

Glendale Memorial Hospital & Health Center

Community Benefit 2020 Report and 2021 Plan

Adopted October 2020



Dignity Health.
Glendale Memorial Hospital
and Health Center

A message from

Jill Welton, president and CEO of Dignity Health Glendale Memorial Hospital and Health Center, and Vince Hambright, Chair of the Dignity Health Glendale Memorial Hospital and Health Center Community Board.

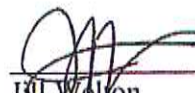
Dignity Health's approach to community health improvement aims to address significant health needs identified in the Community Health Needs Assessments that we conduct with community input, including from the local public health department. Our initiatives to deliver community benefit include financial 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.

Glendale Memorial Hospital 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 report and plan. Dignity Health hospitals in Arizona and Nevada voluntarily 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), Glendale Memorial Hospital provided \$22,431,062 in patient financial assistance, unreimbursed costs of Medicaid, community health improvement services and other community benefits. The hospital also incurred \$19,318,171 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 21, 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 out to Cassie McCarty, Director of Mission Integration, at 818-502-4578 or Cassie.Mccarty@dignityhealth.org.





 10/22/2020
Jill Welton
President/CEO


 10/22/20
Vince Hambright
Chairperson, Board of Directors

Table of Contents

At-a-Glance Summary	Page 4
Our Hospital and the Community Served	Page 6
About Glendale Memorial Hospital	Page 6
Our Mission	Page 6
Financial Assistance for Medically Necessary Care	Page 7
Description of the Community Served	Page 7
Community Need Index	Page 8
Community Assessment and Significant Needs	Page 10
Community Health Needs Assessment	Page 10
Significant Health Needs	Page 10
2020 Report and 2021 Plan	Page 15
Creating the Community Benefit Plan	Page 15
Impact of the Coronavirus Pandemic	Page 16
Report and Plan by Health Need	Page 16
Community Grants Program	Page 21
Program Digests	Page 22
Other Programs and Non-Quantifiable Benefits	Page 28
Economic Value of Community Benefit	Page 30
Hospital Board	Page 31
Financial Assistance Policy Summary	Page 32

At-a-Glance Summary

Community Served 	<p>Dignity Health Glendale Memorial Hospital and Health Center (GMHHC) is located in Glendale, California within the county of Los Angeles and serves the greater Glendale community. The total population within GMHHC's primary service area is 559,809.</p> <p>GMHHC's primary service is the following 17 ZIP Codes:</p> <ul style="list-style-type: none"> • Glendale (91201, 91202, 91203, 91204, 91205, 91206, 91207, 91208) • La Crescenta (91214) • Los Angeles <ul style="list-style-type: none"> ○ Hollywood: 90026, 90029 ○ Los Feliz: 90027 ○ Griffith Park: 90039 ○ Eagle Rock: 90041 ○ Highland Park: 90042 ○ Glassell Park: 90065 • Tujunga (91042) 		
Economic Value of Community Benefit 	<p>\$22,431,062 in patient financial assistance, unreimbursed costs of Medicaid, community health improvement services, community grants and other community benefits</p> <p>\$19,318,171 in unreimbursed costs of caring for patients covered by Medicare</p>		
Significant Community Health Needs Being Addressed 	<p>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:</p> <table border="1"> <tbody> <tr> <td data-bbox="462 1417 836 1585"> <ol style="list-style-type: none"> 1. Poverty / Homelessness 2. Mental Health / Substance Abuse 3. Access to Medical Care 4. Cardiovascular Diseases </td><td data-bbox="901 1417 1161 1459"> <ol style="list-style-type: none"> 5. Geriatric Support </td></tr> </tbody> </table>	<ol style="list-style-type: none"> 1. Poverty / Homelessness 2. Mental Health / Substance Abuse 3. Access to Medical Care 4. Cardiovascular Diseases 	<ol style="list-style-type: none"> 5. Geriatric Support
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FY20 Programs and Services 	<p>The hospital delivered or supported several programs and services to help address identified significant community health needs. These included:</p> <ul style="list-style-type: none"> • Community Grants Program (Grant awardees provided programs and/or services that addressed our significant community health needs.) 		

	<ul style="list-style-type: none"> • Cultural Trauma and Mental Health Resiliency Project (Grant awardees addressed Mental Health in their programs through evidence-based curriculum.) • 50+ Senior Services (included health lectures and exercise classes) • Breastfeeding Resource Center (included support groups and education) • Health Fairs (included screenings and education) • Diabetes and Nutrition Program • Collaboration with Glendale Healthier Community Coalition • Health Professions Education (provided internships to ultrasound, X-ray, phlebotomy, lab, pharmacy, surgical technician, and dietician students) <p>Please note that some programs were cancelled, paused, and/or adjusted due to the pandemic.</p>
FY21 Planned Programs and Services 	<p>For FY21, the hospital plans to continue the same programs and activities, as well as grant funding for our Community Grants and Cultural Trauma and Mental Health Resiliency Project. Please note, due to the coronavirus pandemic, some of the programs will be held virtually and we may have to limit the number of internships we can offer. In addition, at this time, we still do not know if we will be able to host and/or participate in health fairs.</p>

This document is publicly available online at <https://www.dignityhealth.org/socal/locations/glendalememorial/about-us/serving-the-community/community-health-needs-assessment-plan>.

Written comments on this report can be submitted to Dignity Health Glendale Memorial Hospital and Health Center, c/o Director of Mission Integration, 1420 S. Central Ave., Glendale, CA 91204 or by e-mail to Cassie.McCarty@dignityhealth.org.

Our Hospital and the Community Served

About Glendale Memorial Hospital

Glendale Memorial Hospital is a member of Dignity Health, which is a part of CommonSpirit Health.

GMHHC was founded in 1926 as Physicians and Surgeons Hospital by six Glendale community members who had a vision to expand health care services to the residents of south Glendale. The hospital began with 47 beds and is now an acute care hospital with 334 licensed beds. It became a member of Dignity Health in 1998. The hospital is located at 1420 S. Central Ave., Glendale, CA, 91204. The hospital resides within the county of Los Angeles and serves the city of Glendale and the surrounding communities of La Crescenta, La Canada/Flintridge, portions of Burbank and northern sections of the greater Los Angeles metropolitan area. During FY20, GMHHC celebrated its ninety-fourth year of providing quality healthcare. GMHHC has a staff of 1000 employees and we have 550 physicians on our Medical Staff. In addition, we have a large team of active volunteers. Annually, over 150 volunteers provide services and support for our hospital, patients, and families. Glendale Memorial Hospital and Health Center service lines include:

- Adult Behavioral Health Unit
- Colorectal Care Center
- Critical Care Medicine
- Emergency Services
- Gastroenterology
- Heart Care
- Maternity Care
- Neonatal Intensive Care Unit (Level III)
- Orthopedics
- Rehabilitation Services
- Spine Services
- Stroke Care
- Surgical Services
- Women's Health
- Wound Care

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

Glendale Memorial Hospital delivers compassionate, high quality, affordable health care and advocates for members of our community who are poor and disenfranchised. In furtherance of our 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

Glendale Memorial Hospital and Health Center serves the city of Glendale and the surrounding communities of La Crescenta, La Canada/Flintridge, portions of Burbank and northern sections of the greater Los Angeles metropolitan area. The City of Glendale is very diverse and includes a large population of Armenians, including immigrants. GMHHC resides in the southernmost part of Glendale, an underserved area of our community.

Dignity Health hospitals define the community they serve as the geographic area served by the hospital. GMHHC has a primary and secondary service area. Our primary service area is the basis for our Community Health Needs Assessment. A summary description of the community is below, and additional details can be found in the CHNA report online.



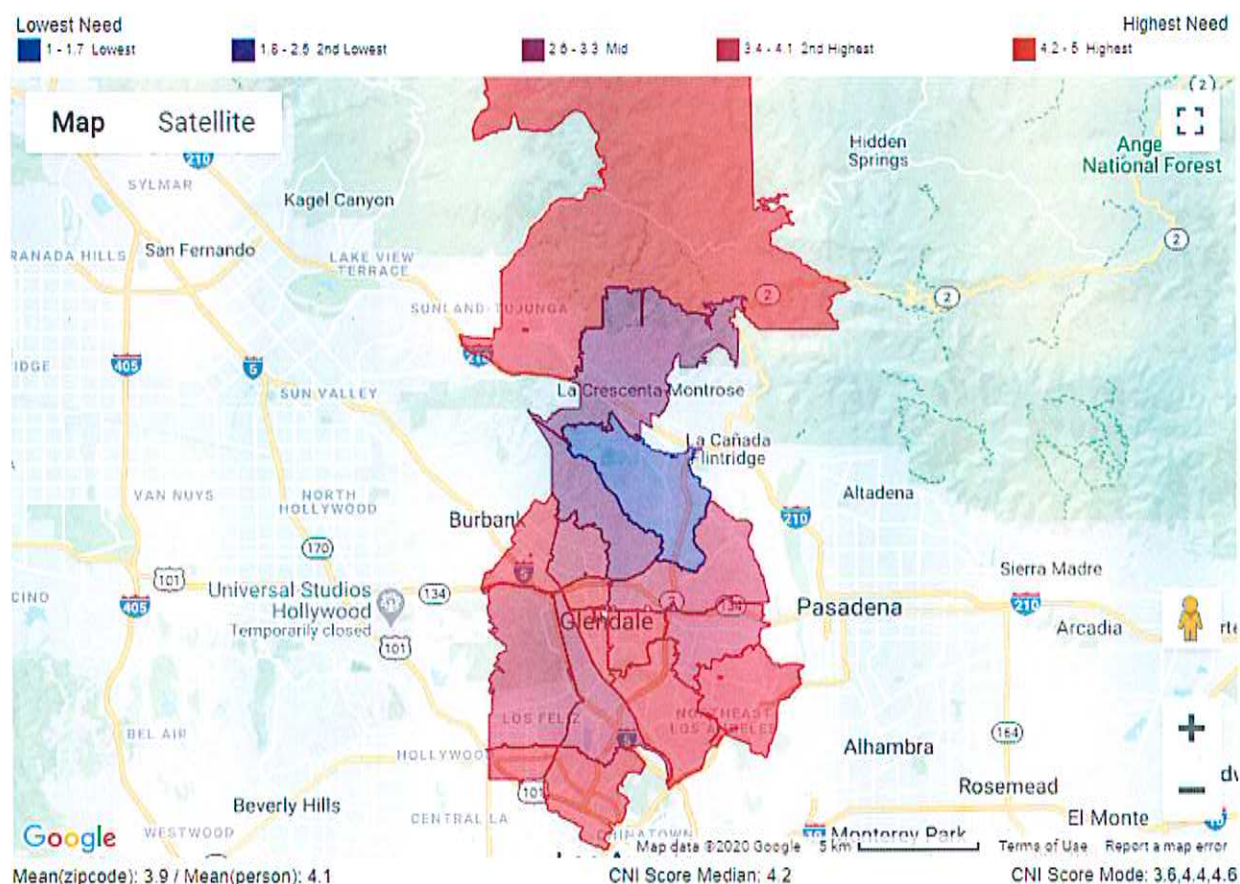
Demographics of the primary service area are from Claritas Pop-Facts © 2020; SG2 Market Demographic Module:

- Population for primary service area: 559,809
- Race
 - White - Non-Hispanic: 42.6%
 - Black/African American - Non-Hispanic: 1.9%
 - Hispanic or Latino: 36.3%
 - Asian/Pacific Islander: 16.3%
 - All others: 2.9%
- % Below Poverty: 11.6%
- Unemployment: 6.4%
- No High School Diploma: 17.3%
- Medicaid (household): 10.4%
- Uninsured (household): 4.3%
- CNI Score: 4.0
- Other hospitals serving the area: 2
- Medically Underserved Area: Yes

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. Please note that the median CNI score for Glendale Memorial Hospital's primary is in the Highest Need category (4.2).



Zip Code	CNI Score	Population	City	County	State
90026	4.6	68949	Los Angeles	Los Angeles	California
90027	3.8	45600	Los Angeles	Los Angeles	California
90029	4.8	38587	Los Angeles	Los Angeles	California
90039	3.8	28671	Los Angeles	Los Angeles	California
90041	3.6	28103	Los Angeles	Los Angeles	California
90042	4.4	63829	Los Angeles	Los Angeles	California
90065	4.4	48032	Los Angeles	Los Angeles	California
91042	4.4	28695	Tujunga	Los Angeles	California
91201	4.2	23056	Glendale	Los Angeles	California
91202	3.6	23720	Glendale	Los Angeles	California
91203	4.2	16604	Glendale	Los Angeles	California
91204	4.6	16561	Glendale	Los Angeles	California
91205	4.6	38449	Glendale	Los Angeles	California
91206	3.6	32993	Glendale	Los Angeles	California
91207	3	10540	Glendale	Los Angeles	California
91208	2.4	16723	Glendale	Los Angeles	California
91214	2.8	30697	La Crescenta	Los Angeles	California

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 2019.

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 <https://www.dignityhealth.org/socal/locations/glendalememorial/about-us/serving-the-community/community-health-needs-assessment-plan> 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:

- 1. Poverty and Homelessness**

In California, where the cost of living is high, families can earn two or more times the Federal Poverty Level and still struggle to meet their basic needs. A comprehensive 2018 state-by-state report by the National Low Income Housing Coalition (NLIHC) demonstrated that renting a two-bedroom apartment in Los Angeles required a household income of \$66,520. The GMHHC service area falls within larger geographic Service Planning Areas that differ in their overall poverty profile. Although the county's highest rates of poverty are in SPA 6 and SPA 1, as described in the chart below, the densely populated SPA 4 has a larger percentage of the population living below the FPL than both neighboring SPA 2 and the entire county: one in four households in SPA 4 were estimated to be living below 100% of the FPL. Youth in the county are similarly affected, with 27.4% living below 100% of the FPL compared with the state's rate of 21.0%. In 2017, according to the U.S. Census, 40.6% of Los Angeles County families with children under 18 with a female head of household were living below 100% FPL. This rate is line with the state's rate of 39.5%.

Population Living below the Federal Poverty Level

	Below 100% Poverty	100-200% Poverty
SPA 2—San Fernando Valley	14.2%	16.8%
SPA 4—Metro	25.9%	22.7%
HIGHEST POVERTY Area in Los Angeles County	SPA 6—South: 38.6%	SPA 1—Antelope Valley: 30.4%
Los Angeles County	20.6%	18.2%
California	16.8%	18.1%

Data Source: California Health Interview Survey, 2017, SPA

According to the Los Angeles Homeless Services Authority, “homeless individuals” (as opposed to “homeless families”) include single adults, adult couples with no children, and groups of adults over the age of 18. Most of the homeless individuals in the GMHHC service area are living within SPA 4—Metro (27.7%). Of the identified homeless families, most are within SPA 4—Metro (22.7%). Of the 125 homeless minors under the age of 18 in all SPAs, most reside within SPA 4—Metro (31.2%). SPA 4—Metro has the county’s highest percentage of homeless who are mentally ill (29.3%), have substance abuse issues (28.0%), are HIV-positive (45.2%), or are physically disabled (28.0%). These percentages are slightly higher than in Los Angeles County.

Homeless by Type

	Total Homeless	Individuals (Not in Family Units)	Family Members (in Family Units)	Unaccompanied Minors (Under age 18)
SPA 2	7,738	77.2%	22.8%	0.0%
SPA 4	14,218	89.7%	9.9%	0.3%
Highest SPA	SPA 4	SPA 4	SPA 2	SPA 4
Los Angeles County	52,765	84.1%	15.8%	0.1%

Source: Los Angeles Homeless Service Authority, 2018 Greater Los Angeles Homeless Count Reports

2. Mental Health and Substance Abuse

In 2017, in Los Angeles County, psychological distress and depression were prevalent within 8.6% to 9.7% of the population. Two-thirds of the population reported receiving adequate social and emotional support (64.0%), leaving the remaining third of the population vulnerable to the risks associated with untreated mental health. This crisis in care affects the teenage population mostly profoundly, where 1 in 4 needs urgent care for emotional and mental health crises at least once in the course of a year. Adults experience an average of 2.6 unhealthy days resulting from

poor mental health—much like reports within the county (2.3 days). Over 8% report feeling depressed.

Mental Health Indicators

	Limited-Activity Days in Past Month for Adults due to Poor Physical and/ Mental Health	Adults with Serious Psychological Distress in the Last Year ¹	Depression Prevalence	Adequate Social and Emotional Support
Report Area	Days	Percentage	Percentage	Percentage
SPA 2—San Fernando Valley	2.5	7.6%	8.0%	69.1%
SPA 4—Metro	2.7	10.9%	10.8%	60.2%
GMHHC Service Area	2.6	NA	9.6%	64.0%
Los Angeles County	2.3	9.7%	8.6%	64.0%

Data Sources: Los Angeles County Health Survey, 2015 and (1) California Health Interview Survey (CHIS), 2017, SPA

In 2015, within the GMHHC service area, half (55.0%) of adults (18+ years old) reported drinking alcohol at least once in the past month, while 16.2% of adults reported engaging in binge drinking in the past month. In 2016, the average number of alcohol outlets per 1,000 persons in the GMHHC service area was 1.5. The rate was almost three times higher for 91203—Glendale (4.0), relative to the service area, and for the service area relative to Los Angeles County (0.6).

In 2017, the percentage of adults who reported misusing prescription drugs in the GMHHC service area (5.7%) is slightly higher than in Los Angeles County (5.5%), as is the percentage of adults who reported using marijuana in the past year (13.4%).

Finally, almost one in six persons (17.1%) in the county reported needing help for mental, emotional, or alcohol/drug issues in 2017—slightly lower than that reported for the state (18.5%). In general, fewer adults sought help than recognized their need for help in the county and the state, though in SPA 4, the trend is reversed: more (17.8%) saw a health care provider than reported their need for help. A large proportion in SPA 2 (49.3%) and in SPA 4 (27.7%) said that they sought or needed help but did not receive any treatment.

Needed Help for Mental, Emotional, or Alcohol/Drug Issues

Report Area	Adults Who Needed Help for Emotional/Mental and/or Alcohol-Drug Issues in Past Year	Adults Who Saw a Health Care Provider for Emotional/Mental Health and/or Alcohol-Drug Issues in Past Year	Adults Who Sought/Needed Help for Self-reported Mental/Emotional and/or Alcohol-Drug Issues
SPA 2—San Fernando Valley	17.6%*	13.7%	49.3%
SPA 4—Metro	15.5%	17.8%*	27.7%*

Los Angeles County	17.1%	15.1%	39.9%
California	18.5%	15.2%	39.7%

3. Access to Medical Care

More than 7% of the population in both the state and Los Angeles County do not have insurance. In 2013-2017, over 10% of adults in SPA 2 and SPA 4 carried no insurance. In 2017, more than a quarter of adults (25.6%) in the GMHHC service area had difficulty accessing medical care, which is slightly higher than Los Angeles County (23.6%).

As shown in the chart, the percentage of adults who lack a consistent source of primary care is lower in Los Angeles County (19.7%) than in the GMHHC service area (21.1%).

Lack of a Consistent Source of Primary Care among Adult Population

Report Area	Percentage
SPA 2–San Fernando Valley	18.6%
SPA 4–Metro	23.0%
GMHHC Service Area	21.1%
Los Angeles County	19.7%

Data source: Los Angeles County Health Survey, 2015, SPA

4. Cardiovascular Diseases

In Los Angeles County, the rate of adults diagnosed with heart disease increased moderately each year. This trend is more pronounced in SPA 4 (which includes GMHHC's service area), where the diagnosis rate in 2015 was 2.6%, and the change in rate was +3.8% in 2016 and an additional +0.5% in 2017. Within the county, almost 1 in 10 white adults (9.5%) has heart disease compared to 5.6% of Latinos, 8.2% of African Americans, and 2.8% of Asians.

In 2013-2015, the emergency room visit rates for heart failure and hypertension for the GMHHC service area was 5.8% and 32.9%, respectively. The highest rates for chronic obstructive pulmonary disease (COPD), heart failure, and hypertension, are for Glendale: Glendale—91204 and 91205 had the highest COPD rates, while Glendale—91203 had the highest rates for both heart failure (11.2%) and hypertension (50.7%).

Emergency Room Visits per 10,000 Persons

City	ZIP Code	Average Annual Age-Adjusted Rate		
		COPD	Heart Failure	Hypertension
Echo Park, Silver Lake	90026	8.2	4.6	25.9
East Hollywood	90029	9.3	5.2	33.8
Los Feliz	90027	13.2	7.8	36.5
Atwater Village, Elysian Valley	90039	6.5	5.5	24.7
Eagle Rock	90041	10.1	5.4	32.3
Highland Park	90042	9.7	5.6	24.6
Glassell Park	90065	5.9	5.5	28.8
Tujunga	91042	8.2	6.9	31.2

City	ZIP Code	Average Annual Age-Adjusted Rate		
		COPD	Heart Failure	Hypertension
Glendale	91201	6.3	7.2	31.3
Glendale	91202	5.3	5.6	48.2
Glendale	91203	7.6	11.2	50.7
Glendale	91204	19.8	6.3	52
Glendale	91205	14.1	5.1	36
Glendale	91206	4.5	4.6	23.8
Glendale	91207	6.9	3.0	19.5
Glendale	91208	7.3	3.5	15.2
La Crescenta	91214	4.8	4.8	30.5
GMHHC Service Area		8.9	5.8	32.9

Data Source: California Department of Public Health 2013–2015, ZIP Code

5. Geriatric Support

The GMHHC service area has a larger population of adults over 65 (16.3%) compared to the Los Angeles County average (13.5%). A larger percentage of the 65+ population have been diagnosed with diabetes (21.2%), hypertension (54.2%) or high cholesterol (47.5%) than the Los Angeles County population in general (9.8%, 23.5%, and 25.2%, respectively). Additionally, 47.7% of the 65+ population reported low or no physical activity, compared with 34.8% of the general population.

Looking at falls, the rate of elderly hospitalizations due to falls is roughly 28% in both Los Angeles County and California. Comparatively, seniors in SPA 2 and SPA 4 have significantly fewer falls. The GMHHC service area has a lower percentage of elderly hospitalized from falls (16.5%) than both Los Angeles County (28.0%) and California (28.5%).

Elderly (65+) Falls in Past Year

Report Area	Was Hospitalized due to Falls	Changed Daily Routines because of Fall in Past Year	Professional Recommended Physical Therapy/Exercise due to Falls	Professional Reviewed Medication after Fall
SPA 2–San Fernando Valley	21.6%	30.0%	86.7%	40.8%
SPA 4–Metro	12.8%	32.9%	69.8%	29.5%
GMHHC Service Area	16.5%	31.7%	76.9%	34.3%
Los Angeles County	28.0%	33.5%	83.9%	40.2%
California	28.5%	33.3%	80.4%	33.7%

Data Source: Los Angeles County Health Survey, 2015, SPA

Significant Needs the Hospital Does Not Intend to Address

The hospital intends to take actions to address all of the prioritized significant health needs in the CHNA report, both through its own programs and services and with community partners. Lists and descriptions of those planned actions are included in this report.

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

Glendale Memorial Hospital is dedicated to improving community health and delivering community benefit with the engagement of its management team, Community Board, clinicians and staff, and in collaboration with community partners. 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 or 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

In developing the hospital's Community Benefit Plan, the process includes two objectives: 1) The determination of hospital programs and resources that will have the greatest impact on addressing

community need; and 2) The identification of potential community partners that have goals and missions aligned with GMHHC and that address identified needs in the CHNA.

The Director of Mission Integration, along with the manager of Community Health, members of the Senior Leadership Team, and Mission Council (community members are represented in this council), review existing community benefit programs to ensure alignment with significant health needs identified in the most recent CHNA.

In addition, the hospital's Community Board reviews community benefit plans and program updates (see Page 31 for our Community Board roster).



Impact of the Coronavirus Pandemic

When the COVID-19 pandemic became an unprecedented reality for our hospital and the world in March, the ability of our hospital and community partners to provide programs and services for the community were definitely impacted. In some cases, programs, such as our weekly Farmers Market, Health Professions Education internships, our monthly senior lectures, and our weekly senior exercise classes came to a halt. In other cases, we pivoted to provide much needed services to our community, such as partnering with the Los Angeles County to serve as a Drive-Thru COVID-19 testing site and also providing COVID-19 testing and infection prevention education to a local Skilled Nursing Facility. In addition, we collaborated very closely with city leaders to ensure the safety of our community. For FY21, we will continue to partner with our city leaders to ensure we have a unified voice and action plan regarding COVID-19. In addition, we are looking at how we can provide our hospital's 50+ Senior Program virtually (both the education and exercise classes) and slowly bringing back our students.

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: Poverty and Homelessness

Strategy or Program Name	Summary Description	Active FY20	Planned FY21
Support for situationally homeless families	<ul style="list-style-type: none">Community Grant to Family Promise of the Verdugos. This project will provide support for parents and children as they obtain housing, jobs, and maintain schooling.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Support for low income and homeless children	<ul style="list-style-type: none">Community Grant to Kids' Dental Community Clinic. This project will provide access to dental care for low-income and homeless children.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Support for low-income seniors and disabled adults.	<ul style="list-style-type: none">Community Grant to Hope through Housing Foundation. This project will provide low-income seniors and disabled adults individual assistance and resource referrals and coordination partnership to deliver health, wellness, exercise and social programs.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Support for chronically homeless individuals and families	<ul style="list-style-type: none">Community Grant to Ascencia to support access to medical care/medical home and permanent supportive housing and case management.	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Impact: The hospital's initiatives to address poverty and homelessness are anticipated to decrease Glendale homeless population; increase access to basic needs; improve physical and mental wellbeing; increase positive behavior; and decrease social isolation and depression.

Collaboration: In particular, through our Community Grants program, our hospital partners with a number of community organizations to ensure a broader reach with respect to addressing Poverty and Homelessness.



Health Need: Mental Health and Substance Abuse

Strategy or Program Name	Summary Description	Active FY20	Planned FY21
Support for situationally homeless families	<ul style="list-style-type: none">Community grant to Family Promise of the Verdugos. This project will provide support for parents and children as they obtain housing, jobs, and maintain schooling. This will include support for families for overall mental well-being.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Support for low-income seniors and disabled adults.	<ul style="list-style-type: none"> Community grant to Hope through Housing Foundation. This project will provide low-income seniors and disabled adults individual assistance and resource referrals and coordination partnership to deliver health, wellness, exercise and social programs. 	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Support for veterans and their families	<ul style="list-style-type: none"> Community grant to Wellness Works. This project provides mental health care to veterans with PTSD, TBI (Traumatic Brain Injury), and/or MST (Military Sexual Trauma), and provides Community Resilience Model (CRM) Training, which enhances a peer-support, self-care model. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Cultural Trauma and Mental Health Resiliency Project	<ul style="list-style-type: none"> Our hospital will provided grant funds to two lead organizations (National Alliance for Mental Health and Glendale Youth Alliance / Glendale Unified School District) who work with primary and secondary schools and libraries to provide education for administrators, teachers, staff, parents, and community members on the signs and symptoms of mental health. 	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Breastfeeding Resource Center	<ul style="list-style-type: none"> Our hospital's Breastfeeding Resource Center provides free support to new moms and their infants in the community through group and 1:1 support in English and Spanish. Breastfeeding is linked to a lower risk of post-partum depression. For FY21, we continue to offer our telephone warm line, however, it is not yet determined if/when we can resume in-person support groups and/or transition to virtual platforms. 	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Support for chronically homeless individuals and families	<ul style="list-style-type: none"> Community Grant to Ascencia to support access to medical care/medical home and permanent supportive housing and case management. This includes supporting mental health. 	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Impact: The hospital's initiatives to address Mental Health are anticipated to result in increased education, destigmatization, and/or support for the mental well-being of a variety of populations in our community.

Collaboration: In particular, through our Community Grants program, our hospital partners with a number of community organizations to ensure a broader reach with respect to addressing Mental Health needs.



Health Need: Access to Medical Care

Strategy or Program Name	Summary Description	Active FY20	Planned FY21
Education for the community	<ul style="list-style-type: none">Our hospital hosts monthly health education lectures regarding screenings, diagnosis, treatment options and diet on various health topics as well as safety topics. Due to COVID-19, for FY21 we will go to a virtual platform.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Education and screenings for the community	<ul style="list-style-type: none">GMHHC participates in a number of community and business sponsored health fairs in the greater Glendale area. We provide information, education and screenings for adults and seniors at these events. Due to COVID-19, we are still unsure about whether or not these events will be held in FY21.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Access to oral health care	<ul style="list-style-type: none">Community Grant to Kids' Dental Community Clinic. This project will provide access to dental care for low-income and homeless children.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Access to medical care/medical home	<ul style="list-style-type: none">Community Grant to Ascencia to support access to medical care/medical home and permanent supportive housing and case management. This includes supporting mental health.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Financial Assistance	<ul style="list-style-type: none">Our 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. The financial assistance policy and plain language summary are on the hospital's web site and at the end of this report.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Impact: The hospital's initiatives to address Access to Medical Care are anticipated to result in increased access, education, and information for various populations in our community.

Collaboration: Our connection to local community organizations, including Senior Centers, provide opportunities for collaboration around Access to Medical Care.



Health Need: Cardiovascular Diseases

Strategy or Program Name	Summary Description	Active FY20	Planned FY21
Support for seniors	<ul style="list-style-type: none">Our hospital hosts weekly Strength Training and Shao Chi/Yoga Classes to promote exercise and healthy lifestyles. Due to COVID-19, for FY21, this will need to transition to a virtual platform.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Support for seniors	<ul style="list-style-type: none">Our hospital provided a lecture on vascular health and educated seniors on how to manage peripheral arterial disease (PAD) and what lifestyle changes to make in order to avoid diabetes, obesity, hypertension and other risk factors for PAD.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Education for the community	<ul style="list-style-type: none">GMHHC's Cardiac Fitness Program hosts an annual King and Queen events at the hospital. We provide information, education, and health screenings at these events, including carotid screenings. Due to COVID-19, for FY21 we are unsure as to whether or not we will be able to host this fair this year.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Education and screenings for the community	<ul style="list-style-type: none">GMHHC participates in community and business sponsored health fairs in the greater Glendale area. We provide information, education, and screenings at these events, in particular carotid screenings. Due to COVID-19, we are unsure as of now if the community will be able to host health fairs.	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Impact: The hospital's initiatives to address Cardiovascular Disease are anticipated to result in increased education and disease management for various populations in our community.

Collaboration: Our connection to local Senior Centers and other community agencies provide opportunities for collaboration around Cardiovascular Disease.



Health Need: Geriatric Support

Strategy or Program Name	Summary Description	Active FY20	Planned FY21
Support for low-income seniors and disabled adults.	<ul style="list-style-type: none"> Community grant to Hope through Housing Foundation. This project will provide low-income seniors and disabled adults individual assistance and resource referrals and coordination partnership to deliver health, wellness, exercise and social programs. 	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Education for the community	<ul style="list-style-type: none"> Our hospital hosts monthly health education lectures regarding screenings, diagnosis, treatment options and diet on various health topics as well as safety topics. Due to COVID-19, we will need to transition to a virtual platform for FY21. 	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Support for seniors	<ul style="list-style-type: none"> Our hospital hosts weekly Strength Training and Shao Chi/Yoga Classes to promote exercise and healthy lifestyles. This also helps seniors with their overall mental well-being and social life. Due to COVID-19, we will need to transition to a virtual platform for FY21. 	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Education for the community	<ul style="list-style-type: none"> GMHHC's Cardiac Fitness Program hosts an annual King and Queen events at the hospital. We provide information, education, and health screenings at this events. At this time, we are unsure regarding whether or not we can hold this event for FY21 due to COVID-19. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Impact: The hospital's initiatives to address Geriatric Support are anticipated to result in increased education and improved fitness seniors in our community.

Collaboration: The hospital's Community Grants and King and Queen events provides opportunity for collaboration with partners.

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 \$90,000. Some projects also may be described elsewhere in this report.

Grant Recipient	Project Name	Amount
Family Promise of the Verdugos	Shelter & Supportive Services for Homeless Families	\$25,000
Hope Through Housing Foundation	Connections to Care	\$25,000
Kids' Community Dental Clinic	Dental Screenings & Oral Health Education	\$20,000
Wellness Works	Comprehensive Continuum of Care for Veterans	\$20,000

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.

 50+ Senior Services	
Significant Health Needs Addressed	<input type="checkbox"/> Poverty and Homelessness <input checked="" type="checkbox"/> Mental Health and Substance Abuse <input checked="" type="checkbox"/> Access to Medical Care <input checked="" type="checkbox"/> Cardiovascular Disease <input checked="" type="checkbox"/> Geriatric Support
Program Description	<p>The major components of our hospital's senior services are comprised of the 50+ membership program which offers:</p> <ul style="list-style-type: none"> • Education <ul style="list-style-type: none"> ○ Free monthly health related education lectures specifically targeted for seniors ○ AARP Mature Driving Classes • Exercise <ul style="list-style-type: none"> ○ Promotion of physical, mental, and social well-being through weekly exercise classes.
Community Benefit Category	A1—Community Health Education
FY 2020 Report	
Program Goal /	Increase health awareness and screenings for seniors in our community.

Anticipated Impact

Measurable Objective(s) with Indicator(s)	Grow membership by 5%
Intervention Actions for Achieving Goal	<ul style="list-style-type: none"> • 10 lectures for members. • Offered weekly Strength Balance & Shao Chi/Yoga Class promoting healthy physical activity and social interactions once a week. • Attended three health fairs to provide education and screenings.
Collaboration	Community Health Manager collaborated with local senior centers and she serves on the City of Glendale Senior Services Committee.
Performance / Impact	Provided information on 50+ Program at local senior centers, hosted monthly senior lectures, weekly Strength Balance & Shao Chi/Yoga Class and hosted AARP mature driving classes. Served 1,476 individuals over the year.
Hospital's Contribution / Program Expense	\$44,127. (This includes Community Health staff, space for classes, and refreshments for seniors.)

FY 2021 Plan

Program Goal / Anticipated Impact	Increase health awareness and screenings for seniors in our community.
Measurable Objective(s) with Indicator(s)	Increase membership.
Intervention Actions for Achieving Goal	Depending on COVID-19, schedule monthly virtual or in-person senior lectures, schedule weekly virtual or in-person exercise classes, and attend 4 health fairs to provide education and screenings (if possible).
Planned Collaboration	Community Health Manager to continue collaborating with local senior centers and serve on the City of Glendale Senior Services Committee.



Health Fairs

Significant Health Needs Addressed	<input type="checkbox"/> Poverty and Homelessness <input checked="" type="checkbox"/> Mental Health and Substance Abuse <input checked="" type="checkbox"/> Access to Medical Care <input checked="" type="checkbox"/> Cardiovascular Disease <input checked="" type="checkbox"/> Geriatric Support
Program Description	GMHHC participates in community and business sponsored health fairs in the greater Glendale area. We provide information, education and screenings at these events.
Community Benefit Category	A1—Community Health Education

FY 2020 Report

Program Goal / Anticipated Impact	Continue providing access to screenings and health-related education for community members in the greater Glendale area.
Measurable Objective(s) with Indicator(s)	Attend four health fairs.
Intervention Actions for Achieving Goal	Provide information, education and screenings.
Collaboration	Our Community Health Manager will collaborate with community organizations and businesses.
Performance / Impact	Provided information, education, and screenings to 715 persons in the community.
Hospital's Contribution / Program Expense	\$6,109. (This includes Community Health staff, Cardiac Fitness staff, Respiratory staff, Radiology staff, Lab staff and Outpatient Therapy staff.)

FY 2021 Plan

Program Goal / Anticipated Impact	Continue providing access to screenings and health-related education for community members in the greater Glendale area.
Measurable Objective(s) with Indicator(s)	Participate in four health fairs: Pending restrictions around COVID-19.
Intervention Actions for Achieving Goal	Provide information, education and screenings.
Planned Collaboration	Community Health Manager to continue collaborating with community organizations and businesses.



Breastfeeding Resource Center

Significant Health Needs Addressed	<input type="checkbox"/> Poverty and Homelessness <input checked="" type="checkbox"/> Mental Health and Substance Abuse <input type="checkbox"/> Access to Medical Care <input type="checkbox"/> Cardiovascular Disease <input type="checkbox"/> Geriatric Support
Program Description	<p>GMHHC's Breastfeeding Resource Center has trained certified lactation educators to assist new mothers with breastfeeding needs and assess the mother/baby dyad to ensure that the baby is breastfeeding effectively. All women in the community are invited to participate, whether or not their baby was delivered at GMHHC. In particular, many low-income women have limited or no access to breastfeeding support and education, and we want to make our resources available to them. The short-term and long-term benefits of breastfeeding for mother and child are well documented (e.g., for mother—breastfeeding linked to a lower risk of these types of health problems: Type 2 diabetes, breast cancer, cervical</p>

	cancer, and post-partum depression; for baby—breastfeeding linked to lower risk of Type 1 & 2 Diabetes, childhood leukemia, lower respiratory infections, asthma, and obesity).
Community Benefit Category	A1—Community Health Education
FY 2020 Report	
Program Goal / Anticipated Impact	<ul style="list-style-type: none"> • Continue to market our free Breastfeeding Support Group and classes. • Increase numbers of pregnant women attending the BF classes. • Nurture a free Spanish-speaking weekly support group. • Community awareness that breastfeeding consultations and breast pump purchase assistance is now available through most health insurance plans. • Market our free hot line, classes and support group to surrounding clinics in the community. • Open up a low cost/no cost Lactation Service for the community
Measurable Objective(s) with Indicator(s)	<ul style="list-style-type: none"> • Track patients satisfaction with overall breastfeeding support and education provided. • Track number of mothers attending the Breastfeeding Support Group and monitor their overall satisfaction with the services provided.
Intervention Actions for Achieving Goal	<ul style="list-style-type: none"> • Free weekly support group. • Free Breastfeeding Hotline. • Free Breastfeeding Classes in English and Spanish. • Free Lactation Support in the hospital. • Making sure mother/baby dads receive BF resources
Collaboration	Working with Director of Breastfeeding Promotion at WIC, she has generously donated time to visit physician offices to give free Breastfeeding Education to their staff.
Performance / Impact	<ul style="list-style-type: none"> • Support group attendance on rise since returning back to 2 hours. • Receiving calls on our hotline for mothers seeking resources and more breastfeeding information. • Served 414 persons.
Hospital's Contribution / Program Expense	\$23,012. (Includes Breastfeeding Resource staff, space for support groups, dedicated phone line and refreshments.)
FY 2021 Plan	
Program Goal / Anticipated Impact	<ul style="list-style-type: none"> • Inform the community regarding our free hotline for breastfeeding support. • Please note, the following will be goals only if current restrictions are lifted around COVID-19: <ul style="list-style-type: none"> ◦ Continue to market our free Breastfeeding support group and classes.

	<ul style="list-style-type: none"> ○ Breastfeeding Follow up clinic low cost/no cost ○ Increase numbers of pregnant women attending the BF classes. ○ Nurture a free Spanish-speaking weekly support group. ○ Community awareness that Breastfeeding Consultations and Breast pump purchase assistance is now available through most Health Insurance Plans.
Measurable Objective(s) with Indicator(s)	<ul style="list-style-type: none"> • Track patients satisfaction with overall breastfeeding support and education provided. • Track number of mothers who call our hotline and who attend the Breastfeeding Support Group and monitor their overall satisfaction with the services provided.
Intervention Actions for Achieving Goal	<p>Continuing:</p> <ul style="list-style-type: none"> • Free Breastfeeding Hotline. <p>Continuing only if restrictions are lifted with respect to COVID-19 (In addition, we are also exploring the possibility of offering these support groups and classes virtually)</p> <ul style="list-style-type: none"> • Free weekly support group. • Free Breastfeeding Classes in English and Spanish.
Planned Collaboration	<p>Working with Director of Breastfeeding Promotion at WIC, she has generously donated time to visit physician offices to give free Breastfeeding Education to their staff. In addition, work with City of Glendale to promote Breastfeeding Resource Center through resource pamphlets.</p>



Community Grants

Significant Health Needs Addressed	<ul style="list-style-type: none"> ✓ Poverty and Homelessness ✓ Mental Health and Substance Abuse ✓ Access to Medical Care <input type="checkbox"/> Cardiovascular Disease ✓ Geriatric Support
Program Description	<p>The objective of Dignity Health Community Grants Program is to award grants to nonprofit 501c (3) organizations (excluding hospitals) whose Accountable Care Community proposal responds to the Dignity Health Glendale Memorial Hospital's strategic priorities identified in the most recent Community Health Needs Assessment and the community benefit plan. In addition, programs will be evaluated for the five Dignity Health Community Benefit Principles of serving disenfranchised populations with unmet health needs, primary prevention, seamless continuum of care, community capacity building, and collaborative governance. Dignity Health grants funds are to be used to provide services to underserved populations.</p>

Community Benefit Category	E2—Grants
FY 2020 Report	
Program Goal / Anticipated Impact	Increase education, disease management, access to care, prevention, and well-being of community members.
Measurable Objective(s) with Indicator(s)	<ul style="list-style-type: none"> 90% or more situationally homeless families move back into sustainable housing. 85% senior residents served indicate increased access to basic needs (transportation, utility assistance, exercise, etc.); 75% senior residents served indicate increased knowledge about healthy behavior; 75% senior residents served indicate increased access to physical activity 1,818 children to be served in Glendale Unified School District; 25-40% will have current active decay uncovered; Increased oral health literacy for participants; 10% of identified homeless children will be provided sustained access to dental care. 90% of veterans will experience a decrease in PTS symptoms; 90% of vets will meet at least one indicator for transitioning to civilian life, such as having a job, reducing chronic pain symptoms, making positive lifestyle changes; 80% of vets will see improvement in their relationships with family members and/or other vets at Wellness Works, as measured by self-report and staff and family observation.
Intervention Actions for Achieving Goal	<ul style="list-style-type: none"> Provide case management to situationally homeless families Provide health education workshops and exercise classes for seniors Provide oral health education, screenings, and dental care for children Provide trauma-informed treatment and case management for veterans
Collaboration	GMHHC provided grant funding to four lead applicants and their Accountable Care Communities (Family Promise of the Verdugos, Hope Through Housing Foundation, Kids' Community Dental Clinic and Wellness Works)
Performance / Impact	Family Promise was able to exceed their goals. Hope Through Housing, KCDC, and Wellness Works had to adjust their goals and actions due to COVID-19.
Hospital's Contribution / Program Expense	\$90,000 Grant awards
FY 2021 Plan	
Program Goal / Anticipated Impact	Increase education, disease management, access, prevention, and well-being of community members.

Measurable Objective(s) with Indicator(s)	<ul style="list-style-type: none"> • 10 of 20 enrolled homeless clients to be placed into permanent housing. • Serve at minimum 100 unduplicated homeless households to transition into permanent housing. • 85% senior residents served indicate increased access to basic needs (transportation, utility assistance, exercise, etc.); 75% senior residents served indicate increased knowledge about healthy behavior; 75% senior residents served indicate increased access to physical activity.
Intervention Actions for Achieving Goal	<ul style="list-style-type: none"> • Provide case management for chronically homeless individuals and families. • Provide case management to situationally homeless individuals and families. • Provide health education workshops and exercise classes for seniors.
Planned Collaboration	Glendale Memorial will provide grant funding and collaborate with the following lead applicants: Ascencia, Family Promise of the Verdugos, Hope Through Housing Foundation. In addition, we will offer a COVID-19 Relief Grant to Kids' Community Dental Clinic to support the overall operations of this vital clinic in our community during this tenuous time.

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.

GMHHC is proud to support Health Professions Education through our clinical rotations for ultrasound, X-ray, phlebotomy, lab, pharmacy, surgical technician, and dietician students which provided training for over 336 students in our community in FY20. We will monitor the COVID-19 impact on these programs and strive to continue to provide these clinical rotations in our on-going efforts to build community capacity as much as possible/feasible.

GMHHC also provides leadership and support to a key organization which supports a healthier Glendale community. The Glendale Healthier Community Coalition (GHCC), comprised of key community leaders representing local community agencies and Glendale's hospitals, was created by Glendale's three hospitals and has now successfully worked on many high-profile community-wide projects for 26 years (since 1994). These include the birth of Glendale Healthy Kids; the city's Quality of Life Indicators; and healthcare projects serving the homeless, as well as collaborating every three years on the comprehensive Community Health Needs Assessment. GHCC held its third annual Glendale Health Summit, which brought together city leaders, business leaders, elected officials, not-for-profit leaders, and healthcare leaders to discuss current health needs for the community. The Director of Mission Integration serves on the Executive Board of the GHCC.

GMHHC will continue to partner with the GHCC, as well as the lead organizations that have been awarded community grants and their partnering organizations. Most of the organizations participating in our community grant program are also members of the Glendale Healthier Community Coalition. In addition, we will continue to dialogue and develop our relationships with local city leaders and elected officials. Our collaboration includes GMHHC leaders serving on various community boards and community councils to contribute to community building and relationship building.

In FY20, we continued with our bi-weekly hospital Farmers Market, providing fresh fruits and vegetables to our community; we also invited NAMI Glendale to offer information on mental health awareness and education. Unfortunately, due to COVID-19, we have had to pause the market indefinitely.

Economic Value of Community Benefit

310 Glendale Memorial Hospital and Health Center

Complete Summary - Classified Including Non Community Benefit (Medicare)

For period from 7/1/2019 through 6/30/2020

	Persons	Net Benefit	% of Expenses
<u>Benefits for Poor</u>			
Financial Assistance	1,817	5,117,029	2.1%
Medicaid	29,482	15,552,193	6.3%
Community Services			
A - Community Health Improvement Services	1,445	204,922	0.1%
E - Cash and In-Kind Contributions*	904	0	0.0%
Totals for Community Services	2,349	204,922	0.1%
Totals for Poor	33,648	20,874,144	8.4%
<u>Benefits for Broader Community</u>			
Community Services			
A - Community Health Improvement Services	3,309	112,797	0.0%
B - Health Professions Education	336	483,915	0.2%
C - Subsidized Health Services	0	375,900	0.2%
E - Cash and In-Kind Contributions	1,404	58,468	0.0%
G - Community Benefit Operations	80	525,838	0.2%
Totals for Community Services	5,129	1,556,918	0.6%
Totals for Broader Community	5,129	1,556,918	0.6%
Totals - Community Benefit	38,777	22,431,062	9.0%
Medicare	16,454	19,318,171	7.8%
Totals with Medicare	55,231	41,749,233	16.8%

*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

Robert Gall, MD
Hospital Physician

Silva A. Gasparian, PharmD
Pharmacist, Memorial Medical Pharmacy

Silvio Lanzas
Chief, Glendale Fire Department

Patrick Liddell, Esq
Attorney, Melby & Anderson

Hans Mayer (*Vice Chair*)
Attorney, Knobbe Martens Olson, & Bear

Carl Povilaitis
Chief, Glendale Police Department

Teresa Swida, DO
Hospital Physician

Kalust Ucar, MD
Hospital Physician

Petar Vukasin, MD (*Chair*)
Hospital Physician

Douglas Webber, MD
Hospital Physician

Jill Welton
CEO/President

Brigeli Westerband, MD
Hospital Chief of Staff

Financial Assistance Policy Summary

Summary Of Financial Assistance Programs

Dignity Health's Financial Assistance Policy describes the financial assistance programs available to uninsured or underinsured 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 250% 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 250-350% 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 for your hospital.

California Hospital Medical Center 1401 South Grand Ave, Los Angeles, CA 90015 | **Financial Counseling** 213-742-5530
Patient Financial Services 888-488-7667 | www.dignityhealth.org/californiahospital/paymenthelp

Community Hospital of San Bernardino 1805 Medical Center Dr, San Bernardino, CA 92411
Financial Counseling 909-806-1317 | **Patient Financial Services** 909-806-1281
www.dignityhealth.org/san-bernardino/paymenthelp

Glendale Memorial Hospital 1420 South Central Ave, Glendale, CA 91204 | **Financial Counseling** 818-502-2305
Patient Financial Services 888-488-7667 | www.dignityhealth.org/glendalememorial/paymenthelp

Northridge Hospital Medical Center 18300 Roscoe Blvd, Northridge, CA 91328 | **Financial Counseling** 818-885-5368
Patient Financial Services 888-488-7667 | www.dignityhealth.org/northridgehospital/paymenthelp

St. Bernardine Medical Center 2101 N. Waterman Ave, San Bernardino, CA 92404
Financial Counseling 909-883-8711 ext 4408 | **Patient Financial Services** 909-881-4418
www.dignityhealth.org/stbernardinemedical/paymenthelp

St. Mary Medical Center 1050 Linden Ave, Long Beach, CA 90813 | **Financial Counseling** 562-491-7078
Patient Financial Services 888-488-7667 | www.dignityhealth.org/stmarymedical/paymenthelp

Southern California_CA2016

