



Community Benefits Plan Fiscal Year 2015

For Submittal by May 30, 2016 to:

Office of Statewide Health Planning and Development
Healthcare Information Division – Accounting and Reporting Systems Section
818 K Street, Room 400
Sacramento, CA 95814

Preface

In accordance with Senate Bill 697, Community Benefits Legislation, Beverly Hospital, a private not-for-profit hospital, submits this Community Benefits Plan for Fiscal Year 2015. Senate Bill 697 requires a not-for profit hospital in California to complete the following activities:

- Review and reaffirm its mission statement to ensure that its policies integrate and reflect the public interest in meeting its responsibilities as a not-for-profit organization;
- Complete and update a needs assessment every three years, evaluating the health needs of the community served by the hospital; and
- Adopt and file a community benefits plan annually, documenting activities that the hospital has undertaken to address community needs within its mission and financial capacity; and to the extent practicable, assign and report the economic value of community benefits provided in furtherance of its plan.

Introduction to Beverly Hospital

Since 1949, Beverly Hospital (located in Montebello) has provided quality medical care to the residents of Montebello, Pico Rivera, Monterey Park, El Monte, Whittier, East Los Angeles, and surrounding communities. The hospital has grown to keep pace with the changing needs of patients and the rapidly advancing technology of health care. A team of health care professionals supports the medical staff of over 400 physicians; Beverly Hospital has sophisticated diagnostic and treatment services, as well as spacious patient care units.

Beverly Hospital is a 224-bed acute care, not-for-profit hospital that is proud of the care and comfort we provide to our patients. Beverly Hospital is accredited by Det Norske Veritas (DNV) and an ISO: 2008 certified organization. Our expertise lies with providing services driven by the health needs of the community.

Having a strong presence in our community has been critical to our success for over 67 years. We have changed with our community not only in the way we deliver basic healthcare, but also by reaching beyond the walls of our hospital and working with our community members in meeting their needs.

Services Offered Include

Cardiac Care Services

Center for Wound Care and Hyperbaric Medicine

Diabetes Center

Emergency Care Center

Family Care Center

Hensel Maternity Center

Industrial Clinic

Intensive Care Services

Medical and Surgical Services

Pediatric Services

Radiology Diagnostic Services

Senior Services

Women's Care Center

Women's Pavilion and Breast Center
Free Medical Transportation
Free Education and Screening Program

In 2015, Beverly Hospital received HealthGrades¹ Awards for hospital clinical excellence for the following:

- America's 100 Best Hospitals for Cardiac Care in 2015
- America's 100 Best Hospitals for Coronary Intervention in 2015
- Five-Star Recipient for Treatment of Heart Attack for 3 years in a row (2013-2015)
- Five-Star Recipient for Treatment of Heart Failure for 4 years in a row (2012-2015)
- Five-Star Recipient for Hip Fracture Treatment for 5 years in a row (2011-2015)

¹ HealthGrade, Inc. is an independent health care quality information and advisory services company. The mission of HealthGrades is to improve the quality of the health care nationwide. HealthGrades profiles more than 5,000 hospitals, 15,000 nursing homes, and 6,000 home health agencies. Ratings compare actual and risk-adjusted mortality and major complications for the patient population for three years ending 2014. Data is sourced from CMS Medicare databases that include major complications and mortality.

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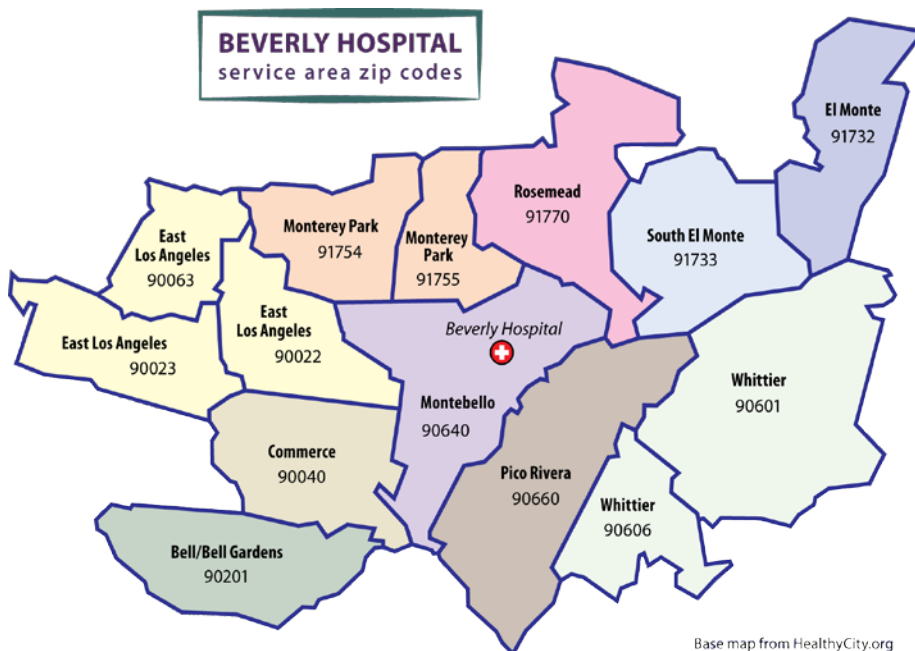
Section 1: Executive Summary

Mission Statement

Beverly Hospital is a leading independent, non-profit community hospital improving the quality of life of its constituents through health education, disease prevention, and state of the art illness and injury prevention.

Definition of Service Area Used in the 2013 Community Needs Assessment

In 2013, Beverly Hospital updated its community needs assessment. The hospital, located in Montebello, defined its service area for purposes of the 2013 Community Needs Assessment to include the following 14 zip codes that overlap ten cities and the large unincorporated area of East Los Angeles.



The "Beverly Hospital Service Area" covers a wide range of community types such as largely residential neighborhoods, industrial areas, business parks, and college campuses. Crisscrossed by several major freeways and rail lines, it is an area that thousands pass through or across daily, unaware of its diversity and its interesting, influential history in the evolution of today's Los Angeles County. In this report, zip code data is used most accurately to represent the service area, but in some cases data are available for the broader L.A. County Service Planning Area (SPA) 7.

Description of the Community

According to the U.S. Census Bureau 2010-2014 American Community Survey population estimates, the Beverly Hospital service area included an estimated population of 710,992. Of the area population, 49.3% are male and 50.7% are female, which is identical to the county percentages.

Population by Age: In the service area, 26% of residents are children and teens, 63% are adults between 18-64, and 11% are age 65 years and older. The median age in the service area is 34.1, lower than the median age in the county of 35.3.

	Zip Code	Youth Ages 0 – 17	Seniors Ages 65+
Bell / Bell Gardens	90201	32.5%	5.9%
Commerce	90040	25.7%	13.8%
East Los Angeles	90022	28.0%	9.9%
East Los Angeles	90023	29.7%	7.8%
East Los Angeles	90063	28.8%	9.6%
El Monte	91732	26.0%	10.1%
Montebello	90640	22.6%	14.9%
Monterey Park	91754	19.9%	19.1%
Monterey Park	91755	15.3%	19.1%
Pico Rivera	90660	25.4%	13.3%
Rosemead	91770	20.0%	15.3%
South El Monte	91733	27.0%	10.4%
Whittier	90601	23.2%	13.5%
Whittier	90606	24.5%	11.2%
Beverly Hospital Service Area		25.9%	11.5%
Los Angeles County		23.5%	11.6%

Source: U.S. Census Bureau, 2010-2014 American Community Survey, 5-year estimates, DP05.<http://factfinder.census.gov>

Population by Race/Ethnicity: Hispanics are the largest race/ethnic group in the service area (77% of the population), followed by Asians or Pacific islanders (17%), White Non-Hispanics (5%) and others (1%). This is a much higher percentage of Hispanics/Latinos and a much lower percentage of Whites than found at the county level. There are also a higher percentage of Asians and a lower percentage of Blacks than found county-wide.

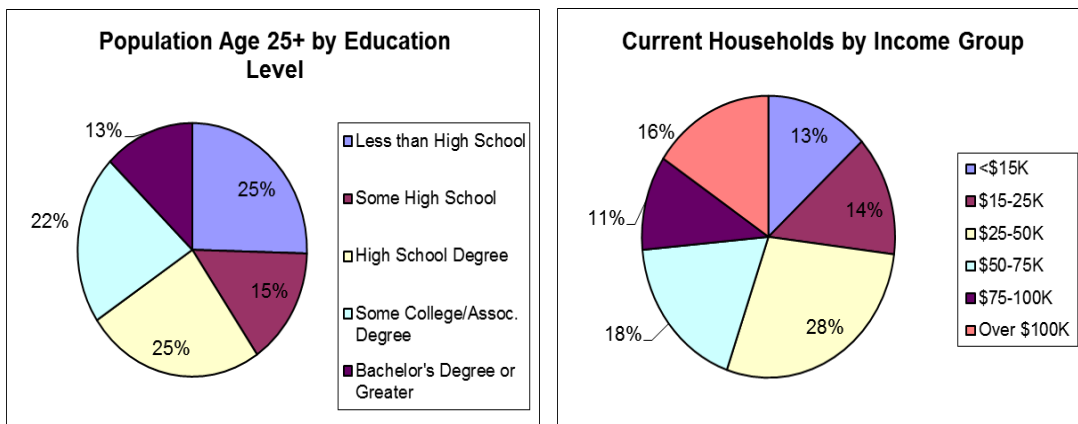
	Service Area	Los Angeles County
Hispanic/Latino	77.3%	48.1%
Asian	16.5%	13.8%
White	4.8%	27.2%
Black/African American	0.6%	8.0%
American Indian/Alaska Native	0.2%	0.2%
Native Hawaiian/Pacific Islander	0.1%	0.2%
Other / Multiple	0.6%	2.4%

Source: U.S. Census Bureau, 2010-2014 American Community Survey, 5-year estimates, DP05.<http://factfinder.census.gov>

Population by Language: As a result of the area’s immigration and ethnic patterns, many residents speak a language other than English at home like Spanish (65%) and Asian languages (15%), being 19% who speak only English at home and 1% another language. When communities in the service area are examined by zip code, the areas with the highest concentrations of Spanish-speakers are East Los Angeles and Bell/Bell Gardens. The highest concentrations of English-only speakers were in Whittier, and neighborhoods with a high percentage of Asian language speakers include: Monterey Park, Rosemead and El Monte. The highest concentration of Indo-European language speakers (other than Spanish) is found in Montebello.

	Zip Code	English	Spanish	Asian/Pacific Islander	Indo European
Bell / Bell Gardens	90201	9.3%	89.4%	0.5%	0.2%
Commerce	90040	26.4%	72.6%	0.1%	0.8%
East Los Angeles	90022	14.0%	85.3%	0.5%	0.2%
East Los Angeles	90023	8.0%	91.3%	0.6%	0.1%
East Los Angeles	90063	9.3%	89.6%	1.1%	0.1%
El Monte	91732	14.7%	56.9%	28.0%	0.4%
Montebello	90640	28.8%	57.2%	9.6%	4.1%

Education Level: On the education level, 25% of the adults age 25 years and older has less than a high school diploma, 25% are high school graduates, 22% have some college but no degree, and 13% have a professional degree.



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Households by Income Group: Beverly Hospital service area has the highest percentage of family households, more than 80% of all households are families compared to the Los Angeles County of 67%. Not only are rates of families with children (51%), but also families with no children (31%). In terms of income, 55% of households are below the county median income.

Objectives Addressed in the Community Benefits Plan

Based on the 2013 Community Needs Assessment, Beverly Hospital addressed the following objectives during Fiscal Year 2015.

- A. Affordable and accessible services to low income and uninsured persons
- B. Reduction of risk factors for leading causes of death through preventive health education
- C. Culturally responsive services focused on Latino community
- D. Senior citizen health promotion
- E. Coordination of services with health care and community services agencies

Community Benefits Programs and Services in Support of Objectives

In support of the above objectives, Beverly Hospital community benefits activities included: charity care for patients without the ability to pay for necessary hospital treatment; absorbing the unpaid costs of care for patients; assistance with patient transportation for medical appointments, assistance preparing Medi-Cal applications; expanding local programs like KidsFit to help overweight children develop good eating and exercise habits in order to prevent Diabetes; Pregnant Minors programs to prevent teen pregnancy; free childhood immunizations and CPR classes; working in conjunction with other health care providers to provide health lectures and screenings for Heart Disease, Diabetes, Stroke and Cancer at convenient community locations; providing financial support to a variety of local non-profit organizations; participating in community health fairs; offering specialized education programs for the management of diabetes and prepared childbirth; breastfeeding and infant care; expanding wellness programs for seniors such as nutrition and exercise classes; social activities; flu immunizations; support groups; participate in career programs; and serving as a clinical rotation sites for RN students and emergency medical and respiratory technicians attending local colleges.

Economic Value of Community Benefits Provided by Beverly Hospital

The economic value of community benefits provided by Beverly Hospital in Fiscal Year 2015 is estimated at \$8,739,740.

Section 2: Mission, Vision, and Values

Beverly Hospital Mission and Vision statements and Values are as follows. These guide our organization's commitment to responding to community needs.

Our Mission

Beverly Hospital is a leading independent, non-profit community hospital improving the quality of life of its constituents through health education, disease prevention, and state of the art illness and injury prevention.

Our Vision

Beverly Hospital is committed to providing quality health care through a cost-effective organization that educates and motivates all members of our health care team to become personally involved and individually responsible for the continuous improvements of our services.

Our Values

- Innovation
- Service
- Respect
- Integrity
- Excellence
- Teamwork

Section 3: 2013 Community Needs Assessment

A Community Health Needs Assessment (CHNA) was conducted on November 2013. A wide range of organizations serving the community were invited to a focus group. Organizations invited to provide input included agencies for public health services, clinics, nonprofits focused on specific health conditions, as well as a variety of human services such as child development, parks and recreation, youth services, housing, universities, and the local school district. The focus group session included a discussion of representatives' views about health-related issues in the community, as well as completion of a brief survey about needs in specific communities. The survey was also completed by a number of representatives who were not able to participate in the focus group session.

The CHNA study also includes data on population characteristics, birth and death records, public health department surveys and reports, and related research papers:

- The U.S. Census Bureau's 2012 American Community Survey
- The State of California Public Health Department birth and death records, including analysis of mortality data and the Los Angeles County Health Survey
- The UCLA Center for Health Policy Research, California Health Interview Survey

Demographic trends

- Latinos are a large majority of the Beverly Hospital service area population at 77%, with Asians at 17%. These populations are concentrated in different parts of the hospital's service area. Latinos are the primary focus for Beverly Hospital community benefit services.
- While Asians are a significant population in the area, they are clustered in higher income communities served by organizations providing an array of health and social services focusing on specific Asian language needs.
- Latinos have a younger age distribution with median age per community in the thirties age group, Asians in the forties, and Whites in the fifties.
- 79% of residents speak a language other than English at home, with 65% of Spanish speakers and 15% of Asian language speakers.

- The area has low levels of adult education and income, with 25% of adults having less than a high school education and 55% below the county median household income.

Health Facilities and Human Services Resources

- The area is served by 7 other nonprofit and privately owned hospitals with several others in adjacent zip codes, and 16 nonprofit community clinics providing medical and dental services. A wide variety of specialized (mental health, drug rehabilitation, HIV services, etc.) services are available in the service area. Additional health-related resources include senior citizen centers, family services agencies and educational institutions.

Health conditions

- Births decline 19% overall since 2000, with a 15% drop in births to teens. Continuing work with pregnant teens is needed to reinforce their ability to care for their families over the long term. A large majority of births are to Latinas at 86%, followed by Asian at 11%.
- Leading causes of death for SPA 7 are heart disease and cancer, with stroke and diabetes a distant 3rd and 4th. Death rates from heart, diabetes, Alzheimer's, and accidents have declined significantly.
- There has been a startling increase in rate of adults reporting that they have been diagnosed with diabetes from 1997- 2011, paralleling an increase in obesity. SPA 7 has by far the worst diabetes rates in the county.

	2006	2007	2008	2009	2010	Change
Heart Disease	1106	1048	1046	956	979	-12%
Cancer	851	837	876	882	850	0%
Stroke	254	240	192	214	247	-3%
Diabetes	212	188	209	180	167	-21%
Emphysema/COPD*	170	162	195	185	160	-6%
Alzheimer's	162	91	114	113	143	-12%
Pneumonia/Influenza	72	125	137	165	140	94%
Accidents	154	136	128	122	126	-18%
Liver Disease	109	116	112	134	113	4%
Homicide	75	54	74	98	85	13%
Hypertension	63	69	70	57	59	-6%
Suicide	32	35	34	43	40	25%
Other Causes	637	600	582	568	613	4%
Total	3897	3701	3769	3717	3,722	

*Chronic Lower Respiratory Disease

Source: Los Angeles County Department of Public Health, Mortality Report 2001-2010

Comparison to the Healthy People 2020 Objectives

Compared to Healthy People 2020 Objectives, SPA 7 meets about half of the national goals.

Obesity for children and adults remains as an important concern due to its relationship to leading causes of death.

Indicator	Healthy People 2020 Objective	SPA 7 Rate 2009 Report	SPA 7 Rate 2011	Goal Met?
Parenting Practices				
Children 0-5 read to daily by family member	52.6%	42.7%	41.6%	No
Children 0-5 mothers initiated breastfeeding	81.9	91.1%	90.2	Yes
Children whose mothers breastfeed 6 mo.	60.6%	57.9%	43.5	No
Women's Health				
Births with prenatal care in 1 st trimester	77.9%	90.3%	82.4%	Yes
Women who had pap smear in past 3 years	93.0%	85.0%	83.3%	No
Women who had mammogram in past 2 years	81.1%	77.0%	81.1%	Yes
Breast cancer death rate	20.6	21.3%	23.0	No
Cervical cancer death rate	2.2	5.1	3.3	No
Child and Adolescent Health				
Low birth weight infants (2500 grams)	7.8%	6.9%	6.6%	Yes
Low birth weight African American infants (2500 grams)	7.8%	12.0%	12.0%	No
Infant mortality rate (per 1,000 live births)	6.0	4.7	3.7	Yes
Uninsured all or part of year	0%	8.9%	6.5%	No
No regular source of care	10.5%	7.3%	5.1%	Yes
Overweight or obese	NA	26.0%	25.7%	N/A
Teens who smoke cigarettes	16%	N/A	N/A	N/A
Teens who binge drink	8.5%	N/A	5.2% *	Yes
Adult Health				
Adults with recommended aerobic exercise weekly	47.9%	N/A	61.1%	Yes
Adults with recommended muscle-strengthening weekly	24.1%	N/A	36.2%	Yes
Adults with both muscle-strengthening & aerobic exercise	20.1%	N/A	29.9T	Yes
Adults who are uninsured	0%	24.2%	32.4%	No
Adults with no regular source of care	10.6%	19.4%	20.0%	No
Source of ongoing care	10.6%	83.5%	20.0%	No
Adults vaccinated for influenza in past year	80.0%	51.9%	26.2%	No
Adults who are obese (BMI 30+)	30.5%	26.6	30.1%	Yes
Adults who binge drink	24.4%	18.5%	15.7%	Yes
Adults who smoke cigarettes	12.0	13.8%	14.4	No
Adults screened for colon cancer	70.5%	44.0%	57.2%	No
HIV/AIDS new cases (rate per 100,000)	13.0	5.2	15.5	No
Tuberculosis new cases (rate per 100,000)	1.0	6.5	7.6	No
Diagnosed with high blood pressure	26.9%	24.7%	24.4%	Yes
Senior Health				
Seniors vaccinated for influenza in past year	90.05	50.4%	61.7%	No
Seniors ever vaccinated for pneumonia	90.0%	56.6%	62.4%	No
Age-Adjusted Death Rates (per 100,000 population)				
Coronary heart disease	100.8	164.0	122.3	No
Stroke	33.8	37.5	33.7	Yes

Lung Cancer	45.5	29.9	25.9	Yes
Colorectal cancer	14.5	14.4	12.8	Yes
Diabetes	NA	32.8	27.5	
HIV infection	3.3	2.5	1.8	Yes
Suicide	10.2	4.4	7.1	Yes
Motor vehicle crashes	12.4	8.3	6.3	Yes

Data from various sources including 2011-12 California Health Interview Survey, LA County Health Department of Public Health, Key Indicators of Health, 2009 and 2013.

Health Needs of Uninsured, Low Income and Ethnic Groups

- More than 190,000 residents depend on Medi-Cal for health care. More than 99,000 receive food stamps. Both MAO and food stamp caseloads are up substantially from 2010. CalWORKS provides support for 27,000 families, General Relief aids 1,300 unemployable individuals, and more than 9,000 receive in-home care for homebound elderly or disabled.

Community	CalWORKS	General Relief	Medical Aid Only	Food Stamps	IHSS
Bell	2,166	175	10,613	5,804	656
Bell Gardens	2,724	133	12,704	7,441	665
Commerce	479	56	2,783	1,449	313
East L.A. (Belvedere)	10,991	NA*	102,579	53,546	NA*
Montebello	2,433	244	12,027	6,764	1,716
Monterey Park	880	114	9,742	3,390	2,242
Pico Rivera	2,021	211	10,835	5,720	1,096
Rosemead	1,509	127	13,700	5,688	2,115
South El Monte	1,403	69	5,825	3,291	374
Whittier	2,438	166	10,054	6,092	NA*
Total	27,044	1,295	190,862	99,185	9,177

*Belvedere office does not handle GR or IHSS cases. LA County Department of Social Services, Caseload Characteristics, June 2013

Nearly 40% of residents in these communities lack health insurance, compared to an average of 22% for Los Angeles County.

City	Healthcare Coverage	No Coverage
Bell	61.2%	38.8%
Bell Gardens	60.9%	39.1%
Commerce	70.4%	29.6%
East Los Angeles	63.3%	36.7%
El Monte	69.1%	30.9%
Montebello	77.7%	22.3%
Monterey Park	80.9%	19.1%
Pico Rivera	74.4%	25.9%
Rosemead	72.2%	27.8%
Whittier	85.1%	14.9%
Los Angeles County	77.8%	22.2%

U.S. Census Bureau, American Community Survey 5 year estimate 2008-2012

- Life expectancy is affected by economic hardship. Several of the low income communities in the service area have among the worst economic hardship ratings in the county. Cities like Bell, Bell Gardens, and East Los Angeles have the highest needs on economic hardship measures.
- Most households in the service area have a vehicle available for transportation, but the lower income communities show a high percentage (up to 18%) that rely on public transportation.

Community	None	One	Two	Three +
Bell, Bell Gardens 90201	11.1	36.0	36.0	16.9
Commerce 90040	9.7	28.0	38.3	24.0
East Los Angeles 90022	14.7	34.5	32.1	18.7
East Los Angeles 90023	18.2	43.0	24.4	14.4
East Los Angeles 90063	15.0	35.1	26.3	20.5
El Monte 90732	7.9	30.2	34.4	27.5
Montebello 90640	11.7	31.1	34.7	22.5
Monterey Park 91754	8.9	28.8	40.6	21.7
Monterey Park 91755	11.7	30.3	33.9	24.1
Pico Rivera 90660	6.8	24.6	36.8	31.8
Rosemead 91770	6.7	27.3	33.6	32.4
South El Monte 91733	8.4	26.2	38.4	26.9
Whittier 90601	5.5	31.5	38.8	24.2
Whittier 90606	6.3	22.2	38.2	33.2
Los Angeles County	9.7	35.0	35.1	20.2

U.S. Census Bureau, American Community Survey 5 year estimate 2008-2012

Senior Citizen Issues

- Older residents in the Beverly Hospital service area have distinctive characteristics that must be addressed in community benefit and health care activities, including lower education, less fluency in English, and a high rate of living alone that may indicate a need for social support.
- Seniors in the lower income communities have higher than usual rates of poverty. About 70% of seniors in all communities receive Social Security income and 10% to 20% receive Supplemental Security Income. 26% to 42% of those over 60 also receive retirement income (pension, savings, investment, etc.)

Community	Ethnic Groups 60+			Limited English	Education Less than High School	Living Alone	Living with Disability
	Latino	Asian	White				
East Los Angeles	94%	3%	3%	69%	71%	31%	38%
El Monte	46%	37%	16%	65%	54%	24%	34%
Montebello	57%	22%	19%	46%	41%	32%	42%
Monterey Park	21%	69%	7%	62%	38%	32%	33%
Pico Rivera	80%	6%	13%	44%	49%	27%	33%
Rosemead	25%	61%	12%	66%	55%	25%	29%
Whittier	39%	6%	54%	22%	24%	34%	34%

* Sample size for seniors too small to report for Bell, Bell Gardens, Commerce, South El Monte
U.S. Census Bureau, American Community Survey 5 year estimate 2008-2012

Community Input

- A focus group session with a wide range of community service providers identified primary themes for community benefit work, with special focus on nutrition education, and exercise promotion to prevent diabetes.
- Language and cultural barriers remain a major problem that must be addressed to make service delivery effective.
- Family focused health education approaches can benefit lifelong health, including nutrition, parenting, and mental health and life cycle issues.
- Age-related services for teens, young adults and seniors are needed to promote individual and community health.
- Participation in the recently established SPA 7 Community Partnership can provide opportunities for the hospital to coordinate with other organizations in community benefit activities.

Implications for Beverly Hospital Community Benefit Activities

Population Based Implications

- Lower income communities are a major element in the Beverly Hospital service area and are particularly affected by current high levels of unemployment and need for basic services including health care. Low levels of adult education and limited English are a factor in keeping incomes low, and also must be considered in health-related communications.

- To have the desired effect, services to the area's largely Latino and Asian population must be culturally relevant for both immigrant and U.S. born residents, including elements of language, personnel, locations for service delivery, and personnel. Cultural and language issues must be addressed in developing communication materials, health education strategies and other community benefit activities. Simple translation is not always the answer, and attention to research resources on cultural relevancy can return valuable results.

Health Conditions

- Leading causes of death are heart disease and cancer, far outstripping other causes of death, and followed by stroke and diabetes. Most of the leading causes of death share common risk factors (obesity, nutrition, and exercise) and can be addressed with strategies in common.
- Diabetes is a top-of-mind concern in this service area due to elevated rates for its majority Latino population, the prevalence of risk factors of obesity and inadequate exercise, and the above average death rate for diabetes. Health education for diabetes prevention and management is needed for all age groups, including parents, in order to reduce risk factors for adults and children.
- Teen births have showed a significant decline but continuing effort to reduce teen births is needed for long term economic stability for these young families. In addition, rising STD rates for teen males indicate a need for sexual health treatment and education for both young men and women.
- The trend to worsening access to care for adults is a major issue, suggesting that the hospital should be active in promoting Affordable Care Act/Medi-Cal enrollment, as well as emphasizing community benefit outreach to the most disadvantaged areas.

Senior Services

- Distinctive characteristics of senior citizens, including lower incomes, lower levels of education, lack of English fluency and potential lack of support for those living alone, should be considered in developing programs to target this group. Health behavior indicators show there is a significant need for improvement in many areas to encourage habits that can help seniors avoid illness, injury, and need for extensive medical care.

Community Input Implications

- Continuing focus on is needed on diabetes prevention for all age groups, including developing understanding of causes of diabetes and management of the condition, including nutrition education and exercise promotion.
- A family- centered approach to a broad range of health education issues is needed, including nutrition, parenting, mental health needs and life cycle issues such as caring for elderly parents.
- Language and culture barriers need to be addressed to provide effective services to the Latino community, including understanding of preferred approaches, service delivery in Spanish and effective translation of health education materials.
- Teens and young adults are an important target group for health education and access to healthcare that can affect lifelong health habits, promoting careers in a wide range of healthcare occupations can benefit young people and the community.
- The special needs of senior citizens make them an important focus of community benefit activities to promote wellness as well as to cope with issues of aging. Attention to language, culture, social and education characteristics can contribute to effective services for seniors
- The community benefits plan should continue activities that were most highly rated in the focus group survey, diabetes and cardiac education and screenings, KidsFit for overweight children, and 50+ Connection. Also favored by the focus group were financial support to organizations, prenatal care and family planning and support group for Alzheimer's / dementia caregivers.
- Hospital representatives can participate in the SPA 7 Community Partnership for coordination of services with governmental and nonprofit organizations.

Section 4: Community Benefits Plan Objectives

Based on the 2013 Community Needs Assessment, Beverly Hospital addressed the following objectives in Fiscal Year 2015:

- A. Affordable and accessible services to low income and uninsured persons
- B. Reduction of risk factors for leading causes of death through preventive health education
- C. Culturally responsive services focused on Latino community
- D. Senior citizen health promotion
- E. Coordination of services with health care and community services agencies

To accomplish these objectives, an Outreach Team, comprised of a manager of community relations, an events coordinator, outreach nurse, several health educators, and a physician panel as well as the necessary support staff (such as social workers, respiratory care, nursing services, and information technology), work collaboratively to develop, implement and/or participate in a variety of community activities. The Outreach staff is multilingual to better serve the needs of the community.

On an annual basis, Beverly Hospital monitors and reports measures of plan progress. See **Section 5** for a report on the medical center's programs and services provided in Fiscal Year 2015 in support of these objectives.

Section 5: Community Benefits Plan Update

This section includes a description of programs and services provided by the Beverly Hospital and key measurements of outcomes accomplished in Fiscal Year 2015. Programs and services are organized in response to priority categories of need identified in recently conducted community needs assessments.

A. Provide Affordable and Accessible Health Care Services

The community needs assessments identified the need for affordable and accessible health care programs and services in the community, availability and accessibility of hospitals and area emergency rooms, assistance with transportation to medical appointments, and education and assistance with enrollment in government sponsored public insurance programs.

Actions implemented included:

- 24-hour Emergency Care Center: staffed with Board Certified physicians, dedicated and equipped to provide emergent care to all age groups regardless the ability to pay for necessary treatment.
- Charity care for patients: includes free or discounted health-related services to people who cannot afford to pay all or part of a hospital bill, absorbing the unpaid costs of care for patients with Medi-Cal.
- Family PACT, Every Woman Counts and Comprehensive Perinatal Services Programs offered at the Women's Care and Family Care Centers: publicly sponsored programs were available for pregnant mothers, teen agers and seniors through the hospital outpatient clinics. Services included prenatal care, STD screenings, Birth Control Management, Breast and Cervical Cancer screenings, and primary care.
- Patient transportation assistance: Round trip transportation for medical appointments through the hospital vans and taxi services was provided, with free wheelchair access included.
- Health Access Information: the hospital provided information and assistance for patients to apply to Medi-cal and other available low-income publicly sponsored health insurance programs, including the Affordable Care Act and Covered California. The hospital also

partnered with the Center for Health Care Rights (CHCR) to provide information about Medicare Benefits updates.

- Free Childhood Immunizations: The hospital offered free childhood immunizations for newborns to age 18 years old on a monthly basis.

B. Reduction of risk factors for leading causes of death through health education and screenings

The CHNA identified the need of health education focused on reducing common risk factors for leading causes of death like heart disease, cancer, stroke and diabetes, by promoting life-long healthful practices in nutrition, weight management and exercise for all age groups.

Actions implemented included:

- Diabetes Center: accredited by the American Association of Diabetes Educators, the center continued to provide free diabetes education on prevention, management and treatment of diabetes to the community, counseling to mothers who developed gestational diabetes during their pregnancies through the Sweet Success Program. Diabetes Counseling was offered in both, English and Spanish. Additionally, a monthly Diabetes Wellness Lecture continued to be offered to teach participants on how to live a healthy lifestyle after being diagnosed with the disease.
- Center for Wound Care & Hyperbaric Medicine: continued to provide education and medical treatment for wounds, including Hyperbaric Medicine with a high success ratio.
- KidsFit Program: Continued the expansion of this 12-week family-focused program specialized to help overweight and obese children develop good eating and exercise habits. This free program is in collaboration with the Montebello Unified School District, the Montebello-Commerce YMCA, County of Los Angeles Public Health and local Pediatricians, and includes efforts to encourage parents' involvement in healthier nutritional habits for the family. Exercise program is geared to three different age groups: pee wees (ages 6 to 8 years), juniors (ages 9 to 11 years), and teens (ages 12 to 18 years) and includes the parent or family member during all nutrition sessions.

- Preventive Health Lectures: Throughout the year, the hospital continued to partner with specialty physicians to provide more health lectures for the community focused mainly in Cardiac Care, Stroke Prevention, Healthy Nutrition, Depression, Prostate Cancer, Cardiac and Diabetes Care. The lectures were conducted by Beverly Hospital physicians and nurses at the hospital and community locations such as the Montebello Unified School District, Senior Centers, Senior Villas, City Library, recreational centers and other sites.
- Exercise Classes for seniors: Specialized exercise classes for seniors included Balance and Agility, Chair Aerobics and Zumba which were offered for free at the hospital on a monthly basis by certified training instructors.
- Breastfeeding Education: The hospital participated in the Baby-Friendly Hospital Initiative (BFHI), which is a global program sponsored by the World Health Organization to encourage hospitals to promote breastfeeding as a best practice in Nutrition for newborns. The hospital has implemented a full training program that includes lactation consultant, nursing training, patient education, support groups, and more. Breastfeeding is known to reduce the risks for Diabetes for the newborn, and the risks for ovarian and breast cancer for the mothers.
- Free and low-cost breast and cervical cancer screenings: Through the hospital-based clinics, Beverly Hospital continued to offer Breast and Cervical Cancer screenings at low and no-cost for women through the Family PACT and Every Woman Counts programs.
- Other Preventive Screenings: Blood pressure and Glucose screenings and education were provided at a variety of community sites, including Montebello Town Center, Montebello Senior Center, Pico Rivera Senior Center, Pico Rivera Women's Club, senior villas and local churches on a monthly basis.

C. Culturally responsive services focused on Latino community

The CHNA identified the limited access to health care services in Spanish language and the cultural issues in communication and health concepts for residents in the hospital service area. Greater recognition is needed about the fact that translation is not a simple process and organizations often have only one staff person with limited Spanish to translate, which is inadequate for service delivery. Language and culture barriers need to be addressed to provide effective services to the Latino community, including understanding of preferred approaches, service delivery in Spanish and effective translation.

Actions implemented included:

- Health Lectures and Screenings in Spanish: Increased number of activities provided in Spanish language. Outreach team included bilingual nurse to provide counseling in Spanish during the screenings.
- Health education materials: Increased educational materials printed in Spanish, including consents, flyers and informational brochures. Also increased the use of illustrations in posters and health education related materials, which were more appropriate for different levels of education and the Latino community.
- Spanish-speaking health providers: in order to increase the pool of available bilingual health care personnel, the hospital participated in various career fairs and served as a clinical rotation sites for RN students, emergency medical and respiratory technicians attending local schools.
- Family-oriented approach: The Latino community is mostly family-oriented. The hospital worked collaboratively with agencies to provide more education that addresses family behavioral health and preparation of family members for different stages of life, especially related to parenting and elderly care.

D. Senior citizen health promotion

The CHNA identified special needs of seniors due to lower levels of income and education, lack of English fluency and potential lack of support for those living alone. There was a need for services to address senior health - including the ability to take care of themselves, receiving needed support services from other community resources, accessing medical care when needed, being able to afford the cost of medications, eating healthy, avoiding financial abuse, and specific health conditions such as diabetes, heart disease, arthritis and Alzheimer's disease – was mentioned as an important health issue in the community. Serving those special needs through community benefits activities to promote wellness as well as to cope with issues of aging was one of the priorities for the hospital.

Actions implemented included:

- Caregiver Support Groups: In the Latino community, family members are likely to care for an older person, without any assistance, causing stress for both caregivers and the elderly. In response, Beverly Hospital continued to provide Caregiver Support Groups for those who care for a family member or friend over the age of 60 and/or who suffer of chronic diseases including Dementia/Alzheimer.
- Social Activities: The 50+ Connection Program continued to host a variety of monthly activities for seniors for socializing and entertainment like the Bingo/Loteria, movies screenings, and others.
- Lectures specialized in seniors: A variety of lectures for seniors will continue to be offered through the 50+ Connection Program. Topics include: Advanced Directives, Savvy Caregiver Workshops, AARP Safety Driving Classes, Dementia, among others.
- Exercise Classes for seniors: Specialized exercise classes for seniors included Balance and Agility, Chair Aerobics and Zumba which were offered for free at the hospital on a monthly basis by certified training instructors.
- Screenings: Blood pressure, glucose screenings and other health promotion activities will be expanded to more locations in the community to make them more accessible to the senior population. Locations included Senior Centers, Senior Villas and local churches.

E. Coordination of services with health care and community service agencies

The CHNA identified the need of more collaboration between the hospital and community agencies for education, referrals, use of resources more effectively, and to help address aspects that are currently affecting families in the service area like domestic violence, substance abuse, mental health and integration of other health-related fields.

Actions implemented included:

- **Pregnant Minors' program education:** In collaboration with Montebello Unified School District, the hospital will continue to provide education to teens on abstinence, birth control, sexually transmitted diseases and pregnancy prevention through the Women's Care Center. The hospital also provided clinical support to the school district on the importance of early pregnancy care, pregnancy counseling and prenatal care.
- **Participation in Community Health Fairs:** Throughout the year, the hospital participates in community health fairs, providing health education, screenings and information about services. Partnerships for the health fairs include: YMCA, Montebello Unified School District, El Rancho Unified School District, Montebello Senior Club, Pico Rivera Women's Club, Senior Centers, Montebello City, Chambers of Commerce, and others.
- **Career Days and Fairs:** Teens and young adults are an important target group; promoting careers in a wide range of healthcare occupations can benefit young people and the community. The hospital will continue to collaborate with the school district to host career days and participates actively at career fairs in the community.
- **Nursing Student Program:** the hospital will continue to provide rotation programs for Nursing, Respiratory Technician and Emergency Medical Technicians students on a year-round basis. Partnerships include Los Angeles Community College, Mount San Antonio College, West Coast University, Rio Hondo Community College, and East Los Angeles Community College.
- **Sponsorship of Local non-profit organizations:** the hospital contributes with financial support to a variety of organizations including the Firefighters Association, American Cancer Society, MELA Counseling Services, YMCA, Chambers of Commerce, The Whole Child, Police Department, Marriage Spirituality Foundation, and school districts.

- CPR Classes: continued to be offered for the community including students, parents, coaches, teachers from the Montebello, Los Nieto, El Rancho, and Whittier School Districts

Beverly Hospital outcomes for each community benefit program/service are summarized in **Table 7.1, Table 7.2, Table 7.3, Table 7.4 and Table 7.5**. Each table includes the following:

- Program/service name
- Description of the program/service
- Number served in Fiscal Year 2014
- The category where unreimbursed costs are reported according to the framework established by Senate Bill 697 (see Table 8)

BEVERLY HOSPITAL COMMUNITY BENEFITS REPORT FOR FISCAL YEAR 2015

Table 7.1: Programs in Response to Community Need: Affordable and Accessible Health Care Services

Measurable Objective:			
<ul style="list-style-type: none"> Continue to provide affordable and accessible services to low income and uninsured persons through hospital services and community resources. 			

Program/Service	Description of Program/Service	Fiscal Year 2015 Number Served	SB 697 Category
Charity Care	Charity care/patient assistance includes free or discounted health-related services to people who cannot afford to pay all or part of a hospital bill, including uninsured and low-income patients	<ul style="list-style-type: none"> 12 patients served 	Medical Care
Unpaid Cost of Medi-Cal	Services to hospital patients with Medi-Cal insurance coverage	<ul style="list-style-type: none"> 3,453 patients served 	Medical Care
Prenatal Care Access, Family Planning Services and Breast/Cervical Cancer Screening for Low Income Women and Teens	The Women's Care Center and Family Care Center at the hospital offered access to prenatal care, birth control education, STD prevention, Cervical and Breast Cancer screenings through the CPSP, EWC and Family PACT programs. The clinics also served as a referral site for teachers at the Montebello Unified School District.	<ul style="list-style-type: none"> 6,824 Visits for outpatient prenatal care (CPSP), outpatient family planning visits (Family PACT), and Cervical and Breast Cancer screenings (EWC) 	Medical Care
Emergency Care Center	The Emergency Care Center is staffed with Board Certified physicians 24 hours a day. The ECC is designed and equipped to provide emergent care to all age groups.	<ul style="list-style-type: none"> 37,502 visits 	Medical Care
Assistance with Medi-Cal Insurance Eligibility Information	Assistance with completion of low-income publicly sponsored health insurance programs	<ul style="list-style-type: none"> 240 Medi-Cal and 239 Presumptive Eligibility applications processed 	Vulnerable Populations
Cal MediConnect Information	Information and assistance with Medicare Benefits	<ul style="list-style-type: none"> 22 persons served 	Vulnerable Populations
Transportation Assistance	The medical center offered free wheelchair accessible transportation to and from the hospital. Reservations are required 24 hours in advance for scheduled appointments and immediate van transportation is available.	<ul style="list-style-type: none"> Van Service: 3,951 persons served Taxi Vouchers: 3,651 persons served 	Vulnerable Populations
Childhood Immunizations	The hospital offered free childhood immunizations for newborns to age 18 years old at the Women's Care Center on the third Wednesday of each month.	<ul style="list-style-type: none"> 33 children received free vaccinations during the year 	Community

BEVERLY HOSPITAL COMMUNITY BENEFITS REPORT FOR FISCAL YEAR 2015

Table 7.2: Reduction of risk factors for leading causes of death through health education and screenings

<p>Measurable Objective:</p> <ul style="list-style-type: none"> • Increase awareness of Diabetes, Stroke, Cancer and Heart Diseases; including risk factors, detection and management/treatment • Provide free preventive screenings for those who do not have a regular source of care • Reduce overweight and obesity rates by promoting regular exercise and proper nutritional intake in all age groups
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Program/Service	Description of Program/Service	Fiscal Year 2015 Number Served	SB 697 Category
KidsFit Program	Specialized 12-week program to help overweight and obese children develop good eating and exercise habits; program is held at Montebello-Commerce YMCA. Exercise program is geared to three different age groups: pee wees (ages 6 to 8 years), juniors (ages 9 to 11 years), and teens (ages 12 to 18 years)	<ul style="list-style-type: none"> ▪ 164 children and family members attended 33 sessions 	Community
Diabetes Education and Screenings	The Diabetes Center, accredited by the American Association of Diabetes Educators, provided free diabetes education on prevention, management and treatment of diabetes to the community, counseling to mothers who developed gestational diabetes during their pregnancies, free glucose screenings at health fairs and lectures, and hosted the first Diabetes Day event, providing diabetes education, glucose screenings, nutrition classes and equipment exhibitors.	<ul style="list-style-type: none"> ▪ 45 participants attended 6 diabetes management classes and 2 Diabetes community lectures ▪ 190 patients received individual counseling under the Sweet Success program ▪ 286 glucose screenings provided at events ▪ 108 participants attended 12 Diabetes Wellness Hour sessions 	Community
Physicians Health Lectures	Throughout the year, the hospital partnered with specialty physicians to provide health lectures for the community including Stroke Risk, Healthy Nutrition, Arthritis, COPD, Alzheimer's, Immunizations, Osteoporosis, Brown Bag Program, Cardiac Care, and Breast Cancer Prevention. The lectures were held in the hospital, as well as the Montebello Unified School district, Senior Centers, Senior Homes, Senior Villas, local libraries, and Park and	<ul style="list-style-type: none"> ▪ 239 people attended 14 lectures 	Community

Program/Service	Description of Program/Service	Fiscal Year 2015 Number Served	SB 697 Category
Blood Pressure Screenings	<p>Recreation Centers.</p> <p>Blood pressure screenings were provided at a variety of community sites, including Montebello Town Center, Montebello Senior Center, Pico Rivera Senior Center, Pico Rivera Women's Club, Potero Heights Community Center, First Bilingual Church and St. Alphonsus Church</p>	<ul style="list-style-type: none"> ▪ 2,215 blood pressure screenings provided at 66 sessions 	Community
Maternity Education and Tours	<p>Free maternity classes – available in English and Spanish – were offered to the community on topics such as prepared childbirth, infant care and CPR, infant massage and breastfeeding.</p>	<ul style="list-style-type: none"> ▪ 259 participants attended 32 prepared childbirth classes ▪ 41 participants attended 8 infant care classes ▪ 48 participants attended 9 breastfeeding classes ▪ 19 new big brothers and sisters attended 3 siblings classes ▪ 3 participants attended the 1 Infant Massage classes ▪ 24 participants attended 7 Infant CPR classes ▪ 436 mothers and family members learned about maternity services on 23 tours of the hospital 	Community

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Table 7.3: Culturally responsive services focused on Latino Community

<p>Measurable Objective:</p> <ul style="list-style-type: none"> • Ensure accessibility of programs and services to the Latino and Spanish speaking population
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Program/Service	Description of Program/Service	Fiscal Year 2015 Number Served	SB 697 Category
Nursing Student Program	Programs with East Los Angeles College, Rio Hondo Community College, Mount San Antonio College, Platt College, Premier College, American Career College, Cal State Long Beach and West Coast University to offer nursing students, certified nursing assistants, respiratory and emergency medical technicians a clinical site for rotations.	<ul style="list-style-type: none"> ▪ 9 PT students completed rotations ▪ 143 RN students completed rotations ▪ 63 EMT students completed rotations ▪ 5 Surgical tech students completed rotations ▪ 6 respiratory tech students completed rotations 	Research, Education & Training

BEVERLY HOSPITAL COMMUNITY BENEFITS REPORT FOR FISCAL YEAR 2015

Table 7.4: Senior Citizen health promotion

<p>Measurable Objective:</p> <ul style="list-style-type: none"> • Provide programs designed exclusively for seniors that include social and health activities • Provide preventive care to seniors through health education and screenings • Provide resources to seniors to help address their needs related to aging issues
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Program/Service	Description of Program/Service	Fiscal Year 2015 Number Served	SB 697 Category
Exercise Classes for Seniors	Specialized exercise classes for seniors – Balance and Agility, Chair Aerobics and Zumba were offered throughout the year.	<ul style="list-style-type: none"> ▪ 1,282 seniors attended 65 sessions 	Community
Social Activities	The 50+ Connection Program held a variety of monthly activities with socializing and refreshments	<ul style="list-style-type: none"> ▪ 94 seniors attended 3 bingo events ▪ 450 seniors attended 12 movie screenings 	Community
AARP Safety Driving Classes	This 8-hour two-session safety driving class is a refresher course for motorists aged 50 or better who have years of driving experience; upon completion of both sessions, each participant is given a certificate which can be presented to most auto insurance companies for a discount on insurance premiums. Class size is limited.	<ul style="list-style-type: none"> ▪ 7 AARP safety driving classes offered serving 52 seniors 	Community
Health Lectures	A variety of specialized lectures for seniors were offered: Healthy Lifestyle, Savvy Caregiver Workshops, and Advance Directives.	<ul style="list-style-type: none"> ▪ 9 senior lectures offered serving 132 seniors 	Community
Support Groups	The hospital offered a variety of support groups to serve those with long-term illnesses and their families. These support groups were available on a regular basis year-round.	<ul style="list-style-type: none"> ▪ 261 participants attended 47 Alzheimer's/Dementia mornings ▪ 188 participants attended 47 caregiver support group sessions ▪ 43 participants attended 21 grief support sessions 	Community

BEVERLY HOSPITAL COMMUNITY BENEFITS REPORT FOR FISCAL YEAR 2015

Table 7.5: Coordination of services with health care and community service agencies

<p>Measurable Objective:</p> <ul style="list-style-type: none"> Integration of programs and services available in the community through strategic partnerships with agencies/organizations that serve the same population
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Program/Service	Description of Program/Service	Fiscal Year 2015 Number Served	SB 697 Category
CPR Classes	Classes for the community on CPR including students, parents, coaches, teachers from: Montebello Intermediate 7th grade classes, Montebello Unified School District Pregnant Minor Programs (Vail High School, Montebello High School, Schurr High School and Bell Gardens High School), Los Nietos School District Health Aids, Head start Teachers, East Whittier School District Health Aids, Pico Rivera Wolverines, Cub Scout pack 375, Boy Scout Troop 375, , Praise Alive Church, Young Marines, , Sunny Cal Adult Day Care, Beverly Guild Volunteers, Montebello Adult Education.	<ul style="list-style-type: none"> 321 attendees served 	Community
Pregnant Minors Program	In collaboration with Montebello Unified School District, the hospital provided education to teens on abstinence, birth control, sexually transmitted diseases and pregnancy prevention through the Women's Care Center. The hospital also provided clinical support to the school district on the importance of early pregnancy care, pregnancy counseling and prenatal care.	<ul style="list-style-type: none"> 24 teens served 	Community
Participation in Community Health Fairs	Throughout the year, the hospital participated in community health fairs, providing health education, screenings and information about services, including: YMCA Healthy Kids Day, YMCA Senior Health Fair El Rancho Unified School District Spring Health Fair, Montebello Walk & Roll Health Fair, Montebello Police Department National Night Out, 2 nd Annual Health Fair Rancho Vista Health Center, Montebello City Parade,	<ul style="list-style-type: none"> Staff attended 9 community health fairs serving 3,020 people 	Community

Program/Service	Description of Program/Service	Fiscal Year 2015 Number Served	SB 697 Category
	Pico Rivera Senior Center Wellness Day, Congresswoman Linda Sanchez 13 th Annual Senior Fair, Montebello Unified School District Health Fair, Pink Shawl Walk, and Montebello, Commerce, and the Whittier Chamber of Commerce Business Expos.		
Sponsorships of Local Non-Profit Organizations	The hospital provided financial support to a variety of local organizations including Firefighters Association, American Cancer Society, Chambers of Commerce, YMCA, Police Department, Montebello and El Rancho Unified School Districts	<ul style="list-style-type: none"> ▪ 7 local organizations received financial contributions 	Community
Career Days and Fairs	Human Resources staff attended career fairs to provide information to high school student on how to start a career in the healthcare field.	<ul style="list-style-type: none"> ▪ 213 students attended career fairs 	Research, Education & Training
Blood Drives	In recognition of the critical blood shortage, the hospital sponsored blood drives	<ul style="list-style-type: none"> ▪ 210 people donated blood at 3 employee and community blood drives 	Community

Section 6: Economic Value of Community Benefits

In Fiscal Year 2015, the economic value of community benefits provided by Beverly Hospital is estimated at \$8,739,740. **Table 8** summarizes the unreimbursed costs of these community benefits according to the framework specifically identified by Senate Bill 697:

- Medical care services
- Other benefits for vulnerable populations
- Other benefits for the broader community
- Health research, education, and training programs

**Table 8: Estimated Economic Value of Community Benefits Provided by Beverly Hospital
Fiscal Year 2014**

Senate Bill 697 Category	Programs and Services Included	Unreimbursed Cost^a
Medical Care Services	Unpaid Cost of Medi-Cal Program ^b	\$5,279,727
	Traditional Charity Care ^c	\$265,558
	Physician Backup Services in Emergency Care Center ^d	\$2,130,589
Other Benefits for Vulnerable Populations	Transportation Assistance, Assistance with Medi-Cal Eligibility	\$164,269
Other Benefits for the Broader Community	Community Health Classes, Screenings, Support Groups, Immunizations, Health Fairs, and Donations to Local Non-Profits	\$595,551
Health Research, Education, and Training Programs	Clinical Site for Nursing Students, Respiratory and Emergency Medical Technicians and Job Fairs	\$304,046
	GRAND TOTAL	\$8,739,740

^a Unreimbursed costs may include an hourly rate for labor (plus benefits), supplies, materials, and other expenses.

^b Medical care services provided to Medi-Cal beneficiaries result in shortfall for the hospital. The method for determining this shortfall is based on an allocation of the hospital's total cost of providing these services using a ratio of hospital cost (direct and indirect costs) to the Medi-Cal patient charge. This ratio is calculated by dividing the hospital's total direct and indirect cost by the total patient charges by department and applying this ratio to the individual patient charge. The resulting percentage is then multiplied by the Medi-Cal total charges to estimate the cost of services to patients. The calculated cost of the Medi-Cal program has been reduced by payments received from Medi-Cal including any DSH (Disproportionate Share Hospital) funds received and any net QIF (Quality Insurance Fee) funds received.

^c The method for determining unreimbursed cost for charity care is based on an allocation of the hospital's total cost of providing these services using a ratio of hospital cost (direct and indirect costs) to the charity care patient charge. This ratio is calculated by dividing the hospital's total direct and indirect cost by the total patient charges by department and applying this ratio to the individual patient charge. The resulting percentage is then multiplied by the charity care total charges to estimate the cost of services to patients. The cost is subtracted from the payments, if any is received from the patient.

^d Physician backup services include emergency room backup services to cover the cost of physicians on call for uninsured patients.