

---

# **Hoag Memorial Hospital Presbyterian Community Benefit Report**

## **2022**

**January 1<sup>st</sup>, 2022 – December 31<sup>st</sup>, 2022**

---



**California Department of Health Care Access and Information (HCAI)  
Facility ID #106301205**

[www.hoag.org](http://www.hoag.org)

---

**Board of Directors**  
**Hoag Memorial Hospital Presbyterian**  
**2022**

---

**Officers**

Daniel Young, Chair  
Cindy Stokke, Chair-Elect  
George H. Wood, Immediate Past Chair  
Eric Alcouloumre, MD, Secretary

**Members**

Reshma Block (added late 2022)  
Vicki Booth  
Robert Brunswick  
Chris Callero  
Miles Chang, MD  
Dennis J. Gilmore  
Richard Haskell, MD  
Paul Heeschen  
Joel Katz, MD  
Karen D. Linden  
Pamela Massey  
James Shepherdson  
Richard Taketa

**Medical Staff Officers**

Patty Huang, MD, Chief of Staff  
Matthew Hunt, MD, Chief of Staff-Elect  
Michael Hurwitz, MD, Past Chief of Staff

**Senior Management Team**

Robert Braithwaite, President and Chief Executive Officer  
Marcy Brown, Sr. Vice President, Chief Operations Officer  
Carmella Cassetta, Chief Information Officer  
Eric Cheung, Sr. Vice President, Chief Legal Officer  
Teresa Conk, Sr. Vice President, Chief Clinical Institutes Officer  
Flynn Andrizzi, PhD, Sr. Vice President, Development; President, Hoag Hospital Foundation  
Jan Blue, Sr. Vice President, Chief Administrative Officer  
Andrew Guarni, Executive Vice President, Finance  
Kris Iyer, MD, Sr. Vice President, CAO HMTS  
Richard Martin, MSN, RN, EdD, Sr. Vice President and Chief Nursing Officer  
Sanford Smith, Sr. Vice President, Real Estate, Facilities, Construction, & Operations

# Hoag Memorial Hospital Presbyterian Community Benefit Plan CY 2022

---

## Table of Contents

---

<b>Executive Summary</b>	1
<b>Chapter I: History and Community Benefit Structure</b>	
Introduction	2
History	3
Mission, Vision, and Core Values	4
Community Benefit Philosophy	5
Community Benefit Committee	6
<b>Chapter II: Community Health Needs Assessment 2022</b>	
Overview	7
Methodology	10
Priority Health Issues	12
Implementation Strategy 2023-2025	13
<b>Chapter III: Department of Community Health Programs</b>	
Mental Health Center	15
Community Benefit Grants Program	16
Project Wipeout	17
Melinda Hoag Smith Center for Healthy Living	18
Community Nurse Navigator Program	20
Promotores Program	20
<b>Appendices</b>	
Appendix A Hoag Hospital Charity and Discount Policy	23
Appendix B Hoag Hospital Quantifiable Community Benefit for CY2022	34
Appendix C Hoag Hospital Community Benefit Expenditures by Program	35

---

## *EXECUTIVE SUMMARY*

---

The Community Health department at Hoag Memorial Hospital Presbyterian was established in 1995. Since its inception the program has focused on two principal strategies:

- Provide necessary healthcare-related services which are unduplicated in the community.
- Provide financial support to existing community based not-for-profit organizations which already provide effective healthcare and related social services to meet community health needs.

The Department of Community Health, led by its Director, Michael Rose, DrPH spearheads the organizations' efforts in the community, providing several flourishing outreach programs. The department functions with the same vision of promoting population-based health efforts. Housed within the Melinda Hoag Smith Center for Healthy Living (MHSCHL), the department focuses its efforts on improving health and well-being by providing services to the vulnerable and at-risk surrounding community. Programs include mental health services, community nurse navigation, health education and wellness programs, community-based program grants, and many more programs and services through our collaborative partnerships. In addition to these services, many other Hoag departments also provide community health services including education and support groups which are free/and or low cost to the community.

Hoag provides uncompensated care (charity) to patients who are unable to pay for the full cost of their care. These expenditures amounted to approximately \$64 million during CY 2022 (January 1, 2022 through December 31, 2022). Hoag's charity care and self-pay discount policy states that self-pay and uninsured patients who are unable to pay for the full cost of their care may qualify for charity or discounts on a sliding scale for incomes up to 400% of the federal poverty level.

Total quantifiable Community Benefit expenditures (excluding Medicare Cost of Unreimbursed Care) for CY 2022 amounted to over \$78 million.

This report provides detailed descriptions of Hoag's Community Benefit programs and services and includes quantifiable data for expenditures by programs during CY 2022.

## CHAPTER I: HISTORY & COMMUNITY BENEFIT STRUCTURE

---

### *Introduction*

---

The Hoag Memorial Hospital Presbyterian Community Benefit Program was formalized in 1995 and has grown significantly since that time. We have served over 100 nonprofit community organizations in a variety of health and social service categories. We continue to emphasize the development of sustained collaborative relationships and the provision of unduplicated services to disadvantaged residents in our community as core elements of the program.

Hoag's nonprofit regional health care delivery network consists of two acute-care hospitals – Hoag Hospital Newport Beach, which opened in 1952, and Hoag Hospital Irvine, which opened in 2010 – in addition to 15 urgent care centers and 10 health and wellness centers and has delivered a level of personalized care that is unsurpassed among Orange County's health care providers. Renowned for its excellence, specialized health care services and exceptional physicians and staff, Hoag is admired as one of California's leading hospitals. It is one of the county's largest employers with approximately 8,000 employees and 1,000 volunteers. Hoag's network of more than 1,800 physicians represents 52 different specialties.

Hoag is a designated Magnet<sup>®</sup> hospital by the American Nurses Credentialing Center (ANCC) and is fully accredited by DNV. Hoag offers a variety of health care services to treat virtually any routine or complex medical condition. Through its medical staff, state-of-the-art equipment and modern facilities, Hoag provides a full spectrum of health care services including seven institutes that provide specialized services in the following areas: cancer, heart and vascular, neurosciences, women's health, digestive health, spine and orthopedics through Hoag's affiliate, Hoag Orthopedic Institute, which consists of an orthopedic hospital and four ambulatory surgical centers.

To further Hoag's commitment to provide comprehensive care to the communities we serve, Hoag Medical Group was established in 2012 with the core values of excellence, innovation, and compassion. The physician group comprises specialists and subspecialists in internal medicine, family medicine, pediatrics, geriatrics, acupuncture, neuromusculoskeletal, endocrinology, genetics, rheumatology, diabetes, allergy & immunology, and HIV medicine.

Hoag was once again the highest ranked hospital in Orange County in the 2022-2023 U.S. News & World Report. This marks the sixth year in a row Hoag has achieved this level of recognition. The organization was ranked the #4 hospital in the Los Angeles Metro Area and the #9 hospital in California and is the only Orange County hospital in the top 10. Additionally, Hoag was ranked #33 nationally in Diabetes & Endocrinology, #28 nationally in Orthopedics, #38 in Obstetrics & Gynecology. Hoag ranked high performing in five adult specialties, including Gastroenterology & GI Surgery, Geriatrics, Neurology & Neurosurgery, Pulmonary & Lung Surgery, and Urology, as well as in 19 common adult procedures, including: Aortic Valve Surgery, Back Surgery (spinal fusion), Chronic Obstructive Pulmonary Disease (COPD), Colon

Cancer Surgery, Diabetes, Heart Attack, Heart Bypass Surgery, Heart Failure, Hip Fracture, Hip Replacement, Kidney Failure, Knee Replacement, Lung Cancer Surgery, Ovarian Cancer Surgery, Pneumonia, Prostate Cancer Surgery, Stroke and Transcatheter Aortic Valve Replacement (TAVR).

---

## *History*

---

Hoag opened in 1952 as a community partnership between the Association of Presbyterian Members and the George Hoag Family Foundation, a private charitable foundation.

The George Hoag Family Foundation and the Association of Presbyterian Members represent the two founding organizations of the hospital and continue to provide leadership as corporate members of the Hoag Corporation. These members annually elect the Board of Directors, which consists of 17 members with representatives from the Hoag community and medical staff. The hospitals' Chief Executive Officer is also seated on the board as a voting member.

An annual meeting at the end of the fiscal year provides the corporate members the opportunity for the election/re-election of directors for the ensuing year.

Since its founding the hospital has welded a strong commitment to the community that it serves, including the provision of services for those who constitute a more vulnerable, at-risk population. Such care, for both inpatients and outpatients, is often only partially compensated. With excellence of management and the diligent stewardship of funds, Hoag has been able to sustain its financial strength. As a result, Hoag has been able to maintain a continuing commitment to quality of care while developing and expanding community programs and partnerships. Most of the funds expended upon Hoag's Community Benefit Program are from operating income.

For more information, visit [www.hoag.org](http://www.hoag.org).

---

## ***Mission, Vision, and Core Values***

---

### **Hoag's Mission**

Our mission as a nonprofit, faith-based hospital is to provide the highest quality health care services to the communities we serve.

### **Vision Statement**

Hoag is a trusted and nationally recognized healthcare leader

### **Core Values**

Excellence  
Respect  
Integrity  
Patient Centeredness  
Community Benefit

Hoag has identified six core strategies as a means to achieve our Vision and maintain our Mission and Values:

#### ***Quality and Service***

Implement the Quality Management System to drive excellence throughout the organization.

#### ***People***

Develop a performance-based and integrated culture of patients, physicians and staff.

#### ***Physician Partnerships***

Create and maintain commitment to the Hoag community from exceptional doctors, through sustainable and satisfying leadership opportunities and mutually beneficial economic relationships.

#### ***Strategic Growth***

Implement the continuum of care strategy to provide improved access, integration and experience and experiment with new business models to create sustainability for the future.

#### ***Financial Stewardship***

Achieve enterprise wide growth and financial stability while directly reducing the cost of care.

#### ***Community Benefit and Philanthropy***

Improve the health of vulnerable populations in Orange County.

---

## ***Community Benefit Philosophy***

---

***We are encouraged by the better angels of our nature and the disposition of our hearts to think favorably of our fellows, regardless of their circumstances, and to serve them well: improving and sustaining their health and the quality of their lives and thus benefiting all.***

The Department of Community Health provides direct services and collaborates with other not-for-profit community-based organizations to promote the health of our communities. The department coordinates Hoag's Community Benefit activities, driven by the health needs of our surrounding communities, which are regularly reviewed in an ongoing manner.

Hoag's Community Benefit Program is guided by five Core Principles:

1. *Emphasis on Disproportionate Unmet Health-Related Needs (DUHN)* - We concentrate on residents who have a high prevalence of severity for a particular health concern; and on residents with multiple health problems and limited access to timely high-quality health care.
2. *Emphasis on Primary Prevention* – We focus on program activities that address the underlying causes of persistent health problems as part of a comprehensive strategy to improve health status and quality of life in local communities.
3. *Build a Seamless Continuum of Care* – We work to develop and sustain operational linkages between clinical services and community health improvement activities to manage chronic illnesses among uninsured and publicly insured populations.
4. *Build Community Capacity* – We target our charitable resources to mobilize and strengthen existing effective community health services.
5. *Emphasis on Collaborative Governance* – We emphasize *Networking* to exchange information; *Coordination* of synergistic activities; *Cooperation* in sharing resources; and *Collaboration* to enhance the combined capacity of our community health partners.

The department provides services which are unduplicated in the community. These currently include mental health services, community nurse navigation, community-based program grants, and other health and wellness programs and services. In order to promote effective access to health care and related services, the department works in collaboration with a number of not-for-profit community-based organizations to provide insurance coverage as well as free services to underserved and vulnerable residents, many of whom are undocumented. Charity care is an integral component of the benefit that Hoag provides to the community. The current hospital Charity Care and Self Pay Discount Policy provides assistance on a sliding scale for uninsured and self-pay patients with family incomes up to 400% of the Federal Poverty Level. The current Charity Care and Self-Pay Discount Policy is provided in Appendix A. Appendix B provides a summary of the quantifiable Community Benefit provided by Hoag in CY 2022 (January 1, 2022 to December 31, 2022). Appendix C provides a detailed breakdown of the Community Benefit expenditures by program.

---

## *Community Benefit Committee*

---

The role of the Community Benefit Committee (“CBC”) is to establish, implement and monitor the policies and procedures that will provide the appropriate oversight and governance structure for the activities related to the Community Benefit Program at Hoag Memorial Hospital Presbyterian (“Hospital”).

The CBC is a Committee of the Hoag Memorial Hospital Presbyterian Board of Directors (the “Board”) and has the primary responsibility of ensuring that Hospital fulfills its moral and legal obligations to the community in serving the underserved and underprivileged through direct and indirect support of philanthropic health-related programs. CBC ensures that Hospital is in full compliance with federal and state regulations governing non-profit hospital organizations pertaining to community benefit and health-related activities.

The CBC ensures that Community Benefit activities are:

- Developed through engagement with community groups and local governmental officials in the identification and prioritization of community needs and to include mechanisms to evaluate the plan’s effectiveness.
- Aligned with the mission, vision and strategic objectives/initiatives of the Hospital,
- Consistent with the Hospital’s values and founding principles, and
- Developed with the input from Board, Administration and the Medical Staff leadership as appropriate.

The CBC is comprised of Hospital Board members and other members of the community and is supported by the senior management staff of the Community Health department.

### *Service Objectives*

The service objectives of the Community Benefit program remain as initially defined:

- **Access:** To ensure adequate access to medical treatment through the availability of inpatient, outpatient and emergency medical services.
- **Services for Vulnerable Populations:** To provide health care services to uninsured, underinsured and indigent populations.
- **Education/Prevention:** To address the community health needs identified by the community health needs assessment through screening, prevention, and programs.
- **Research:** To provide new treatments and technologies to the local community through participation in primary clinical research.
- **Collaboration:** To establish and participate in collaborations which address community health priorities.
- **Coordination:** To provide case management services which coordinate medical and social services for vulnerable community residents.

## CHAPTER II: COMMUNITY HEALTH NEEDS ASSESSMENT 2022

---

### *Overview*

---

Hoag conducts a Community Health Needs Assessment (CHNA) as required by state and federal law. California Senate Bill 697 and the Patient Protection and Affordable Care Act and IRS section 501(r)(3) direct tax-exempt hospitals to conduct a community health needs assessment and develop an Implementation Strategy every three years. The 2022 CHNA was completed for the 3-year period 2023-2025. The CHNA is a primary tool used by the hospital to determine its community benefit plan, which outlines how it will give back to the community in the form of health and other community services to address unmet community health needs. This assessment incorporates components of primary data collection and secondary data analysis that focus on the health and social needs of the service area.

The IRS regulations allow for the conduct of joint Community Health Needs Assessments (CHNA) when hospitals define their service area communities the same. In compliance with these regulations, this CHNA was conducted jointly by Hoag Hospital Newport Beach, Hoag Hospital Irvine, and Hoag Orthopedic Institute. Project Oversight of the Community Health Needs Assessment process was overseen by: Minzah Malik, MPH, MBA Manager, Community Benefit and Lauren Tabios, MPH, MBA Supervisor, Community Benefit.

Both the CHNA Report and the Implementation Strategy (IS) for Hoag Memorial Hospital Presbyterian are available publicly at: <https://www.Hoag.org/about-Hoag/community-benefit/reports/>

### **Community Served**

Hoag Hospital Newport Beach is located at 1 Hoag Drive, Newport Beach, CA 92663.  
Hoag Hospital Irvine is located at 16200 Sand Canyon Avenue, Irvine, CA 92618.  
Hoag Orthopedic Institute is located at 16250 Sand Canyon Avenue, Irvine, CA 92618.

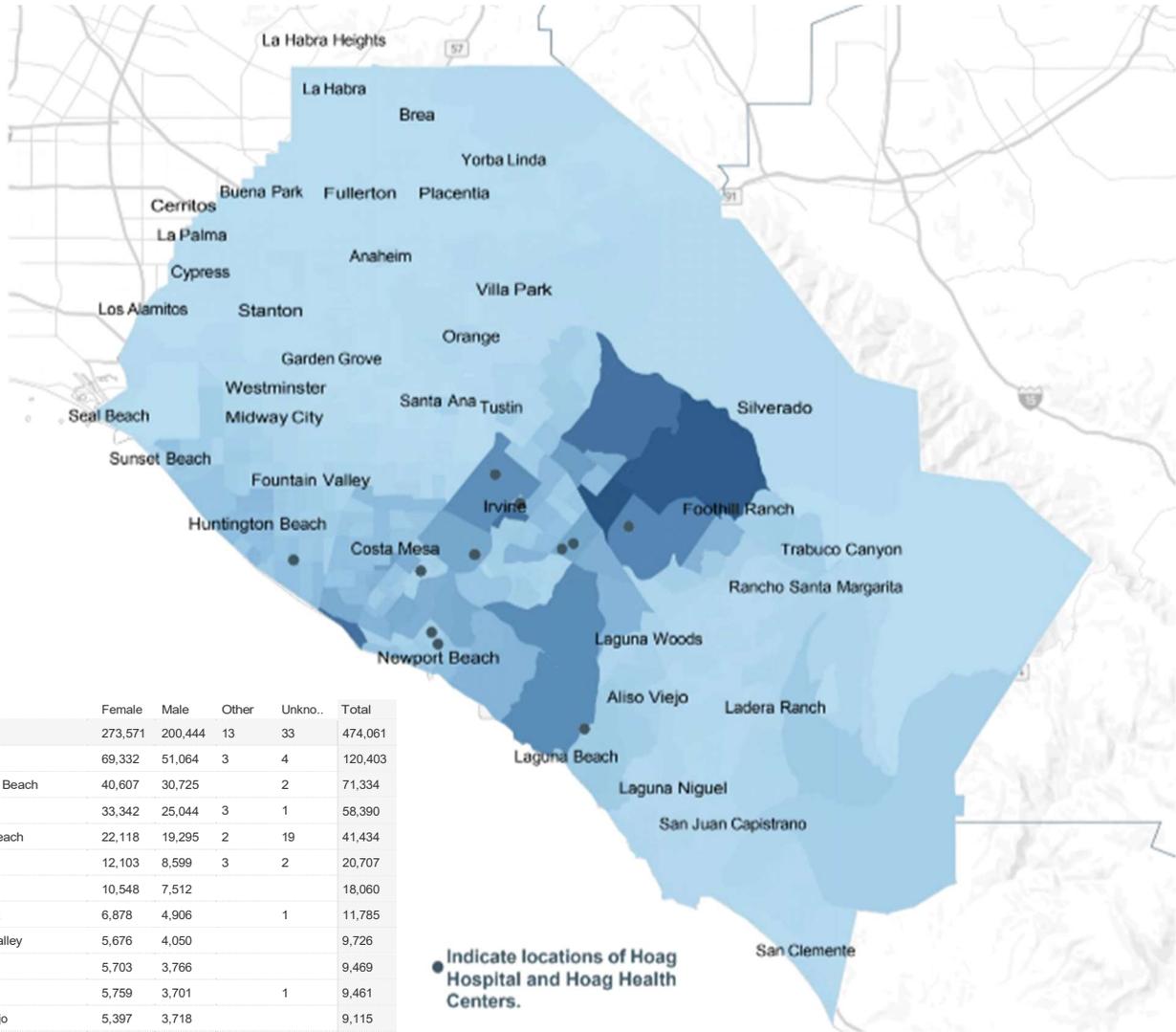
Hoag defines the community served by a hospital as those individuals residing within its hospital service area. A hospital service area includes all residents in a defined geographic area surrounding the hospital and does not exclude low-income or underserved populations. Hoag Hospital Newport Beach, Hoag Hospital Irvine and Hoag Orthopedic Institute provide Orange County communities with access to a full spectrum of health care services through its more than 1700-member medical staff, state-of-the-art equipment and modern facilities. The hospitals' service area includes all 88 zip codes and all 582 census tracts in Orange County. Hoag's patient population comes from all 34 cities and unincorporated communities in Orange County, as shown on the map on Page 9.

Among the top 5 cities served by Hoag (Irvine, Huntington Beach, Costa Mesa, Newport Beach and Santa Ana), the average age of patients range from 29 years to 48 years old with younger patients on average residing in the cities of Costa Mesa and Santa Ana. Among Hoag's obstetrician visits, the average age of Costa Mesa and Santa Ana patients is 29 years. For Emergency Department visits, the youngest patients reside in Costa Mesa and Irvine and the oldest patients reside in Newport Beach.

The number of Medicaid patients range from 8% in the cities of Huntington Beach and Irvine to as much as 25% and 21% in the cities of Costa Mesa and Santa Ana, respectively. Medicaid patients skew female, and they tend to represent a higher percentage of patients visiting the Emergency Department.

As seen in Hoag's service area, Orange County is a tale of two counties. Some of its cities have higher than average median household income while neighboring cities have some of the lowest in the state of California. To understand the social and health disparities of the county, this report will highlight different metrics that capture the characteristics of wealthier cities like Newport Beach and Irvine as well as less affluent cities such as Costa Mesa and Santa Ana.

# Patients serviced by Hoag Memorial Hospital Presbyterian



	Female	Male	Other	Unkno..	Total
Total	273,571	200,444	13	33	474,061
Irvine	69,332	51,064	3	4	120,403
Huntington Beach	40,607	30,725	2	2	71,334
Costa Mesa	33,342	25,044	3	1	58,390
Newport Beach	22,118	19,295	2	19	41,434
Santa Ana	12,103	8,599	3	2	20,707
Tustin	10,548	7,512			18,060
Lake Forest	6,878	4,906		1	11,785
Fountain Valley	5,676	4,050			9,726
Aliso Viejo	5,703	3,766			9,469
Anaheim	5,759	3,701		1	9,461
Mission Viejo	5,397	3,718			9,115
Orange	5,258	3,352		1	8,611
Laguna Beach	3,812	3,254			7,066
Westminster	4,098	2,901			6,999
Laguna Niguel	3,883	2,584			6,467
Newport Coast	3,663	2,784		1	6,448
Corona Del Mar	3,602	2,673			6,275
Garden Grove	3,681	2,330			6,011
San Clemente	3,114	1,906		1	5,021
Trabuco Canyon	2,416	1,706	1		4,123
Laguna Woods	2,370	1,426			3,796
Ladera Ranch	2,459	1,331			3,790
Rancho Santa Margarita	2,208	1,414			3,622
Yorba Linda	1,560	1,025	1		2,586
Seal Beach	1,557	940			2,497
Laguna Hills	1,463	1,004			2,467
Fullerton	1,406	1,015			2,421
San Juan Capistrano	1,346	912			2,258
Dana Point	1,351	883			2,234

---

## *Methodology*

---

### **Primary Data Collection**

The study team designed four strategies for collecting community input: key stakeholder interviews with health experts and community service experts, provider surveys, community surveys, focus groups with residents, and focus groups with professionals who represent and/or serve the community or residents. Individuals representing high-need populations (low-income, minority, medically underserved, older adult, homeless/unhoused and youth) were included. To ensure consistency across every interview and focus group, the study team generated research protocols. The study team sought to build upon prior CHNAs by focusing the primary research on topics and subpopulations that are less well understood by statistical data.

### **Key Stakeholder Interviews**

To gain insight into the health needs of Hoag's service area, a series of interviews were conducted in May 2022. Drawing from a list of Hoag partner organizations that provide direct services to the Orange County community, invitations were sent to organizational leaders to participate in stakeholder interviews. Stakeholders were chosen to ensure that the organizations represented would cover a wide range of perspectives including public health. From those invitations, 18 interviews were conducted. Interview sessions were conducted and recorded via Zoom and transcribed using artificial intelligence software with human review. Transcriptions were uploaded into a qualitative analysis software where a deductive coding process took place.

### **Provider Survey**

The 2022 CHNA Provider Survey was developed by the study team and Hoag. The survey was conducted online and opened on June 8, 2022 and closed on July 7, 2022. The survey was available in English, Spanish, Korean, Vietnamese, Traditional & Simplified Chinese and emailed to a predetermined list of individuals and organizations. Providers represented a wide range of county, private, and non-private agencies who serve residents of Orange County. Each provider was given a link to the online survey, with a request to distribute the survey to coworkers, members of their field team, and any caretakers in their network. Individuals self-identified their organization in response to the survey. A total of 210 respondents were collected and used for analysis.

### **Community Member Survey**

The 2022 CHNA Community Member Survey was developed by the study team and Hoag. The survey was opened on June 24, 2022 and closed on August 8, 2022. The survey was translated into 10 languages: Arabic, Chinese (Traditional & Simplified), English, Khmer, Korean, Farsi, Spanish, Tagalog, and Vietnamese and administered through direct outreach at community

events and canvassing as well as indirectly through email and social media. A total of 806 responses were collected and used in the analysis

## **Focus Groups**

The study team conducted nine focus groups in Orange County in August 2022 with 98 participants. Focus group participants were recruited from Hoag's partner organizations and by the consultant study team. Focus group sessions were conducted in person as well as remotely through Zoom. Participants were given \$30 gift cards to participate in the focus group (s) and transportation was also provided to ensure there were no barriers to participation. Each session lasted approximately 1 hour and was recorded and transcribed using in-language note taking. Three focus groups were conducted in Spanish, 1 in Chinese (Mandarin) and 1 in Farsi (Persian). Transcriptions were analyzed and coded into targeted themes.

## **Secondary Data Collection**

Within the guiding health framework for the CHNA, publicly available data was sought that would provide detailed information about the communities and people (at the city, ZIP Code and census tract levels) within the service area. In addition, comparison data were gathered to show how the service area communities are faring compared to the county or state. Indicators were chosen if they were widely accepted as valid and appropriate measures and would readily communicate the health needs of the service area. Preference was given to data that were obtained in the last 2 years and were available at the neighborhood or census tract level. Data sources were selected to understand general county level health, specific underserved and/or underrepresented populations, and to fill previously identified information gaps.

The study team analyzed over 200 quantitative health indicators to increase understanding of the health needs in Orange County and to assess priorities in the community. The study team collected data from existing sources such as the Social Progress Index Orange County, the US Census Bureau American Community Survey, County Health Rankings, California Department of Health Care Access and Information (HCAI), Orange County Health Care Agency, CDC, California Department of Education, American Cancer Society, and the National Institute on Aging.

In addition to the sources mentioned above, the study team collected quantitative and qualitative secondary data from multiple reports, including The Conditions of Children's Report 2021, Report on Aging in Orange County 2022, The Impact of Synthetic Opioids During the Pandemic 2022, California Children's Report Card 2022, and Equity in OC: Population Overviews.

---

## *Priority Health Issues*

---

The Community Benefit team utilized the following internal evaluation to consider these health needs and social predictors of health in light of the following additional criteria:

1. Community priority. Quantitative research data was used to ascertain the top priorities of the community, such as the high frequency with which the community prioritized the issue over others during the CHNA primary data collection process.
2. Community benefit expertise. Insights and experience are drawn upon as a major funder of community benefit programming (through grantmaking and learning from community benefit grantees).
3. Broad perspective. Hoag used the knowledge it gained from participation on various boards of directors and health-focused coalitions, which include stakeholders from diverse sectors.
4. Gaps in services. Hoag seeks to impact the well-being of the community at large beyond the traditional health services provided by our hospital. To this end, Hoag used its list of assets and resources to consider to what extent community supports were lacking in health and wellness services or programs.
5. Legacy priorities. For many years, Hoag has addressed health care access, behavioral health (social/emotional well-being), women's health and substance use, reflecting its belief in the importance and urgency of these needs and the need for ongoing investment to improve community health in these areas.

Hoag leadership reviewed the CHNA and identified community health needs that Hoag could have the highest impact and be most effective in. Based on the criteria described above, Hoag senior leadership identified and prioritized the following 3 health needs for 2023-2025:

1. Access to Health Care
2. Mental Health and Behavioral Health
3. Cancer/Chronic Disease

---

## *Implementation Strategy 2023-2025*

---

The Implementation Strategy (IS) describes actions that Hoag intends to take, including programs and resources it plans to commit; anticipated impacts on these actions; and planned collaboration with other organizations.

### Mental Health and Behavioral Health

#### *Strategies*

1. Provide mental health care services through Hoag's Mental Health Center primarily focused on the low-income population
2. Provide funding and/or in-kind support to community nonprofit organizations that focus on mental health that goes beyond our scope of care. This includes partnerships with local FQHCs and BE WELL OC.
3. Provide workforce development opportunities (internships, internal and external professional development) for the mental health profession.
4. Use existing pathways to expand our continuum of care for mental health.

#### *Expected Outcomes for this health need*

- Increase access and remove barriers to mental health care services in community settings.
- Provide bilingual, bi-cultural mental health care services to people who otherwise could not obtain mental health services.
- Bridge gaps, improve referrals and increase coordination among mental health care providers and community resources and programs.
- Leverage Hoag assets to build capacity among community clinics and community organizations to improve access to mental health care.

### Access to Health Care

#### *Strategies*

1. Provide financial assistance through free and discounted care for health care services, consistent with the hospital's financial assistance policy.
2. Offer information and enrollment assistance for no cost and low-cost insurance programs.
3. Provide funding and/or in-kind support to community clinics.
4. Provide funding and/or in-kind support to community nonprofit organizations that reduce barriers to accessing care.
5. Provide partners with space and resources at the Melinda Hoag Smith Center for Healthy Living.
6. Provide transportation support for seniors to increase access to health care services.
7. Collaborate with Share Our Selves to provide orthopedic care to the under-served (HOI)
8. Provide in-kind clinics to young athletes during fall sports (HOI)

*Expected Outcomes for this health need*

- Increase access to primary health care and a medical home.
- Bridge gaps, improve referrals and increase coordination among health care providers and community resources and programs.
- Leverage Hoag assets to build capacity among community clinics and community organizations to improve access to health care.

Cancer/ Chronic Disease

*Strategies*

1. Provide funding and/or in-kind support to community clinics.
2. Provide funding and/or in-kind support to community nonprofit organizations that focus on cancer/chronic disease prevention and management.
3. Provide partners with space and resources at the Melinda Hoag Smith Center for Healthy Living.
4. Offer chronic disease prevention, management, education, care navigation, screenings and support groups.
5. Continue to provide wellness and prevention programs to vulnerable communities.

*Expected Outcomes for this health need*

- Improve individuals' compliance with chronic disease prevention and management recommendations.
- Increase community awareness of disease prevention strategies.
- Leverage Hoag assets to build capacity among community clinics and community organizations to improve chronic disease management among at-risk populations.
- Provide access to needed health promotion resources for vulnerable populations at-risk for or suffering with chronic diseases.
- Continue health education and health coaching efforts – e.g. public school presentations, community lectures, on-line education.
- Continue physician and healthcare provider education.

**Public Comment**

In compliance with IRS regulations 501(r) for charitable hospitals, a hospital Community Health Needs Assessment (CHNA) and Implementation Strategy (IS) are to be made widely available to the public and public comment to be solicited. In compliance with these regulations, the CHNA and IS are available to the public on the website <https://www.hoag.org/about-hoag/community-benefit/reports/>.

## CHAPTER III: DEPARTMENT OF COMMUNITY HEALTH PROGRAMS

The department of Community Health provides direct Community Benefit service programs and coordinates Community Benefit reporting at Hoag Hospital. This section of the report provides information for each of the Community Health programs and achievements in CY2022: January 1, 2022 - December 31, 2022.

---

### *Mental Health Center*

---

The Mental Health Center was created to provide bilingual bicultural services to people who otherwise could not obtain mental health services. The majority of the clients are low-income, uninsured and highly vulnerable and present with a mild to moderate level of distress/symptomatology. These clients have limited health insurance with no mental health/behavioral health benefits, or they have benefits but cannot afford the co-payments and/or deductibles.

During CY22, the program employed six full-time, two part time and three per diem bilingual Master's prepared social workers, 5 of the staff are licensed. These social workers provided mental health services to 669 clients in the form of psychotherapy. Resource brokering, and/or case management was provided to 251 individuals. In addition, the program offered psychotherapeutic, psycho educational groups and community presentations which resulted in 3,114 encounters. All services were offered on a voluntary basis and free of charge. A review of client demographics found that the majority of the clients seen through the Mental Health Center were female, Hispanic, and indicated a language other than English as their primary language. 49.83% of our clients reported having an annual household income below \$40,000 and 22% reported an income below \$ 10,000. The program has proven to be highly efficient and effective. The program utilized a clinical assessment tool (DASS) to measure levels of depression, anxiety, and stress in clients. According to pre and post test scores, clients who participated in either individual or group psychotherapy saw a statistically significant decline in depression, anxiety, and stress scores. The program also implemented a self-esteem assessment tool (Rosenberg) on a pre and posttest basis. Across the board for individual and group psychotherapy, there was statistically significant improvement in self-esteem.

In addition to direct mental health services to the community we also provided professional development trainings to mental health professionals at no cost. Our professional development program provided 21 virtual trainings. A sampling of the trainings offered included: ASIST for suicide assessment and intervention, Law and Ethics, Self-Compassion, ACES Interface, Mental Health First Aid classes, Mental Health and Nutrition and EMDR. The number of professionals trained for CY22 was 1,225 and of those 419 received free continuing education credits courtesy of the Mental Health Center.

In CY22, the Mental Health Center provided a supervised clinical internship training program for 16 MSW (Master of Social Work) students. The center collaborates with the University of

Southern California, Azusa Pacific University, California State University at Fullerton, California State University at Dominguez Hills, California State University at Long Beach, and California State University at Los Angeles. Each intern was provided with weekly one-hour long supervision and one-and-a-half-hour-long group supervision. The interns, in turn, provided mental health services to 136 clients in the form of psychotherapy, totaling 1095 sessions. Additionally, the internship program allowed for psychotherapeutic/psychoeducational groups, workshops, and presentations, which resulted in 623 encounters. The internship program includes providing consultation, support, and education to paraprofessionals at partner agencies such as Girls Incorporated and the Newport Mesa Unified School District. This support included telephone consultation, workshops, and in-service education. In CY22 we continued to take on yoga therapy interns in collaboration with Be The Change Yoga. We successfully trained 3 interns, who provided a total of 147 Yoga Therapy sessions.

In addition to support for the staff of partner agencies, the Mental Health Center offered several different psychotherapeutic and psycho educational groups and workshops for the partner agency clients. These efforts allowed our partner agencies to offer mental health services at no cost to their clientele and all services are provided in-kind to the not-for-profit agencies. Some examples include: ACES Interface, depression support groups, self-esteem groups, and stress management workshops. Group sessions were also offered to help individuals cope with stress and anxiety related to returning to work.

**Contact: Rocio Valencia Vega, LCSW at 949 764-8547 or [rocio.valenciavega@hoag.org](mailto:rocio.valenciavega@hoag.org)**

---

### ***Community Benefit Grants Program***

---

Hoag's Community Benefit Grants Program serves to reinforce Hoag's mission as a non-profit, faith-based hospital, providing the highest quality health care services to the community. The Community Benefit Grants Program focuses on meeting the unique needs of Orange County residents, with particular emphasis on the disadvantaged and underserved. The program provides grants to community organizations who strive to meet the health and social service-related needs of the Orange County community. Beginning in 2020, the opportunity to apply for a grant was made to pre-identified organizations. Invitations to apply will be extended to organizations that meet eligibility requirements and have established their ability to demonstrate positive outcomes.

The eligibility criteria include:

- Organization must have operations in Orange County, CA
- Must be 501(c)(3) tax exempt organization, local government entity, or education institution
- Services are provided to disadvantaged and/or underserved populations
- Services must align with at least one of the identified priority focus areas
- Services are provided within the geographic boundaries of Orange County, CA

The Priority Focus Areas are determined by the Community Health Needs Assessment, conducted every three years. The needs are identified first through secondary data for the county, and then narrowed to significant health needs using input from persons representing the broad interests of the community, as well as persons with special knowledge or expertise in public health. The significant health needs are then prioritized into the Priority Focus Areas that the hospital will plan on addressing through programming and services. The Priority Focus Areas for the Community Benefit Grants Program for CY22 were:

1. Mental Health
2. Access to Care
3. Economic Security
4. Prevention of Chronic Disease and Management
5. Women's Health
6. Substance Abuse

CY22 included a 12-month grant cycle from January 1, 2022 – December 31, 2022. Organizations that receive funding are required to submit a progress report, as well as a final outcomes report. During CY22, a total of 86 program grants were funded with a total contribution of approximately \$7.3M.

**Contact: Minzah Malik, MPH, MBA at (949) 764-6597 or [Minzah.Malik@hoag.or](mailto:Minzah.Malik@hoag.or)**

---

### *Project Wipeout*

---

Project Wipeout was created to provide beach and water safety information to nearby communities after seeing an increased incidence of spinal cord injuries in Hoag Hospital's Emergency Department. The program initially focused education efforts for lifeguards on the prevention of spine injuries. Over time, educational materials transitioned to include broader beach and water safety and overall injury prevention for lifeguards and the greater community. Education topics include drowning prevention, rip current safety and escape, marine animal behavior and safety, beach hazards, best practices in the water, and sun protection.

Project Wipeout partners and collaborates with members of the beach safety community, which includes lifeguard and fire departments throughout Orange County, the California Surf Life Saving Association, and other lifesaving agencies. Additionally, Project Wipeout works closely with the Orange County Lifeguard Chiefs Association, the Orange County Drowning Prevention Taskforce, and other countywide and southern California collaborative entities. At the national level, Project Wipeout collaborates with the United States Lifesaving Association and has gained recognition as a community-based drowning prevention entity.

Throughout 2022, Project Wipeout participated as a member of the California Water Safety Coalition, attending workshops, the California Water Safety Summit, and serving on the Water Competence and Swim Lessons work group.

*Education and Training*

In April 2022, Project Wipeout facilitated a De-Escalation Training for city and county Training Officers. Additionally, the program partnered with Scripps Memorial Hospital La Jolla to present the annual Lifeguard Conference in July, virtually via Zoom. Additionally, local lifeguard agencies returned to delivering Project Wipeout’s beach safety presentation at schools in CY22. Additionally, lifeguard agencies continued to distribute Project Wipeout materials at each agency’s headquarters, both as education materials for beach visitors and as training for the junior guard programs through spring and summer. Materials are available in both English and Spanish, serving as teaching tools for different water safety agencies outside of California. All materials are available to download from the Hoag Project Wipeout website: [www.hoag.org/projectwipeout](http://www.hoag.org/projectwipeout).

**Contact: Lauren Tabios, MPH, MBA at (949) 764-5321 or [Lauren.Tabios@hoag.org](mailto:Lauren.Tabios@hoag.org)**

---

***Melinda Hoag Smith Center for Healthy Living***

---

The Melinda Hoag Smith Center for Healthy Living (MHSCHL) is a one-stop-shop for health and social services. Through co-location and collaboration with partner agencies, the center provides free classes, workshops and supportive services to the community. The MHSCHL allows providers to take an integrated, holistic approach to community services- addressing everything from health care to legal services, to mental health and social support. These services help connect the individual with the resources to improve social determinants that impact their health. Since opening in 2016 our collaborative has grown to include, but not limited to, the following:

Alzheimer’s OC	Girls Inc.
Big Brothers Big Sisters	Human Options
Cancer Kinship	MOMS Orange County
Children’s Bureau	National Alliance for the Mentally Ill
CHOC PODER	Newport Mesa Family Resource Center
Clinic in the Park	Orange County United Way
Community Health Initiative of OC	Project Self Sufficiency
Council on Aging OC	Project Youth/OC Bar Foundation
CIELO	Public Law Center
Dance for Joy	Serving People in Need
Fit First	Share Our Selves

This model of service delivery was originally intended to bridge gaps between community, clients, and agencies, while also leveraging resources and fostering collaboration between organizations. Below are a few highlights from 2022:

- MHSCHL provided Crisis Case Management and Resource Brokering to 3,242 individuals.
- Girls Inc's provided 1441 encounters for after school homework, resiliency programming, and STEM activities.
- Public Law Center provided 131 individuals with legal consultation or representation in the area of Family Law – divorce, DV, child custody etc.
- Partnered with United Way's OC Free Tax Prep Service to provide 455 low-income tax returns at no-cost to the taxpayer.
- CHIOC connected 61 individuals to affordable and quality health care and social services.
- Project Self-Sufficiency provided 158 individuals with financial assistance, long-term case management, and other resources to provide a path for a successful academic journey toward economic self-reliance.
- Partnered with OC Diaper Bank to distribute 179,490 diapers/Pull Ups to needy families.
- MHSCHL provided wellness classes such as yoga, Zumba and other fitness classes to 6,033 individuals
- Partnered with Second Harvest Food Bank to provide 11,030 individuals with fresh produce and groceries through our biweekly food distribution
- In partnership with Share Our Selves and Families Forward, 141 individuals received rental or motel assistance totaling \$88,972.
- In collaboration with Supervisor Bartlett's office, MHSCHL distributed \$150,000 worth of grocery gift cards for individuals and families facing food insecurity.
- 18 individuals received free hair and nail appointments in partnership with the Beauty Bus.
- Partnered with Alinea to provide free mammogram screenings to 89 women.
- Provided monthly Professional Networking and Resource Exchange meetings for 458 professionals to network with community partners.
- Partnered with Girls Inc to provide 2,117 students with afterschool STEM activities and Spring/Summer camps.
- Partnered with NMUSD and IKEA in hosting a Back-to-School Resource Fair serving over 3,000 individuals.
- Trained and Certified 158 individuals with CPR Certification.
- Partnered with Clinic in the Park to provide booster seats and car seat safety training to 94 caregivers.
- In collaboration with Council on Aging, 370 individuals participated in English as a Second Language classes.

**Contacts: Lauren Tabios, MPH at (949) 764-5321 or [Lauren.Tabios@hoag.org](mailto:Lauren.Tabios@hoag.org)**

---

## ***Community Nurse Navigator Program***

---

The Community Nurse Navigator Program was created to help meet the health care needs of low-income, uninsured, and underinsured patients. Community Nurse Navigators (CNNs) provide bilingual bicultural services that include health education, case management and coordination of services by identifying medical, psycho-social, and economic conditions to ensure that appropriate treatment and services are obtained. CNN program goal is to bridge the gap as to ensure health equity for all those served.

The program has 2 full-time registered nurses. Client care is provided individually and in group settings via the following modalities: in person, Zoom, and telephone. Below are a few highlights from 2022:

- Nursing education, case management, navigation, and advocacy: 400 sessions
- Health Coaching: 247 sessions
- Health Education workshops (English and Spanish): 378 participants

**Contact: Julia Teal, BSN RN PHN CHWC at 949-764-6977 or [Julia.teal@hoag.org](mailto:Julia.teal@hoag.org)**

---

## ***Promotores Program***

---

The Promotores Program was introduced to Hoag in the spring of 2018 and has served as an effective way to bring the Center *to the community*. The promotores are bilingual and bicultural and serve the same communities in which they live. This neighborhood connection increases their likability, trustworthiness, and the effectiveness of their outreach. Promotores are stationed both at the Melinda Hoag Smith Center for Healthy Living focusing on the Costa Mesa area and the Oakview Family Resource Center focusing on the Huntington Beach area. The promotores all received extensive training under the tutelage of Latino Health Access (a partner agency with expertise in the promotor model and training).

Our promotores are often the first point of contact for many families, especially those in crisis. Promotores have found strategic tools to reach withdrawn and underserved people. These tools include door to door outreach, outreach at community events (i.e., churches, soccer games, school campuses, laundromats, etc.), peer led support groups addressing suicide prevention and mental health awareness, and accompaniment to important health related appointments. Promotores also receive referrals from community partner agencies for individuals who would benefit from a visit with the promotor.

The following are some accomplishments during CY 2022:

- 8481 contacts were made through door-to-door and tabling events with health education and psychosocial resources
- 263 participants attended a health educational presentation/class
- 2449 families received fresh food and produce
- 1338 outreach phone calls were made
- 1223 case management sessions were provided
- 279 people attended a fitness class
- 235 participated in a monthly book club meeting
- 60 attended the Talk Saves Lives program

**Contact: Stephanie Cariker, LCSW at (949) 764-6571 or [stephanie.cariker@hoag.org](mailto:stephanie.cariker@hoag.org)**

---

## *Appendices*

---

**Appendix A Hoag Hospital Charity Care and Self Pay Discount Policy**

**Appendix B Hoag Hospital Quantifiable Community Benefit for CY2022**

**Appendix C Hoag Hospital Community Benefit Expenditures by Program**

---

## APPENDIX A

---

Status **Active** PolicyStat ID **9804076**



Origination 1/15/2020  
Last Approved 5/19/2021  
Effective 5/19/2021  
Last Revised 5/19/2021  
Next Review 5/18/2024

Owner Sue Hawkins  
Area (Category) Revenue Cycle  
Applicability Hoag Memorial Hospital  
Presbyterian & Hoag Clinic

---

### Financial Assistance Policy (FAP)

---

HOAG2016-0004008

#### PURPOSE:

This policy outlines Hoag's operational guidelines on the Financial Assistance Program (FAP) in relation to the patient collections process. The purpose of this policy is to ensure a fair, non-discriminatory, effective, and uniform method for the provision of financial assistance to eligible individuals who are unable to pay in full or part for medically necessary emergency, other hospital and clinic services.

It is the intent of this policy to comply with all federal, state and local law. This policy and the financial assistance program herein constitute the official Financial Assistance Policy (FAP).

#### SCOPE:

Revenue Cycle

#### AUTHORIZED PERSONNEL:

Financial Assistance Specialist, Business Office Manager, Self-Pay Manager, Supervisor Self-Pay/Charity, Self-Pay Collectors, Financial Councilors, PAS Supervisors, Insured and Uninsured Patients

#### 1. POLICY:

- A. Hoag seeks to address patient's health care and financial needs while remaining committed to the stewardship of Hoag resources. To ensure that Hoag obtains appropriate reimbursement for services provided, several payment options and programs are available to support the needs of uninsured and underinsured patients. When it is determined that a payment solution cannot be obtained through such payment options and programs, then the patient is provided with information about the Hoag Financial Assistance Program (FAP).
- B. Patient collections processes shall remain in compliance with Hoag policies relevant to patient financial assistance:

- I. Any patient who requests financial assistance will be afforded the opportunity to apply and be considered.
- II. Access to necessary care shall in no way be affected by whether financial assistance eligibility exists; medically necessary care will always be provided to the extent the Hoag can reasonably do so.
- III. The need for financial assistance is a sensitive and deeply personal issue for patients. All Hoag employees will maintain confidentiality of requests for assistance, the information obtained in the application process, and the funding or denial of assistance.
- IV. In an effort to ensure patients' post-acute and follow-up health care needs are met, patients who demonstrate lack of financial coverage by third-party insurance are offered information on how the patient may obtain applications for Medicare, Medicaid, Medi-Cal and the Healthy Families Program (CA), coverage offered through the Covered California (CA), or other state or county funded health coverage programs. Hoag will assist patients with applying for government-sponsored programs and follow through to acceptance or denial.

## 2. LIST OF PROFESSIONALS SUBJECT TO HOAG'S FAP:

- A. Hoag will specifically identify a list of physicians, medical groups, or other professionals providing services who are and who are not covered by this policy. Emergency room physician who provide emergency services to patients at Hoag, are required by California law to provide discounts to uninsured patients or patients with high medical costs (as defined by the Hospital Fair Pricing Policies outlined in California Health and Safety Code (Sections 127400–127446) who are at or below 400% of the federal poverty level. Hoag will provide this list to any patient who requests a copy. The provider list could also be found online on Hoag's website: [www.Hoag.org](http://www.Hoag.org).

## 3. COLLECTIONS PROCESS OVERVIEW:

- A. It is the expectation that the patient's estimated cost or liability will be collected in full prior to or at the time of service. If a patient states they cannot pay in full, payment options and programs are offered during the collections process and in consistent sequential order as outlined below:
  - I. Full payment is requested
  - II. A reasonable payment plan based on estimate is offered. A deposit payment as requested, if appropriate.
  - III. Eligibility for government-funded programs is explored in programs including, but not limited to:
    - a. Medicare
    - b. Medi-Cal (CA)
    - c. Covered California
    - d. Other state and country funded health coverage programs.
  - IV. When a payment solution cannot be found in Stages 1- 3, then the patient is provided the information about the Hoag financial assistance program (FAP). Pending applications for coverage through FAP and from a government-funded health program will not preclude the patient's eligibility for eligibility for other programs.  
**Important:** If at any time, patient request information or an application for Hoag financial

assistance, it is promptly provided to the patient.

#### **4. FINANCIAL ASSISTANCE PROGRAM OVERVIEW:**

- A. Hoag Financial Assistance Program (FAP) ensures that medically necessary Health Care is provided at discounted are at no cost to qualify to uninsured and underinsured patients. Any uninsured or underinsured patient who is unable to pay for his or her Hoag bill and whose income meets the approved Federal Poverty Level (FPL) qualifications will be considered eligible for Hoag Financial Assistance (FA). Additionally, patients who incur qualified High Medical Costs may be deemed eligible for financial assistance.
- B. Hoag serves all persons in the communities where we are located. We aspire to provide health services with the upmost dignity and compassion for each patient and family in our care. In a confidential and caring environment patients are provided providing financial assistance to pay their Hoag bills and, in turn, to ensure access to needed healthcare as an essential element of fulfilling their human dignity and ability to live more healed, more whole, and more able to contribute to the common good.

#### **5. COMPLETION OF THE FAP APPLICATION:**

- A. Upon a patient's request, a Financial Assistance Program (FAP) application will be provided. Designated personnel will assist patients in completing the Financial Assistance Application and determining eligibility for financial assistance, charity care, or government-funded programs, if applicable. Financial Assistance notice printed in English and Spanish are also placed in the public admission areas at Hoag. Interpretation services are available to address any questions or concerns and to assist in the completion of the Financial Assistance Applications.
- B. A patient, our patient's legal representative, who requests a discounted payment, charity care, or other assistance in meeting his or her financial obligation to the Hoag shall make every reasonable effort to provide Hoag with documentation of income and health benefits coverage. If the person requests charity care or a discounted payment and fails to provide information that is reasonable and necessary for Hoag to make a determination, Hoag may consider that failure in making its determination.
- C. Upon establishing full or partial eligibility under the Financial Assistance Program the coverage will be valid for six (6) months from the date of the eligibility letter. Additionally, other pre-existing patient account outstanding balances at the time of eligibility determination will be included as eligible, excluding exceptions set forth in this policy.
- D. The Hoag financial systems will be updated to reflect the charity discounted amount using the designated adjustment code for the full or partial approved amount.

#### **6. PATIENT BILLING:**

- A. Patients applying for Hoag Financial Assistance will continue to receive monthly statements as an awareness of an open balance in to encourage patient engagement if needed. Statements mailed to the patient will include a clear and concise notice advising the patient of Hoag Financial Assistance Program and the appropriate contact information.
- B. This notice shall also:
  - I. Advise the patient that he or she may be eligible for programs such as Medicare Medical (CA), Covered California or other state or county funded health coverage programs.

- II. How the patient may apply for any of these programs and that the Hoag will provide the patient with an application.
- III. That Hoag will refer the patient to a local consumer assistance center housed a legal services office.

C. Disputes:

- I. Efforts to collect healthcare debts by an affiliate, subsidiary or external collection agency of Hoag must adhere to the standards set forth in this policy including the definition and application of a reasonable payment plan.
- II. In dealing with patients eligible for Hoag Financial Assistance or reasonable payment plan, Hoag should not wage garnishments or place liens on homes as a mean of collecting unpaid Hoag bills. This requirement does not preclude Hoag from pursuing reimbursement from third-party liability settlements.
- III. Accounts without an existing FAP or payment arrangement will transfer to an external collection agency and 150 days from the first patient billing cycle.
- IV. Accounts with a default in payment plan with three consecutive missed payments will transfer to the external collection agency upon review and approval of the department supervisor to ensure a reasonable attempts to reach the patient / guarantor were made.

**7. PROOF OF INCOME:**

- A. The patient will submit all necessary income documents including copies of IRS forms, W-2 wages and earnings, disability payment statements, etc. An application for a government program (i.e. prescription drug assistance programs, DHS, SSI, or any other signed federal program document), may be used to financial assistance. Financial information obtained will not be used to determine collection activities.
- B. In cases where documentation is unavailable, the patient's income may be verified by having the patient sign assistance application attesting to the veracity to the income provided if the proof of income is questionable, validation of income should be immediately requested.

**8. INCOME QUALIFICATIONS- CA HOSPITALS:**

- A. Any uninsured or underinsured patient whose family income is less than 400% of the current federal poverty level FPL is unable to pay his or her bills shall be considered eligible for financial assistance. Full or partial assistance is based on the criteria outlined below:

If the income % of FPL is:	And the patient is:	Then:					
200% or less,	Uninsured or insured	The entire (100%) patient liability portion of the bill for services will be written off.					
201% - 400%,	Uninsured,	The patients' payment obligation will be a percentage of the gross amount the Medicare program would have paid for the service based on the sliding scale below: <table border="1" data-bbox="743 373 1333 443"> <thead> <tr> <th>If the income % of FPL is:</th> <th>Then the % of Medicare LIKE Rate Payable is:</th> </tr> </thead> <tbody> <tr> <td>201 - 400%</td> <td>50%</td> </tr> </tbody> </table>	If the income % of FPL is:	Then the % of Medicare LIKE Rate Payable is:	201 - 400%	50%	
	If the income % of FPL is:	Then the % of Medicare LIKE Rate Payable is:					
201 - 400%	50%						
Insured,	The patient's obligation will be reduced by insurance payments: <table border="1" data-bbox="743 470 1354 600"> <thead> <tr> <th>If:</th> <th>Then:</th> </tr> </thead> <tbody> <tr> <td>The amount paid by insurance exceeds what Medicare would have paid,</td> <td>The entire (100%) patient liability portion of the bill will be written off.</td> </tr> <tr> <td>The Medicare Payment LIKE Rate is greater than the HMO/PPO Payment Rate for services rendered,</td> <td>The patient's payment obligation will be based on the HMO/PPO Payment Rate.</td> </tr> </tbody> </table>	If:	Then:	The amount paid by insurance exceeds what Medicare would have paid,	The entire (100%) patient liability portion of the bill will be written off.	The Medicare Payment LIKE Rate is greater than the HMO/PPO Payment Rate for services rendered,	The patient's payment obligation will be based on the HMO/PPO Payment Rate.
If:	Then:						
The amount paid by insurance exceeds what Medicare would have paid,	The entire (100%) patient liability portion of the bill will be written off.						
The Medicare Payment LIKE Rate is greater than the HMO/PPO Payment Rate for services rendered,	The patient's payment obligation will be based on the HMO/PPO Payment Rate.						
201% - 400%,	Insured, yet services are not covered by the payer.	The following will apply: <table border="1" data-bbox="743 632 1354 720"> <thead> <tr> <th>If...</th> <th>Then ...</th> </tr> </thead> <tbody> <tr> <td>The patient ordinarily would be responsible for the full billed charges,</td> <td>The total patient payment obligation will be the HMO/PPO Payment Rate.</td> </tr> </tbody> </table>	If...	Then ...	The patient ordinarily would be responsible for the full billed charges,	The total patient payment obligation will be the HMO/PPO Payment Rate.	
If...	Then ...						
The patient ordinarily would be responsible for the full billed charges,	The total patient payment obligation will be the HMO/PPO Payment Rate.						
201% - 400%,	Insured, and services are covered by the payer.	The following will apply: <table border="1" data-bbox="743 743 1354 831"> <thead> <tr> <th>If:</th> <th>Then:</th> </tr> </thead> <tbody> <tr> <td>The patient is responsible for only a portion of the billed charges (deductible, copay, etc.),</td> <td>There is no discount.</td> </tr> </tbody> </table>	If:	Then:	The patient is responsible for only a portion of the billed charges (deductible, copay, etc.),	There is no discount.	
If:	Then:						
The patient is responsible for only a portion of the billed charges (deductible, copay, etc.),	There is no discount.						

#### 9. AUTOMATIC CLASSIFICATION FOR CHARITY CARE:

- A. Under the following special circumstances, patient may be deemed eligible for charity care without absolute requirement for submission of a financial assistance application:

Circumstance	California
Eligible for other FPL-qualified programs	(Addressed in Other Special Circumstances section below)
Disabled	n/a
Deceased	Is deceased and without third-party insurance coverage or identifiable estate, no living spouse
Incarcerated	n/a
Homeless	Is determined to be homeless and is not currently enrolled in Medicare, Medicaid or any government sponsored program, without third-party insurance coverage
Seen in ER, unable to bill	Is treated in the Emergency Department but Hoag is unable to issues a billing statement
Access to Care	Is treated through an Access to Care Program

#### 10. OTHER SPECIAL CIRCUMSTANCES:

- A. As validated by the court document of discharge for accounts not yet in collection or as validated by the collection agency, patients who have filed for bankruptcy for the outstanding Hoag debt and the court has granted discharge status.
- B. Patients who are eligible for FPL - qualify programs such as Medi-Cal, Medicaid, and other

government-sponsored low-income assistance programs, are deemed to be indigent. Therefore, such patients are eligible for Charity Care when payment for services is not made by the program. Patient account balances resulting from non-reimbursed charges are eligible for charity write off. Medi-Cal Share of Cost obligations are not eligible for charity write off or the discount program.

- I. Specifically included as eligible are charges related to the following:
- II. Denied inpatient stays for medically necessary services
- III. Denied inpatient days of care
- IV. Eligible non-covered services
- V. IP Treatment Authorization Request (TAR) denials
- VI. Denials due to restricted coverage

#### 11. PRESUMPTIVE CHARITY:

- A. Hoag recognizes that a portion of the uninsured or underinsured patient population may not engage in the traditional financial assistance application process. If the required information is not provided by the patient, Hoag utilizes an automated, predictive scoring tool to qualify patients for Charity Care. The PARO™ tool predicts the likelihood of a patient to qualify for Charity Care based on publicly available data sources. PARO provides estimates of the patient's likely socio-economic standing, as well as, the patient's household income and size.
- B. **QMB patients:** Qualified Medicare Beneficiaries: Eligible for charity write off when no secondary or Medi-Cal information is obtainable or balance after secondary other than SOC: Medicare providers and suppliers may not bill people in the QMB program for Medicare deductibles, coinsurance or co-pays, but state Medicaid programs may pay for those costs. Under some circumstances, federal law lets states limit how much they pay providers for Medicare cost sharing. Even when that's the case, people in the QMB program have no legal obligation to pay Medicare providers part A or part B cost-sharing. Refer to Prohibition on billing dually eligible individuals enrolled in the QMB program.

#### 12. CATASTROPHIC MEDICAL EXPENSES

- A. Hoag at its discretion, may grant charity in the event of a catastrophic medical expense. These patients will be handled on individual basis.

#### 13. APPROVAL LEVELS:

- A. Financial assistance determination will be made only by approved Hoag personnel according to the local levels of authority.
- B. **Notification of Determination**
  - I. Patients will receive notification of Hoag's determination within 30 days of submitting the completed application and supporting documentation.
  - II. **Patient Disputes**
  - III. FAP qualifications are determined after the application is reviewed for eligibility based on criteria contained in this policy. Financial assistance shall not be provided on a discriminatory or arbitrary basis, however Hoag retains full discretion to establish eligibility criteria based on sufficient evidence and information provided by the patient or

guarantor.

- C. In the event of a dispute, a patient or guarantor may seek review from management or the executive director of revenue cycle via email at [PFS@hoag.org](mailto:PFS@hoag.org) or in writing by providing additional information to support the dispute at:

*Hoag Memorial Hospital Presbyterian  
Attn: Executive Director of Revenue Cycle  
2975 Redhill Avenue, Suite 200  
Costa Mesa, CA 92626*

**14. PROOF OF INSURANCE:**

- A. If Hoag bills a patient who has not provided proof of coverage by a third party at the time the care is provided or upon discharge Hoag will provide the patient with a Notice of Availability Financial Assistance (NAFA)

**15. DEFINITIONS:**

<b>Term</b>	<b>Definition</b>
Affordable Care Act (ACA)	A federal mandate that aims to increase the quality and affordability of health insurance.
Charity Care	Medically necessary Hoag services provided at no cost of the patient who lacks or has inadequate insurance in meets defined low-income requirements.
Covered California	California's Health Insurance Marketplace program that provides assistance and shopping for affordable healthcare and possibly financial assistance. Covered California will also assist in determining qualifications for Medi-Cal.
Deposit	When payment arrangements are made, the first installment payment is considered the deposit. The deposit is negotiated, starting at 50% of the total estimated patient liability.
Government -Funded Insurance Programs	The following are included in the "government-funded insurance programs" (but is not limited to): <ul style="list-style-type: none"><li>• Medicare</li><li>• Presumptive Eligibility (Medi-Cal)</li><li>• Medi-Cal (CA)</li><li>• Covered California (CA)</li><li>• Out of State Medicaid</li></ul>
Health Insurance Marketplace	A component of the Affordable Care Act (ACA) is the Health Insurance Marketplace (formally known as Exchange). Each state is mandated to have this online venue for customers and small businesses to compare and purchase insurance coverage options and to learn if they are eligible for federal insurance subsidies.

High Medical Cost	<p>California:</p> <p>A patient is considered to have High Medical Cost if he or she has either of the following:</p> <ul style="list-style-type: none"> <li>• Annual out of pocket cost incurred by the individual at Hoag that exceeds 10% of the patient's family income in the prior 12 months.</li> <li>• Annual out-of-pocket expenses that exceed 10% of the patient's family income, if the patient provides documentation of the patient's medical expenses paid by the patient or the patient's family in the prior 12 months.</li> </ul>
HMO/PPO payment rates	The average amount of payment Hoag would receive from all contracted HMOs/PPOs for providing services. This rate, represented as a percentage of total billed charges, is Hoag-specific and updated periodically.
Out of State Medicaid	Hoag will bill for Out of State Medicaid provided a contract is approved by the state and/or obtained through an outsourced vendor.
Medi-Cal (CA)	Medi-Cal is California's federally funded health insurance programs that pay for a variety of medical services for children and adults who have limited resources and low income. Under ACA, Medi-Cal has expanded who may be eligible.
Medically Necessary Services	Services or supplied determined to be proper and needed for the diagnosis, direct care or treatment of the medical condition and meet the standards of good medical practice in the medical community.
Excluded services	If service is not deemed medically necessity, CDU, cosmetic, gastric bypass for weight loss.
Presumptive Charity (PARO, SOS and La Amistad programs)	Share ourselves program (SOS) and La Amistad have been pre-determined to meet the program guidelines as these individuals were deemed to be at or below the 200% FPL. SOS and La Amistad complete their own screening and approval. Payment Assistance Rank ordering (PARO) Score: PARO is a patient account scoring mechanism. PARO score is evaluated bi-annually and calibrated to reflect the charity care policy of Hoag for evaluation an eligibility criteria.
Medicare	Medicare is a federally funded health insurance program for qualified people age 65 or older. Certain people younger than 65 also qualify based on disabilities or renal disease. This program helps with the cost of healthcare, but does not cover all medical expenses or the cost of long-term care. It is not based on a low-income. It is not part of the Health Insurance Marketplace, but there are some coverage changes as a result.
Medical Payment Rates	The average amount of payment Hoag would receive from Medicare for providing services. This rate is Hoag specific and

	updated periodically.
Payment Arrangements/ Installment plans	A plan negotiated and agreed to by the Hoag and the patient sets the terms of extended payment for services provided by Hoag. Any pre-service payment plan is based on an estimate and the financial counselors and/or schedulers coordinate payment through self-pat supervisor as Final terms are set up after final bill.
Reasonable Payment Plan (CA)	If Hoag and the patient/guarantor, cannot agree, Hoag shall create a reasonable payment plan Monthly payments pursuant to a reasonable payment cannot exceed more than 10% of the patient's family income, excluding deductions for essential living expenses.
Essential Living Expenses (CA)	Expenses for any of the following: rent our house payment and maintenance; food and household supplies; utilities and telephone; clothing; medical and dental payments; insurance; school or childcare; child or spousal support; transportation and auto expenses, including insurance, gas and repairs, installment payments.
Amounts Generally Billed (AGB)	A Hoag facility may determine AGB for any emergency or other medically necessary care provided to a FAP-eligible individual by using the billing and coding process the Hoag facility would use if the FAP-eligible individual were a Medicare fee-for-service or Medicaid beneficiary and setting AGB for the care at the amount the Hoag facility determines would be the total amount Medicare or Medicaid would allow for the care (including both the amount that would be reimbursed by Medicare or Medicaid and the amount the beneficiary would be personally responsible for paying in the form of co-payments, co-insurance, and deductibles).

#### PLAIN LANGUAGE SUMMARY: HOAG NOTICE OF AVAILABILITY OF FINANCIAL ASSISTANCE

##### MISSION

Our missions as a non-profit, faith-based hospital is to provide the highest quality health care services to the communities we serve. Hoag is committed to working with our patients through any financial issues, including finding ways to make medical care more affordable. Hoag offers financial assistance to eligible patients who do not have the financial ability to pay for their medical bills. If you're having trouble paying for all or some of your healthcare, we encourage you to talk with one of our Financial Counselors are someone in our business office about how we can help you.

##### WHAT IS THE PATIENT FINANCIAL ASSISTANCE PROGRAM?

Hoag's Financial Counseling Department offers free financial screenings for people who do not have health insurance and cannot pay their Hoag bill, as well as patients who do have insurance, but are unable to pay their portion of the bill that insurance does not cover.

Our Financial Counselors will review your eligibility for Medicare, Healthy Families Program, Medi-Cal, or other coverage offered through the California Health Benefit Exchange, California Children's Services

program, other state- or county-funded health coverage, or charity care. If you already have coverage through one of these programs, please notify our Financial Counselors immediately. Patients ineligible for government assistance may still qualify for discount or charity programs available through Hoag. You may also be referred to [www.OCGOV.com](http://www.OCGOV.com) for local assistance.

If you lack, or have inadequate, insurance, and you meet low- and moderate-income requirements, you may qualify for discounted payment or charity care. Please remember that access to necessary health care is not affected by eligibility for financial assistance. Hoag is committed to treating all those who come to us for care.

You may also apply directly for the above programs by accessing their website directly:

Medi-Cal: <http://www.dhcs.ca.gov/services/medi-cal/pages/applyformedi-cal.aspx>

Affordable Care Act: [www.HealthCare.gov](http://www.HealthCare.gov) to apply by phone Call 1-800-318-2596

Medicare: [www.ssa.gov/medicare/apply.html](http://www.ssa.gov/medicare/apply.html)

Hoag Charity care program: [www.Hoag.org](http://www.Hoag.org) (Patient & Visitors tab, Billing, Charity Care Application)

Free or Discounted Care: For those who qualify for financial assistance, free or discounted care is available. The amount discounted is determined by your family income as compared to the Federal Poverty Level (FPL). Free care is offered to patients with family income of 200% or less of FPL and discounted care is offered to patients with family income of 201% to 400% of FPL.

A FAP-eligible individual may not be charged more than AGB for emergency or other medically necessary care.

#### HOW AND WHEN TO APPLY

Please contact our Financial Counselors immediately after discharge or completion of services by calling 949-764-5564 or by e-mail at [FC@hoag.org](mailto:FC@hoag.org).

If you have questions or would like to receive a financial assistance application form, please contact:

- By telephone: 949-764-8413
- On our website at: <https://www.hoag.org/patients-visitors/billing-information/financial-assistance-charity-care/>
- By visiting:

Hoag Hospital- Newport Beach Cashier's Office One Hoag Drive Newport Beach, CA 92662 Hours: Monday through Friday 8:30am to 4:30pm or by email at <a href="mailto:FC.Hoag.Org">FC.Hoag.Org</a>	Hoag Hospital- Irvine Cashier's Office 16200 Sand Canyon Ave Irvine, CA 92618 Hours: Monday through Friday 8:30am to 4:30pm or by email at <a href="mailto:FC.Hoag.Org">FC.Hoag.Org</a>	Patient Financial Services Attn: Charity Care Specialist 2975 Red Hill Ave., Suite 200 Costa Mesa, CA 92626 Hours: Monday through Friday 8:30am to 4:30pm or by email at <a href="mailto:PFS@Hoag.org">PFS@Hoag.org</a>
--	---	---

We are committed to making information about the Hoag Financial Assistance Program available in the communities we serve in a manner that is easy to understand. In addition to English, this summary, the Hoag Financial Assistance Policy, and the Hoag Financial Assistance Application form, are available in other

languages, including Arabic, Chinese, Farsi, Korean, Spanish and Vietnamese. See <https://www.hoag.org/patients-visitors/billing-information/financial-assistance-charity-care/>

**CONFIDENTIALITY**

We understand that the need for financial assistance can be a sensitive and deeply personal issue. We are committed to maintaining the confidentiality of requests, information and funding.

**Reference:** n/a

**Review and/or input for this procedure was given by the following:** Internal Revenue Code Section 501©; 26 C.F.R. 1.501(r) (1)-1.501(r) (7)

**Title and version of IFU:** n/a

## Approval Signatures

Step Description	Approver	Date
VP Approval	Andrew Guarni: VP SR AND CFO	5/19/2021
VP of Hoag Clinic Approval	Michael Gam: VP AND CFO HOAG CLINIC	5/19/2021
Policy Management Approval	Carissa-Lyn Huang: POLICY MANAGEMENT SPECIALIST	5/14/2021
Owner Approval	Sue Hawkins: EXEC DIR REVENUE CYCLE	5/13/2021

## *APPENDIX B*

### **Hoag Hospital Quantifiable Community Benefit Summary CY 2022**

#### **A. Unreimbursed Cost of Direct Medical Care Services - Charity Care**

*Definition: The direct cost of medical care provided by Hoag; consists of unreimbursed costs (calculated utilizing cost-to-charge ratios) of providing services to the county indigent population, charity care, and care provided to patients identified and referred by the SOS Medical and Dental Clinic.*

	<b>CY2021</b>	<b>CY2022</b>
Charity Care	\$ 4,662,803	\$ 5,753,801
MediCal/Cal Optima Cost of Unreimbursed Care	\$ 55,644,964	\$ 58,670,816
Medicare Cost of Unreimbursed Care	\$ 100,570,334	\$ 122,039,194
<b>Total Cost of Unreimbursed Direct Medical Care Svcs</b>	<b>\$ 160,878,101</b>	<b>\$ 186,463,811</b>

#### **B. Benefits for Vulnerable Populations**

*Definition: Services and support provided to at-risk seniors and children, the indigent, uninsured/underinsured and homeless to facilitate access to preventive and immediate medical care services.*

Community Health Services	\$ 1,692,496	\$ 2,017,364
Subsidized Clinical Specialty Services	\$ 224,727	\$ 175,298
Cash and In-Kind Contributions	\$ 7,803,954	\$ 6,514,699
Community Benefit Operations	\$ 1,185,896	\$ 1,276,674
<b>Total Benefits for Vulnerable Populations</b>	<b>\$ 10,907,073</b>	<b>\$ 9,984,035</b>

#### **C. Benefits for the Broader Community**

*Definition: Health education, prevention and screening programs, information and referral services, and supportive services available to community residents.*

Community Health Services	\$ 493,998	\$ 359,601
Health Profession Education	\$ 219,272	\$ 183,517
Subsidized Clinical Specialty Services	\$ 93,621	\$ 87,212
Cash and In-Kind Contributions	\$ 2,323,961	\$ 3,730,233
<b>Total Benefits for the Broader Community</b>	<b>\$ 3,130,852</b>	<b>\$ 4,360,563</b>

Total Community Benefit and Economic Value	174,916,026	200,808,409
--	-------------	-------------

<b>Total Community Benefit and Economic Value (excluding Medicare Cost of Unreimbursed Care)</b>	<b>74,345,692</b>	<b>78,769,215</b>
--	-------------------	-------------------

#### **Notes:**

*\*The CY 2022 year included 12 months: January 1, 2022-December 31, 2022*

## *APPENDIX C*

### **Benefits for Vulnerable Populations**

### **Net CB Expenditure**

#### ***Community Health Services***

Mental Health Center-Community Health	\$ 1,159,865
Center for Healthy Living-Community Health	\$ 528,700
Community Nurse Navigation-Community Health	\$ 328,799
<b>Total Community Health Services</b>	<b>\$ 2,017,364</b>

#### ***Subsidized Clinical Specialty Services***

ECU Call Panel Fees for Uninsured Patients (Southern CA Hospitalists)	\$ 175,298
<b>Total Subsidized Clinical Specialty Services</b>	<b>\$ 175,298</b>

#### ***Cash and In-Kind Contributions***

Access California Services	\$ 75,000
Age Well Senior Services	\$ 75,000
Alzheimer's Family Services Center	\$ 2,039,699
Alzheimers Orange County	\$ 60,000
American Academy of Pediatrics: Clinic in the Park	\$ 50,000
Bracken's Kitchen	\$ 75,000
Braille Institute	\$ 25,000
Build Futures	\$ 35,000
Casa Teresa	\$ 25,000
Child Guidance Center, Inc / Strong Families, Strong Children	\$ 25,000
CHOC Foundation-Breathmobile Program	\$ 50,000
City of Costa Mesa-Transportation	\$ 50,000
City of Huntington Beach-Transportation	\$ 50,000
City of Newport Beach-Oasis Senior Center-Transportation	\$ 50,000
Community Action Partnership of Orange County	\$ 25,000
CIELO (Community for Innovation, Entrepreneurship, Leadership & Opportunities)	\$ 60,000
Community Health Initiative of OC	\$ 25,000
Community Senior Serve Inc	\$ 50,000
Council on Aging Orange County	\$ 110,000
Families Forward	\$ 225,000
Friendship Shelter	\$ 25,000
Girls Inc	\$ 100,000
Goodwill of Orange County	\$ 25,000
Healthy Smiles for Kids OC	\$ 50,000
Human Options	\$ 50,000
Hurtt Family Health Clinic	\$ 25,000
Innovative Housing Opportunities	\$ 25,000

Irvine Adult Day Health Services-Transportation	\$	50,000
Irvine Children's Fund	\$	25,000
Irvine Public Schools Foundation	\$	25,000
Kiwanis Costa Mesa	\$	10,000
Korean Community Services Inc	\$	50,000
Laguna Beach Seniors, Inc (The Susie Q)	\$	25,000
Latino Health Access	\$	65,000
Laurel House- Hope Harbor	\$	25,000
Mariposa Women and Family Center	\$	25,000
Mary's Shelter	\$	25,000
Mercy House	\$	25,000
Miracles for Kids	\$	25,000
MOMS Orange County	\$	100,000
National Alliance of Mental Health (NAMI)	\$	125,000
Newport Mesa Unified School District	\$	245,000
OMID Multicultural Institute for Development	\$	25,000
One OC: Cancer Kinship	\$	25,000
One OC: Kid Healthy	\$	25,000
Orange County Community Housing Corp	\$	25,000
Orange County United Way	\$	25,000
Pediatric Adolescent Diabetes Research Education Foundation	\$	50,000
People for Irvine Comm Health/211 Orange County	\$	50,000
Phoenix House Orange County Inc	\$	25,000
Phoenix Multisport Inc, DBA The Phoenix	\$	10,000
Project Hope Alliance	\$	25,000
Project Self Sufficiency	\$	35,000
Providence Speech and Hearing Center- Low Income Program	\$	100,000
Public Law Center	\$	120,000
Save Our Youth (SOY)	\$	50,000
Second Harvest Food Bank	\$	50,000
Seegerstrom Center for the Arts- Childrens with Disabilities Program	\$	25,000
SENECA Family of Agencies	\$	25,000
Serving Kids Hope	\$	30,000
Serving People in Need (SPIN)	\$	50,000
Shanti Orange County	\$	25,000
Share Our Selves Corporation	\$	960,000
Shoes That Fit	\$	10,000
South County Outreach	\$	25,000
Susan G Komen	\$	25,000
The Cambodian Family	\$	50,000
The Purpose of Recovery	\$	25,000
The Wooden Floor	\$	25,000
TIYYA Foundation	\$	15,000
United Cerebral Palsy Association of OC	\$	50,000
Veterans Legal Institute	\$	25,000

Vietnamese American Cancer Foundation	\$	25,000
Waymakers (formerly Community Services Program)	\$	35,000
Wellness and Prevention Center	\$	25,000
Wiseplace	\$	25,000
Young Lives Redeemed	\$	35,000
Youth Employment Services	\$	40,000
<b>Total Cash and In-Kind Contributions</b>	<b>\$</b>	<b>6,514,699</b>

**Community Benefit Operations**

Community Health Department Operations	\$	816,947
Community Health Needs Assessment	\$	80,000
Dedicated Staff	\$	379,727
<b>Total Community Benefit Operations</b>	<b>\$</b>	<b>1,276,674</b>

**Total Benefits for Vulnerable Populations    \$            9,984,035**

**Benefits for the Broader Community****Net CB Expenditure*****Community Health Services***

Community Education and Outreach (various Hoag departments)	\$	30,292
Community Flu Immunization Clinics	\$	301,324
Project Wipeout	\$	27,985
<b>Total Community Health Services</b>	<b>\$</b>	<b>359,601</b>

***Health Professions Education***

Health Scholars Volunteer Program	\$	140,600
Care Management Internships	\$	16,875
Rehab Therapy Internships	\$	13,847
HOI Internships	\$	12,195
<b>Total Health Professions Education</b>	<b>\$</b>	<b>183,517</b>

***Subsidized Clinical Specialty Services***

ETOH/Psych/Ancillary Patient Transfer Program	\$	87,212
<b>Total Subsidized Clinical Specialty Services</b>	<b>\$</b>	<b>87,212</b>

***Cash and In-Kind Contributions***

Be Well Foundation/MIND OC	\$	1,000,000
Big Brother Big Sisters Of Orange County	\$	50,000
Charitable Ventures of OC: Project Kinship	\$	25,000
Charitable Ventures of OC: Orange County Grantmakers/HFPOC	\$	19,000
CHOC Pediatric Diabetes Services at the Allen Diabetes Center	\$	1,531,244
Crime Survivors Inc	\$	40,000
Epilepsy Support Network	\$	35,000
In-Kind Office Lease/Meeting/Parking Space for Non-Profits	\$	804,989
LGBTQ Center OC	\$	50,000
Orange County Bar Foundation	\$	50,000
Orange County Human Relations	\$	75,000
Orange County Asian and Pacific Islander Community	\$	25,000
Radiant Health Centers/formerly AIDS Service Foundation	\$	25,000
<b>Total Cash and In-Kind Contributions</b>	<b>\$</b>	<b>3,730,233</b>

**Total Benefits for the Broader Community    \$                    4,360,563**

*Prepared By:*

**Michael Rose, DrPH, LCSW**  
**Director, Community Benefit & Department of Community Health**  
**Telephone: (949) 764-6278 Email: [Michael.Rose@hoag.org](mailto:Michael.Rose@hoag.org)**

**Minzah Z. Malik, MPH, MBA**  
**Manager, Community Benefit Program**  
**Telephone: (949) 764-6597 Email: [Minzah.Malik@hoag.org](mailto:Minzah.Malik@hoag.org)**

**Lauren Tabios, MPH, MBA**  
**Supervisor, Community Benefit Program**  
**Telephone: (949) 764-5321 Email: [Lauren.Tabios@hoag.org](mailto:Lauren.Tabios@hoag.org)**