FY 2012 Community Benefit Report



St. Jude Medical Center St. Jude Heritage Healthcare

Fiscal Year 2012 COMMUNITY BENEFIT REPORT PROGRESS ON FY 12 – FY 14 CB PLAN/IMPLEMENTATION STRATEGY



EXECUTIVE SUMMARY

Our Mission

To extend the healing ministry of Jesus in the tradition of the Sisters of St. Joseph of Orange by continually improving the health and quality of life of people in the communities we serve.

Our Vision

We bring people together to provide compassionate care, promote health improvement and create healthy communities.

Our Values

The four core values of St. Joseph Health– Service, Excellence, Dignity and Justice – are the guiding principles for all we do, shaping our interactions with those whom we are privileged to serve.

Who We Are and What We Do

St. Joseph Health, St. Jude Medical Center (referred to as St. Jude Medical Center in this document) is a 372 bed hospital sponsored by St. Joseph Health Ministry with centers of excellence in Cardiac, Oncology, Orthopedics, Rehabilitation and Women and Children's Services. The Medical Center's 2,755 employees and 672 medical staff are committed to striving for sacred encounters, perfect care and healthiest communities.

St. Jude Heritage Healthcare is a not-for-profit medical practice foundation with 945 employees and 169 physicians that serves as the integrated partner with the Medical Center in serving over 250,000 residents in North Orange County and neighboring areas.

St. Jude Medical Center invested **\$46,715,471** in community benefit in FY 2012 (FY 12) a 7.8% increase from FY 11 (\$43,316,529). St. Jude Heritage Healthcare invested **\$4,529,554** in community benefit in FY 12, a 112% increase from FY 11 (\$2,137,014). The main reason for this increase has been the increase in persons served by the MediCal and Medical Services for the Indigent (MSI) programs. For FY 12, St. Jude Medical Center had an unpaid cost of Medicare of **\$37,510,569** and St. Jude Heritage Healthcare had an unpaid cost of Medicare of **\$6,191.096**, which represent increases in losses from the Medicare program.

Community Benefit Plan Priorities

Community benefit priorities were developed in 2011 based on the 2011 Community Health Needs Assessment with input from community groups. FY 12 accomplishments include:

Increase Access to Medical and Dental Care for the Uninsured and Underinsured in Zip Codes 92832 and 92833. The number of unique patients who live in zip codes 92832 and 92833

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receiving medical services at St. Jude Neighborhood Health Center declined 3.8% in FY 12 as compared to FY 11. This was due to two providers being on maternity leave during FY 12. The numbers of unique patients who live in zip codes 92832 and 92833 receiving dental services at St. Jude Neighborhood Health Center or St. Jude Dental Clinic declined 10.2% which was due to the resignation of one dentist in FY 12 which took more than six months to fill.

Improving the percentage of Healthy Weight Children in South Fullerton – Initiatives included Healthy for Life Program in 36 school classes, the Richman Neighborhood Healthy Weight Initiative at 5 schools and support for community-based exercise and walking programs. The percentage of students in the Healthy Fitness Zone for body composition on the Fitnessgram in five target schools improved significantly from FY 11 to FY 12 with a range of 56.5% - 65.1% of students in the Healthy Fitness Zone in FY 11 and 71.1% - 84.1% of students in the Healthy Fitness Zone in FY 12.

Reducing the conversion of St. Jude Neighborhood Health Center patients with pre-diabetes to diabetes- Initiatives included the identification of pre-diabetic clinic patients, referral to classes and follow-up testing. In FY 12, 95.7% of clinic pilot group patients with pre-diabetes did not convert to diabetes which was better than our target of 90%.

INTRODUCTION

Who We Are and What We Do

The tradition of the Sisters of St. Joseph of Orange calls on us to go out into the communities we serve, identify the problems that exist and work with the people in the community to solve these problems. The work we are continuing to do in reducing childhood obesity in South Fullerton is an example of how this tradition is lived today.

St. Jude Medical Center is a 372 bed hospital sponsored by St. Joseph Health Ministry with centers of excellence in Cardiac, Oncology, Orthopedics, Rehabilitation and Women and Children's Services. The Medical Center's 2,755 employees and 672 medical staff are committed to striving for sacred encounters, perfect care and healthiest communities. St. Jude Heritage Healthcare is a not-for-profit medical practice foundation with 945 employees and 169 physicians that serves as the integrated partner with the Medical Center in serving over 250,000 residents in North Orange County and neighboring areas.

Five years ago St. Joseph Health, St. Jude Medical Center (referred to as St. Jude Medical Center in this document) identified that the majority of students in classes who took the Fitnessgram test were not in the healthy fitness zone for body composition. In an effort to address this important issue that could have a life-long health impact, the Medical Center engaged the community residents and community partners, including the City of Fullerton, Fullerton School District, Fullerton Collaborative, and the Boys and Girls Club to create a culture of healthy lifestyles. The goal was to provide increased opportunities for children to have more minutes per week of moderate to vigorous physical activity and to decrease sugar sweetened beverage intake while increasing access to healthy foods.

Over the past year the Medical Center invested over \$150,000 in activities such as training parents to lead school lunch exercise programs, zumba classes, walking clubs, school gardens, enhanced school curricula around health and well-being and the Healthy for Life program which provided equipment and teacher training. These efforts resulted in a major improvement in the body composition ratings in the healthy fitness zone for targeted schools in the South Fullerton neighborhood.

St. Jude Medical Center invested **\$46,715,471** in community benefit in FY 2012 (FY 12) a 7.8% increase from FY 11 (\$43,316,529). St. Joseph Health, St. Jude Heritage Healthcare invested **\$4,529,554** in community benefit in FY 12, a 112% increase from FY 11 (\$2,137,014). The main reason for this increase has been the increase in persons served by the MediCal and Medical Services for the Indigent (MSI) programs. For FY 12, St. Jude Medical Center had an unpaid cost of Medicare of **\$37,510,569** and St. Jude Heritage Healthcare had an unpaid cost of Medicare of **\$6,191.096**, which represent increases in losses from the Medicare program.

Patient Financial Assistance Program

Our mission is to provide quality care to all our patients, regardless of ability to pay. We believe that no one should delay seeking needed medical care because they lack health insurance. That is why St. Joseph Health, St. Jude Medical Center has a **Patient Financial Assistance Program** that provides free or discounted services to eligible patients. In FY 12, St. Jude Medical Center provided **\$7,751,384** in charity care for 15,942 encounters, an increase of 7.4% from FY 11. St. Jude Heritage Healthcare provided **\$395,438** in charity care in FY 12 for 1,311 encounters, an increase of 4.2% from FY 11.

Extensive efforts have been implemented to educate patients about the Financial Assistance Program including signs posted in prominent locations, brochures provided to patients who do not have insurance and also posted on our web site.

The Health System enhanced its process for determining charity care by adding an assessment for presumptive charity care. This assessment uses a predictive model and public records to identify and qualify patients for charity care, without a traditional charity care application.

Community Benefit Plan Priorities

St. Jude Medical Center and St. Jude Heritage Healthcare continue to focus on community benefit priorities to increase access to medical and dental care for the uninsured and underinsured, implement programs to reduce childhood obesity and reducing the conversion from pre-diabetes to diabetes among clients served at the St. Jude Neighborhood Health Center.

Our accomplishments for Fiscal Year 12 are as follows:

- Provided 18,357 medical visits and 6,640 dental visits to uninsured/underinsured low income persons through our fixed site and mobile community clinics increasing access to care to 4,578 individuals.
- Continued the St. Jude Heritage Access Program to expand comprehensive medical home access to St. Jude Heritage primary care physician offices.
- Increased access to specialty care for the uninsured by recruiting additional volunteer specialists at our clinics and partnering with Access OC to provide 17 free surgeries and colonoscopies at a Super Surgery Saturday event.
- Implemented Year 3 of the Healthy for Life program in 36 Title I public school classes in our service area.
- Implemented the South Fullerton Neighborhood Healthy Weight Initiative which expanded nutrition and physical activity programs and policies in the Richman community.
- Continued to partner with Fullerton, Placentia, La Habra and Buena Park Collaboratives on their Obesity Prevention Plans.

Community Benefit Governance Structure

The Community Benefit Committee of the St. Jude Medical Center Board of Trustees is composed of a majority of community members, with Board members and executive management of both the hospital and Heritage Healthcare provides oversight for the development and implementation of the Medical Center's Community Benefit Plan. Community members include representatives from School Boards, city government, Orange County Health Care Agency, faith based organizations and others knowledgeable about the needs of the underserved. Members have provided input into the community benefit needs assessment and planning process, helped establish priorities for community benefit budget. In addition, they support us in our advocacy efforts with local government and school boards. The CeO sought to engage Executive Management Team members in our community benefit activities by encouraging their participation in the Richman Neighborhood 5K and working in partnership with Home Depot to re-build the community garden at the Richman School.

Overview of Community Needs and Assets Assessment

The FY 12 priorities and programs were based on the findings of the 2011 SJMC Needs Assessment. The process utilized in conducting the needs and assets assessment included the following:

- Orange County Health Needs Assessment 2007 Survey with updates for 2010.
- Orange County Health Care Agency Secondary Data
- Stakeholder surveys conducted by the Orange County Health Needs Assessment
- Community meetings with low income residents and representatives from agencies that serve them.

A new community needs and asset assessment has just been completed and is available online at <u>stjudemedicalcenter.org</u>

Primary Area and Secondary Service Area

The primary service area of St. Jude Medical Center is noted in light blue and the secondary service area in dark blue. The service areas reach 1.63 million people.

Demographic Summary

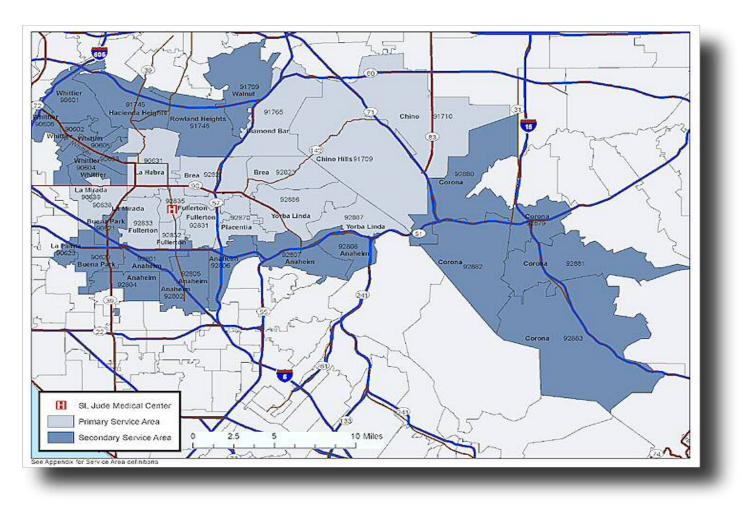
Total Service Area

Characteristics Total Population			2011			2016			%Δ		
				1,632,6	07	1,729,456			5.9		
Average Household Size*			3.33			3.36		0.9			
Median Household Income* Male Population Female Population			\$71,257 816,960 815,647			\$80,218 865,266 864,190			12.6 5.9 6.0		
Age Group	2011	%	2016	%	%Δ	Race/Ethnicity	2011	%	2016	%	%Δ
0-17	431,621	26.4	452,387	26.2	4.8	Caucasian	504,852	30.9	466,338	27.0	(7.6)

Total	1,632,607	100.0	1,729,456	100.0	5.9	Total	1,632,607	100.0	1,729,456	100.0	5.9
65+	164,878	10.1	195,072	11.3	18.3	All Others	49,679	3.0	53,997	3.1	8.7
45-64	397,679	24.4	435,550	25.2	9.5	Asian	290,553	17.8	328,901	19.0	13.2
10 44	030,425	55.1	010,117	57.4	1.5	Hispanic	734,893	45.0	822,760	47.6	12.0
18-44	638,429	39.1	646.447	37.4	1.3	African American	52,630	3.2	57,460	3.3	9.2
0-17	431,621	26.4	452,387	26.2	4.8	Caucasian	504,852	30.9	466,338	27.0	(7.6)

Household Income	# of Households	%	Adult Education Level	Population Age 25+	%
<\$10K	20,914	4.4	Less than High School	93,125	9.0
\$10K - \$25K	47,126	9.8	Some High School	93,094	9.0
\$25K - \$35K	39,883	8.3	High School Degree	238,739	23.1
\$35K - \$50K	63,660	13.2	Some College/Assoc. Degree	313,424	30.3
\$50K- \$100 K	166,664	34.7	Bachelor Degree or Greater	297,184	28.7
Over \$100K	142,268	29.6	Total	1,035,566	100.0

Source: Claritas 2011 - Based on 2000 U.S. Census, ESRI 2010



Primary Area and Secondary Service Area (continued)

2011 Annual Market Assessment, St. Joseph Health, Jude Medical Center

Community Benefit Geographic Focus

The Medical Center's geographical area of focus for community benefit programs are the cities of Brea, Buena Park, Fullerton, La Habra, Placentia and Yorba Linda whose demographics are outlined in Table 1 below.

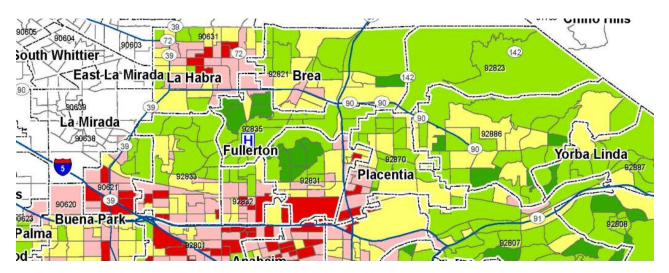
City	Pop.	%	%	%	%	HH	Median	Unemployed
		White	Hispanic	Asian	Black	Size	Income	
Brea	35,419	60.8%	20.3%	9.3%	1.3%	2.7	\$59 <i>,</i> 759	3.4%
Buena Park	78,282	25.9%	33.5%	21.6%	3.8%	3.32	\$50,336	8.0%
Fullerton	126,003	36.4%	30.2%	16.3%	2.3%	3.0	\$62,124	6.2%
La Habra	58,974	19.6%	49.0%	6.1%	1.6%	3.08	\$47,652	9.1%
Placentia	46,488	41.8%	31.1%	12.2%	1.8%	3.07	\$62,803	5.7%
Yorba	64,226	67.2%	10.2%	16.4%	1.9%	3.1	\$121,075	2.1%
Linda								
TOTAL	409,383	39.4%	29.6%	14.7%	2.3%	3.05	\$65,95 <mark>2</mark>	5.75%

Table 1. Target Cities for Community Benefit Initiatives and Programs

Source: 2000 US Census (Race/ethnicity data excludes other race)

The socio-demographic data above for the six areas served by SJMC Community Benefit demonstrate wide disparities in racial/ethnic and economic indicators. La Habra is the city with the lowest median income and the greatest racial/ethnic diversity while Yorba Linda has the highest income and least racial/ethnic diversity.

Within each city, with the exception of Yorba Linda, there are neighborhoods that have a higher percentage of disproportionate unmet health needs populations. The map below outlines these neighborhoods which are designated in red (highest need) and pink (high need) based on demographic indicators such as poverty level, unemployment rate and household income. Highest need neighborhoods had highest rates of poverty, unemployment and lowest incomes. Community benefit programs are targeted to these highest need neighborhoods.



FY 12 – FY 14 Community Benefit Plan/Implementation Strategies: FY 12 Community Benefit Priority Initiatives Accomplishments

Our community benefits priorities and key programs in our FY 12- FY 14 Community Benefit Plan include:

• Increase the percentage of uninsured and underinsured residents in zip codes 92832 and 92833 with access to medical and dental care.

The number of unique patients who live in zip codes 92832 and 92833 receiving medical services at St. Jude Neighborhood Health Center declined 3.8% in FY 12 as compared to FY 11. This was due to two providers being on medical leave during FY 12. The numbers of unique patients who live in zip codes 92832 and 92833 receiving dental services at St. Jude Neighborhood Health Center or St. Jude Dental Clinic declined 10.2% which was due to the resignation of one dentist in FY 12 which took more than six months to fill.

Telling Our Story:

In January of 2012, a telehealth program was implemented at the St. Jude Neighborhood Health Center. This program is a pilot project of St. Joseph Health with support from UniHealth Foundation. The initial services that are available include psychiatry and urgent care. Psychiatry services have been available for most of the patients who would benefit from since the clinic opened. The availability of this service has enabled patients with depression, anxiety and major psychiatric disorders to receive consultation and for our clinic providers to receive assistance with recommendations related to medication management. Urgent care services provide the opportunity for walk-in patients to be seen the same day when clinic provider schedules are full and avoid costly emergency department visits. In order to create the space needed for this program, the Center partnered with the Boys and Girls Club of Fullerton's nearby Teen Center to move its Gym equipment that was in the telehealth proposed space. This partnership allows the equipment to be utilized by clinic patients with chronic illnesses in the morning and community teens in the afternoon.

• Improving the percentage of Healthy Weight Children in South Fullerton

Over \$200,000 has been invested in a wide array of childhood obesity prevention and treatment services including: Healthy for Life, the Vida Sana program, and the South Fullerton Healthy Weight Initiative.

Telling Our Story:

Over the past five years, St. Jude Medical Center and its partners have continued to introduce a culture of health lifestyles in South Fullerton. Today, there are zumba classes and walking clubs at most area schools, parent-led lunch recess exercise programs and active after school programs. School Fitnessgram results in targeted schools have significantly improved as a result.



 Reducing the conversion of St. Jude Neighborhood Health Center patients who have prediabetes to diabetes.

The St. Jude Neighborhood Health Center cares for over 600 patients with diabetes. In an effort to reduce the conversion of persons who have pre-diabetes to diabetes the Center implemented a protocol to identify pre-diabetic patients and provide educational classes for them. Many patients have been enthusiastic about the changes they are making in their lifestyle and in the improvement they have seen in their health.

FY 12 – FY 14 Community Benefit Plan/Implementation Strategies: FY 12 Community Benefit Priority Initiatives Accomplishments



Expanding Access to Medical and Dental Care for the Uninsured and Underinsured Low Income Population in Zip Codes 92832 and 92833

Key Community Partners: City of Fullerton, Fullerton School District, Boys and Girls Club of Buena Park, City of Placentia, St. Angela Merici Church, Access OC

Target Population: Low income residents of zip codes 92832 and 92833 who are uninsured and underinsured.

Goal: Increase access of low income residents in zip codes 92832 and 92833 who are uninsured and underinsured to primary health care.

How will we measure success? % increase in unique number of uninsured and uninsured low income population in service area provided care

- **Strategy:** Increase access to care through care redesign at the St. Jude Neighborhood Health Center
- Measures: Number of care redesign initiatives

Strategy: Expand access to specialty services. **Measure:** # of specialty referrals for the uninsured

FY 12 Accomplishments:

Increasing Access to Primary Care

The number of unique patients who live in zip codes 92832 and 92833 receiving medical services at St. Jude Neighborhood Health Center declined 3.8% in FY 12 as compared to FY 11. The numbers of unique patients who live in zip codes 92832 and 92833 receiving dental services at St. Jude Neighborhood Health Center or St. Jude Dental Clinic declined 10.2% which was due to the resignation of one dentist in FY 12 which took more than six months to fill. In FY 13 the clinic plans to hire an additional full-time physician to increase access to care. The dental position was filled in December 2011 and an initiative to increase the number of new patients to the clinic has been implemented.

FY 12 – FY 14 Community Benefit Plan/Implementation Strategies: FY 12 Community Benefit Priority Initiatives Accomplishments

Improving the Percentage of Healthy Weight Children in South Fullerton

Key Community Partners: American Academy of Pediatrics, University California Irvine, Fullerton Collaborative, , Richman School District, , Orange County Head Start, Fullerton Child Development Center, Boys and Girls Clubs Fullerton, Solidarity, Orange County Congregation Community Organization, Orange County Nutrition and Physical Activity Collaborative, St. Jude Heritage Medical Group.



Target Population: Low income families with children who are overweight or obese at target Title 1 schools in South Fullerton.

Goals: Enhance obesity prevention programs in schools. Reduce obesity in pediatric population in St. Jude Community Clinics.

How will we measure success? :

Improvement in the percent of 5th and 7th graders in target South Fullerton schools who score in the Healthy Fitness Zone for body composition.

Strategy: Measures:	Implement Healthy for Life program in schools serving low income students. Number of schools program implemented; percentage of students with decrease in Body Mass Index (BMI) and waist circumference.
Strategy:	Continue Vida Sana Program at St. Jude Community Clinics.
Measure:	Number of participating children in Vida Sana who have reduced BMI.
Strategy:	Work with community collaboratives in Fullerton and La Habra on obesity prevention plan implementation.
Measure:	Number of obesity prevention plans implemented.
weasure:	Number of obesity prevention plans implemented.

FY 12 Accomplishments: Fitnessgram scores for body composition in the target schools increased significantly between the 2009/2010 school year and the 2010/2011 school year. Schools that ranged from the 63 - 74% of children in the healthy fitness zone increased to the 71 - 84% range. All target schools showed a minimum of 10% improvement in scores.

Healthy for Life Program: The Healthy for Life Program was initiated in six title one thirty-six school classes in South Fullerton. Results from all the schools in the program showed that after nine months of 16% of the children who were overweight or obese changed their weight status in a positive direction.

Vida Sana Program: *The Vida Sana* (Healthy Life) *Program* has served 1,244 clients with 11,518 encounters. The program was expanded this year to embrace the Richman Neighborhood Healthy Weight Initiative. This initiative implemented a parent-led lunch physical activity program at four schools, parent walking groups and zumba classes at three schools, increased physical activity in the after school programs at three schools, expanded servings of fresh fruits and vegetables at three schools and continued a non-sweetened milk pilot program at two schools. The program staff is working with UCI on a long-term evaluation of program outcomes.

Community Collaborations for Policy Change: The Medical Center continued to participate as an active participant in the Fullerton School District Wellness Council, which tightened up the administrative rules for the District Wellness policy. In addition, Medical Center staff provided leadership to the Alliance for a Healthy Orange County, a group working on county-wide policies promoting health eating and active living.

FY 12 – FY 14 Community Benefit Plan/Implementation Strategies: FY 12 Community Benefit Priority Initiatives Accomplishments

Reduce the conversion of St. Jude Neighborhood Health Center patients with pre-diabetes to diabetes.

Key Community Partners:St. Jude Heritage Healthcare, St. Jude Heritage Medical Group,
City of Fullerton, Boys and Girls Club of Fullerton

Target Population: St. Jude Neighborhood Health Center patients with pre-diabetes.

Goals: Reduce the conversion of St. Jude Neighborhood Health Center patients with prediabetes to diabetes to less than 10%.

How will we measure success? % of patients with pre-diabetes who convert to diabetes.

Strategy: Implement pre-diabetes protocol and classes. **Measure:** Hemoglobin A1C levels of patients with pre-diabetes.

FY 12 Accomplishments: In an effort to reduce the conversion of persons who have prediabetes to diabetes the Center implemented a protocol to identify pre-diabetic patients and provide educational classes for them. Many patients have been enthusiastic about the changes they are making in their lifestyle and in the improvement they have seen in their health. The classes are taught by a bilingual dietitian/certified diabetes educator. In addition, exercise classes are available through the clinic partnership with the Boys and Girls Club of Fullerton and the community programs initiated by the Medical Center's Vida Sana program. To date, over 95% of the patients in the pilot program with pre-diabetes do not convert to diabetes.

Other Major Community Benefit Initiatives and Programs

Nurse Advice Line

Key Community Partners: Coalition of Orange County Community Clinics

Target Audience: Broader Community

Goal: Reduce inappropriate emergency department visits

How will we measure success? Number of inappropriate emergency department visits avoided.

FY 12 Accomplishments: The Nurse Advice Line provides advice to the community on how to care for an illness or injury at home or guidance about whether and where to see a healthcare provider. In addition, it served as the after hours resource for six community clinics in Orange County through the After Hours Collaborative funded by Measure H. The Nurse Advice Line provided after hour phone advice to 16,816 persons in FY 12. The majority of calls did not require referral to the emergency department.

Cancer Center Community Programs

Key Community Partner: American Cancer Society

Target Audience: Patients with a cancer diagnosis and their families

Goal: To improve the quality of life of cancer patients and their families.

FY 12 Accomplishments: Cancer Center Community Programs are designed to provide educational, psychosocial and navigation support to cancer patients and their families. Services that are not reimbursed that are provided include: Support Groups; Community Screenings; Education; Care Navigators; Research; and support for Expressions, a specialty store for needs of cancer patients. In FY 12, 6,536 persons were served with 10,832 encounters. These services truly make a difference in the quality of life of cancer patients and their families.

Other Major Community Benefit Initiatives and Programs

Family Caregiver Support Program

Key Community Partners: County of Orange Office on Aging, Community Senior Services, Alzheimer's Association, Abrazar, Age Well.

Target Audience:Broader Community

Goal: Assist caregivers to develop a plan that allows them to keep caring for their family member in their home as long as it is feasible.

How will we measure success? Number of caregivers served

FY 12 Accomplishments: The Family Caregiver Support program/Caregiver Resource Center directly and through its partners served 658 clients with over 8,709 encounters including: inhome assessment and care plan development, respite support, legal consultation, support groups and education programs.

Care Transitions

Key Community Partners: Multiple social service and community organizations.

Target Audience: Broader Community

Goal: Prevent re-admissions to the hospital.

How will we measure success? Re-admission rate for targeted diagnoses.

FY 12 Accomplishments: Medicare 30 day readmission rates from the second quarter 2011 to the first quarter 2012 showed that St. Jude Medical Center's rates were lower than the region's for all four diagnoses tracked. The results are:

Diagnosis	St. Jude Medical Center Rate	Regional Rate ¹
AMI	19.6%	22.2%
Heart Failure	21.9%	27.7%
Pneumonia	19%	19.7%
COPD	21.1%	23.7%

The Care Transitions Department has worked with St. Jude Heritage Healthcare on a high risk discharge clinic and other innovative strategies to reduce re-admissions.

¹ Source: National Quality Forum. (September 2012). Centers for Medicare & Medicaid Services (CMS) Dry Run Hospital-Specific Report for Hospital-Wide All-Cause Unplanned Readmission (HWR) Measure Report.

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FY 12 COMMUNITY BENEFIT INVESTMENT ST. JOSEPH HEALTH, ST. JUDE MEDICAL CENTER (Ending June 30, 2012)

CA Senate Bill (SB) 697 Categories	Community Benefit Program & Services ²	FY 12 Net Benefit
Medical Care Services for Vulnerable ³ Populations	Financial Assistance Program (FAP) (Charity Care-at cost)	\$7,751,384
	Unpaid cost of Medicaid ⁴	\$22,529,894
	Unpaid cost of other means-tested government programs	\$7,508,131
Other benefits for Vulnerable Populations	Community Benefit Operations Community Health Improvements Services Cash and In-kind Contributions for Community Benefit Community Building Subsidized Health Services	\$297,238 \$2,277,124 \$0 \$0 \$454,276
	Totals Community Benefit for the Vulnerable	\$ 40,818,047
Other benefits for the Broader Community	Community Benefit Operations Community Health Improvements Services Cash and In-kind Contributions for Community Benefit Community Building Subsidized Health Services	\$64,419 \$4,974,131 \$10,538 \$0 \$699,297
Health Professions Education, Training and Health Research	Health Professions Education, Training & Health Research	\$149,039
	Total Community Benefit for the Broader Community	\$5,897,424
	TOTAL COMMUNITY BENEFIT (excluding Medicare)	\$ 46,715,471
Medical Care Services for the Broader Community	Unpaid cost of Medicare ⁵ (not included in CB total)	\$37,510,569
	TOTAL COMMUNITY BENEFIT (including Medicare)	\$84,226,040

² Catholic Health Association-USA Community Benefit Content Categories, including Community Building.

³ CA SB697: "Vulnerable Populations" means any population that is exposed to medical or financial risk by virtue of being uninsured, underinsured, or eligible for Medicaid, Medicare, California Children's Services Program, or county indigent programs. For SJH, we exclude Medicare as part of Community Benefit total and only include it below the line for SB697 reporting purposes.

⁴ Accounts for Hospital Fee. The pledge/grant (separate from the quality assurance fee) is reported in Cash and In-kind Contributions for other vulnerable populations.

⁵ Unpaid cost of Medicare is calculated using our cost accounting system. In Schedule H, we use the Medicare cost report.

FY 12 COMMUNITY BENEFIT INVESTMENT ST. JOSEPH, ST. JUDE HERITAGE HEALTHCARE (ending June 30, 2012)

CA Senate Bill (SB) 697 **Community Benefit** FY 12 Net Benefit **Program & Services⁶** Categories **Medical Care Services** St. Jude Heritage Financial Assistance Program (FAP) \$395,438 for Vulnerable⁷ (Charity Care-at cost) Unpaid cost of Medicaid **Populations** \$2,954,004 Unpaid cost of other means-tested government \$1,140,861 programs Other benefits for **Community Health Improvements Services** \$ 22,693 **Vulnerable Populations Community Benefit Operations** \$0 Cash and In-kind Contributions for Community Benefit \$7,972 \$O **Community Building** Subsidized Health Services \$0 \$4,520,968 Total Community Benefit for the Vulnerable Populations Other benefits for the **Community Health Improvements Services** \$0 **Broader Community Community Benefit Operations** \$0 Cash and In-kind Contributions for Community Benefit \$7,857 \$O **Community Building** Subsidized Health Services \$0 **Health Professions** Health Professions Education & Training and Health **Education, Training and** \$729 Research **Health Research** Total Community Benefit for the Broader Community \$8,586 **TOTAL COMMUNITY BENEFIT** \$4,529,554 (excluding Medicare) **Medical Care Services** Unpaid cost of Medicare for the Broader \$6,191,096 (not included in CB total) Community TOTAL COMMUNITY BENEFIT \$10,720,650 (including Medicare)

⁶ Catholic Health Association-USA Community Benefit Content Categories, including Community Building.

⁷ CA SB697: "Vulnerable Populations" means any population that is exposed to medical or financial risk by virtue of being uninsured, underinsured, or eligible for Medicaid, Medicare, California Children's Services Program, or county indigent programs. For SJH, we exclude Medicare as part of Community Benefit total and only include it below the line for SB697 reporting purposes.

Telling Our Community Benefit Story: Non-Financial Summary⁸ of Accomplishments

In addition to the financial investments made by the Medical Center and Heritage Healthcare, there are non-quantifiable benefits that are provided by both organizations. Going out into the community and being of service to those in need is part of the tradition of our founders and is carried out today by our staff. Each month the Medical Center and Heritage Healthcare sponsor the Spirit of Giving, a program that encourages staff to help the community. This program has collected eyeglasses for the needy, cell phones for soldiers, prepared backpacks for former foster kids who are now in college and collected coats for those in need during winter months. In addition, our staff has donated funds to support a monthly food distribution in West Fullerton and provide volunteers to help distribute the food.

This year, in honor of the 100th anniversary of the founding of the Sisters of St. Joseph of Orange, employees of St. Jude Medical Center and St. Jude Heritage Healthcare documented over 20,000 volunteer hours of community service. In addition, over one hundred physicians, nurses and support staff volunteer each year to support Supersurgery Saturday, where free surgeries and special procedures are provided to the uninsured. Over fifty of our medical staff volunteers to provide specialty consultations to uninsured patients of the St. Jude Neighborhood Health Center. Our staff also supports special events such as the Race for the Cure and the Heart Walk. When there is a need in the community our staff responds with their time, expertise and funds. They truly demonstrate the value of service to the community.

⁸ Non-financial summary of accomplishments are referred to in SB 697 as non-quantifiable benefits.

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St.JosephHealth

500 S. Main St., Ste. 1000 Orange, CA http://www.stjhs.org/

St. Joseph Health (SJH) is an integrated healthcare delivery system providing a broad range of medical services. The system is organized into three regions--Northern California, Southern California, and West Texas/Eastern New Mexico - and consists of 14 acute care hospitals, as well as home health agencies, hospice care, outpatient services, skilled nursing facilities, community clinics, and physician organizations. The ministries that comprise SJH offer a wide variety of services within each of the three regions. From well-established acute care hospitals to clinics in non-traditional settings like school rooms, SJH is establishing a "continuum of care," that is, a system that links and coordinates an entire spectrum of health services.