COMMUNITY BENEFIT UPDATE AND PLAN

2019

Submitted to:

The Office of Statewide Health Planning and Development
Healthcare Information Division
Accounting and Reporting Systems Section
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Cedars-Sinai’s role as a nonprofit academic medical center encompasses a breadth of community benefit activities that reflect a longstanding commitment to helping those in greatest need. Cedars-Sinai spent $673,478,000 in FY 2019 on services and programs that increase access to medical care for individuals and families who live in poverty, are uninsured or underinsured, enabling people of all ages to lead healthier lives.

Cedars-Sinai provides a complete spectrum of medical services and is considered one of the leading specialty referral centers for the region. In addition to inpatient care in all major specialties, Cedars-Sinai offers a broad range of services to meet patient needs along the continuum of care. Cedars-Sinai is a Level I trauma hospital and is one of 15 trauma hospitals within the County. It is of great importance to our community. A multitude of departments throughout the hospital provide continuous readiness and excellent care, all of which contribute in a significant way to saving the lives of our trauma patients.

In fiscal year 2019, Cedars-Sinai counted over 168,000 hospital-based patient discharges – both inpatient and outpatient - for individuals who receive care through Medi-Cal (California’s Medicaid insurance program) or through dual eligibility, that is, insurance that deems individuals eligible for both Medicare and Medi-Cal. On average, 36.8% of Cedars-Sinai’s Medicare population are dual eligible - insured through both Medicare and Medi-Cal based on financial indigency. This places Cedars-Sinai in the highest tier of hospitals with respect to patients who have elevated social needs and higher risk for readmission. Additionally, Cedars-Sinai cares for more elderly patients than any other hospital in California as the largest Medicare provider in the state. These patients often have multiple, complex illnesses requiring highly specialized care. In total, 45% of Cedars-Sinai’s patient population is eligible for either Medicare or Medi-Cal.

Community benefit includes the unreimbursed cost of caring for Medi-Cal and Medicare patients; hundreds of free community education and medical screening and immunization programs that address major health issues such as heart disease, type 2 diabetes and obesity; research focused on advancing population health and improving healthcare delivery; and training that helps alleviate the nation’s shortage of healthcare professionals.

Cedars-Sinai is one of the largest nonprofit academic medical centers in the U.S., with 866 licensed beds, over 2,300 physicians on medical staff, more than 2,700 nurses and thousands of other healthcare professionals, staff and volunteers. In addition, Cedars-Sinai serves the community through a medical network committed to seamless coordination of patient care between primary and specialty physicians.

Cedars-Sinai is an academic medical center with a world-renowned faculty and extensive, highly competitive training programs for residents and fellows in more than 80 specialty and subspecialty areas. Medical education has been a core mission of the Medical Center since its inception. Our commitment is to provide graduate medical education programs that enable physicians in training to develop personal, clinical and professional competence under the guidance and supervision of
the faculty and staff. We also provide advanced research training for postdoctoral scientists, programs that enable nurses to develop specialized skills and advance in their careers, and training for allied health professionals such as clinical laboratory scientists. Learning takes place in the most advanced facilities in the world with state-of-the-art simulation and training equipment and the latest medical technology. Medical residency programs include:

- anesthesiology
- diagnostic Radiology
- general surgery
- internal medicine/primary care pathways
- neurologic surgery
- neurology
- obstetrics and gynecology
- orthopaedic surgery
- otolaryngology
- partnerships for pediatric training
- pathology and laboratory medicine
- pharmacy
- podiatric surgery
- radiation oncology
- thoracic surgery
- urology
- vascular surgery

As a global leader in medical research and care, Cedars-Sinai generates lifesaving discoveries that benefit patients suffering from heart disease, brain disorders, cancer and innumerable other conditions. Cedars-Sinai also pioneers research that improves the quality, safety and efficiency of healthcare delivery. The more than 2,100 active research projects currently underway encompass basic, translational, clinical and health services research. Scientific leaps forward include using cardiac stem cells to repair damaged hearts, developing a vaccine to fight the most aggressive malignant brain tumors and developing more effective anti-cancer drugs aimed at specific molecular targets.

Cedars-Sinai is ranked nationally as one of the 10 best hospitals in the United States, according to U.S News & World Report's "Best Hospital 2018-2019." Cedars-Sinai ranked No. 8 in a select group of 20 Honor Roll hospitals and also had 12 medical specialties ranked nationally in the U.S. News annual rankings.
II. ORGANIZATIONAL COMMITMENT

The clearest demonstration of Cedars-Sinai’s commitment to its community is the involvement and dedication of the Board, Executive Management, physicians and staff in community benefit. Community benefit activities are delivered throughout Cedars-Sinai departments, with many specialists contributing their expertise in specific areas.

The Cedars-Sinai Board of Directors provides organizational leadership in fostering Cedars-Sinai’s commitment to community benefit. Cedars-Sinai’s Community Benefit Committee – a standing committee of the Board of Directors – functions as an oversight and policy-making body for Cedars-Sinai’s community benefit commitments, efforts and strategic alignment with community needs. Community Benefit Committee members meet quarterly to review the status and progress of Cedars-Sinai’s community benefit services, programs and activities. Additionally, Community Benefit Committee members assure organizational compliance with relevant community benefit legislation. The Community Benefit Committee is chaired by a member of the Board of Directors. Its membership is made up of Directors, as well as members of the Cedars-Sinai Board of Governors.

Cedars-Sinai’s commitment to improve the health of the community – the fourth leg of Cedars-Sinai’s mission – has been fully integrated into the governance, executive management and system-wide goals of the organization. Senior management plays a key leadership role in supporting community benefit and allocates significant human and financial resources to this end. The following community benefit oversight responsibilities within the organization are as follows:

**Executive Committee of the Board of Directors**
- Reviewing and approving the Community Benefit Update and Plan annually
- Reviewing and approving the Community Health Needs Assessment and Implementation Strategy every three years

**Community Benefit Committee (Board Committee)**
- Engage in Ongoing Committee Education
- Approve Legally Required Community Benefit Documents
- Affirm Community Benefit Priorities
- Advise on Community Benefit Systems and Processes
- Advise on Community Benefit Program Evaluations
As a leading nonprofit academic medical center, Cedars-Sinai serves patients from the local community as well as from throughout the nation and the world. Most patients come from Southern California, within approximately 10 miles of the Medical Center. The population characteristics below describe Cedars-Sinai’s Community Benefit Service Area. The Community Benefit Service Area includes large portions of Service Planning Areas (SPAs) 4 (Metro), 5 (West) and 6 (South), and a smaller portion of SPA 8 (South Bay) in Los Angeles County. The Community Benefit Service Area includes 52 zip codes, representing 25 cities or neighborhoods. To determine the Community Benefit Service Area, Cedars-Sinai takes into account the zip codes of inpatients discharged from the hospital; community need based on the Community Health Needs Assessment process; and long-standing community programs and partnerships.

### Population Characteristics

<table>
<thead>
<tr>
<th>Population Characteristics</th>
<th>Cedars-Sinai Community Benefit Service Area</th>
<th>Los Angeles County</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Population (# of persons)</td>
<td>1,814,274</td>
<td>10,057,155</td>
</tr>
<tr>
<td><strong>Race/Ethnicity</strong></td>
<td><strong>Percent</strong></td>
<td><strong>Percent</strong></td>
</tr>
<tr>
<td>Hispanic/Latino</td>
<td>49%</td>
<td>48%</td>
</tr>
<tr>
<td>White</td>
<td>20%</td>
<td>27%</td>
</tr>
<tr>
<td>Black/African American</td>
<td>18%</td>
<td>8%</td>
</tr>
<tr>
<td>Asian</td>
<td>10%</td>
<td>14%</td>
</tr>
<tr>
<td>Native Hawaiian/Pacific Islander</td>
<td>0.1%</td>
<td>0.2%</td>
</tr>
<tr>
<td>American Indian/Alaskan Native</td>
<td>0.1%</td>
<td>0.2%</td>
</tr>
<tr>
<td>2+ Races</td>
<td>2.4%</td>
<td>2.5%</td>
</tr>
<tr>
<td><strong>Age</strong></td>
<td><strong>Percent</strong></td>
<td><strong>Percent</strong></td>
</tr>
<tr>
<td>0-17</td>
<td>22%</td>
<td>27%</td>
</tr>
<tr>
<td>18-24</td>
<td>12%</td>
<td>10%</td>
</tr>
<tr>
<td>25-64</td>
<td>56%</td>
<td>56%</td>
</tr>
<tr>
<td>65+</td>
<td>10%</td>
<td>12%</td>
</tr>
<tr>
<td><strong>Socioeconomic Status</strong></td>
<td><strong>Percent</strong></td>
<td><strong>Percent</strong></td>
</tr>
<tr>
<td>Families in poverty</td>
<td>26%</td>
<td>18%</td>
</tr>
</tbody>
</table>

Data Sources: U.S. Census Bureau, American Community Survey, 2012-2016, S1701. [http://factfinder.census.gov]
Cedars-Sinai conducted a state and federally-mandated Community Health Needs Assessment (CHNA). This legislation requires hospitals to assess and prioritize the health needs of the communities they serve; and develop plans and implementation strategies to address health focus areas. The most recent CHNA was completed in 2019. The data below is a summary of Cedars-Sinai’s 2019 CHNA.

**Community Benefit Service Area: CHNA 2019**

Cedars-Sinai is located at 8700 Beverly Boulevard, Los Angeles, California 90048. The Community Benefit Service Area includes large portions of Los Angeles County Service Planning Areas (SPAs) 4 (Metro), 5 (West) and 6 (South), and a smaller portion of SPA 8 (South Bay). The Community Benefit Service Area includes 52 zip codes, representing 25 cities or communities.

**Data Collection: CHNA 2019**

**Secondary Data Collection**

Secondary data were collected from a variety of local, county, and state sources to present community demographics, social and economic factors, health care access, birth characteristics, leading causes of death, chronic disease, health behaviors, mental health and substance abuse and preventive practices. Analyses were conducted at the most local level possible for the Community Benefit Service Area, given the availability of the data.

Sources of data include Nielsen Claritas accessed through the Healthy Communities Institute, the U.S. Census American Community Survey, the California Health Interview Survey, the California Department of Public Health, the California Employment Development Department, the Los Angeles County Health Survey, the Los Angeles Homeless Services Authority, the Uniform Data System, the National Cancer Institute, the California Department of Education, and others. When pertinent, these data sets are presented in the context of Los Angeles County and California State, framing the scope of an issue as it relates to the broader community.

**Primary Data Collection**

The analysis of secondary data yielded a preliminary list of significant health needs, which then informed primary data collection. Primary data were obtained through interviews with 39 key community stakeholders, public health, and service providers, members of medically underserved, low-income, and minority populations in the community, and individuals or organizations serving or representing the interests of such populations. The primary data collection process was designed to validate secondary data findings, identify additional community issues, solicit information on disparities among subpopulations, ascertain community assets potentially available to address needs and discover gaps in resources. Given shared service areas, Cedars-Sinai partnered with UCLA Health, Kaiser Foundation Hospital-West Los Angeles and Providence St. John’s Health Center to conduct the interviews.
Identification and Prioritization of Significant Health Needs

The following criteria were used to identify significant health needs:
1. The size of the problem (relative portion of population afflicted by the problem)
2. The seriousness of the problem (impact at individual, family, and community levels)

The community stakeholders were then asked to prioritize the significant health needs according to highest level of importance in the community. The total score for each significant health need was divided by the total number of responses for which data were provided and resulted in an overall average for each health need. Among the interviewees, mental health, housing and homelessness, and substance use and misuse were ranked as the top three priority needs in the service area. A brief description of the significant health needs follows listed in priority order:

<table>
<thead>
<tr>
<th>Priority Ranking</th>
<th>Health Need</th>
<th>Summary Data</th>
</tr>
</thead>
</table>
| 1                | Mental health                      | • In SPA 4, 9.4% of adults were determined to have likely experienced serious psychological distress in the past year. 7.2% of adults in SPA 5 and 8.7% of adults in SPA 6 experienced serious psychological distress in the past year.  
• Among those who sought mental/emotional help, SPA 5 residents (65%) were more likely to receive help than those in SPA 4 (54.4%) and SPA 6 (54.7%).  
• Stakeholders noted that there continues to be a stigma associated with mental health care, which decreases access to needed services. |
| 2                | Housing and homelessness           | • Data from the annual Greater Los Angeles Homeless Count show a large increase in homelessness from 2015 to 2018.  
• Among the homeless population, 31.7% in SPA 4, 26.3% in SPA 5 and 22.6% in SPA 6 are chronically homeless.  
• Stakeholders noted there is not an adequate supply of housing. “Even if we had the supply, many don’t have the means to live here. For some a financial set back would likely put them on the street. They live in a very tenuous situation. People who are forced to spend too much of their income on housing, live in substandard housing, live in garages, live six to a room, it is a crisis.” |
| 3                | Substance use and misuse           | • In SPA 4, 20% of the population has misused prescription drugs. 21% of SPA 5 residents and 18% of SPA 6 residents have misused prescription drugs.  
• In SPA 4, 13.9% of adults smoke cigarettes. 9.9% of SPA 5 adults smoke and 13.6% of adults in SPA 6 smoke. SPA 4 and SPA 6 rates of smoking do not achieve the Healthy People 2020 objective (12%).  
• 8.8% of teens in SPAs 4, 5, and 6 have tried an e-cigarette.  
• A stakeholder commented there is so much media coverage about opioid use but there are many other issues that need attention too. It’s eclipsing other issues like meth and alcohol use. |
<p>| 4                | Access to health care              | • Health insurance coverage is a key component to accessing health care. The Community Benefit Service Area has 79.0% insurance coverage across all ages, which is lower than county (84.1%) and state (87.4%) rates of insurance |</p>
<table>
<thead>
<tr>
<th>Priority Ranking</th>
<th>Health Need</th>
<th>Summary Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Health Need</td>
<td><strong>Coverage.</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• 92.8% of children in the Community Benefit Service Area are insured.</td>
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<tr>
<td></td>
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<td>• Community stakeholders commented there is not enough accessible health care. “Many times, people have to wait a very long time to see a doctor. Once they do get an appointment, the challenge is transportation. We’ve noticed the number one reason people tend to miss appointments is they lack transportation.”</td>
</tr>
<tr>
<td>5</td>
<td>Dental care</td>
<td>• 14.5% of children in SPA 4, 24.5% in SPA 5 and 13.3% of children in SPA 6 have never been to a dentist.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• 40.3% of adults in SPA 4, 28.9% of adults in SPA 5 and 56.9% of adults in SPA 6 have not obtained dental care in the past year.</td>
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<tr>
<td></td>
<td></td>
<td>• Stakeholders noted dental care is one of the health services that is challenging to access or missing in the community.</td>
</tr>
<tr>
<td>6</td>
<td>Diabetes</td>
<td>• Diabetes is the fourth leading cause of death in the Community Benefit Service Area.</td>
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<tr>
<td></td>
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<td>• Among adults in SPA 4, 10.1% have been diagnosed with diabetes, 6.3% in adults in SPA 5, and 12.7% of adults in SPA 6 reported they have been diagnosed with diabetes.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Stakeholders noted that a lack of healthy food, medications and safe neighborhoods make it difficult to effectively manage chronic diseases such as diabetes.</td>
</tr>
<tr>
<td>7</td>
<td>Preventive practices</td>
<td>• The Healthy People 2020 objective is 70% of the population to receive a flu shot. 38.4% of SPA 4 adults, 45.8% of SPA 5 adults and 30.3% of SPA 6 adults received a flu shot.</td>
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<tr>
<td></td>
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<td>• The Healthy People 2020 objective for mammograms is that 81.1% of women, ages 50-74 years, have a mammogram in the past two years. In SPA 4, 78.5% of women in the target demographic have had a mammogram in the past two years. 82% of SPA 5 women had the required mammogram, and 77.6% of women in SPA 6 had a mammogram.</td>
</tr>
<tr>
<td>8</td>
<td>Heart disease and stroke</td>
<td>• Heart disease is the top leading cause of death in the Community Benefit Service Area and stroke is the third leading cause of death.</td>
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<td></td>
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<td>• A co-morbidity factor for heart disease is hypertension (high blood pressure). In SPA 4, 27.7% of adults are diagnosed with high blood pressure. 24.3% of adults in SPA 5 and 32.7% of adults in SPA 6 have been diagnosed with high blood pressure.</td>
</tr>
<tr>
<td>9</td>
<td>Overweight and obesity</td>
<td>• 33.7% of SPA 4 adults, 34.4% of SPA 5 adults and 36.3% of adults in SPA 6 are overweight.</td>
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<tr>
<td></td>
<td></td>
<td>• In SPAs 4, 5 and 6 combined, 21.6% of teens are overweight and 13.2% of children are overweight.</td>
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<tr>
<td></td>
<td></td>
<td>• Adult overweight and obesity by race and ethnicity indicate over three-quarters of the adult population among African Americans in SPA 4 (79.4%) and SPA 6 (78.1%) are overweight or obese. Area Latinos also have high rates of overweight and obesity.</td>
</tr>
<tr>
<td>Priority Ranking</td>
<td>Health Need</td>
<td>Summary Data</td>
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<td>-----------------</td>
<td>-------------------------------------------------</td>
<td>-----------------------------------------------------------------------------------------------------------------------------------------------</td>
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</tbody>
</table>
| 10              | Cancer                                          | • Cancer is the second leading cause of death in the Community Benefit Service Area.  
• Rates of newly diagnosed breast cancer ranged from a low of 79.3 per 100,000 women in City Council District 15 to a high of 193.5 in Beverly Hills.  
• Rates of newly diagnosed colon cancer ranged from a low of 31.5 per 100,000 persons in LA City Council District 15 to a high of 48.6 per 100,000 persons in West Hollywood. |
| 11              | Community safety (crime and violence)           | • When asked whether they perceived their neighborhood to be safe from crime, 40.3% of SPA 6 adults felt safe from crime, compared to 84.0% of respondents countywide.  
97.4% of adults living in SPA 5 felt safe from crime and 74.3% of SPA 4 respondents perceived their neighborhoods to be safe.  
• Community stakeholders noted if a community doesn’t feel safe and secure it impacts residents’ health and wellbeing. |
| 12              | Food insecurity                                  | • 30.5% of adult residents of SPA 5, 32% of SPA 4, and 32.4% of SPA 6 adults, living below 300% of the Federal Poverty Level, reported food insecurity. These are higher rates of food insecurity than found in the county (29.2%).  
• A community stakeholder noted, “We live in a food desert. We do not have enough access to healthy food. There are plenty of liquor stores but not enough grocery stores and farmers markets.” |
| 13              | Sexually transmitted infections (STIs)          | • Rates of STIs continue to rise. In the Community Benefit Service Area, SPA 6 has the highest area rate of Chlamydia (941 per 100,000 persons). SPA 4 has the highest area rates of Gonorrhea (400 per 100,000 persons), and early syphilis, which includes primary and secondary syphilis, and early latent (103 per 100,000 persons).  
• Stakeholders noted there is insufficient funding for STI testing and treatment. “We have effective interventions for STIs but we lack resources.” |
| 14              | Asthma                                          | • In SPA 4, 10.9% of the population has been diagnosed with asthma. In SPA 5, 13.1% of the population has asthma, and in SPA 6, 9.2% of the population has asthma.  
• Among youth in SPA 4, 5.9% have been diagnosed with and currently have asthma, 6.7% of youth in SPA 5 have asthma, and 7.8% of youth in SPA 6 have asthma. |
Implementation Strategy: Health Focus Areas

Cedars-Sinai chose health focus areas, taking into account the capacity to impact community needs, the strength of community partnership organizations and the match with Cedars-Sinai’s organizational strategic planning efforts.

Access to Care:
Community Benefit efforts focus on increasing and supporting access to essential health care services for the underserved through direct programs and partnerships with local community-based organizations. Programs, partnerships and strategies address the following access-to-care priority health needs:

- Primary care
- Mental health
- Preventive care

Chronic Disease:
Community Benefit efforts focus on the prevention of chronic health conditions and their underlying risk factors. Programs, partnerships and strategies address the following priority health needs related to chronic disease:

- Cancer
- Cardiovascular disease
- Diabetes
- Overweight and obesity: healthy food choices and physical activity

Homelessness:
Community Benefit efforts focus on connecting people experiencing homelessness to community-based programs and services as well as building strategies to improve the health and housing stability of homeless individuals.

Report Adoption, Availability and Comments
This CHNA report was adopted by the Cedars-Sinai board of directors in May, 2019. The Implementation Strategy was adopted by the Cedars-Sinai board in September, 2019.


Written comments on this report can be submitted through Cedars-Sinai’s “Send a Message to the Community Team” web page: https://www.cedars-sinai.org/community/send-a-message.html
Cedars-Sinai’s wide-ranging efforts to improve the community’s health reflect a great deal of study and planning to determine how we can most effectively translate our commitment into action that will ensure a healthier future for those in greatest need. As part of the $673,478,000 Community Benefit contribution, Cedars-Sinai engages in a variety of approaches ranging from investing in capacity building in vulnerable communities to large scale provision of needed services.

The programs outlined below are highlights of Cedars-Sinai’s Directed Community Benefit programs, which are strategic investments implemented to meet specific community needs.

**DIRECTED COMMUNITY BENEFIT PROGRAMS**

1. **Healthy Habits**

The Cedars-Sinai Healthy Habits programs provide nutrition education and obesity prevention by helping children and families learn about healthy eating and physical activity with a wide range of education, capacity building and technical assistance programs run by trained health educators, reaching elementary school students, parents, and families in underserved communities. The overall goal of Healthy Habits is to reduce the risks and impacts of obesity in underserved communities. Programs include an evidence-based and evaluated curriculum for 2nd, 3rd and 4th grades, Healthy Habits for Families, Cooking Healthy Habits, Building Healthy Habits, Healthy Habits for Teachers, Step & Sweat walking clubs, Exercise in the Park, summer programs and school-wide events. Healthy Habits partners with 23 elementary and middle schools in the Mid-City neighborhood and surrounding communities to provide programs.

**Healthy Habits Accomplishments - Fiscal Year 2019:**

- Expanded to six additional elementary schools in Koreatown resulting in an increase of 43% of students taught in Healthy Habits
- Established the Healthy Habits Internship for graduate-level public health (MPH) students. Six MPH students interned with Healthy Habits for over 2,600 hours
- Taught 1,727 individual lessons/workshops for a total 38,845 participant encounters, including 4,599 elementary students through Healthy Habits programs in schools
- Reached 483 parents from schools through Healthy Habits parent workshops and 106 individuals through Exercise in the Park
- Administered the Day in the Life Questionnaire (DILQ) electronically to 3rd and 4th graders eliminating hours of manual data entry
- Obtain year three DILQ data for the first cohort for Healthy Habits evaluation. Collected DILQ data from prior to implementation of Healthy Habits at expansion schools as control data for analysis
- Partnered with Share & Care to provide a joint workshop for parents on stress and communication
- Trained Los Angeles Unified School District Wellness Staff in Healthy Habits for Families parent workshop. Healthy Habits for Families was implemented in at least 10 schools.
- Coordinated all-school events at partner schools including:
  - Fit Heart with the Los Angeles Rams at Charles H. Kim Elementary
- NBA Fitness Week with Los Angeles Clippers at Cahuenga Elementary
- Fit Heart at Shenandoah Street Elementary
- Fit Heart at Virginia Road Elementary
- Fit Heart at Mid-City’s Prescott School
- Fit Heart at Sixth Avenue Elementary

- Participated in events with community partners and partner schools:
  - LA’s BEST Family Health Festival
  - Community Green Day with Garden School Foundation at 24th Street Elementary
  - Marvin Elementary Walk-a-thon and Nutrition Fair
  - Field Days at Wilshire Park Elementary

**Healthy Habits Measurable Impacts – Fiscal Year 2019:**

After participating in Healthy Habits programs:

- 84% of second grade students are active for at least 30 minutes every day
- 89% of second grade students eat at least one serving of fruit every day
- 77% of second grade students eat at least one serving of vegetable every day
- 71% of elementary families do physical activity together as a family
- 75% of second grade students made a healthy snack
- 74% of parents in Healthy Habits for Families include foods from the five food groups in their daily meals
- 90% of parents in Healthy Habits for Families plan their meals in advance
- 91% of parents in Cooking Healthy Habits changed the way they prepare foods
- 92% of parents in Cooking Healthy Habits have tried the recipes in the workshop at home
- 78% of participants in Exercise in the Park exercise at least three days a week for at least 30 minutes each time

**Healthy Habits, Looking Forward - Fiscal Year 2020:**

- Due to its successful pilot, Healthy Habits was awarded a two-year grant from the Hearst Foundation to fund the Healthy Habits Internship program. Six MPH students from UCLA Fielding School of Public Health and Cal State LA will complete their internship with Healthy Habits.
- With renewed funding from Cedars-Sinai Community Benefit Giving Office, LAUSD will expand Healthy Habits for Families workshops to 150 school sites reaching a potential 4,500 parents.
- Develop training curriculum for the Healthy Habits elementary curriculum
- Finalize Healthy Habits elementary curriculum toolkit.
- Enter year four of the four-year longitudinal evaluation of Healthy Habits curriculum for elementary students.
- Provide Healthy Habits for Teachers training to expansion schools.
- Hosting or sponsoring school-wide events to foster a culture of health in partner schools, including Fit Heart in celebration of American Heart Healthy Month, Let’s Jump! – encouraging student physical activity, walk-a-thons and other school fundraisers.
- Collaborate with Cedars-Sinai Communications and Marketing team to host school-wide events featuring the Los Angeles Clippers and Los Angeles Rams.
2. Community Health and Education

Cedars-Sinai is committed to improving the number of quality life years for adults and seniors in our community. The provision of health promotion, prevention, education, and screening services has been proven, according to the Center for Disease Control, to improve quality life years. In Fiscal Year 2019, the Cedars-Sinai Community Health and Education department provided a total of 22,755 participant encounters in adult-focused community benefit programs, such as clinical screenings, educational programs, community health fairs, and immunization clinics. The extensive programs, provided by Cedars-Sinai’s registered nurses, physicians, dietitians, social workers, and other healthcare professionals, occur in communities such as Mid City, Hollywood/West Hollywood, West Los Angeles, Koreatown, and South Los Angeles. Health Services are provided at Senior Centers, churches, synagogues as well as at the Medical Center main campus.

Community Health and Education Accomplishments - Fiscal Year 2019

Development, implementation, and coordination of:

- Cardiovascular disease, Type 2 diabetes, and hypertension-related preventive programs and services
- Cancer awareness, education, and screening programs
- Influenza immunization programs
- Health promotion and disease-prevention programs
- Health information handouts for adults and seniors
- Outreach/Networking with community partners
- Health education lectures at Cedars-Sinai and community sites

<table>
<thead>
<tr>
<th>PROGRAMS/SERVICES</th>
<th>FY 2019 participant encounters</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Health Education</strong>: Injury Prevention, Health Promotion, Disease Prevention</td>
<td>9264</td>
</tr>
<tr>
<td><strong>Health Lectures</strong></td>
<td>1038</td>
</tr>
<tr>
<td><strong>Health Screenings</strong>: Diabetes, Cholesterol, Blood Pressure Screening</td>
<td>7263</td>
</tr>
<tr>
<td><strong>Other Screenings</strong>: Prostate Cancer, Podiatry, Pulmonary, Skin Cancer, Colorectal Cancer, BMI, Waist Measurement, Body Composition, All of Us, Quality of Life, Geriatric Fitness Testing, Clinical Breast Exams, Breast Health Screenings, and Cancer Risk Assessments</td>
<td>3365</td>
</tr>
<tr>
<td>Seasonal Flu Immunizations</td>
<td>839</td>
</tr>
<tr>
<td>Emergent Triage</td>
<td>47</td>
</tr>
<tr>
<td>Clinical Counseling</td>
<td>939</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>22,755</strong></td>
</tr>
</tbody>
</table>
Cedars-Sinai’s Community Health and Education programs:
- Reached thousands of underserved Los Angeles County residents in the Community Benefit Service area.
- Expanded to provide clinical screening services and health promotion, health education in new service areas such as Hollywood, Culver City, Marina del Rey, and the San Fernando Valley.
- Provided health education and prevention services to promote increased awareness of health and healthy behaviors.
- Received high satisfaction scores, are well-received, and are perceived to be of excellent quality by the participants.
- Reached out to the community to empower vulnerable adults to live healthy lives.

Community Health and Education programs are responsive to community needs; and help increase access to reduce barriers to accessing health services for many at-risk and vulnerable residents of the Cedars-Sinai Community Benefit service area.

**Community Health and Education, Looking Forward - Fiscal Year 2020**

- Continue all adult and senior programs will continue in Fiscal Year 2019.
- Continue chronic disease screenings and health promotion education in local senior centers and local faith-based organizations and other community sites.
- In collaboration with the Cedars-Sinai Samuel Oschin Comprehensive Cancer Center, continue to expand community-based cancer education and screening programs for the prevention and early detection of various cancers in underserved populations.

3. **COACH for Kids®**

**Community Outreach Assistance for Children's Health (COACH)**

Cedars-Sinai operates two state-of-the-art mobile medical clinics staffed by an expert team of bilingual English/Spanish nurse practitioners, registered nurses, social workers, dental hygienist, health educators, and other healthcare professionals from Cedars-Sinai Medical Center. COACH preventive services include well-child and immunization clinics for children, diagnosis and treatment of minor illnesses for children, dental screenings and fluoride varnish services for children and adults, Body Mass Index (BMI)/Blood Pressure (BP)/Body Composition screening clinics for adults, nutrition and fitness education, and linkages to health homes.

COACH serves communities in Downtown/Skid Row, Pico-Union/Central Los Angeles, South Los Angeles, Watts, Compton, Inglewood, Crenshaw/Mid-City, and Hollywood/West Hollywood. Healthcare services are provided at WIC Centers, Head-Start Centers, schools, family homeless shelters, and public housing developments and other community-based organizations. Services were expanded this year to include Marina del Rey, Culver City, and the San Fernando Valley.

COACH collaborates with more than 200 public and private community organizations, including the Los Angeles Unified School District, Children’s Institute Inc., the Housing Authority of the City of Los Angeles (HACLA), South Los Angeles Health Projects WIC, Public Health Foundation Enterprises WIC, and Union Rescue Mission. Current supporters of COACH include the Children’s Health Fund.
COACH Accomplishments - Fiscal Year 2019:

<table>
<thead>
<tr>
<th>Services/Programs</th>
<th>FY 2019 Participant Encounters</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical Visits</td>
<td>4,398</td>
</tr>
<tr>
<td>Case Management Visits</td>
<td>1,189</td>
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<tr>
<td>Dental Visits</td>
<td>851</td>
</tr>
<tr>
<td>Mental Health Visits</td>
<td>2,089</td>
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<tr>
<td>Health Education Visits</td>
<td>16,633</td>
</tr>
<tr>
<td>Nutrition Visits</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total FY 2019</strong></td>
<td><strong>25,160</strong></td>
</tr>
</tbody>
</table>

- Collaborated with the Cedars-Sinai Samuel Oschin Comprehensive Cancer Institute (SOCCI) team to facilitate enrollment of community participants in the National Institute of Health (NIH)-funded All of Us Research Program.
- Provided Quarterly Healthy Smiles Dental Screening Clinics for children and parents at Union Rescue Mission.
- Expanded the Neighborhood Health Project, providing monthly BMI/BP/Dental screenings for parents, grandparents and caregivers at six Watts/South Los Angeles housing developments: Jordan Downs, Imperial Courts, Gonzaque, Avalon Gardens, Nickerson Gardens, and Pueblo del Rio.
- Collaborated with community partners, including Watts Healthcare Foundation and the Los Angeles County Department of Public Health (DPH), to provide adult immunizations services for parents, grandparents, and caregivers.
- Continued collaboration with the Cedars-Sinai Samuel Oschin Comprehensive Cancer Institute to expand HPV Education and Immunization Program in underserved communities.
- Continued to provide HAPPI (Healthy Aging Partnerships in Prevention Initiative) education and screening services for low-income African American and Latino adults age 50 plus:
  - Colorectal Cancer Screening
  - Breast Cancer Screening
  - Cervical Cancer Screening
  - Cholesterol Screening
  - Influenza Immunization
  - Pneumococcal Immunization
- Collected data to measure clinical outcomes. Results for FY 2019 include:
  - 73% of sick patients avoided ED admissions
  - 96% of children were protected against vaccine-preventable diseases
  - 28% previously missed opportunity to diagnosis a condition were diagnosed and addressed
  - 100% of children served had Chief Complaint addressed and/or resolved
- Provided consultation, training, and technical support for 32 African-American participating in the First Ladies Health Initiative.
- Coordinated Cedars-Sinai registered nurses from over 40 departments to provide health screenings in underserved communities for children and their parents.
- Provided comprehensive nutrition assessments, counseling and monitoring for overweight and obese children.

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• Continued the COACH 2019 Safe Summer Campaign, which included education for children and families regarding sun protection, water/pool safety, and swimming for health/physical activity.
• Expanded HPV Vaccine education intervention and follow-up processes to improve vaccine uptake for 1st and 2nd doses in pre-adolescent/adolescent children.
• Continued Connections to Care program by establishing new, and strengthening existing, partnerships with Federally Qualified Health Centers: Eisner Health, Saban Community Clinic, THE Clinic, Watts Healthcare Foundation, Central City Clinic, South-Central Family Health Center, R.O.A.D.S. Clinic, UMMA Clinic, and South-Central Regional Center. Partnered to establish a rotation of promotoras and clinic outreach coordinators to improve COACH patients’ connections to primary care medical and dental homes within their communities.
• Collaborated with Cedars-Sinai Community Health and Education team to provide trauma-informed Yoga at Union Rescue Mission.

COACH, Looking Forward - Fiscal Year 2020

• Expand Neighborhood Health Project services for parents, grandparents, and caregivers at Watts and South Los Angeles housing developments.
• Continue Connections to Care to facilitate referral management and improve COACH patients’ connections to primary care medical and dental homes and specialty care within their communities.
• Expand collaboration to bring cancer prevention education and screening services to underserved communities.
• Continue partnership with Union Rescue Mission to bring Mental Health and Oral Health Services to the homeless population.

4. Share and Care

Since 1981, Cedars-Sinai’s school-based mental health programs help victims of trauma, filling crucial needs for prevention, intervention crisis intervention, and training that would otherwise be unmet. Programs and trainings - for children, teachers, parents and school principals - run by licensed mental health practitioners, enhance an at-risk child’s ability to learn in the classroom, change destructive behaviors and envision a brighter and happier future. Share and Care counselors facilitate 12-week group art-therapy curricula that provide a therapeutic environment to improve students’ ability to concentrate on their lessons. Therapy groups focus on trauma, loss and grief, self-esteem, bullying, socialization, anger management, divorce, shyness, students with an incarcerated parent and substance abuse.

Share and Care Accomplishments – Fiscal Year 2019:

• Share and Care programs counted 28,957 total encounters with children, teachers and parents.
• Provided full services at 26 schools (20 Elementary Schools, 5 Middle Schools and 1 High Schools) and partial services at 4 schools.
• Children’s Art Therapy: 955 unduplicated students were seen, 3,403 children’s group art therapy sessions were provided, with a total of 14,300 encounters.
• Parent Workshops: 294 unduplicated parents were seen, 58 parent workshops were provided with a total of 739 encounters plus a total of 2,484 individual parent encounters.
• Teachers: 7,251 individual teacher encounters provided, 17 teacher trainings with 427 teacher encounters.
• Classroom Interventions: 24 classroom interventions were provided totaling 712 students encounters.
• Jointly conducted a half day parent workshop with Healthy Habits for 26 parents.
• Held 6 principals’ meetings in different school locations focusing on unmet needs of the students and parents, self-care, challenging parentings and on team building techniques.
• Provided 3 professional development trainings for a middle school and elementary school.
• Developed a 3-year school-based Associates Training Program for Social Workers, and Marriage Family Therapist graduates.
• Expanded the Share & Care partial services to 6 wait list schools, services consisting of: professional development, resource sharing, parent workshops and participation in the Principals meetings.
• Collaborated with Jordan High School Wellness Council on a monthly basis.
• Created an anxiety curriculum for secondary students.
• Mark Twain Middle School developed a program for students with an incarcerated loved one.

Sample of Share and Care Measurable Impacts - Fiscal Year 2019

• 75% of parents saw improvement in their child’s self-esteem
• 76% of students showed improved self-esteem
• 91% of students showed improved behavior

Share and Care, Looking Forward - Fiscal Year 2020

• Continue site visits for elected officials from Los Angeles City Council and LAUSD Board of Education Members.
• Develop partnership with Los Angeles County Office of Education.
• Expand services into Inglewood Unified Schools District, providing parent workshops at Morningside High School.
• Continue to refine efficient and effective data collection systems, for example piloting the use of iPads for completing all paperwork and down-loading to the server nightly which will allow for the update to the school roster immediately.

5. Grantmaking – Fiscal Year 2019

In fiscal year 2019, Cedars-Sinai more than doubled its annual grantmaking commitment by contributing over $15 million to support over 100 community-based organizations serving vulnerable populations within the community benefit service area. With a new strategic focus on three priority areas: improving access to care, addressing social determinants of health, and enhancing civic engagement, Cedars-Sinai community grants work to break down barriers that affect hundreds of thousands of people within the healthcare safety net.

The Access to Care grantmaking portfolio aims to increase the capacity of organizations to improve access to comprehensive, quality health care services for underserved populations. Access to Care includes the flagship Community Clinic Initiative, focused on bolstering leadership and effectiveness within safety net clinics, and the Behavioral Health Initiative that launched in 2017, with a goal of increasing access to behavioral health services with an emphasis on integration and supportive patient navigation. Cedars-Sinai continued funding for a primary care psychiatry fellowship led by faculty at UC Irvine and UC Davis, as well as added funding for two new programs: 1) a technical assistance program for clinics exploring value-based care models, and 2) a learning collaborative to support clinics in addressing food insecurity and transportation barriers. Additional Cedars-Sinai Access to Care grants include the renewal and growth of
programming in leadership and financial acumen, as well as the development of a self-sustaining behavioral health program for Martin Luther King, Jr. Community Hospital’s local community. The Access to Care portfolio, which includes the two legacy initiatives, totaled over $8.5 million.

As a signal of Cedars-Sinai’s commitment to addressing the homelessness and housing crisis, as well as other “upstream” health factors, Cedars-Sinai launched a Social Determinants of Health grantmaking portfolio. With the goal of increasing the organizations’ capacity to promote healthy environments in which people are born, grow, live, work and age, the Social Determinants of Health grants in fiscal year 2019 focused primarily on supporting organizations addressing homelessness and economic instability. Over $3.8 million in grantmaking was allocated to support more than 20 organizations serving vulnerable populations throughout Los Angeles, and include programs such as vocational training for youth transitioning out of homelessness, an expanded navigator program that connects patients experiencing homelessness to community resources, and the development of a Housing Stability Loan Fund designed to provide immediate housing assistance to stabilize those on the verge of homelessness.

Each year, Cedars-Sinai supports local, regional, and national partners whose missions closely align with Cedars-Sinai’s priorities. In order to enhancing the coordination of these alignment efforts, Cedars-Sinai launched the Civic Engagement grantmaking portfolio, as a maturation of Cedars-Sinai’s historic institutional grants. Civic Engagement grants are broad in scope and scale, funded through strategic partnerships with local community organizations, to increase their capacity to address issues of public concern. Over $2.5 million were disbursed to organizations that align with local city and first responder efforts, such as training field deputies in traumatic casualty care, to supporting Jewish communal organizations through research like the Los Angeles Jewish Community Study to produce data related to the needs, interest, engagement level and demographics of the Jewish population in Los Angeles.

6. Youth Employment and Development (YED) Health Careers Academy

The YED Health Careers Academy is a partnership with the Los Angeles Unified School District, Regional Occupational Program and California Technical Education. The program includes work-site learning at Cedars-Sinai, school-based learning at Fairfax High School and mentoring which is done by employees who are part of the program.

This is two-year program which starts during students’ 11th grade year. Participants earn five elective credits each semester towards graduation. A variety of departments at Cedars-Sinai provide students an opportunity to apply what they learn in the classroom at the work-site while being exposed to careers.

YED Accomplishments – Fiscal Year 2019:

- Redesigned the YED Health Careers Academy with two days of instruction at Fairfax High School and three days of the work experience at Cedars-Sinai.
- Participated in the annual Telemundo La Feria de La Salud 2019. YED Students assist with registration, translation and surveys.
- Students presented year-end projects that highlight careers of interest to Cedars-Sinai staff, parents and school district officials at the YED Showcase.
- Engaged with speakers from internal Cedars-Sinai departments introducing students to various careers.
• Students were trained in e-scooter safety in order to be educational peer ambassadors.
• High School Seniors received CPR certification, toured the research department and attended a series of college application and college readiness trainings. s attended CPR training and received certification.
• Cedars-Sinai staff participated in Fairfax High School’s Career Day. Careers covered were Pediatrics, Infectious Disease, Nursing, Physical Therapy, Public Relations and Human Resources. Over 5,000 students participated.
• Cedars-Sinai’s YED Health Careers Academy was selected to be interviewed and featured on the Los Angeles Chamber of Commerce website to promote LA Health Care Talent Pipeline

YED, Looking Forward - Fiscal Year 2020:

• Continue the redesign of the program (worksite, mentoring)
• Provide Career Days to other schools within the Los Angeles Unified School District and on Cedars-Sinai campus
• Develop more learning opportunities for Summer Youth participants
• Collaborate with Fairfax High School on new recruitment techniques
• Revitalize the HOSA (Health Occupations Students of America) Chapter at Fairfax High School.

7. Research Center for Health Equity at Cedars-Sinai’s Samuel Oschin Comprehensive Cancer Institute

The Research Center for Health Equity (RCHE) at Cedars-Sinai’s Samuel Oschin Comprehensive Cancer Institute was established in 2018 with a defined catchment area and population focus: Los Angeles County Department of Health Services, Service Planning Areas (SPAs) 1, 2, 4 & 5, with particular focus on underserved populations including Hispanics, Asians (Filipinos and Koreans), African-Americans, Immigrants, and LGBTQ+.

The Research Center for Health Equity community outreach and engagement strategies aim to increase cancer education and screening and build capacity at the community-level to address disparities. Implementation of the Health and Faith initiative began in 2018 to reach diverse and underserved communities within the Cedars-Sinai Cancer catchment area to address cancer disparities and develop research programs. Partnerships were developed with 20 churches, clinics, community organizations and the Los Angeles County Department of Public Health to address disparities in the targeted communities (Hispanic Latino, Korean, Filipino and Immigrant):

1. Immaculate Heart of Mary Church 11. World Mission University
2. Saint Thomas the Apostle Church 12. Prajna Gate Buddhist Temple
5. St Francis of Assisi Church 15. Berendo Street Baptist Church
7. Holy Family Catholic Church 17. Kheir Center
8. The Oriental Mission Church 18. QueensCare Health Centers
A comprehensive cancer education program, “7 Steps to Reduce Cancer Risk”, adapted for Hispanic Latino and Korean communities was successfully implemented. Experienced Korean speaking and Spanish speaking Community Outreach Coordinators were trained on delivering low-literacy cancer information on cancer prevention, early detection, diagnosis through the “7 Steps” workshops. This evidence-based approach, was implemented through 78 workshops. 1,968 adults participated in in-depth workshops in community settings. Four additional cancer screening events at FQHCs created pathways to free and low cost cancer screening services and access to a medical home. As a result, 301 adults participated and two colorectal cancers were diagnosed.

Cancer information was further disseminated by 16 trained community health workers at Clinica Monsenor Oscar Romero in a neighborhood at highest risk for late-stage diagnosis of breast cancer, among other cancers.

**Community Advisory Board and Outreach to LGBTQ+ Communities**

The Research Center for Health Equity has developed outreach strategies to reach LGBTQ+ communities for cancer awareness, research, and training. With guidance from a community-participatory process and a LGBTQ+ advisory group, community education was conducted LGBTQ+ Pride events throughout the Los Angeles with a focus on HPV related cancers. Outreach efforts reached 1,100 LGBTQ+ community members with vital information. 560 community members were referred to culturally sensitive LGBTQ+ providers in the community, including within the Cedars-Sinai medical network.

**Lung Cancer in African American Communities of Los Angeles**

The South Los Angeles Lung Cancer collaborative was formed through a funded partnership with USC Norris Comprehensive Cancer Center and funding from the California Community Foundation to increase lung cancer screening in a geographic area with the highest density of late-stage lung cancer diagnosis in Los Angeles County. The goal is to increase screening among at-risk African American, Hispanic and LGBTQ+ communities in South LA. In addition, the Research Center is collaborating with community leaders to advocate for lung cancer screening coverage for uninsured and underinsured community members.
### VI. COMMUNITY BENEFIT INVENTORY OF SOCIAL ACCOUNTABILITY (CBISA)

**Fiscal Year 2019: July 1, 2018 – June 30, 2019**

<table>
<thead>
<tr>
<th>Categories</th>
<th>Programs</th>
<th>Encounters</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Community Health Improvement</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Programs/activities that improve community health</td>
<td>Number of programs or activities</td>
<td>4,759</td>
</tr>
<tr>
<td><strong>Health Professions Education</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Educational programs for physicians, nurses and other health professionals</td>
<td>Number of educational rotations, e.g. internships, mentorships, preceptorships</td>
<td>2182</td>
</tr>
<tr>
<td><strong>Financial and In-Kind Contributions</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Funds and in-kind services donated to benefit the community</td>
<td>Number of programs or activities</td>
<td>581</td>
</tr>
<tr>
<td><strong>Community Building</strong></td>
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<td></td>
</tr>
<tr>
<td>Programs/activities that help build the capacity of the community to address “upstream” factors and social determinants that impact health</td>
<td>Number of programs or activities</td>
<td>57</td>
</tr>
<tr>
<td><strong>Community Benefit Operations</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Includes costs associated with identifying community health needs, implementing community health improvement commitments, strategy-building and planning</td>
<td>Number of programs or activities</td>
<td>12</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>7,591</td>
<td>179,729</td>
</tr>
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</table>
Unreimbursed Cost of Direct Medical Care for the Poor and Underserved $99,013,000
(Excludes the unreimbursed cost of caring for Medicare patients)

Charity care & uncompensated care for the uninsured/underinsured $29,301,000
Unreimbursed cost: caring for Medi-Cal patients $69,712,000

Unreimbursed Cost of Direct Medical Care for Medicare Patients $357,497,000

Unreimbursed Cost of Specialty Government Programs $1,893,000

Community Benefit Programs, Charitable Contributions and Education and Training for Physicians and Other Health Professionals $128,230,000
(Includes hundreds of free community education and medical screening/immunization programs offered at the Medical Center, in local schools, homeless shelters and community centers)

Research Programs $86,845,000

Total Cost of Research $227,281,000
Less: Research funding from grants <$140,436,000>
Net Costs of Research $86,845,000

Total quantifiable community benefits $673,478,000

Cedars-Sinai Medical Center is driven by its mission to improve the health status of the community and to provide leadership and excellence in patient care, research and education. In collaboration with expert medical staff, administrative leaders and community partners, Cedars-Sinai has made a significant contribution—both in quantifiable and non-quantifiable terms—to the benefit of the community. Cedars-Sinai provides a breadth of services to meet identified health needs in the community. Many Cedars-Sinai programs are operated at a financial loss but continue to be offered because they are an important part of the medical center's mission to serve the community's health needs.

Unreimbursed Cost of Direct Medical Care for the Poor and Underserved – includes the unreimbursed cost of free and discounted healthcare services provided to persons who meet the organization’s criteria for financial assistance and are therefore, deemed unable to pay for all or a portion of the services. If there is any subsidy donated for these services, that amount is deducted from the gross amount. Traditional Charity Care is included in the Internal Revenue Service (IRS) Form 990 Schedule H Part I Line 7a.

Unpaid Cost of State Programs – also benefits the indigent but is listed separately. This amount represents the unpaid cost of services provided to patients in the Medi-Cal program and enrolled in HMO and PPO plans under contract with the Medi-Cal program. These costs are included in the IRS Form 990 Schedule H Part I Line 7b. In the State of California, the Medicaid program is called Medi-Cal.

Unreimbursed Costs of Specialty Government Programs – also provides community benefit under such programs as the Veterans Administration, Los Angeles Police Department, Los Angeles County...
Trauma, and other programs to benefit the indigent. This amount represents the unpaid cost of services provided to patients in these various means-tested programs. If this community benefit was not provided, the federal, state or local governments would need to furnish these services. These costs are included in the IRS Form 990 Schedule H Part I Line 7c.

**Unreimbursed Cost of Direct Medical Care for Medicare Patients** - primarily benefits the elderly. This amount represents the unpaid cost of services provided to patients in the Medicare program and enrolled in HMO and PPO plans under contract with the Medicare program. These costs are included in the IRS Form 990 Schedule H Part III Section B.

**Community Benefit Programs, as well as Education and Training for Physicians and Other Health Professionals** – cost of services that are beneficial to the broader community. This category includes unreimbursed costs of Health Professions Education, Community Health Improvement, Community Benefit Operations, and Cash and In-Kind Donations. These costs are included in the IRS Form 990 Schedule H Part I Lines 7 e, f, and i. Below are some examples of costs included in this category of the Community Benefit contribution:

**Health Professions Education**
As an academic medical center, Cedars-Sinai offers graduate medical education and many other education programs for a variety of health professionals. They include offering graduate education training programs in over 70 physician specialty and subspecialty areas; and other health professions education programs including degree programs and extensive educational resources for aspiring and current nurses, dieticians, psychologists, paramedics, pathologists, researchers, rehabilitation professionals and chaplains.

**Community Health Improvement**
- Clinical services are provided to underserved communities daily, through an on-site primary adult care clinic; and through mobile medical units and free and community clinics throughout Los Angeles – all serving underserved, uninsured and underinsured populations.

- Each year, Cedars-Sinai takes part in community-based activities including health fairs, exercise programs, and screening programs for conditions such as cardiovascular disease, depression, diabetes and hypertension, as well immunization programs, lectures and workshops. Also offered are disease-specific support groups, patient education programs and program affiliates.

- Cedars-Sinai plans and implements long-term comprehensive strategies to meet the health needs of underserved communities. Signature Community Benefit programs seek to improve health in communities by building strong partnerships, building community capacities and providing direct education.

**Research Programs** – Cedars-Sinai’s currently has more than 2100 active research projects and has made significant contributions to the development of new medical technology, medical knowledge and practice. Cedars-Sinai ranks among the nation’s top non-university hospitals in National Institutes of Health (NIH) research funding - Cedars-Sinai received over $140 million in research funding this year. These costs are included in the IRS Form 990 Schedule H Part I Line 7.
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