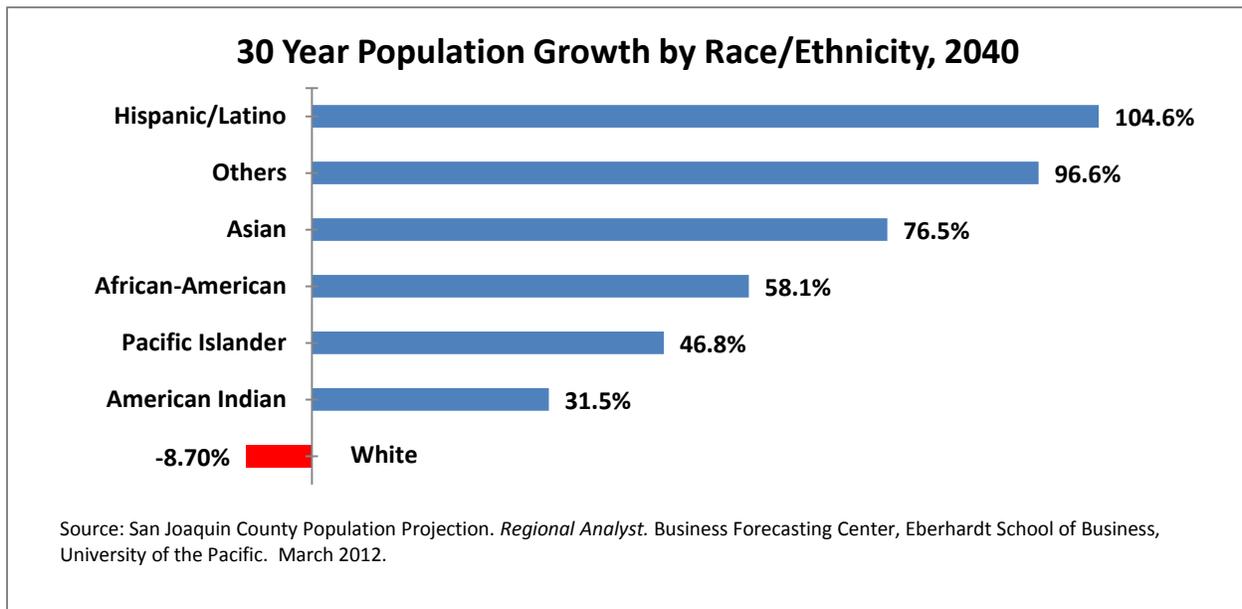
⁵ San Joaquin County QuickFacts from the US Census Bureau. Retrieved from <http://quickfacts.census.gov>.

⁶ San Joaquin County Population Projection. (July 2012). *Regional Analyst*. University of the Pacific, Eberhardt School of Business, Business Forecasting Center, in partnership with the San Joaquin Council of Governments.

⁷ San Joaquin County Population Forecast. (June 2011). *Regional Analyst*. University of the Pacific, Eberhardt School of Business, Business Forecasting Center, in partnership with the San Joaquin Council of Governments.

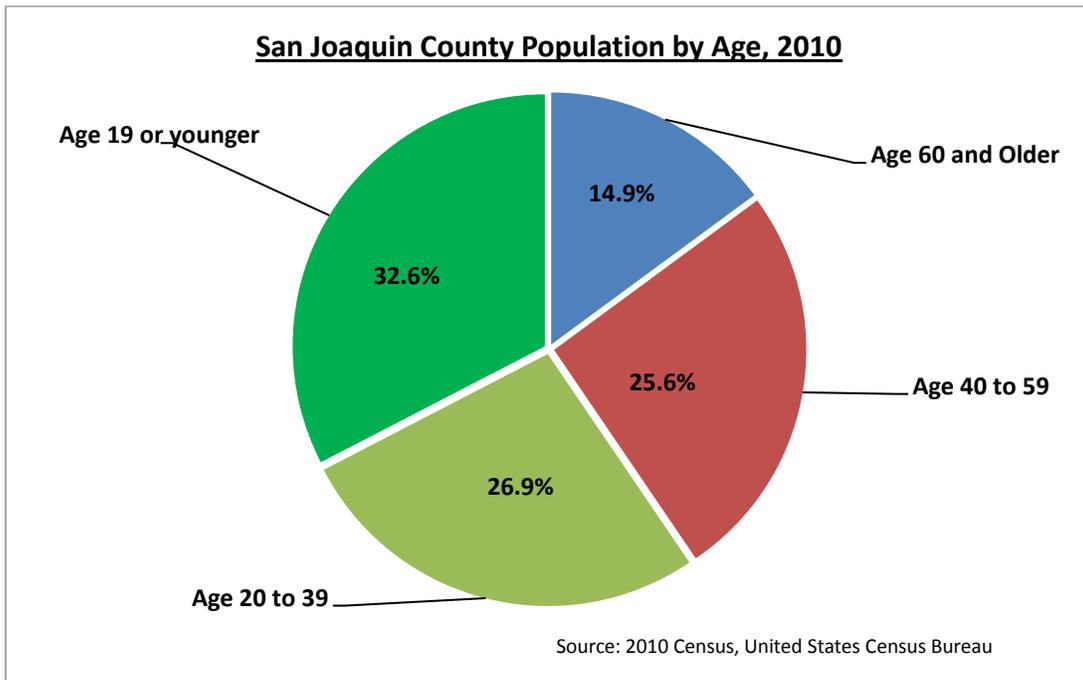


Population change by ethnicity will also affect San Joaquin County in the coming years. The largest increase over the next thirty years will come from an estimated 104.6% increase in the Hispanic/Latino population. This represents the most significant shift in San Joaquin County over the next thirty years. Other populations estimated to increase in number over the next thirty years include the Asian population; the African-American population; the Pacific Islander population; those individuals made up of two or more races; and the American Indian population. The only population that is estimated to shrink over the next thirty years is the White population, which is estimated to decrease by 8.7%.⁸



⁸ San Joaquin County Population Forecast. (June 2011). *Regional Analyst*. University of the Pacific, Eberhardt School of Business, Business Forecasting Center, in partnership with the San Joaquin Council of Governments.

The 2010 Census counted 102,229 people aged 60 or older in San Joaquin County compared to 78,070 in the 2000 Census. The population of people aged 60 and older now makes up 15% of the population, up from 14% in 2000. The 2000 Census found 34.3% of the county's population to be under the age of 20. The 2010 Census shows that this figure has shrunk to 32.9%, which is one-third of the population. These trends show that San Joaquin County's population is slowly aging.⁹



In San Joaquin County, the percentage of the youth population ages 6-11 and 12-17 are projected to remain nearly constant from 2010 to 2020, while the percentage for those ages 0-5 are projected to increase.¹⁰ Adults aged 19 and older will increase by 31% by the year 2040, and adults aged 60 and older will increase from under 15% of the population today to over 21% of the population in the next forty years.¹¹

⁹ United States Census Bureau. www.census.gov.

¹⁰ 2011 *Healthier San Joaquin County Community Assessment*, Population-Age, page 18.

¹¹ San Joaquin County Population Projection. (July 2012). *Regional Analyst*. University of the Pacific, Eberhardt School of Business, Business Forecasting Center, in partnership with the San Joaquin Council of Governments.

Income

Personal and household income are two indicators that assess the economic vitality of the county and the buying power of individuals, including their ability to afford basic needs such as housing and health care. San Joaquin County's per capita income was \$31,547 in 2008, lower than both California's (\$43,852) and the nation's (\$40,166). Per capita income increased nearly 28% from 2003 to 2008, which is similar to the state (31%).¹² According to the U.S. Department of Urban Housing and Development (HUD), San Joaquin County's median household income has increased 39% over the last decade, reaching \$63,100 in 2010; despite this increase, the county's median household income was lower than the median household income in the United States (\$64,000), and in California (\$71,000)¹³. It is important to note that a greater percentage of the San Joaquin County population lives below federal poverty levels compared to the rest of the state of California. HUD projected that San Joaquin County's 2012 median household income was \$66,300, but those numbers have yet to be finalized.¹⁴

¹² 2011 *Healthier San Joaquin County Community Assessment*, Household Income, page 33.

¹³ 2011 *Healthier San Joaquin County Community Assessment*, Household Income, page 33.

¹⁴ U.S. Department of Housing and Urban Development, FY 2012 Median Family Income Documentation System. Retrieved from <http://www.huduser.org/portal/datasets/il/il2012/2012MedCalc.odn>

Available Health Resources

There are numerous health resources throughout San Joaquin County available to the community. Some of these resources include:

- American Heart Association
- Breastfeeding Coalition of San Joaquin County
- Charterhouse Center for Families
- Community Medical Centers, Inc.
- Council for the Spanish Speaking (El Concilio)
- Dameron Hospital
- Delta Blood Bank
- Delta Health Care
- Doctor's Hospital of Manteca
- Dorothy L. Jones Family Resource Center
- Family Resource and Referral Center
- First 5 San Joaquin
- Health Plan of San Joaquin
- Hospice of San Joaquin
- Kaiser Permanente
- Lodi Memorial Hospital
- Planned Parenthood Mar Monte
- San Joaquin County Behavioral Health Services
- San Joaquin County Health Care Services Agency
- San Joaquin County Public Health Services
- San Joaquin General Hospital
- San Joaquin Medical Society
- St. Joseph's Medical Center
- St. Mary's Interfaith Services
- Sutter Tracy Healthy Connections Resource Center
- University of the Pacific

Community Health Needs Assessment Process

In 1994, the California legislature passed SB697 which states that hospitals, in exchange for their tax-exempt status, “assume a social obligation to provide community benefits in the public interest.”¹⁵ The bill requires that hospitals conduct a community health needs assessment (CHNA) every three years. Hospitals must develop a community benefit plan based on the results of the assessment and detail how they will address the needs identified in the CHNA. The plans are submitted to the Office of Statewide Health Planning and Development (OSHPD) and are available for public review.

Dameron Hospital is one of the original members of the San Joaquin County Community Health Assessment Collaborative (SJC₂HAC). The collaborative was first formed in 2004 in order to complete the Community Health Needs Assessment mandated by the State of California (SB697). The collaborative evolved from the 2001 Needs Assessment Group that included Dameron Hospital, St. Joseph’s Medical Center, Sutter Tracy Community Hospital, Kaiser Permanente, and Health Plan of San Joaquin. Other members have since joined the collaborative, including the Public Health Services of San Joaquin County; Delta Health Care; the San Joaquin Medical Society; Anthem Blue Cross; the Stockton Unified School District; University of the Pacific; First 5 San Joaquin; Community Medical Centers, Inc.; El Concilio; and the San Joaquin County Office of Education- Migrant Education, among others.

SJC₂HAC is responsible for preparing and releasing the *Healthier San Joaquin County Community Assessment*, which is produced every three years. The primary goals of the assessment are to:

- Engage local stakeholders
- Generate knowledge that will lead to collaborative action
- Identify data that would be useful for policy and advocacy work
- Establish a “Call to Action” for community members
- Assess community needs and assets
- Develop a community dissemination plan
- Provide ongoing tracking and monitoring

The most recent assessment was conducted in 2010/2011 and was released to the public in June 2011. Knowledge gained from the assessment is integrated into Dameron’s ongoing community benefit planning, implementation, and assessment. SJC₂HAC partnered with Applied Survey Research (ASR), a Northern California Bay Area nonprofit social research firm dedicated to helping people build better communities, to conduct the 2011 *Healthier San Joaquin County Community Assessment*. SJC₂HAC has previously partnered with ASR to conduct and release the 2005 and 2008 *Healthier San Joaquin County Community Assessments*. The

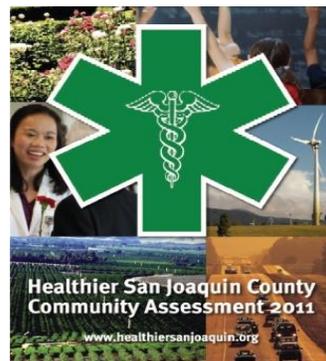
¹⁵ California’s Hospital Community Benefit Law: *A Planner’s Guide*. (June 2003). The California Department of Health Planning and Development. Retrieved from: <http://www.oshpd.ca.gov/HID/SubmitData/CommunityBenefit/HCBPPlannersGuide.pdf>

SJC₂HAC met in September 2004 and developed over fifty-five quality of life indicators. The collaborative included a mixture of professionals and community advocates, all of whom were experts in the respective areas under review. Indicators were chosen based on criteria which stipulated that the indicators should be understandable by the general public; allow for a quick response; drive noticeable change; and be available annually. In 2010, all of the indicators were reviewed for significance and additional indicators were added for the 2011 community health needs assessment.

Primary data was obtained from face-to-face surveys and telephone surveys. Face-to-face surveys were conducted by collaborative members at different sites throughout San Joaquin County, including First 5 San Joaquin, Community Medical Centers, Inc., health fairs, hospitals, and clinics. Over 1,955 face-to-face surveys were completed in August and September 2010 for the 2011 assessment. ASR conducted a telephone survey (in both English and Spanish) of 430 randomly selected adult residents in September 2010. The telephone survey also included calling cellular phone numbers. The survey sample was pulled from wireless-only and wireless/land-line random digit dial prefixes in San Joaquin County. Cellular phone respondents were screened for geography, as cell phones are not necessarily located where the number originally came from. Calling cell phone users yielded an additional 1,110 survey respondents in the county.

Secondary data for the fifty-five quality-of-life indicators was collected from a variety of sources, including but not limited to: the US Census Bureau; the California Health Interview Survey (CHIS); academic institutions; health care organizations; the Internet; the US Health and Human Services Department; the California Department of Public Health; and the US Department of Housing and Urban Development (HUD).

The 2011 *Healthier San Joaquin County Community Assessment* can be found at www.healthiersanjoaquin.org. Previous SJC₂HAC community assessments can also be found on this same website. Assessments are available for download. The assessment can also be found on Dameron hospital's website, www.dameronhospital.org.



The SJC₂HAC is currently working on a community health needs assessment which will be publicly released in the summer of 2013. The SJC₂HAC has partnered with Valley Vision, Inc., a non-profit consulting firm serving a broad range of communities across Northern California, to assist with the assessment process.



Priority Needs

Improving Access to Care

Health insurance is a crucial component of health care access. Uninsured people are less likely to receive medical care, more likely to have poor health outcomes, and are more likely to die early. Being uninsured is a significant barrier to accessing necessary health care services, including preventive care and treatment for chronic conditions. Families and individuals without health insurance often have unmet health needs, receive fewer preventive services, experience delays in receiving appropriate care, and experience more hospitalizations that could have been prevented.

According to a report released by UCLA's Center for Health Policy Research, just under half (49.7%) of all nonelderly Californians in 2011 were insured through their own or a family member's employment-based coverage. That is down from 55.6% in 2007.¹⁶ Based on UCLA's California Health Interview Survey (CHIS), an estimated 82,000 San Joaquin County residents were living without health insurance in 2011.¹⁷

Dameron Hospital recognizes the need to provide accessible and affordable health care services to the community in which we serve. Dameron provides health care services to poor and underserved patients throughout the community in a variety of ways, including:

- Providing charity care or partial charity discount to those individuals who demonstrate an inability to pay (whose income is at or below 350% of the federal poverty level)
- Charity care via the Emergency Room
- Providing an uninsured patient discount to patients who do not qualify for charity care, but still may face hardship paying their medical bills
- Covering the unpaid costs of health care for Medi-Cal patients

Consistent with our mission to provide quality patient care in a safe and caring environment, with or without compensation, the hospital provides a full charity and charity care discount program. Full charity or partial charity discount is offered to those patients who demonstrate an inability to pay for medically necessary services. Dameron Hospital strives to ensure that every person receives required services, regardless of inability to pay. The unpaid costs of Medi-Cal and charity care comprised 11.05% of the hospital's operating expenses in 2012 (the unpaid costs if Medi-Cal, Medicare and charity care comprised 17.17% of the hospital's 2012 operating expenses).

¹⁶ Goldeen, Joe. (2012, October 27). Pacific, Kaiser Working on Community Health. *The Record*. Retrieved from <http://www.recordnet.com>.

¹⁷ Ibid

Patients that are uninsured or have high medical costs who are at or below 350% of the federal poverty level may be eligible for charity care and discounted payments from emergency room physicians that provide emergency services in our general acute care hospital.

The uninsured patient discount is intended to apply to patients who do not qualify for charity care but still may face hardships paying their medical bills.

Preventing Disease and Increasing Wellness

➤ Diabetes

Diabetes is the leading cause of kidney failure, adult blindness, amputation, and is a leading contributor to strokes and heart attacks. According to the American Diabetes Association, 25.8 million children and adults (8.3% of the population) had diabetes in 2010. The vast majority of U.S. residents who have been diagnosed with diabetes have type II diabetes, previously called adult onset diabetes. Many people with type II diabetes can control their condition by eating well, exercising, losing weight and taking oral medication. Data shows that San Joaquin County has consistently had higher rates of diabetes than California. According to the 2011 *Healthier San Joaquin County Community Assessment*, over 9% of adults in San Joaquin County were diagnosed with diabetes, compared to 8% in California in 2007.

Dameron Hospital offers the Diabetes Outpatient Education Program, which is free to community residents who register for the program. Our on-site program covers every stage of diabetes. Patients who attend the program can achieve a lifestyle of success with our care and guidance. Dameron Hospital has a full staff of dietitians, registered nurses, certified diabetic educators, social workers and physicians to assist local residents in maintaining a normal, active lifestyle. The Diabetes Outpatient Education Program utilizes the American Diabetes Association (ADA) certified U.S. Department of Health “Diabetes Conversation maps.” There are four maps:

- Map 1: On the Road to Managing Diabetes
- Map 2: Diabetes and Healthy Eating
- Map 3: Monitoring Your Blood Glucose
- Map 4: Continuing Your Journey with Diabetes

Please visit www.dameronhospital.org for the class schedule and information on how to register for the classes. You can also contact Carolyn Sanders, RN, at (209) 461-3136 or (209) 461-7597 for additional information. Classes are free, but pre-registration is required.

Dameron also offers diabetic education and glucose screenings at numerous health fairs and public events throughout the community, including the Health and Wellness Family Festival at Lodi Lake; the Jackson Rancheria Senior Expo; and the Asparagus Festival. More than 550 people were given diabetic education in 2012.

In an effort to improve the health of the community we serve, Dameron Hospital will begin offering individual counseling sessions, free of charge, for people who are interested in speaking with a diabetic educator. No physician referral is necessary to request this counseling session. This program will begin in 2013. Contact Carolyn Sanders, RN, at (209) 461-3136 for more information.

➤ Comprehensive Care for Women and Infants

Dameron Hospital is well known for its comprehensive Women's and Newborn Services. The A.G. Spanos Family's Start-of-Life Center offers specially trained nurses, advanced technology, and a safe, caring environment for both mother and baby. Newborns requiring more advanced care have the advantage of our on-site Level III Intensive Care Nursery with 24 hour neonatology coverage. The Oshtory Pediatric Center is a full-service 24 hour hospital department that treats infants from day 1 to 13 years of age. Dameron Hospital offers several pregnancy and parenthood classes throughout the year, including:

- All Day Prepared Childbirth Classes
- Breastfeeding Support for Expectant and Delivered Families
- Infant CPR and Safety
- NICU/SCN Support Group

Dameron Hospital is certified by California Children's Services as a Community Level III NICU and Community Level Pediatrics for ages birth to 20 years. Dameron Hospital provides referral services to local obstetricians, perinatologists, and pediatricians. The hospital also provides referrals to Women Infant and Children (WIC); and to San Joaquin County Public Health Services' Maternal Child and Adolescent Health services;, Black Infant Health; the Family Resource and Referral Center; and the Valley Mountain Regional Center Early Start Program.

Dameron Hospital is San Joaquin County's certified affiliate of the California Pregnancy and Diabetes Program (Sweet Success). Diabetes is at epidemic levels, and Dameron Hospital has taken a lead in responding to diabetic pregnancy evaluation and successful infant development. The State authorized program covers diet, social behavior, insulin management, and lifestyle counseling. In response to our community's diversity, the program is also offered in Spanish.

The healthcare industry is seeing a movement from an emphasis on charity care to more of a community health improvement approach. Because of this shift, our health education nurse will be concentrating on providing education to childbearing women throughout San Joaquin County in 2013. Education related to high-risk pregnancies, gestational diabetes, nutrition, prenatal care and other information will be available throughout the community from Dameron Hospital.

Workforce Development

Decision Medicine is a two-week program designed to introduce high school students to the field of medicine through personal mentoring opportunities and site visits with behind-the-scenes access to some of our regional hospitals, clinics and public health centers. Decision Medicine 2012 took place in Stockton at various locations, including each of the hospitals, various clinics and inside actual private offices of participating physicians. In addition, students went on multiple site visits to local healthcare related organizations, learning first-hand from actual in-the-field experiences. Decision Medicine 2012 at Dameron Hospital was a full eight-hour day including student interactive tours into the Core Laboratory, the Pathology Laboratory, an Emergency Services Ambulance and the Hospital Data Center; didactic lectures on Basic Hematology & Comparative Cellular Morphology and Forensic Pathology; and hands-on laboratory exercises for Phlebotomy, Blood Specimen Preparation, Blood Smear Technique, Differential Staining Technique, Blood Smear Examination by Light Microscopy, and Blood Typing. In addition, students were provided an individual Complete Blood Analysis (CBC), a preliminary ABO blood group determination, historical information about Dameron Hospital and career information in pathology and laboratory medicine. Twenty-seven students were hosted at Dameron Hospital which included lunch and refreshments throughout the day. Program facilitators for Dameron Hospital included a Board Member, the Chief Information Officer, a Hospital Administrator, the Laboratory Medical Director, the Laboratory Manager, several Clinical Laboratory Scientists, the Patient Relations Coordinator, the Director of Volunteers, and the Employee Relations Coordinator.

Leadership Stockton is California's oldest adult community leadership program, founded in 1981. Leadership Stockton is a program designed to inspire a new generation of men and women ready to assume leadership roles in the community. The program challenges and prepares individuals from diverse backgrounds to become influential in the region's future. Dameron Hospital's Chief Medical Officer spoke at the Leadership Stockton Class Day in 2012. The topic of the day was "Healthcare in Our Community." The roundtable discussion enabled the students to learn about the healthcare facilities located throughout the City of Stockton. Other discussion highlights included the current state of health care and what changes may be good and what changes may be harmful. The discussion ended with a question-and-answer period.

The Health Careers Academy was established by the Stockton Unified School District to meet the growing community need for healthcare clinicians in Stockton and the greater San Joaquin County. The Health Careers Academy is a high school that will prepare students for careers in the health care industry. The Health Careers Academy trains students to be able to work in the California state prison hospital and the Veteran's Administration hospital that are expected to open in Stockton in the coming years. The academy began in 2011 with 120 ninth grade students attending class. Each year the academy adds a grade. The goals of the Health Careers

Academy are to produce students who have been challenged with a rigorous college prep curriculum as well as teaching them health career technical skills and finally providing them with opportunities to gain a better sense of community awareness. When students finish their four years at the academy, they will leave prepared to join the workforce; to pursue further health-related vocational training; or to attend a four-year college. Health Careers Academy graduates could be starting down the road to working in a medical office, to becoming an X-ray technician, to being a phlebotomist, a nurse, or a doctor. Dameron staff are committed to conducting tours and offering speakers at the request of the Health Careers Academy. There are ongoing opportunities for Dameron Hospital staff to be involved with the Health Careers Academy in the coming year, including e-mentoring; classroom speakers; job shadowing; assistance with classroom lessons; and teacher/professional pairing.

Association of California Nurse Leaders (ACNL) was created and is embraced by nurse leaders. Its mission is to develop nurse leaders; advance professional practice; influence health policy; and promote quality and patient safety. With health care reform, implementation of the IOM Future of Nursing initiatives, professional practice issues and regulatory mandates, challenges and opportunities for nurse leaders have never been greater. The ACNL helps nurse leaders face these issues together. ACNL provides essential information, statewide networking with peers, progressive leadership development programs and timely educational activities. Dameron Hospital is a member of the North Central Chapter and several Dameron staff members attend monthly chapter meetings and participate in ACNL projects. Dameron will continue its ACNL membership and activity participation through 2013.

What Have We Been Up to?

Read to Me, Stockton!

Stockton is one of the cities in California with a high literacy problem. The previous Mayor of Stockton, Ann Johnston, started The Read to Me, Stockton! program in 2011 in collaboration with the Stockton Rotary Club and Dolly Parton's Imagination Library. Children, from birth through 5 years of age (living in a targeted area), can be enrolled in the program for no cost. Each child who is enrolled in the program will receive a new book once a month up to 5 years of age from the Dollywood Foundation. Dameron Hospital began participation in this program in 2011 and will continue its participation in 2013. Our Pediatric health unit coordinators ask new parents who reside in targeted zip codes to enroll in the program when they complete their child's birth certificate. In 2012, Dameron focused on children living in zip codes 95205 and 95206. Dameron helped to enroll 456 children in the Read to Me, Stockton! program in 2012.

NICU Family Support Group/Families Helping Families

One of the key components of Dameron's Spanos Start of Life Center is the Dameron Level III Neonatal Intensive Care Unit (NICU). Premature infants can achieve normal growth when assisted by a state-of-the-art Neonatal Unit. The NICU Family Support Group is facilitated by Mastered Prepared Maternal Child Health Social Workers and the Maternal Child Community Outreach Nurse. The NICU Family Support Group, by reducing isolation through care and support, is about bringing together and strengthening families.

On December 9th, 2012, Dameron's NICU held their annual NICU Graduate Christmas Party with Santa Claus and gifts for both past and present NICU families. One of the features of the Christmas party is to offer a venue where past NICU families can meet and offer support to current NICU families. Families can get involved with the NICU Family Support Group as well. The Christmas party is open to the public.

Healthier Community Coalition

Dameron Hospital is an active participant in the San Joaquin County Healthier Community Coalition. The purposes of the Coalition are to provide leadership in the development and coordination of health status improvement efforts in San Joaquin County; to provide a forum for health services stakeholders to share ideas and information about projects and seek collaborative partners; and to work collaboratively and encourage the efforts of other collaborative attempting to respond to community health issues and problems. While providing leadership to other collaborative throughout the county, the Healthier Community Coalition also sponsors the annual Public Health Leadership Breakfast and the Breastfeeding Coalition of San Joaquin County's annual Birth, Baby and Bonding Fair. Dameron staff co-

chaired the Coalition for 2011 and 2012 and was nominated to co-chair the Coalition again for 2013 and 2014.

Child Abuse Prevention Council

During the 2012 holiday season, Dameron Hospital collected 300 new toys for the Child Abuse Prevention Council of San Joaquin County. Dameron staff wrapped the gifts and delivered them on December 12th. The children were treated to a visit from Santa Claus and were able to have their photo taken with him. The Child Abuse Prevention Council is committed to protecting the children of our community, strengthening families, and giving hope to those seeking to break the bonds of physical, verbal, sexual, and emotional abuse. The Child Abuse Prevention Council is a place where parents can learn to be better parents, children can heal from the wounds of abuse and neglect, and where families can improve their quality of life. Dameron Hospital is proud to continue its support of the Child Abuse Prevention Council in the years to come.

Continuing Medical Education

Dameron Hospital offers Continuing Medical Education classes at noon on Fridays (excluding holidays). The classes are open to all physicians throughout the community. The classes are held in the hospital's Annex building. Dameron Hospital is accredited by the Institute for Medical Quality/California Medical Association (IMQ/CMA) to provide continuing medical education for physicians. Dameron provided thirty-one continuing medical education classes throughout 2012 and will continue to provide Continuing Medical Education Classes in 2013. A total of 164 medical professionals attended the continuing medical education classes at Dameron in 2012. Contact the Staff Development and Medical Education Department or visit www.dameronhospital.org for more information.

Breastfeeding Coalition of San Joaquin County: Birth, Baby and Bonding Fair

The Breastfeeding Coalition of San Joaquin County is made up of representatives from local hospitals, WIC programs, community groups, non-profit organizations, health plans, San Joaquin governmental agencies, and interested individuals. The Coalition's objectives are:

- Increase the number of physicians and other primary healthcare providers in San Joaquin County who include breastfeeding/lactation counseling and referral as part of routine care
- In accordance with Healthy People 2010 National Health Promotion and Disease Prevention Objectives, increase to at least 75% the proportion of mothers who initiate breastfeeding; increase to at least 50% the proportion who continue to breastfeed until their infants are 6 months old, and increase to at least 25% the proportion who continue to breastfeed past one year
- Provide accurate and consistent breastfeeding support, information and resources to women, families, health professionals and the community

- Educate local charity and county government officials on the benefits of breastfeeding and involve them in making San Joaquin County baby-friendly

In addition to Dameron staff being members of the Breastfeeding Coalition of San Joaquin County, Dameron also sponsors the Coalition's annual Birth, Baby and Bonding Fair. Dameron Hospital was a Bronze sponsor of this event in 2012 and will continue to sponsor the event in 2013. The Birth, Baby and Bonding Fair is a free event where new parents can check out local resources, products and services regarding breastfeeding; view a fashion show featuring maternity wear, nursing wear, and baby wear; participate in mini-workshops; and win raffle prizes.

American Heart Association Go Red for Women Event

Dameron Hospital continued its participation in the American Heart Association's Go Red for Women event in 2012. The Go Red Lunch is an inspiring, informative event created to encourage the community to champion the fight against heart disease in women. Heart disease is the number one killer of women, but most women don't know this fact. Dameron Hospital staff sits on the Planning Committee for this annual event. Our health education nurse also provides education on healthy eating, physical activity, and preventing heart disease to community members that attend the event. Dameron Hospital has been and will continue to be a consistent partner with the American Heart Association, working together to improve the health of community residents and wipe out heart disease and stroke.

Donations of Staff Time, Money and Equipment

In addition to the programs and activities previously described, Dameron Hospital also offered sponsorships, donations of food, toys, medical supplies, equipment, staff and volunteer time, and meeting room space to community programs and organizations throughout San Joaquin County. Some of our local sponsorships and donations went to the following organizations and programs:

- Emergency Food Bank of Stockton/San Joaquin (414 pounds of food donated in 2012)
- Regional Sports Center for Disabled Children
- Folsom Lake College Foundation
- Healthier Community Coalition
- Health and Wellness Family Festival at Lodi Lake
- Champions for Change: Network for a Healthy California
- YMCA
- Gospel Rescue Mission
- Habitat for Humanity
- Man to Man Prostate Support Group
- Stockton Delta Rotary
- Haven for Peace
- Jackson Rancheria Senior Health Expo
- St. Mary's Dining Room
- Stockton Black Family Day
- The Record's Literacy and Book Fair-Family Fun Day in the Park

Community Benefit Plan 2013

Dameron Hospital will be focusing its 2013 community benefit planning efforts on improving access to care and increasing health education throughout the community we serve. Dameron Hospital is currently participating in a community health needs assessment which will be released to the public in the summer of 2013. Findings from this community health needs assessment will assist in Dameron's future community benefit planning efforts. Dameron Hospital will also continue to participate in the various sponsorships, programs and activities previously described.

As a healthcare provider, Dameron Hospital is committed to providing a healthy and safe environment for patients, staff, medical staff, and visitors, and to promoting positive, healthy behaviors. In an effort to create a healthier community, the entire Dameron Hospital campus and grounds will be going smoke-free in 2013.

In another effort to create a healthier community, Dameron Hospital will be offering several free drive-in flu vaccination clinics throughout 2013. All community residents age three and older are encouraged to get a flu vaccine.

Dameron Hospital will begin offering bariatric weight loss seminars to members of the community. The seminars are aimed at educating people about the problems of obesity and the surgical options that are available. People do not have to have a procedure done at Dameron in order to attend these seminars. Dameron will also offer a Healthy Lifestyles class. The post-op Healthy Lifestyles class is available to anyone who has had a bariatric procedure done. The class gives reinforcement of the concepts they have already learned. Dameron will also be offering a weight loss support group. Contact the hospital's Bariatric Surgery Coordinator for more information.

Dameron will continue to be a member of the Champions for Change: Network for a Healthy California, which focuses its efforts on preventing diabetes, heart disease, chronic obesity, asthma and smoking. Communities are educated on how to make healthy choices, including food choices and incorporating exercise into their daily lifestyle.



The matrix below summarizes Dameron Hospital's Community Benefit Plan for 2013:

Benefit	Need Addressed	Targeted/Affected	Goal	Measureable Objective
Traditional Charity Care and Financial Assistance and Means-Tested Government Programs	Improving and increasing access to care	Uninsured and underinsured; persons living in poverty	Allocate 20% of operating expense for charity care and financial assistance and means-tested government programs (excluding Medicare, goal will be 15% of operating expense)	Financial end-of-year report reflects 20% of operating expense spent on charity care and unpaid costs of financial assistance and means-tested government programs
Health education for the community	Preventing chronic disease and increasing wellness	Persons living in poverty and the broader community	Provide ongoing and/or periodic community education regarding: <ul style="list-style-type: none"> ▪Parenting, breastfeeding, infant safety and CPR ▪Diabetes awareness ▪Other chronic diseases 	Number of monthly and periodic classes regarding parenting, infant CPR and safety, breastfeeding classes, diabetic education and other chronic disease education. Number of local community health fairs and events where Dameron provides health education.
School mentoring programs	Workforce development	Persons living in poverty and the broader community	Continue participation in Decision Medicine and the Health Careers Academy; continue to provide leadership to various school mentoring programs	Participation in Decision Medicine program; participation in Health Careers Academy; number of student mentoring requests satisfied
Support Groups	Community education; improving access to care	<ul style="list-style-type: none"> ▪Infants ▪Families of NICU/Special Care Nursery babies ▪Breastfeeding mothers ▪Prostate cancer patients ▪Diabetic patients 	Continue to provide monthly support groups for NICU/SCN families and breastfeeding mothers; continue to provide monthly support to patients suffering from prostate cancer and diabetes	Number of monthly NICU/SCN and breastfeeding support groups ; number of monthly prostate support groups; number of weekly diabetic educational classes
Donations of Time, Money and Equipment	<ul style="list-style-type: none"> ▪Broad benefit to the community ▪Commitment of the organization's resources to the community 	<ul style="list-style-type: none"> ▪Medically underserved ▪Persons living in poverty ▪Broader community benefit ▪Infants, children and adolescents ▪Senior citizens ▪Homeless 	Continue to provide staff time, money and equipment to meet the health needs of the local community	The yearly cost of hours donated by staff to the community while on the organization's payroll and the financial value of donated food, supplies, equipment and sponsorships
Health Professions Education	Workforce development	<ul style="list-style-type: none"> ▪Accessible to all physicians ▪Other health care professionals 	Provide continuing medical education to community physicians and other healthcare professionals	Number of scheduled 2013 CME classes and health professional education events
Transportation	Improving access to care	<ul style="list-style-type: none"> ▪Persons living in poverty ▪Senior citizens ▪Other vulnerable populations 	Provide transportation to patients who have no other means of transportation to and from the hospital	Yearly transportation invoice with the number of taxi vouchers issued to patients

Inventory and Economic Valuation of Community Benefits

<u>Category</u>	<u>Reporting Period 2012</u>	<u>Planned 2013</u>
Financial Assistance and Means-Tested Government Programs		
Traditional Charity Care	\$2,320,861	\$2,320,861
Unpaid Cost of Medicaid	\$17,939,474	\$17,939,474
Unpaid Cost of Medicare	\$10,068,729	\$10,068,729
Total for Financial Assistance and Means-Tested Government Programs, excluding unpaid Medicare (minus offset)	\$18,171,556	\$18,171,556
Total for Financial Assistance and Means-Tested Government Programs, including unpaid Medicare (minus offset)	\$28,240,285	\$28,240,285
Other Benefits		
Community Health Improvement Services and Community Benefit Operations	\$41,198.28	\$41,198.28
Health Professions Education	\$38,756.34	\$38,756.34
Cash and In-Kind Contributions	\$149,710.39	\$149,710.39
Community Building Activities	\$43,916.27	\$43,916.27
Total Community Benefits (excluding unpaid Medicare)	\$18,445,136	\$18,445,136
Total Community Benefits (including unpaid Medicare)	\$28,513,865	\$28,513,865

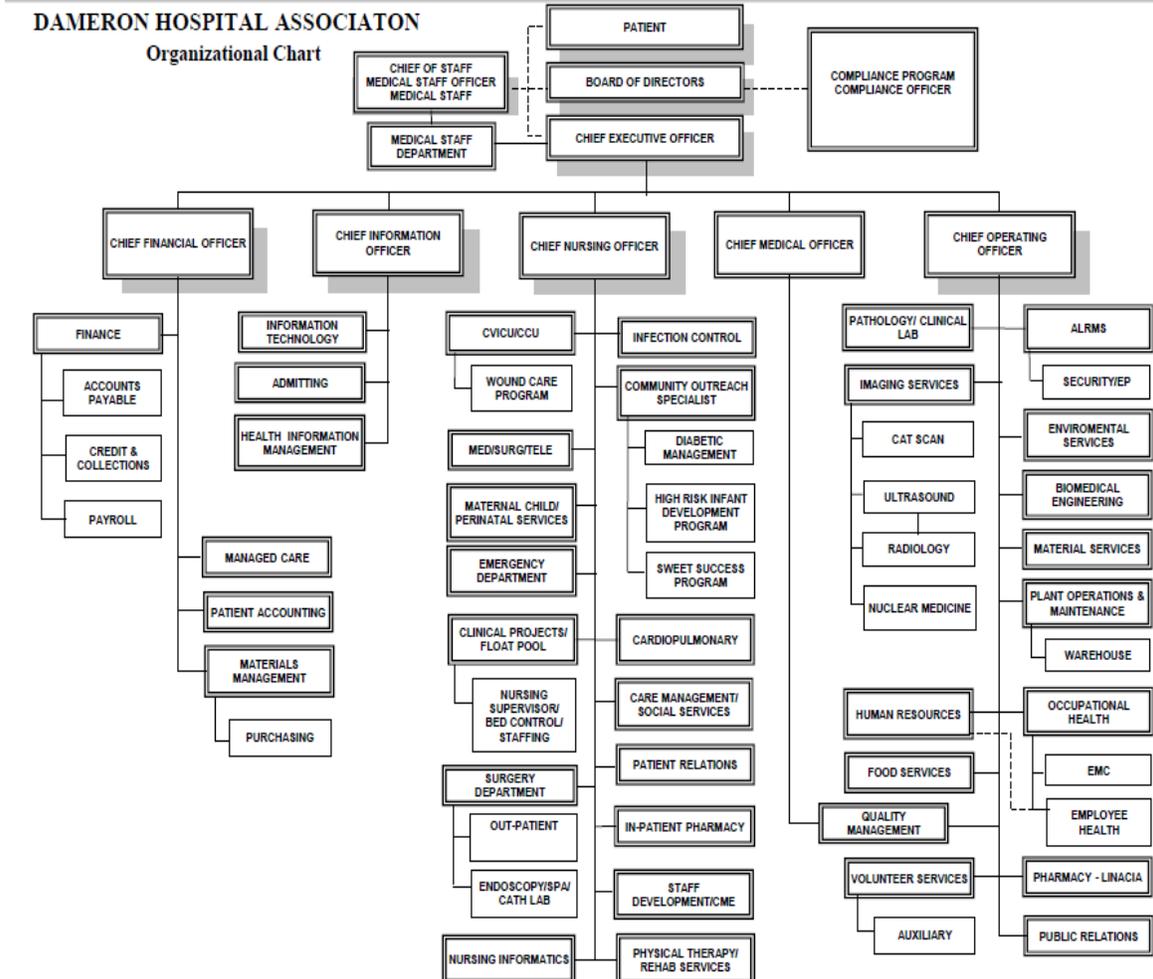
Public Review

The Community Outreach specialists act as the central points of focus for evaluation of the Community Benefit Plan. Community outreach specialists representing Dameron Hospital attend collaborative meetings and community-agency functions throughout San Joaquin County. They also collect, analyze and summarize data related to program performance. Results are shared with community agencies and groups with whom Dameron collaborates with.

A review committee comprised of the Community Outreach specialists, the Chief Financial Officer, the Director of Finance, members of the Executive Corporate Compliance Committee, and other staff deemed appropriate meet to evaluate program performance issues, data collection, resource distribution and progress towards required compliance. The annual Community Benefit Plan is reported to the Governing Board for approval and is also reported to the Executive Corporate Compliance Committee. The annual Community Benefit Plan is made available to the public via the hospital's public website, www.dameronhospital.org. Requests for the plan or comments may be directed to the Community Outreach specialists at (209) 461-3136.

Appendices

Appendix A



Appendix B

	Charity Care	
	ID Number:	20-01-0034
	Manual:	Departmental Manual
	Division:	Finance
	Policy Level:	Multi-Departmental
	Review Date:	12/20/2014
	Status:	4. Approved
	Primary Owner:	Craig Haupt/Dameron

Policy & Procedure Body

I. Policy:

Full charity or partial charity discount shall be offered to those individuals who demonstrate an inability to pay for medically necessary services.

II. Purpose:

To ensure that every person receives required services, regardless of ability to pay.

III. Definitions:

None

IV. Text:

Consistent with our mission to operate and furnish care, treatment, hospitalization and other services, with or without compensation, the hospital will provide a full charity or charity discount program.

In order to balance a patient's need for financial assistance and the hospital's broader fiscal responsibilities to the community of maintaining a financially healthy facility, the hospital must determine the patient's ability to contribute to the cost of their care, based on their individual ability to pay as well as the requirements of California Health & Safety Code 127400-127462.

Effective January 1, 2011, patients that are uninsured or have high medical costs who are at or below 350% of the federal poverty level may be eligible for charity care and discounted payments from emergency room physician that provide emergency medical services in a general acute care hospital.

V. Procedure

Patients may apply for charity under Section I or Section II as described below.

A. Section I: Charity Discount Requirements of California Health & Safety Code 127400-127462

There are two types of patients who shall be eligible to apply for participation under the charity discount provision of the charity policy; self-pay patients and patients with high medical costs. Patients seeking qualification of coverage under the charity discounted provision of California Health & Safety Code 127400-127462 must provide documentation of eligibility by submitting either recent check stubs or recent income tax returns. Failure to return a complete application within 30 days shall result in denial of the request for charity consideration. Subsequent requests for consideration will be processed at the sole discretion of the hospital.

1. Self-pay patient: If an uninsured patient's documented income falls at or below 350% of the Federal poverty level, the patient will receive charity discounted rates in accordance with the

Medicare fee schedule for the services received by the patient. If the hospital provides a service for which there is no established payment by Medicare or other government-sponsored program of health benefits in which the hospital participates, the hospital shall establish an appropriate charity discount amount.

2. A patient with high medical costs: If a patient falls at or below 350% of the Federal poverty level and does not receive a discounted rate as a result of third party coverage, and has annual out of pocket costs incurred at the hospital or other medical providers in the prior 12 months that exceed 10% of family income, the patient shall qualify for a charity discount. The patient shall be liable for the lesser of the balance after the insurance payment, or the applicable Medicare rate.

Patients that provide required documentation and qualify under the income requirements of this section may also qualify for an extended, interest free, payment plan that shall be reasonable and may be negotiated by the patient and the hospital. Patients attempting to qualify for eligibility in good faith or to settle an outstanding bill with the hospital by negotiating a reasonable payment plan or by making regular partial payments of a reasonable amount shall not be sent to an outside collection agency or other assignee, unless that entity has agreed to comply with the provisions of this policy. The hospital or hospital's assignee shall not report adverse information to a consumer credit reporting agency or commence civil action against the patient for nonpayment at any time prior to 150 days after initial billing.

B. Section II: Other Charity Care

Notwithstanding the eligibility requirements of the charity discount program, the hospital will also provide a charity program to those who demonstrate an inability to pay regardless of insurance status.

In determining an individual's ability to pay, it is important to distinguish between an individual's inability to pay versus unwillingness to pay. In order to evaluate inability versus unwillingness, the following criteria, if available, should be used:

1. The employment status of the patient, spouse, or parents along with the prospect of future earnings being sufficient to meet the obligation within a reasonable period of time.
2. Family size.
3. Net worth should be considered including all liquid and non-liquid assets owned, less liabilities and claims against assets. Retirement and deferred-compensations plans qualified under the Internal Revenue Code as well as nonqualified deferred-compensation plans shall not be used in determining net worth. Furthermore, the first \$10,000 of patient's monetary assets shall not be counted in determining eligibility nor shall 50% of a patient's monetary assets over the first \$10,000. Note: The hospital may require waivers or releases from the patient authorizing the hospital to obtain verifying information from financial or commercial institutions, or other entities that hold or maintain the monetary assets to verify their value.
4. The amount(s) and frequency of the hospital bill(s) in relation to the factors outlined above.
5. All other resources should first be applied, including Medi-Cal, Medicare, Victim of Violent Crime, and all other third-party sources.
6. Patient's financial reports (i.e. tax returns, W2 forms, pay stubs, etc.) may be used to verify inability to pay as well as investigative tools by the Credit Department (i.e. credit reports, skip tracing, etc.).
7. Bankruptcy Court determination of inability to pay all or a portion of the account.

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8. Homelessness (no demographic information given at time of service; i.e., address, city, state, zip, social security number, date of birth, etc.).

The Credit and Collections Department will be responsible for determining an individual's ability to pay utilizing all or a portion of the factors outlined above.

The determination of a patient's eligibility for charity care should be made as close to the time of admission as possible, but may be made at any time adequate eligibility information is available. In many instances considerable time and effort is required to adequately determine a patient's financial condition.

If an individual is determined to be unable to pay for all or part of the account, and there are no other avenues available to collect on the account, then the uncollected amount will be written off as charity care. Otherwise, the account will be pursued as outlined in the hospital's collection policy and procedure. Under no circumstances will contractual write-offs, discounts or any other administrative or courtesy allowances be written off as charity care.

The hospital or other assignee which is an affiliate or subsidiary of the hospital shall not, in dealing with patients eligible under any portion of this policy, use wage garnishments or liens on primary residences as a means of collection.

A collection agency or other assignee that is not a subsidiary or affiliate of the hospital shall not, in dealing with patients eligible under any portion of this policy, use as a means of collecting unpaid hospital bills, any of the following:

1. A wage garnishment, except by order of the court.
2. Notice or conduct a sale of the patient's primary residence.

Nothing in this policy shall preclude the hospital, collection agency or other assignee from pursuing reimbursement and any enforcement remedy or remedies from third-party liability settlements, tortfeasors, or other legally responsible parties.

In the event of a dispute, a patient may seek review from the hospital's Patient Relations and Service Excellence Coordinator.

VI. References:

Internal Revenue Code section 501(c)(3))

California Health & Safety Code, **Chapter 2.5 of Division 107, Article 1, Hospital Fair Pricing Policies 127400-127462**

U.S. Department of Health and Human Services website at: <http://aspe.hhs.gov/poverty/>

VII. Cross References:

Collection of Past Due Accounts Policy & Procedure, #20-01-0033

VIII. Approvals:

Operations Document Review Committee – 04/27/2011

Chief Financial Officer – 11/18/2011

Board of Directors – 12/20/2011

Document Link Manager

No Documents Linked

<http://dhalts01/policy/policy.nsf/7db0ebfd3e210600872571470079e3a4/733bf6185225c276...> 5/1/2013

Attachment Manager

No Attachments

Appendix C

	Uninsured Patient Discount	
	ID Number:	20-01-0036
	Manual:	Departmental Manual
	Division:	Finance
	Policy Level:	Multi-Departmental
	Review Date:	12/20/2014
	Status:	4. Approved
	Primary Owner:	Cyrus Dah/Dameron

Policy & Procedure Body

I. Policy

A. Dameron Hospital recognizes the need to provide accessible and affordable health care services to the community in which we serve. The uninsured patient discount is intended to apply to patients who do not qualify for charity care, but still may face hardships paying their medical bills. Patients who are offered charity care receive free or substantially discounted services, and thus shall not also receive the UPD. The UPD does not apply to co-payments, deductibles, or cost shares.

B. Dameron also recognizes that it is the policy of the State of California to reward its citizens for their prudence in obtaining insurance coverage for their health care needs. The UPD policy and procedure shall at all times remain consistent with State policy.

II. Purpose

To provide uninsured patients equitable discounts for medically necessary services from the hospital's reasonable, necessary, usual and customary billed charges as well as information regarding the availability of charity care or government program assistance as required by Health and Safety Code Section 1339.585, effective January 01, 2006.

III. Definitions

- HLA - Hospital Lien Act
- HMO - Health Maintenance Organization
- PPO - Preferred Provider Organization
- UPD - Uninsured Patient Discount

IV. Text

This Policy and Procedure should be read in conjunction with Charity Care Policy and Procedure #20-01-0034.

V. Procedure

A. Uninsured Patient Eligibility Requirements

The patient or patient's guarantor has the burden of proving eligibility for the UPD. "Uninsured Patient" means either: (1) A patient who is responsible to pay a hospital bill that is not covered, payable or discounted by any type of insurance, governmental program, or responsible third party or entity; or (2) A patient whose benefits under insurance have been exhausted.

In order to qualify as an uninsured patient, the patient or patient's guarantor must verify that he or she is not aware of any insurance, governmental program or third party or entity responsible to pay all or part of the patient's billed charges, or empowered in some manner to discount the billed charges. Insurance in this case includes but is not limited to any HMO, PPO, indemnity coverage, consumer-directed health plan, liability insurance of any kind, workers compensation insurance, legally permissible self-insurance

of any kind, and/or medical payments coverage of any kind.

B. Uninsured Patient Discount

The UPD is a write-off of a portion of the hospital's reasonable, necessary, usual and customary billed charges, taken at the time the uninsured patient is billed for the hospital services rendered. The amount of the UPD shall be consistent with the policy objectives and purposes outlined above.

C. Annual Determination of Uninsured Discounts

The uninsured patient discount is set by the hospital **annually** at an amount between the highest and lowest discounts from billed charges for commercial health plans.

D. Notification of Availability of Uninsured Patient Discount and Other Financial Assistance

The hospital will make a good faith effort to identify each patient who is potentially eligible for a UPD, and will provide such patients and/or guarantors with written information regarding UPD eligibility. Hospital shall provide this information to patients and/or guarantors as soon as practical following the hospital's recognition that payers other than the patient or guarantor in all likelihood do not reasonably exist.

E. Third Party Liens

This UPD policy and procedure does not apply in any way to charges collected under the California Hospital Lien act ("HLA"), California Civil Code sections 3045.1 to 3045.6. HLA collections shall be in the amount of the hospital's reasonable, necessary, usual and customary billed charges.

VI. References

Health and Safety Code Section 1339.585
California Civil Code sections 3045.1 to 3045.6

VII. Cross References

Charity Care Policy and Procedure, #20-01-0034

VIII. Associated Documents

None

IX. Approvals

Operations Document Review Committee – 05/25/2011
Chief Financial Officer – 11/18/2011
Board of Directors – 12/20/2011

Document Link Manager No Documents Linked

Attachment Manager No Attachments

To learn more about Dameron Hospital, please visit our website at

www.dameronhospital.org

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Serving the Community for Over 100 Years