Mercy Medical Center Mt. Shasta Community Benefit 2024 Report and 2025 Plan



Adopted November 2024



A message from

Rodger Page, President, and Nikita Gill, M.D, Chair of the Dignity Health North State Service Area 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 drivers of health.

Mercy Medical Center Mt. Shasta shares a commitment with others to improve the health of our community and promote health equity, and delivers programs and services to help achieve that goal. The Community Benefit 2024 Report and 2025 Plan describes much of this work. This report meets requirements in California (Senate Bill 697) that not-for-profit hospitals produce an annual community benefit report and plan. 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 2024 (FY24), Mercy Medical Center Mt. Shasta provided \$1,567,346 in patient financial assistance, unreimbursed costs of Medicaid, community health improvement services and other community benefits. The hospital also incurred \$5,695,405 in unreimbursed costs of caring for patients covered by Medicare fee-for-service.

The hospital's Community Board reviewed, approved and adopted the Community Benefit 2024 Report and 2025 Plan at its November 14, 2024 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 out to Alexis Ross, Market Director Community Health at (530) 225-6114 or by email at alexis.ross@commonspirit.org.

Rodger Page President Nikita Gill, M.D Chairperson, Board of Directors

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At-a-Glance Summary

Hospital HCAI ID: 106470871

Report Period Start Date: July 1, 2023

Report Period End Date: June 30, 2024

This document is publicly available online at:

https://www.dignityhealth.org/north-state/locations/mercy-mtshasta/about-us/community-benefit

Community Served



Mercy Medical Center Mt. Shasta is located in Siskiyou County. Siskiyou County is located in the northern most part of California, situated along the U.S. Interstate 5 corridor bordering the State of Oregon. Siskiyou County is rural in nature covering 6,347 square miles with a total population of 43,468 in 2020. The majority of patients served by the hospital reside in one of the southern Siskiyou County ZIP codes, including: 96025, 96057, 96067, and 96094, home to approximately 17,000 individuals.

Economic Value of Community Benefit



\$1,567,346 in patient financial assistance, unreimbursed costs of Medicaid, community health improvement services, community grants and other community benefits

\$5,695,405 in unreimbursed costs of caring for patients covered by Medicare fee-for-service.

The hospital's net community benefit expenses for services to vulnerable populations and to the broader community are listed by category in the Economic Value of Community Benefit section of this report.

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 Mental/Behavioral Health and Substance-Use Services
- Access to Basic Needs Such as Housing, Jobs, and Food
- Access to Quality Primary Care Health Services
- Access to Quality Primary Care Health Services
- Access to Functional Needs (indirectly addressed)
- Safe and Violence-Free Environment

FY24 Programs and Services



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

- Transportation Services
- Substance Use Navigation
- Community Grants
- Community Health Education Outreach

FY25 Planned Programs and Services



In FY25, Mercy Medical Center Mt. Shasta plans to build upon many of the FY24 initiatives and explore new partnership opportunities with Siskiyou County community organizations.

Written comments on this report can be submitted to Mercy Medical Center Mt. Shasta at 914 Pine St., Mt. Shasta, CA, Attn: Alexis Ross, Market Director Community Health or by e-mail to alexis.ross@commonspirit.org.

Our Hospital and the Community Served

About Mercy Medical Center Mt. Shasta

Mercy Medical Center Mt. Shasta is a member of Dignity Health, which is a part of CommonSpirit Health. Mercy Medical Center Mt. Shasta is located at 914 Pine Street in Mt. Shasta, Siskiyou County, California and is a designated 25-bed Critical Access Hospital, accredited by The Joint Commission, and a member of the American Hospital Association. The hospital is located off U.S. Interstate 5 in the City of Mt. Shasta, at the base of Mount Shasta, a 14,000-foot mountain at the southern end of the Cascade Range. The facility's campus is 14 acres in area. The hospital is a Level III Trauma Center and offers comprehensive inpatient and outpatient services, including, orthopedics, imaging, nuclear medicine, laboratory, wound care, and a family birth center. In addition to the acute care hospital, Mercy Medical Center Mt. Shasta also operates three Rural Health Clinics: Mercy Mt. Shasta Community Clinic, Mercy Lake Shastina Community Clinic and the Dignity Health Pine Street Clinic. With over 300 skilled professionals and support staff, approximately 45 active doctors, and more than 40 dedicated volunteers, Mercy Medical Center Mt. Shasta has been consistently named in the Top 100 Critical Access Hospitals by the National Rural Health Association. The hospital has also received the following awards:

- CMS 5 Star Rating for Nurse Communication,
- DAISY Award,
- Honor Roll recognition for maternal care and safe opioid care, and
- Environmental Excellence Award from Practice Greenhealth.

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

It is the policy of CommonSpirit Health to provide, without discrimination, emergency medical care and medically necessary care in CommonSpirit hospital facilities to all patients, without regard to a patient's financial ability to pay. This hospital has a financial assistance policy that describes the assistance provided to patients for whom it would be a financial hardship to fully pay the expected out-of-pocket expenses for such care, and who meet the eligibility criteria for such assistance. The financial assistance policy, a plain language summary and related materials are available in multiple languages on the hospital's website.

Description of the Community Served

Mercy Medical Center Mt. Shasta, located in Mt. Shasta, California, serves over 17,000 residents of southern Siskiyou County. Siskiyou County is located in the northern-most part of California, bordering Oregon to the north and transected by the U.S. Interstate 5 (I-5) corridor. Siskiyou County is largely undeveloped and rural, covering 6,347 square miles with population centers found along the I-5 corridor. Siskiyou County consists of primarily unincorporated, rural areas with a diverse landscape home to the majestic potentially active stratovolcano of Mt. Shasta towering over the hospital and the communities of Weed, Mt. Shasta City, and McCloud. The county is also home to desert planes and rivers with magnificent waterfalls and fishing. The largest city in



Siskiyou County is the county seat, Yreka, home to 7,870 residents, and the total population of Siskiyou County was 43,468 in 2020.

The community served by Mercy Mt. Shasta resides in unincorporated southern Siskiyou County and the following communities: Weed, Mt. Shasta, Dunsmuir, and McCloud. The majority of patients served by Mercy Mt. Shasta Medical Center reside in one of the following ZIP codes: 96025, 96057, 96067, and 96094. According to U.S. Census data presented in the 2022 CHNA, the majority of the population ethnically identifies as White/Not Hispanic or Latino and has a consistently higher median age than the State of California. As reported in the 2022 CHNA, the average median income for California was \$75,235 and \$45,241 for Siskiyou County, with the zip codes of 96025 and 96057 being below the median income levels for Siskiyou County. The percent of the population residing in poverty ranges from 12.8% in 96057 to 20.6% in 96025. Additional demographic details can be found in the 2022 CHNA report online on page 26.

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 April 2022. The hospital makes the CHNA report widely available to the public online at

https://www.dignityhealth.org/north-state/locations/mercy-mtshasta/about-us/community-benefit and upon request from the hospital's Community Health office.

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.

Community Groups that Attended or Engaged in the CHNA:

- Tulelake Family Resource Center
- Happy Camp Community Action, Inc.
- Happy Camp Ambulance
- Hmong Community Activist in Siskiyou County
- Northern CA Indian Development Council Inc.

Vulnerable Populations Represented by These Groups:

- Latinx
- Indigenous
- Hmong
- Communities with a California Healthy Places Index score <50%:
 - o Zip codes 96025, 96067, and 96094

Significant Health Needs

The CHNA identified the significant needs in the table below, which also indicates which needs the hospital intends to address. Identified needs may include specific health conditions, behaviors and health care services, and also health-related social needs that have an impact on health and well-being.

| Significant Health Need | Description | Intend to Address? |
|---|---|--------------------|
| Access to Mental/Behavioral Health and Substance-Use Services | Access to mental, behavioral, and substance-use services is essential for mental and emotional health. | • |
| Injury and Disease Prevention and Management | Knowledge is important for individual health and well-being, and efforts aimed at injury and disease prevention are powerful vehicles to improve community health. Addressed as part of Access to Quality Primary Care Health Services. | • |
| Access to Basic Needs Such as Housing, Jobs, and Food | Access to affordable and clean housing, stable employment, quality education, and adequate food for good health are vital for survival. | • |
| Access to Quality Primary Care Health Services | Access to primary care resources includes community clinics, pediatricians, family practice physicians, internists, nurse practitioners and physician assistants, pharmacists, telephone advice nurses, and other similar resources. | • |
| Access to Specialty and Extended Care | Specialty and extended care services are a particular branch of medicine focused on the treatment of a particular disease. In addition to specialty care, extended care goes beyond primary care services to include skilled-nursing facilities, hospice care, and in-home healthcare. | |
| Access to Dental Care and Preventive Services | Oral health is important for overall quality of life. Poor oral health status impacts the health of the entire body, especially the heart and the digestive and endocrine systems. | |
| Active Living and Healthy Eating | Physical activity and eating a healthy diet are important for one's overall health and well-being. When access to healthy foods is challenging for community residents, many turn to unhealthy foods that are convenient, affordable, and readily available. | |
| Access to Functional Needs | Functional needs include indicators related to transportation and disability. Without transportation, individuals struggle to meet their basic needs, including those needs that promote and support a healthy life. Addressed as part of Access to Mental/Behavioral Health and Substance-Use Services and Access to Quality Primary Care Health Services. | • |
| Safe and Violence-Free Environment | Feeling safe in one's home and community is fundamental to overall health. | • |



Significant Needs the Hospital Does Not Intend to Address

Mercy Medical Center Mt. Shasta met with internal and community members to review and determine the top priorities the hospital would address. The hospital will continue to lean into the organizations that are addressing the needs and continue to build capacity by strengthening partnerships among local community-based organizations. Due to the magnitude of the need the hospital will not address the following health needs:

- Injury and Disease Prevention and Management
- Access to Specialty and Extended Care
- Active Living and Healthy Eating

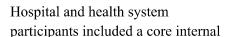
2024 Report and 2025 Plan

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 FY24 and planned activities for FY25, with statements on impacts and community collaboration. Program Highlights provide additional detail on select programs.

Planned activities are consistent with current significant needs and the hospital's mission and capabilities. The hospital may amend the plan as circumstances warrant, such as changes in community needs or resources to address them.

Creating the Community Benefit Plan

The hospital 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.





team of clinical staff, social workers, members of the hospital leadership team, and Dignity Health leaders at the regional level from Mission Integration and Community Health. The core team helped shape ongoing initiatives and define appropriate processes, procedures, and methodologies for measuring outcomes.

The programs and initiatives described here were selected based on their past successful interventions. Each initiative involves research on best practice and is written to align with local resources, state or national health priorities and initiatives. The community grant program was selected by the Community

Health Improvement Committee to address a currently unmet need in the community. The programs and initiatives described here were selected based on their past successful interventions.

Community Health Core Strategies

Driven by a commitment to equity and social justice, we envision a future where health and well-being are attainable by all regardless of background or circumstance.



The hospital believes that program activities to help address significant community health needs should reflect a strategic use of resources and engagement of participants both inside and outside of the health care delivery system.

CommonSpirit Health has established three core strategies for community health improvement activities. These strategies help to ensure that program activities overall address strategic aims while meeting locally-identified needs.

- Extend the care continuum by aligning and integrating clinical and community-based interventions.
- Strengthen community capacity to achieve equitable health and well-being.
- Implement and sustain evidence-based health improvement program initiatives.

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.



Health Need: Access to Mental/Behavioral Health and Substance-Use Services

| Strategy or Program | Summary Description | Active FY24 | Planned FY25 |
|---|--|----------------|-----------------|
| Financial Assistance | The hospital provides financial assistance for uninsured/underinsured and low-income residents. Rural health clinics offer sliding fee scale for patients who do not qualify for insurance. | X | |
| Tele-Psychiatry | Psychiatrists are able to provide early evaluation and psychiatric intervention via remote consultations with patients, improving access to timely quality care. Access is available at the ED and inpatient setting. | | |
| Substance Use Navigation | Funded through grants, the CA Bridge program provides 24/7 high-quality care for individuals with substance use disorder. The program seeks to fully integrate addiction treatment into standard medical practice—increasing access to treatment to save more lives. Program is currently funded through Medication for Addiction Treatment (MAT) program. | | |
| Transportation Assistance | Address transportation barriers to accessing healthcare services. Provide van service, taxi vouchers or bus tokens to patients who need assistance with access to our facilities. | | \boxtimes |
| Education and Awareness | Provide education and awareness and reduce stigma in the community. | | \boxtimes |
| Help Me Grow Siskiyou Parent Support | The program provides social connections, reduces stress and helps parents identify and become educated regarding their children's developmental stages, provide resources and parenting tools. | | |

Goal and Impact:

These programs will provide patient linkages to outpatient behavioral health services; provide a seamless transition of care, reduce mental health stigma and increase in resources in the community.

Collaborators: The hospital currently partners with Partnership HealthPlan, Mt. Shasta Community Clinic, Lake Shastina Community Clinic, Dignity Health Pine Street Clinic, Disability Action Center, Siskiyou County Behavioral Health and other local community based organizations.



Health Need: Access to Basic Needs Such as Housing, Jobs, and Food

| Strategy or | Summary Description | Active | Planned |
|---|---|-------------|-------------|
| Program | | FY24 | FY25 |
| Summer Food Program and Nutritional Education | Provide nutritious lunches daily for up to 100 at-risk K-8 children and provide nutrition education to help 220 youth learn about healthy eating. | \boxtimes | \boxtimes |

Goal and Impact:

These programs will focus on improving the social determinants of health in the community ultimately improving the communities' opportunity for healthy and productive lives.

Collaborators: The hospital will partner with the Boys and Girls Club of Greater Shasta and other local community-based organizations.



Health Need: Access to Quality Primary Care Health Services

| Strategy or Program | Summary Description | Active FY24 | Planned FY25 |
|---|--|----------------|-----------------|
| Financial Assistance | The hospital provides financial assistance for uninsured/underinsured and low-income residents. Rural health clinics offer sliding fee scale for patients who do not qualify for insurance. | × | |
| Build community resiliency/Creating Healthy Communities | The hospital will partner with Siskiyou County Health and Human Services Public Health Division to coordinate whole person care systems in Siskiyou County which are culturally appropriate. | \boxtimes | |
| Health Education Outreach | Provide health education and outreach at community events throughout the year. | \boxtimes | |
| Transportation Assistance | Address transportation barriers to accessing healthcare services. Provide van service, taxi vouchers or bus tokens to patients who need assistance with access to our facilities. | | |
| Workforce Development | Identify and partner with community organizations who are leading workforce development efforts to increase access to a diverse and inclusive health care workforce—both in clinical and nonclinical/corporate settings and improve health equity. | | |

Goal and Impact:

These programs will increase timely access to care by improving health literacy, addressing social determinants of health, and taking healthcare into the community.

Collaborators: The hospital currently partners with Mt. Shasta Community Clinic, Lake Shastina Community Clinic, Dignity Health Pine Street Clinic, Siskiyou County Health & Human Services and other local community-based organizations.



Health Need: Safe and Violence Free-Environment

| Strategy or Program | Summary Description | Active FY24 | Planned FY25 |
|---|---|----------------|-----------------|
| Mission and Ministry Fund, United Against Violence Planning Grant | Facilitate strategy sessions to develop violence prevention/human trafficking implementation plan encompassing in Shasta County. This plan will build upon and align existing work identified during planned activities. | | |
| Prevent violence and intervene when it is suspected | Increase health system and community capacity to identify victims of human trafficking and respond appropriately. | | |
| Provide trauma-informed care for patients | Explore ongoing opportunities to promote Trauma Informed Care practices within the behavioral health service line. | | |
| Siskiyou Domestic Violence and Crisis Center | A Dignity Health Community Grants program, this program will provide 24-hour/7-day shelter staffing at the Siskiyou Domestic Violence and Crisis Center and motels for domestic violence victims that do not fit the shelter criteria. | | |
| Human Trafficking Taskforce | A revitalization of the Human Trafficking Taskforce made up of multidisciplinary leaders with a victim-centered approach on strategies, interventions and policies. | \boxtimes | \boxtimes |
| Human Trafficking/Violence Training led by the International Rescue Committee (IRC) | Anti-Trafficking Outreach and Training Specialist from IRC will provide trainings to bring awareness around human trafficking and its various forms and resources available at local and national level. Physicians, Physicians Assistants, Nurse Practitioners, Nurses, Social Workers, Pharmacists, Police, Fire, Hospitality, Government, and other Community Members will be invited. | | |

Goal and Impact:

These programs prevent future traumatization once violence has occurred by increasing healthcare workforce capacity to provide trauma informed care for victims of violence. They also support community capacity to reduce future violence.

Collaborators: The hospital will continue to seek out partnerships with local organizations that respond to the health needs of our community. Community-based collaborations continue to be a priority in for the hospital and will continue to drive community benefit efforts.

Community Health Improvement 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 related to CHNA priorities.

In FY24, the hospital awarded the grants below totaling \$38,379. Some projects also may be described elsewhere in this report.

| Grant Recipient | Project Name | Health Needs Addressed | Amount |
|---|--|---|----------|
| Boys and Girls Club of Greater Shasta | Summer Food Program and Nutritional Education | Access to Basic Needs Such as Housing, Jobs, and Food | \$10,379 |
| Siskiyou Community Resource Collaborative | Help Me Grow Siskiyou Parent Support Grant | Access to Mental/Behavioral Health and Substance-Use Services | \$13,000 |
| Siskiyou Domestic Violence and Crisis Center | Siskiyou Domestic Violence and Crisis Center | Safe and Violence-Free Environment | \$15,000 |

Program Highlights

The following pages describe a sampling of programs and initiatives listed above in additional detail, illustrating the work undertaken to help address significant community health needs.

| Community Healt | h Education | | |
|--|--|--|--|
| Significant Health Needs Addressed | Access to Mental/Behavioral Health and Substance-Use Services Access to Quality Primary Care Health Services | | |
| Program Description | Provide needed community education and outreach programs to improve the communities' health literacy and improve access to care. | | |
| Population Served | Greater Siskiyou County community, including low-income and vulnerable populations | | |
| Program Goal / Anticipated Impact | The anticipated result of offering these activities is to improve the health and quality of life for those who suffer from chronic disease, enable participants to better manage their disease, and create a supportive environment for individuals to learn critical skills and enhance their knowledge on self-management. | | |
| FY 2024 Report | | | |
| Activities Summary | Education sessions and workshops are conducted in collaboration with a variety of community organizations and are held in locations accessible to the residents, such as senior housing communities and organizations that serve a high percentage of residents that have or are caring for family members with chronic illnesses. | | |
| Performance / Impact | 87 persons served | | |
| Hospital's Contribution / Program Expense | \$4,129 Community Benefit (net) | | |
| FY 2025 Plan | | | |
| Program Goal / Anticipated Impact | Continue educating the community to improve their health literacy and take health education and outreach programs to the community. | | |
| Planned Activities | In addition to the programs already ongoing, a Diabetes Education and Empowerment Program and Chronic Disease Self-Management Program will be added in FY25. | | |

| Transportation Sy | /stem | | |
|--|---|--|--|
| Significant Health Needs Addressed | Access to Mental/Behavioral Health and Substance-Use Services Access to Quality Primary Care Health Services | | |
| Program Description | Address transportation barriers to accessing health care services. | | |
| Population Served | Low-income and vulnerable populations | | |
| Program Goal / Anticipated Impact | Improve and eliminate barriers to transportation in the most vulnerable communities in Siskiyou County, especially the low-income and underserved to decrease barriers to access health care. | | |
| FY 2024 Report | | | |
| Activities Summary | Provide van service, taxi vouchers or bus tokens to patients who need assistance with access to facilities. | | |
| Performance / Impact | 14 individuals | | |
| Hospital's Contribution / Program Expense | \$536 | | |
| FY 2025 Plan | | | |
| Program Goal / Anticipated Impact | Increase access to care by providing much critical transportation to medical appointments. | | |
| | | | |

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.

- Community Vision (formerly Northern California Community Loan Fund) In 2017 and 2023 Dignity Health approved two 7-year loans totaling \$7,000,000 respectively—the first as lending capital in a "FreshWorks" Fund for \$1,000,000 supporting the bringing of grocery stores and other innovative forms of healthy food retail to underserved communities ("food deserts"), and the second \$6,000,000 for lending capital for Community Vision's many projects.
- Dignity Health North State Hospitals sponsorship program supports health and wellness
 initiatives, programs serving the poor and disenfranchised, education programs, community based
 and events of organizations among them, include; Siskiyou Outdoor Recreation Alliance Bike
 Race, St. Anthony Catholic Church and Mt. Shasta Museum Association, Inc.
- Professional Scholarships awarded to South Siskiyou County students to support and encourage study in the health professions.
- No-cost flu-shots, drug screenings, and sports physicals are provided to community members.
- Mercy Mt. Shasta Medical Center holds an annual Thanksgiving Food Drive for distribution in South Siskiyou County as well as a Winter Coat and Boot Drive for Siskiyou County Schools Children.

Members of the hospital's leadership and management teams provide significant in-kind support and expertise to nonprofit health care organizations, civic, and service agencies such as Partnership HealthPlan, North State Region Community Economic Resilience Fund Program and Mount Shasta Trail Association.

Economic Value of Community Benefit

The economic value of all community benefit is reported at cost. Patient financial assistance (charity care) reported here is as reported to the Department of Health Care Access and Information in Hospital Annual Financial Disclosure Reports, as required by Assembly Bill 204. The community benefit of financial assistance, Medicaid, other means-tested programs and Medicare 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.

| Complete Summary - Classified (Programs) | Including Man | Community Por | nofit (Madinara) | | |
|---|---------------|---------------|--------------------|-------------|---------------|
| | | Community Der | ient (wedicare) | | |
| For period from 07/01/2023 through 06/30/20 | 24 | | | | |
| | | 1205774771725 | | | |
| | Persons | Expense | Offsetting Revenue | Net Benefit | % of Expenses |
| Benefits for Poor | | | | | |
| Financial Assistance | 542 | \$1,319,109 | \$0 | \$1,319,109 | 1.9% |
| Medicaid | 9,303 | \$13,151,769 | \$13,169,694 | \$0 | 0.0% |
| Other Means Tested Programs | 2 | \$2,337 | \$1,110 | \$1,227 | 0.0% |
| Community Services | | | | | |
| E - Cash and In-Kind Contributions | 4 | \$176,559 | \$0 | \$176,559 | 0.3% |
| G - Community Benefit Operations | 135 | \$42,900 | \$0 | \$42,900 | 0.1% |
| Totals for Community Services | 139 | \$219,459 | \$0 | \$219,459 | 0.3% |
| Totals for Benefits for Poor | 9,986 | \$14,692,674 | \$13,170,804 | \$1,539,795 | 2.2% |
| Benefits for Broader Community | | | | | |
| Community Services | | | | | |
| A - Community Health Improvement Services | 379 | \$10,586 | \$0 | \$10,586 | 0.0% |
| E - Cash and In-Kind Contributions | 3 | \$14,000 | \$0 | \$14,000 | 0.0% |
| F - Community Building Activities | 1,276 | \$2,965 | \$0 | \$2,965 | 0.0% |
| Totals for Community Services | 1,658 | \$27,551 | 0 | \$27,551 | 0.0% |
| Totals for Broader Community | 1,658 | \$27,551 | \$0 | \$27,551 | 0.0% |
| Totals - Community Benefit | 11,644 | \$14,720,225 | \$13,170,804 | \$1,567,346 | 2.2% |
| Medicare | 19,654 | \$27,852,749 | \$22,157,344 | \$5,695,405 | 8.1% |
| Totals Including Medicare | 31,298 | \$42,572,974 | \$35,328,148 | \$7,262,751 | 10.3% |

*For the Medicaid provider fee program effective for the two-year period of January 1, 2023 - December 31, 2024, the State of California received Centers for Medicare & Medicaid Services approval in December 2023. As such, during the fiscal year July 1, 2023 - June 30, 2024, the hospital recognized provider fee net income of \$6,667,287 covering 18 months dating back to January 2023. Subtracting the six months of net provider fee attributable to the prior fiscal year, FY24 Medicaid net benefit would be \$2,327,755 and total community benefit including Medicare would be \$9,590,506.

^{**}Consistent with IRS instructions and Catholic Health Association guidance, Medicaid is reported at \$0 net benefit because offsetting revenue was greater than expense in FY24.

Hospital Board and Committee Rosters

FY2025 Dignity Health North State Service Area Community Board Members

Nikita Gill, M.D., Chairperson, Physician Mike Davis, Secretary, Philanthropy Amanda Hutchings, Community Representative Irene DeLao, Community Representative Keith Cool, Community Representative Mary Rushka, Community Representative Michael Staszel, M.D., Physician Riico Dotson, M.D., Physician Russ Porterfield, Community Representative Sister Bridget McCarthy, Woman Religious Sister Sheila Browne, Woman Religious

Any communications to Board Members should be made in writing and directed to:

Michelle Burke, Executive Assistant Mercy Medical Center Redding P. O. Box 496009 Redding, CA 96049-6009 (530) 225-6103 phone (530) 225-6125 fax