# Mercy Medical Center Community Benefit 2020 Report and 2021 Plan

# **Adopted October 2020**





#### A message from

Charles Kassis, President and CEO of Mercy Medical Center, and Humberto Barragan, D.O., Chairperson of the Dignity Health Mercy Medical Center Community Board.

Dignity Health's approach to community health improvement aims to address significant health needs identified in the Community Health Needs Assessments that we conduct with community input, including from the local public health department. Our initiatives to deliver community benefit include financial assistance for those unable to afford medically necessary care, a range of prevention and health improvement programs conducted by the hospital and with community partners, and investing in efforts that address social determinants of health.

Mercy Medical Center shares a commitment with others to improve the health of our community, and delivers programs and services to help achieve that goal. The Community Benefit 2020 Report and 2021 Plan describes much of this work. This report meets requirements in California state law (Senate Bill 697) that not-for-profit hospitals produce an annual community benefit repo11 and plan. Dignity Health hospitals in Arizona and Nevada voluntary produce these reports and plans, as well. We are proud of the outstanding programs, services and other community benefits our hospital delivers, and are pleased to report to our community.

In fiscal year 2020 (FY20), Mercy Medical Center provided \$29,373,444 in patient financial assistance, unreimbursed costs of Medicaid, community health improvement services and other community benefits. The hospital also incurred \$75,993,291 in unreimbursed costs of caring for patients covered by Medicare.

The hospital's Community Board reviewed, approved and adopted the Community Benefit 2020 Report and 2021 Plan at its October 22, 2020 meeting.

Thank you for taking the time to review our report and plan. We welcome any questions or ideas for collaborating that you may have, by reaching to out to Mercy Administration, 209-564-5002.

Charles Kassis, President/CEO

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Barragan, D.O.,

Chairperson, Community Board.

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# **At-a-Glance Summary**

# **Community** Served



Merced County is a county located in the northern San Joaquin Valley in the state of California. Merced is the county seat of Merced County. The total population is about 162,603. Two colleges reside in Merced County; University of California and Merced Junior College. Merced is the fastest growing county in California. The Hispanic/Latino population is 57.3% of the total population.

#### Economic Value of Community Benefit

\$29,373,444 in patient financial assistance, unreimbursed costs of Medicaid, community health improvement services, community grants and other community benefits



\$46,619,847 in unreimbursed costs of caring for patients covered by Medicare

#### Significant Community Health Needs Being Addressed

The significant community health needs the hospital is helping to address and that form the basis of this document were identified in the hospital's most recent Community Health Needs Assessment (CHNA). Needs being addressed by strategies and programs are:



- Access to Healthcare Services
- Cancer
- Diabetes
- Heart Disease & Stroke
- Family Planning-Infant Health
- Nutrition, Physical Activity & Weight
- Respiratory Diseases

#### FY20 Programs and Services



The hospital delivered several programs and services to help address identified significant community health needs. These included:

- Zumba and Yoga classes
- Diabetes classes are in English and Spanish
- Chronic Disease Self-Management, six week program
- Cancer Support Group,
- Cancer Patient's patients, Look Good, Feel Better program, Wig Bank and I Can Cope resources
- Stroke Support and resource class
- Child Birth Classes
- Lactation Classes and Breast Feeding Support Group
- Community Spiritual Services, "Ministry to the Sick" classes

# FY21 Planned Programs and Services



FY20 programs will continue in FY21 with the intention of them continuing on for the next three years. Some of the classes will continue a virtual classes until it is safe to meet in a classroom.

This document is publicly available online at <a href="https://www.dignityhealth.org/central-california/locations/mercymedical-merced/about-us/community-benefit-report">https://www.dignityhealth.org/central-california/locations/mercymedical-merced/about-us/community-benefit-report</a>

Written comments on this report can be submitted to the Mercy Medical Center's Community Health Office, 333 Mercy Avenue, Merced California or by e-mail to Janice. Wilkerson@dignityhealth.org.

# **Our Hospital and the Community Served**

## **About Mercy Medical Center**

Mercy Medical Center is a member of Dignity Health, which is a part of CommonSpirit Health.

Mercy Medical Center (MMC) is a 186-bed acute care, not-for-profit hospital located in the city of Merced, California. Mercy is a Catholic facility sponsored by the religious order known as the Congregation of Dominican Sisters of Saint Catherine of Siena. On May 2, 2010 MMC moved into a brand new 262,000 square foot facility on Mercy Avenue. MMC has a staff of more than 1,300 and professional relationships with more than 250 local physicians. Major programs and services include: one licensed acute care facility with a family birthing center, intensive care unit, emergency care and four floors housing, telemetry and medical/surgical nursing units. There are three outpatient facilities, Mercy UC Davis Cancer Center, Mercy Outpatient Center and the Mercy Medical Pavilion. Services at these outpatient centers include home care, physical and cardiac rehabilitation, ambulatory surgery, cancer care, laboratory, imaging and endoscopy. MMC primary service area includes Merced, Atwater, Winton and Planada for a total of 160,215 residents in Merced County. Secondary service areas include Los Banos, Livingston, Dos Palos, Chowchilla, Le Grand and Mariposa totaling 104,122 lives.

MMC operates three rural health clinics that are part of the UC Davis Family Practice Residency Program. All three clinic's patient population is primarily Medi-Cal patients. The clinics are; Family Care a primary care clinic, Kids Care a pediatric clinic and General Medicine Clinic a specialty clinic.

#### **Our Mission**

As CommonSpirit Health, we make the healing presence of God known in our world by improving the health of the people we serve, especially those who are vulnerable, while we advance social justice for all.

#### Our Vision

A healthier future for all – inspired by faith, driven by innovation, and powered by our humanity.

# Financial Assistance for Medically Necessary Care

Mercy Medical Center delivers compassionate, high quality, affordable health care and advocates for members of our community who are poor and disenfranchised. In furtherance of this mission, the hospital provides financial assistance to eligible patients who do not have the capacity to pay for medically necessary health care services, and who otherwise may not be able to receive these services.

A plain language summary of the policy is at the end of this report. The financial assistance policy and plain language summary are on the hospital's web site.

#### Description of the Community Served

The city of Merced is the County seat and is the largest of the six incorporated cities in Merced County. Merced County encompasses 1,935.21 square miles. Between the 2000 and 2010 US Censuses, the population of Merced County increased by 44,646 person, or 21.1%. This is a greater proportional increase than seen across both the state and the nation overall. Merced County is predominantly urban, with 85.7% of the population living in areas designated as urban.

Merced County is located in northern San Joaquin Valley section of the Central Valley. It is located north of Fresno County and southeast of Santa Clara County. Mercy Medical Center serves the primary areas of Merced City with the zip codes 95340, 95341, 95348. Other county areas include Atwater 95301, Planada 95365, Winton 95388, Chowchilla 93610, Livingston 95334, Los Banos 93635, Dos Palos 93620



and Mariposa 95338. A summary description of the community is below. Additional details can be found in the CHNA report online.

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#### **Total Population** 162,603

White Non Historia

#### Race

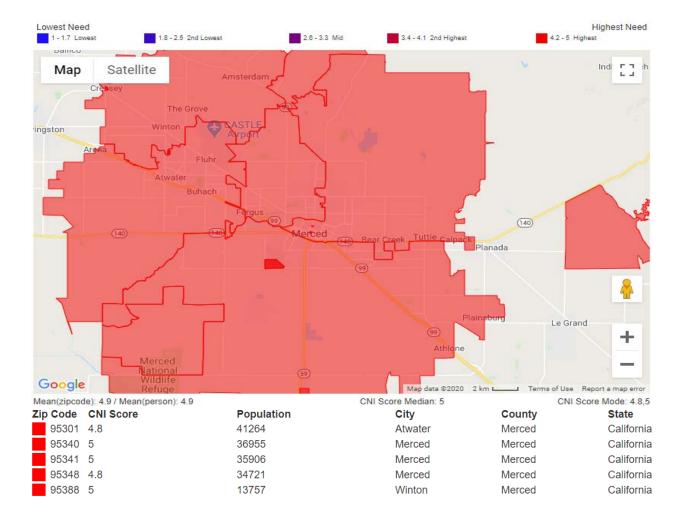
•	White – Non-Hispanic	26.3%
•	Black/African American – Non-Hispanic	3.8%
•	Hispanic or Latino	57.3%
•	Asian/Pacific Islander	9.5%
•	All Others	3.1%
•	% Below Poverty	21.5%
•	Unemployment	13.4%
•	No High School Diploma	28.7%
•	Medicaid (MediCal) (household)	12.7%
•	Uninsured (household)	7.3%

Source: Claritas Pop-Facts 2020; SG2 Market Demographic Module

#### Community Need Index

One tool used to assess health need is the Community Need Index (CNI) created and made publicly available by Dignity Health and IBM Watson Health. The CNI analyzes data at the zip code level on five factors known to contribute or be barriers to health care access: income, culture/language, education, housing status, and insurance coverage.

Scores from 1.0 (lowest barriers) to 5.0 (highest barriers) for each factor are averaged to calculate a CNI score for each zip code in the community. Research has shown that communities with the highest CNI scores experience twice the rate of hospital admissions for ambulatory care sensitive conditions as those with the lowest scores.



# **Community Assessment and Significant Needs**

The hospital engages in multiple activities to conduct its community health improvement planning process. These include, but are not limited, to conducting a Community Health Needs Assessment with community input at least every three years, identifying collaborating community stakeholder organizations, describing anticipated impacts of program activities and measuring program indicators.

### Community Health Needs Assessment

The health issues that form the basis of the hospital's community benefit plan and programs were identified in the most recent CHNA report, which was adopted in October 2018.

The CHNA contains several key elements, including:

- Description of the assessed community served by the hospital;
- Description of assessment processes and methods;
- Presentation of data, information and findings, including significant community health needs;
- Community resources potentially available to help address identified needs; and
- Discussion of impacts of actions taken by the hospital since the preceding CHNA.

Additional detail about the needs assessment process and findings can be found in the CHNA report, which is publicly available at <a href="https://www.dignityhealth.org/central-california/locations/mercymedical-merced/about-us/community-benefit-report">https://www.dignityhealth.org/central-california/locations/mercymedical-merced/about-us/community-benefit-report</a> or upon request at the hospital's Community Health office.

# Significant Health Needs

The most recent community health needs assessment identified the following significant community health needs:

- Access to Healthcare Services: Barriers identified were appointment availability and trying to find a physician. The Primary care physician ratio is very poor.
- Cancer: Cancer is identified as the leading cause of death with lung cancer and prostate cancer higher than the state rate.
- **Diabetes:** 15% adults report having been diagnosed with diabetes. Diabetes is perceived as a major problem by 65.2% of the population.
- **Heart Disease & Stroke:** Heart disease and stroke are among the most widespread and costly health problems. Fortunately, they are among the most preventable.
- Nutrition, Physical Activity, & Weight: Diet and weight are related to health status.
- **Respiratory Diseases:** Asthma and COPD are significant public health burdens.
- **Substance Abuse:** The effects of substance abuse are cumulative, significantly contributing to costly social, physical, mental, and public health problems.
- **Dementia, Including Alzheimer's disease:** Alzheimer's disease is the most common cause of dementia and the 6<sup>th</sup> leading cause of death among adults 18 years and older.
- **Family Planning Infant Health:** The well-being of mothers, infants, and children is an important public health goal. Their well-being determines the health of the next generation.

- **Injury & Violence:** Both unintentional injuries and those caused by acts of violence are among the top 15 killers for Americans of all ages.
- **Kidney Disease:** Chronic Kidney disease and end-stage renal disease are significant public health problems and a major source of suffering and poor quality of life for those afflicted.
- **Mental Health:** Mental health plays a major role in people's ability to maintain good physical health.
- **Potentially Disabling Conditions:** Arthritis, osteoporosis and chronic back conditions affects 1 in 5 adults and continues to be the most common cause of disability.

#### Significant Needs the Hospital Does Not Intend to Address

Mercy Medical Center has chosen to not address the following health needs: Substance Abuse, Dementia, & Alzheimer's disease, Family Planning, Injury & Violence and Potentially Disabling Conditions. Patients will be given community resources to address any of these health needs which would apply to that specific individual. Mercy does not have the capacity or services to address these issues and all are being addressed by another organization in Merced County.

# 2020 Report and 2021 Plan

This section presents strategies and program activities the hospital is delivering, funding or on which it is collaborating with others to address significant community health needs. It summarizes actions taken in FY20 and planned activities for FY21, with statements on anticipated impacts, planned collaboration, and patient financial assistance for medically necessary care. Program Digests provide detail on select programs' goals, measurable objectives, expenses and other information.

This report specifies planned activities consistent with the hospital's mission and capabilities. The hospital may amend the plan as circumstances warrant. For instance, changes in significant community

health needs or in community assets and resources directed to those needs may merit refocusing the hospital's limited resources to best serve the community.

The anticipated impacts of the hospital's activities on significant health needs are summarized below, and for select program initiatives are stated in Program Digests. Overall, the hospital anticipates that actions taken to address significant health needs will: improve health knowledge, behaviors, and status; increase access to needed and beneficial care; and help create conditions that support good health. The hospital works to evaluate



impact and sets priorities for its community health programs in triennial Community Health Needs Assessments.

# Creating the Community Benefit Plan

Mercy Medical Center is dedicated to improving community health and delivering community benefit with the engagement of its management team, board, clinicians and staff, and in collaboration with community partners.

The Mercy Community Board, the Community Advisory Committee are composed of community members who provide stewardship and direction for the hospital as a community resource (see Appendix A). These parties review community benefit plans and programs updates prepared by the hospital's community health director and other staff.

As a matter of Dignity Health policy, the hospital's community health and community benefit programs are guided by five core principles. All of our initiatives relate to one of more of these principles:

- Focus on Disproportionate Unmet Health-Related Needs
- Emphasize Prevention
- Contribute to a Seamless Continuum of Care
- Build Community Capacity
- Demonstrate Collaboration

Mercy Medical Center's community health programs reflect our commitment to improve the quality of life in the community we serve. The Community Advisory Committee (CAC), Community Board, Mercy Administration along with key management staff provides oversight and policy guidance for all charitable services and activities supported by the hospital. The people on these committees and boards represent a health professionals as well as community residents. This group reviews the CHNA to determine that MMC's community health programs are addressing identified needs. The CAC members meets on a quarterly basis and the Community Board meets monthly. Identified needs are also reviewed by the Mercy Foundation to determine their philanthropic strategies.

A roster of members in the CAC and Community Board is attached in Appendix A.

#### Impact of the Coronavirus Pandemic

The coronavirus (COVID -19) pandemic caused an unprecedented challenge to the day to day operations at Mercy Medical Center. Strategies, policies, initiatives had to be reexamined and changed to best meet the needs of our patients, staff and community.

In FY20, MMC took the following actions to respond to the COVID pandemic.

- In March 2020 a COVID incident command center was established. Staff and physicians who ran the command center met daily until moving the command center to a virtual platform in July.
- For the safety of the volunteers, adult, high school and college student volunteers were asked to reframe from covering their shift until further notification
- From March until July all staff received daily written briefings from the command center, briefings are now sent out once a week.
- To help control exposure to COVID visitors were no longer allowed to enter the hospital. Only family of a critically ill patient were allowed a 20 minute visit. Staff assisted patients with an iPad so as to communicate virtually with their family.
- If the patients was unable to communicate then their designated support person was called daily by the nurse, physician or hospital chaplain.
- "Kindness Boxes" containing milk, eggs, dairy products, produce and meat were delivered to employees, Cancer Center patients and any other community family affected by the pandemic. From March 2020 to October 2020, 4,400 boxes have been delivered.
- When out-patient surgeries were reinstated, all surgical patients were tested prior to their procedure for the COVID virus.
- In early March, triage tents were set up outside of the emergency department to screen and segregate respiratory and patients under investigation (PUI). The tents were decommissioned in early summer. In preparation for the coming flu season the tents have again been set up and began being used in September.
- Throughout the pandemic the Incident Command held leader briefings allowing staff time to share best practices, trouble shoot and keep up to date on the ever changing needs of our patients and community.
- Community health education classes all went virtually on ZOOM. This is indicated throughout this report.
- The command center gave staff daily COVID briefings that are now twice a week.
- Hospital chaplains established a hot line for staff during this extremely stressful, challenging time for them and their families.
- Administration and the employee engagement team provided, snacks, gifts and meals to staff to help keep moral positive.
- Our community offered support to our staff by working with the Mercy Foundation, businesses, service groups and individuals donated masks, PPE, snacks, letters, meals and other tokens of appreciation.

#### Report and Plan by Health Need

The tables below present strategies and program activities the hospital has delivered or intends to deliver to help address significant health needs identified in the community health needs assessment.

They are organized by health need and include statements of strategy and program impact, and any collaboration with other organizations in our community.



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#### Health Need: Access to Healthcare Services

Strategy or Program Name	Summary Description	Active FY20	Planned FY21
Family Practice Clinic	Clinic is in affiliation with UC Davis Residency program. Serves primarily Medi-Cal patients and the underinsured.		$\boxtimes$
Kids Care Pediatric Clinic	Pediatric and obstetric clinic with OB services provided by contracted physicians from Merced Faculty Associates. Primarily serves managed Medi-Cal and underinsured patients.		
General Medicine Clinic	Clinic to provide rotating specialty physicians who serve the underinsured, working poor individuals and patients on Medi-Cal.		
Patient Financial Assistance Program	Financial assistance available to uninsured and or underinsured patients.	$\boxtimes$	
Mercy ED and Inpatient Volunteer Program	UC Merced students who are enrolled in premed classes volunteer in the emergency department and on the inpatient medical floors. Program encourages students to return to Merced County once they have become licensed or certified in their particular medical specialty. Due to the COVID 19 pandemic, in March 2020 this program was put on hold until COVID clearance.		

**Impact**: Provide well medicine to patients to prevent future illness and to treat medical needs of the uninsured and underinsured population. By being involved with the University who are pursuing a career in medicine may practice in Merced County.

Collaboration: Merced Faculty Associates, local specialty physicians, UC Merced



#### **Health Need: Cancer**

Strategy or Program Name	Summary Description	Active FY20	Planned FY21
Mercy UC Davis Cancer Center	Provides quality oncology care to the community.  Partners with the American Cancer Society for various outreach programs and support services. CC became accredited by the Commission on Cancer Accredited Program, a quality program of the American College of Surgeons.		
American Cancer Society	The Collaborative Action Plan is a partnership with ACS and the cancer center to provide support and resources for the cancer center patients.		
Cancer Support Group	Meets monthly at the cancer center, is facilitated through Mercy Spiritual Services and is open to any person affected by cancer, patient or family member, regardless of where they receive treatment.		
Paint Night	Teacher taught therapeutic paint classes for cancer patients and their support person.		
Accessible Yoga	A modified yoga program tailored to the individual cancer patient's physical abilities. This became a ZOOM class starting in March 2020.		

**Impact:** Cancer patients given high quality care without having to leave Merced County. Cancer patients and their families will feel less stressed, will feel supported with the needed resources to help them cope while going to their oncology treatments.

**Collaboration:** American Cancer Society, Mercy Foundation, Dignity Health's Community Outreach department, Mercy UC Davis Cancer Center's Community Outreach team and Merced School District.



#### **Health Need: Diabetes**

Strategy or Program Name	Summary Description	Active FY20	Planned FY21
Chronic Disease Self - Management Program	A six week comprehensive, outcomes-based program developed by Stanford University which includes education and action planning for participants living with a chronic disease. Session were offered on ZOOM after March 2020 due to COVID.	X	
Diabetes Classes	Weekly diabetes education classes in English and Spanish. Classes provide the opportunity for		

	participants to bond and offer each other support. Classes were offered on ZOOM after March 2020 due to COVID.	
Diabetes Self- Management Program	A six week comprehensive, outcomes-based program developed by Stanford University which includes education and action planning for participants living with diabetes. Looking at possibly transitioning to DEEP in the future. Session were offered on ZOOM after March 2020 due to COVID.	
National Diabetes Prevention Program	Partnership with the Center for Disease Control offering participants to join a year-long lifestyle coach program.	

**Impact:** Diabetes patients will better manage their diabetes and help pre-diabetic individuals prevent the onset of the disease.

Collaboration: Center for Disease Control, Stanford University



### **Health Need: Heart Disease & Stroke**

Strategy or Program Name	Summary Description	Active FY20	Planned FY21
Certified Stroke Hospital	As a certified primary stroke center there is a dedicated stroke program focused on bringing high quality care to our community. The Stroke Center is certified by the Joint Commission and is staffed by qualified medical professionals trained in the care of the patient suffering from a stroke. The program focuses on high quality individualized care to meet the needs of our patient and to improve the patient outcomes.		
Stoke Telemedicine	The telemedicine for the treatment of stoke helps to bring highly specialized care to our community. It brings immediate access to Board Certified Neurologists who offer lifesaving medical care when time and treatment is of the highest importance.		
Cardia Rehab	Physical therapy and behavioral support for individuals with heart disease. Due to the COVID pandemic classes were put on hold starting March 2020 and are scheduled to resume November 2, 2020.		
Stroke Support & Resource Class	Meeting were quarterly, now offered weekly to offer individuals information on preventing another stroke, coping with disabilities after a stroke and support for caregivers. Due to the COVID pandemic, in July 2020 meetings became ZOOM meetings once a month.		

**Impact:** To provide the community education about the signs and symptoms of a stroke so that potential stroke patients are brought to the ED as quickly as possible. For stroke patients and patients with heart disease these programs will help them to manage their challenges as they cope with their lifestyle changes. Families of stroke and heart disease patients will feel less stressed and will learn about the resources available to them and their loved one.

**Collaboration:** American Heart Association



### **Health Need: Nutrition, Physical Activity and Weight**

Strategy or Program Name	Summary Description	Active FY20	Planned FY21
STEPS	A joint replacement educational program to; prepare a patient for joint replacement, stay in hospital, recovery exercise, nutrition and home environment. Offers a walking club and is open to any individual who has had a joint replacement. Program is offered in English and Spanish. Due to COVID classes were stopped in June 2020 and are currently offered on line. The walking club, walks at the Merced Mall. When the mall says they can return the club will start again.		
Zumba	Community Zumba classes offered twice a week to any adult individuals in the community. Dance exercise. Classes went on ZOOM starting March 2020 due to the COVID pandemic.		
Yoga	Exercise classes one time a week for adults to increase balance, strengthen muscles, and reduce stress and to help maintain flexibility. Classes went on ZOOM starting March 2020 due to the COVID pandemic.		
School Outreach Program	Community Health Educators visit local schools providing speakers to address with students; weight management, good nutrition and the importance of physical activity. This program went on hold in March 2020 due to COVID.		
Family Health Festival & 5K Stroke Awareness Run	An annual event with over 40 health vendors providing educational materials, screenings and physical activities. The 5K run benefits the Mercy stroke program and provides the runners with stroke education. This event was to take place in May 2020, it was cancelled due to COVID.		
Walk With Ease	This is a six week program that targets people with arthritis. Will resume when it safe to do so.		

**Impact:** Community members will become more active, learn to manage their weight, better understand nutritional needs and encourage others to do the same.

**Collaboration:** City of Merced Parks and Recreation, the Arthritis Foundation and the Merced Mall



#### **Health Need: Respiratory Diseases**

Strategy or Program Name	Summary Description	Active FY20	Planned FY21
Asthma Coalition	Mercy is a partner on the coalition and the steering committee. Participates in World Asthma Day and community health fairs. After March 2020 health fairs were put on hold and coalition meeting went to ZOOM due to the COVID pandemic.		
Smoking Cessation Classes	Classes to help persons who smoke to stop by providing education, support and resources. Classes are supported by the Mercy Cancer Center.		
Tobacco Coalition	Mercy is a partner in the "education to the community" component of the coalition. Participates in community health fairs. After March 2020 health fairs were put on hold and coalition meeting went to ZOOM due to the COVID pandemic.		
Asthma Self- Management Program	In collaboration with the CA Department of Public Health to provide asthma education to persons with the condition to be better self-managers.		

**Impact:** Community members will better understand how to manage their asthma. By providing education will be less likely to start smoking and those that do smoke will hopefully stop.

**Collaboration:** CA Department of Public Health, Asthma Coalition, Tobacco Coalition



#### **Health Need: Family Planning – Infant Health**

Strategy or	Summary Description	Active	Planned
Program Name		FY20	FY21
Childbirth Classes	Education and exercises to help pregnant women and their support person to prepare for childbirth. After March 2020 classes were offered one on one on a private Facebook account due to COVID.		

Lactation Classes	Class covers the basics of breastfeeding; reasons to breastfeed, how to hold and latch your baby and how your support person can help. After March 2020 classes were offered one on one on a private Facebook account due to COVID.	
Baby Café	Child birth educator facilitates this breastfeeding support group. Mothers & new moms help each other with the challenges they may encounter while breastfeeding and with postpartum depression. After March 2020 classes were offered one on one on a private Facebook account due to COVID.	
Caesarian Class	OB RN presents information to mothers to prepare them for their caesarian birth.	

**Impact**: Partnerships and trust within the community are strengthened through our community classes.

Collaboration: Family Practice Clinics, OB/GYN Physicians

#### **Community Grants Program**

One important way the hospital helps to address community health needs is by awarding financial grants to non-profit organizations working together to improve health status and quality of life. Grant funds are used to deliver services and strengthen service systems, to improve the health and well-being of vulnerable and underserved populations.

In FY20, the hospital awarded the grants below totaling \$141,406. Some projects also may be described elsewhere in this report.

Grant Recipient	Project Name	Amount
NAMI Merced County	We Care – Merced County	\$14,000
Alpha Pregnancy Help Center	Alpha Community First Trimester Health- Wellbeing Program	\$15,000
JMJ Maternity Homes	Mary's Mantle Maternity Home Shelter	\$27,000
Merced Rescue Mission	Home Medical Respite Care	\$85,406

# **Program Digests**

The following pages include Program Digests describing key programs and initiatives that address one or more significant health needs. The digests include program descriptions and intervention actions, statements of which health needs are being addressed, any planned collaboration, and program goals and measurable objectives.

Mercy UC Davis Cancer Center Community Program				
Significant Health Needs Addressed	<ul> <li>Access to Healthcare Services</li> <li>X Cancer</li> <li>Diabetes</li> <li>Family Planning – Infant Health</li> <li>Heart Disease &amp; Stroke</li> <li>Nutrition, Physical Activity &amp; Weight</li> <li>Respiratory Diseases</li> </ul>			
Program Description	The community programs offered at the Mercy UC Davis Cancer Center are funded through the Mercy Foundation as well as through the Cancer Center's budget. The hospital provides a team of staff from all disciplines to help coordinate, facilitate and raise awareness of the program for patients as well as the community at large. The program provides to the community; information about cancer, education, support, staff, location for programs and snacks.			
Community Benefit Category	A1-D Community Health Education			
	FY 2020 Report			
Program Goal / Anticipated Impact	To address the need in the community for supportive cancer programs, education and resources for cancer patients, their families and/or support persons.			
Measurable Objective(s) with Indicator(s)	<ul> <li>Track the number of community outreach/education events that the Cancer Center participates in as well as the # of attendees at such events (health fairs, symposiums etc.).</li> <li>Track number of screening event participants.</li> <li>Track number of high school classes that were given cancer prevention education</li> <li>Continue to collaborate with the American Cancer Society per our Collaborative Action Plan.</li> <li>Continue to track the # of contacts made by Cancer Center social worker to assist cancer patients for psychosocial concerns related to having cancer.</li> <li>Track participants for "Paint Nights".</li> </ul>			

	<ul> <li>Track the number of patients impacted by food insecurities due to COVID who received "Kindness Boxes".</li> </ul>			
Intervention Actions for Achieving Goal	<ul> <li>Paint night offered on quarterly basis (interrupted due to COVID).</li> <li>Support group expanded to be more multidisciplinary. Participation by therapy services, food and nutrition services as spiritual services.</li> <li>Accessible Yoga program launched on a weekly basis. The program adapted to an online forum during COVID.</li> <li>An average of seven to ten people attend the cancer support group twice a month.</li> <li>Three El Capitan High School classes given 45 minute presentation on vaping and smoking prevention.</li> <li>Daily assessment for food insecurities with weekly deliveries.</li> </ul>			
Collaboration	American Cancer Society, Mercy Foundation, Dignity Health's Community Outreach department, Mercy UC Davis Cancer Center's Community outreach team, and Merced School District.			
Performance / Impact	An average of ten to twelve people attend the cancer support group twice a month. Paint Night had 28 participants. Members of the community better understand cancer and cancer treatments and are more supportive to the cancer patients. The colon screening event had 159 participants. The three El Capitan High School classes were able to provide written feedback on the negative impact of vaping and smoking. A total of 630 "Kindness Boxes" for food insecurity were delivered. Social worker had a total of 897 contacts.  **Participation for most outreach programs was limited due to COVID. Cancer Center plans to re-implement programs when safe to resume in person meetings.			
Hospital's Contribution / Program Expense	The Cancer Center and the Mercy Foundation contributed \$53,388 in approved allocation requests to meet Cancer Center Community needs.			
	FY 2021 Plan			
Program Goal / Anticipated Impact	To address the needs in the community for supportive programs, education and resources for cancer patients, their families and/or support persons.			
Measurable Objective(s) with Indicator(s)	Track and collect data and information of the number of encounter/sessions and attendance to the Cancer Center programs.			
Intervention Actions for Achieving Goal	<ul> <li>Continue and increase participation in supportive care programs such as support group, smoking cessation classes, and accessible yoga when safe to resume in person settings.</li> <li>Continue to offer cancer prevention events with local school district</li> </ul>			

	<ul> <li>Continue the food program to address food insecurities due to COVID.</li> <li>Utilize nurse navigator for oral chemotherapy support and education, bridging gaps between providers and support to patients and caregivers.</li> </ul>
Planned Collaboration	American Cancer Society, Mercy Foundation, Dignity Health's Community Outreach department, Mercy UC Davis Cancer Center's Community outreach team, and Merced School District.



# **Childbirth Preparation Programs**

Significant Health Needs Addressed	<ul> <li>Access to Healthcare Services</li> <li>Cancer</li> <li>Diabetes</li> <li>X Family Planning – Infant Health</li> <li>Heart Disease &amp; Stroke</li> <li>Nutrition, Physical Activity &amp; Weight</li> <li>Respiratory Diseases</li> </ul>		
Program Description	This program prepares expectant mothers for the childbirth experience, including the stages of labor, what to expect during pregnancy and delivery, preparation for cesarean birth, the importance of prenatal care, breastfeeding and infant health care. In addition to this education the program provides information on community resources.		
Community Benefit Category	A1 Community Health Education		
FY 2020 Report			
Program Goal / Anticipated Impact	Expectant women, either with their first child or not, will be prepared for the birth of their child. Mother, baby, families and support persons will experience a high level of patient satisfaction.		
Measurable Objective(s) with Indicator(s)	Track the number of sessions offered as well as the number of participants. There were 36 in-person because of the COVID-19 pandemic in-person sessions were changed to ZOOM for five months. There were 24 ZOOM sessions. The participation in the programs totaled 1,550. Patient satisfaction survey scores are also tracked.		
Intervention Actions for Achieving Goal	The Childbirth Preparation classes were held twice a month. The caesarean course was offered quarterly in the community. There were 12 "stork tours" of the OB Department. The Nursing Nook was established at the Mercy Outpatient Center. A partnership with Community Action Agency WIC allowed the program to add a support group that targeted		

	mommies that were going through baby blues and postpartum depression. A breastfeeding support group was started and was held once a week. The COVID pandemic changed the way this program was provided. Starting in March 2020 classes were provided in private Facebook accounts.				
Collaboration	This program is made possible by collaborating with the Community Action Agency WIC, Merced County All Moms Matter and Merced County All Dads Matter. There are also partnerships with the local medical providers, FQHC's, Alpha Pregnancy Center and the Merced County Department of Public Health.				
Performance / Impact	Expectant moms and their support persons benefited and experienced a better childbirth experience because of their participation in the childbirth preparation classes. Resources were available for any mom that needed postpartum depression help and support was offered to all the moms on baby health and breastfeeding.				
Hospital's Contribution / Program Expense	Mercy Medical Center contributed \$146,602 for this community program.				
FY 2021 Plan					
Program Goal / Anticipated Impact	Expectant women, either with their first child or not, will be prepared for the birth of their child. Mother, baby, families and support persons will experience a high level of patient satisfaction.				
Measurable Objective(s) with Indicator(s)	Participation in classes and support groups will be tracked. Attendees will be surveyed for their rate of satisfaction. Mothers and their support partner will be accessed to make sure they are prepared for childbirth, know well baby care, know how to breastfeed and will have access to any other needed resource.				
Intervention Actions for Achieving Goal	<ul> <li>Childbirth Preparation classes</li> <li>Baby Café a breastfeeding support group</li> <li>Nursing nook at Mercy Outpatient Center</li> <li>Stork Tours in the OB</li> <li>Will be working on establishing a drop in breastfeeding program in the rural health clinics.</li> </ul>				
Planned Collaboration	Collaboration will continue with the Community Action Agency WIC, Merced County All Moms Matter, Merced County All Dads Matter, FQHC's, Alpha Pregnancy Center, Merced County Department of Public Health and Alpha Pregnancy Center. Will explore a new partnership with JMJ Maternity Homes.				



# Live Well With Diabetes

Significant Health Needs Addressed  Program Description	□ Access to Healthcare Services □ Cancer X Diabetes □ Family Planning – Infant Health □ Heart Disease & Stroke X Nutrition, Physical Activity & Weight □ Respiratory Diseases  A multi-purpose educational and support group that teaches strategies for understanding, managing and living with diabetes. It features medical				
	professional guest speakers, interactive educational experiences and develops personal actions plans. Program is offered in English and Spanish.				
Community Benefit Category	A1 Community Health Services				
	FY 2020 Report				
Program Goal / Anticipated Impact	Participants in the monthly diabetes classes learned how to better manage their diabetes. The medical staff became more aware of the classes and increased the number of referrals they made. 299 persons were informed about their diabetes either by attending the diabetes classes or by participating in a community health education session.				
Measurable Objective(s) with Indicator(s)	Maintained the target attendance to both English and Spanish Diabetes programs. Classes were held twice a month. Increased the number of people screened for diabetes in the community at health fairs. Thirteen people participated in the classes.				
Intervention Actions for Achieving Goal	Provided post intervention follow-up and participants provided self-reporting to track outcomes. Classes became virtual once the COVID pandemic made in-person gathering unsafe.				
Collaboration	Collaborate with the Mercy rural health clinics, the local FQHC's and local physicians, also with care coordinators and emergency room patient navigators. Working to increase the amount of referral from the rural health clinics.				
Performance / Impact	An increase in attendance in the diabetes classes. Through surveying and self-reporting there have been positive outcomes in regards to reduction of hospitalizations and A1c numbers amongst participants of the diabetes educational programs.				
Hospital's Contribution / Program Expense	The hospital's contribution was \$16,787.				
FY 2021 Plan					
Program Goal / Anticipated Impact	The diabetes educational program will increase from twice a month to become a weekly class. This program will be offered in Spanish and English and will provide more specific information on				

	foot care, eye care, blood sugar monitoring and A1c tracking. Examine the addition of the Diabetes Empowerment & Educational Program (DEEP). Continue with collaboration with local walking groups as an added component to the support. Strengthen relationships with local private physicians to increase awareness and referrals to the diabetes programs.
Measurable Objective(s) with Indicator(s)	Measure impact through number of referrals to the programs and who is referring to increase outreach in areas that are underutilized. Tracking attendance and self-reported health outcomes post intervention.
Intervention Actions for Achieving Goal	Increase the outreach to community healthcare providers and community-based organizations for referrals to the program. Increase diabetes classes to four a month. Explore the addition of DEEP. Will provide follow-up surveys to participants to measure outcomes of intervention. Launch the Community Connection Network.
Planned Collaboration	Strengthen and continue to develop relationships with local private physicians, RHC's and FQHC's. Collaborate with Emergency Room care coordinators and connect with Connected Community Network.

Chronic Disease Self-Management Program, CDSMP				
Significant Health Needs Addressed	<ul> <li>□ Access to Healthcare Services</li> <li>X Cancer</li> <li>X Diabetes</li> <li>□ Family Planning – Infant Health</li> <li>X Heart Disease &amp; Stroke</li> <li>□ Nutrition, Physical Activity &amp; Weight</li> <li>X Respiratory Diseases</li> </ul>			
Program Description	This is a six-week comprehensive, outcomes-based program developed by Stanford University which includes education and action planning for participants living with a chronic disease. Management tools help to control symptoms such as pain and difficult emotions; improving nutrition, physical activity, health literacy and communication with physicians; managing medications and making appropriate plans that work with their lifestyle.			
Community Benefit Category	A1 Community Health Education			
FY 2020 Report				
Program Goal / Anticipated Impact	This program will address each and every identified chronic condition ranging from obesity, asthma, COPD, high blood pressure, heart disease, kidney disease etc. Our goal is to provide resources and tools to those in the community either dealing with a chronic condition or supporting			

	someone with a chronic condition. Provide education and tools that help with making healthier food choices and living an active life to help control and manage weight.			
Measurable Objective(s) with Indicator(s)	The attendance and progress of the enrollees will be monitored. There will be follow-up post interventions on how well participants have maintained their weight and changes to their lifestyle.			
Intervention Actions for Achieving Goal	Scheduled workshops were spaced through the year at various locations in the community. Developed partnerships with community partners to increase awareness of the program. Before March 2020 there was one workshop held in English and three leader training classes.			
Collaboration	Collaboration with Merced County Department of Public Health, Central California Alliance for Health, FQHC's, RHC's and local physician groups.			
Performance / Impact	There were 32 participants in this year's program, 30 fewer than last year. Participants completed both pre and post surveys to self-assess their overall health and impact of intervention.			
Hospital's Contribution / Program Expense	The hospital's expense was \$17,500. Resources provided were community educators, healthy snacks and classrooms.			
FY 2021 Plan				
Program Goal / Anticipated Impact	This program will address each and every identified chronic condition ranging from obesity, asthma, COPD, high blood pressure, heart disease, kidney disease etc. Our goal is to increase the amount of workshops to four a year, which will better provide resources and tools to those in the community either dealing with a chronic condition or supporting someone with a chronic condition. Provide education and tools that help with making healthier food choices and living an active life to help control and manage weight. One community educators was hired FY20, goal is to hire two more this fiscal year. Planning to provide three virtual workshops FY21, working on logistics and staffing.			
Measurable Objective(s) with Indicator(s)	The attendance and progress of the enrollees will be monitored. There will be follow-up post interventions on how well participants have maintained their weight and changes to their lifestyle.			
Intervention Actions for Achieving Goal	Work with newly hired community educators to schedule four workshops in underserved locations in the county. Schedule a Leader Training workshop to build capacity and workshop offerings. Build stronger relationships with local physician groups by developing a referral form to increase awareness and utilization of program s in the broader community.			
Planned Collaboration	Collaboration with Merced County Department of Public Health, Central California Alliance for Health, FQHC's, RHC's and local physician groups. Connected Community Network			

#### Other Programs and Non-Quantifiable Benefits

The hospital delivers community programs, services and non-quantifiable benefits in addition to those described elsewhere in this report. Like those programs and initiatives, the ones below are a reflection of the hospital's mission and its commitment to improving community health and well-being.

- MMC staff raised funds and walked in the Merced and Atwater's Cancer Society's "Relay for Life" and the "Alzheimer Walk" weekend events.
- MMC staff raised funds and walked in Merced's Hinds Hospice "Angel Babies" walk. Angel Babies is a program that MMC's Family Birthing Center partners with Hinds Hospice to provide support for parents that have had a fetal demise.
- Mercy has donated to local physicians many pieces of medical equipment and supplies to be taken to third world countries.
- Mercy staff represents MMC by being members of the Merced/Mariposa Cancer Society, Merced Rotary, Merced Kiwanis, Merced Greater Chamber of Commerce, Tobacco Coalition, Asthma Coalition, the Bi-National Committee, Central CA Health Alliance, and the Hinds Hospice "Angel Babies" committee.
- Mercy is part of the Merced County Health Care Consortium steering committee initiating the Children's Health Initiative to create Healthy Kids health coverage.
- MMC Pet Therapy Program has dogs that are certified through "Share A Pet". The dogs along with their owners, visit patients, staff and visitors.
- The Dignity Health Community Investment Program approved a 7 year \$2,275,000Leverage loan with Livingston Community Health Clinic in order to build a new and larger clinic in Livingston (LCH). LCH serves low-income minority patients, mainly Latinos working in agriculture. It is the largest FQHC in Merced County.
- Spiritual Services 101 is a twenty one hours of class work for faith leaders to deepen their skills in ministry to the sick.
- Spiritual Services 102 is for faith leaders who have completed SS 101 will take SS 102 for additional training in order to become a SS volunteer and visit patients in the hospital.

# **Economic Value of Community Benefit**

211 Mercy Medical Center Merced
Complete Summary - Classified Including Non Community Benefit (Medicare)
For period from 7/1/2019 through 6/30/2020

	Persons	Net Benefit	% of Expenses
Benefits for Poor			
Financial Assistance	5,371	7,113,310	2.4%
Medicaid	82,924	17,760,680	5.9%
Community Services			
A - Community Health Improvement Services	3,417	80,508	0.0%
E - Cash and In-Kind Contributions*	5,179	0	0.0%
G - Community Benefit Operations	16	14,351	0.0%
Totals for Community Services	8,612	94,859	0.0%
Totals for Poor	96,907	24,968,849	8.3%
Benefits for Broader Community			
Community Services			
A - Community Health Improvement Services	11,165	374,726	0.1%
B - Health Professions Education	24	3,974,210	1.3%
F - Community Building Activities	810	27,493	0.0%
G - Community Benefit Operations	1,249	28,166	0.0%
Totals for Community Services	13,248	4,404,595	1.5%
Totals for Broader Community	13,248	4,404,595	1.5%
Totals - Community Benefit	110,155	29,373,444	9.8%
Medicare	33,189	46,619,847	15.6%
Totals with Medicare	143,344	75,993,291	25.4%

<sup>\*</sup>Cash and in-kind contributions reported at \$0 net benefit due to return of a large donation in the fiscal year.

The economic value of all community benefit is reported at cost. Patient financial assistance (charity care) reported here is as reported to the Office of Statewide Health Planning and Development in Hospital Annual Financial Disclosure Reports, as required by Assembly Bill 204. The community benefit of Medicaid and other means-tested programs is calculated using a cost-to-charge ratio to determine costs, minus revenue received for providing that care. Other net community benefit expenses are calculated using a cost accounting methodology. Restricted offsetting revenue for a given activity, where applicable, is subtracted from total expenses to determine net benefit in dollars.

# **Hospital Board and Committee Rosters**

#### **Hospital Administration**

A six-member senior management team operates the hospital administration.

- Charles Kassis, President
- Michael Strasser, VP / Chief Financial Officer
- Janet Ruscoe, VP / Chief Nurse Executive
- Joerg Schuller, M.D., VP / Medical Affairs
- Kathy Kohrman, VP / Strategy and Business Development
- Rick Moreland, VP / Chief Operations Officer

#### **Community Board**

A fourteen-member board supports the vision, mission, values, charitable and philanthropic goals of the hospital and Dignity Health. Members are regarded in their community as respected and knowledgeable in their field, are contributing citizens in their community and are knowledgeable about or willing to become educated about hospital and healthcare matters.

- Michelle Allison Retired
- Humberto Barragan, D.O. *Board Chair*
- Doug Fluetsch President, Fluetsch Insurance Company
- Sr. Katherine Hamilton, Retired *Board Secretary*
- Mason Brawley, Law Attorney, Murphy & Brawley, LLP- Board Vice Chair
- Garth Pecchenino, Principal Engineer/Branch Manger
- Leslie Abasta-Cummings, CEO Livingston Health Services
- Tim Adam, Chief Operating Officer, Merced Rescue Mission
- Gabriel Garcia-Diaz, M.D. Ortho Spine Advance Health, Inc.
- Pierre Scales, M.D., Chief of Staff
- Robert Dylina, Manager/Senior Loan Officer, Envoy Mortgage, Ltd.
- Christopher H. Vitelli, Superintendent/President Merced College
- Chuck Kassis Hospital President (Ex-Officio)

# **Financial Assistance Policy Summary**

Dignity Health's Financial Assistance Policy describes the financial assistance programs available to uninsured or under-insured patients who meet certain income requirements to help pay for medically necessary hospital services provided by Dignity Health. An uninsured patient is someone who does not have health coverage, whether through private insurance or a government program, and who does not have the right to be reimbursed by anyone else for their hospital bills. An underinsured patient is someone who has health coverage, but who has large hospital bills that are not fully covered by their insurance.

#### Free Care

• If you are uninsured or underinsured with a family income of up to 200% of the Federal Poverty Level you may be eligible to receive hospital services at no cost to you.

#### **Discounted Care**

- If you are uninsured or underinsured with an annual family income between 200-350% of the Federal Poverty level, you may be eligible to have your bills for hospital services reduced to the highest amount reasonably expected to be paid by a government payer, which is usually the amount that Medicare would pay for the same services.
- If you are uninsured or underinsured with an annual family income between 350-500% of the
  Federal Poverty level you may be eligible to have your bills for hospital services reduced to the
  Amount Generally Billed, which is an amount set under federal law that reflects the amount that
  would have been paid to the hospital by private health insurers and Medicare (including co-pays
  and deductibles) for the medically necessary services.

If you are eligible for financial assistance under our Financial Assistance Policy you will not be required to pay more than the Amount Generally Billed described above. If you qualify, you may also request an interest-free extended payment plan. You will never be required to make advance payment or other payment arrangements in order to receive emergency services.

Free copies of the hospital's Financial Assistance Policy and financial assistance application forms are available online at your hospital's website listed below or at the hospital Admitting areas located near the main entrance. (Follow the signs to "Admitting" or "Registration"). Copies of these documents can also be mailed to you upon request if you call Patient Financial Services at the telephone number listed below for your hospital.

**Traducción disponible:** You may also obtain Spanish and other language translations of these documents at your hospital's website, in your hospital's Admitting area, or by calling your hospital's telephone number.

Dignity Health Financial Counselors are available to answer questions, provide information about our Financial Assistance Policy and help guide you through the financial assistance application process. Our staff is located in the hospital's Admitting area and can be reached at the telephone number listed below.

Mercy Medical Center 333 Mercy Ave, Merced, CA 95340 | Financial Counseling 209-564-5105