

Methodist Hospital Community Benefits Plan Fiscal Year 2016

For Submittal by May 31, 2017 to:
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Preface

In accordance with Senate Bill 697, Community Benefits Legislation, Methodist Hospital, a private not-for-profit hospital, submits this Community Benefits Plan for Fiscal Year 2016^a. Senate Bill 697 requires a not-for profit hospital in California to complete the following activities:

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

^a Methodist Hospital fiscal year is from January 1 to December 31.

Introduction to Methodist Hospital

Methodist Hospital is a 348-licensed bed, not-for-profit community hospital located in Arcadia, California. Founded in 1903, Methodist Hospital is committed to providing excellent patient care delivered with compassion and respect. Methodist Hospital provides clinical services that include emergency services, diagnostic testing and imaging, inpatient and outpatient surgery, intensive care, chest pain center, cardiac catheterization, cardiac surgery, vascular surgery, neurosurgery, spine surgery, a stroke program (including neuro-interventional radiology), cancer services (including the GYN Oncology Institute and the Colorectal Surgery Institute), hip and knee replacement, maternity services, weight-loss surgery, physical therapy, acute physical rehabilitation, wound healing center with hyperbaric oxygen therapy, and spiritual care. Methodist Hospital personnel include: 1,900 employees, 630 medical staff members, 700 volunteers, and 25 Community Board members.

Methodist Hospital currently holds the following certifications, designations, and recognitions for services:

Hospital

- Full Three-Year Hospital Accreditation from The Joint Commission
- Top Performer on Key Quality Measures for Pneumonia, Surgical Care, and Perinatal Care from The Joint Commission
- 5-Star Rating for Overall Hospital Quality by Medicare
- Ranked in Top 100 in the United States for Patient Safety, Quality and Efficiency by the SafeCare Group
- Environmental Excellence Award from Practice Greenhealth

Emergency Services

- Los Angeles County Emergency Medical Services (EMS) Emergency Department Approved for Pediatrics (EDAP)
- Los Angeles County EMS Designated STEMI (heart attack) Receiving Center
- Los Angeles County EMS Designated Stroke Center

Cardiology and Stroke

- The Joint Commission Disease-Specific Certification: Acute Myocardial Infarction (AMI)
- The Joint Commission Disease-Specific Certification: Heart Failure
- The Joint Commission Disease-Specific Certification: Advanced Primary Stroke Center
- American Heart Association Get With The Guidelines® Gold Plus for Heart Failure
- American Heart Association Get With The Guidelines® Gold Plus for STEMI (Heart Attack)
- American Heart Association Get With The Guidelines® Gold Plus for AMI (Heart Attack)
- American Heart Association and American Stroke Association Get With The Guidelines® Gold Award
- Blue Cross/Blue Shield Association Blue Distinction Center for Cardiac Care
- Cigna Center of Excellence for Elective Cardiology
- Cigna Center of Excellence for Cardiac Pacemaker Implant
- United Healthcare Distinction: Electrophysiology, Interventional Cardiology and Cardiac Surgery

Cancer

- Accreditation with Commendation as a Comprehensive Community Cancer Center from the American College of Surgeons Commission on Cancer
- Cigna Center of Excellence for Colon Surgery

Orthopedics – Joint Replacement and Spine Surgery

- Blue Cross/Blue Shield Association Blue Distinction Center+ for Knee and Hip Replacement
- Blue Cross/Blue Shield Association Blue Distinction Center+ for Spine Surgery
- Cigna Center of Excellence for Hip Replacement
- Cigna Center of Excellence for Knee Replacement
- Cigna Center of Excellence for Back Surgery

Bariatric Surgery (Weight Loss Surgery)

- Accreditation from the Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program (MBSAQIP)
- Blue Distinction Center for Bariatric Surgery
- Aetna Institute of Quality for Bariatric Surgery

- Cigna Center of Excellence for Bariatric Surgery

Other Services

- Cigna Center of Excellence for Hysterectomy
- Cigna Center of Excellence for Laparoscopic Cholecystectomy

As we continue to grow, Methodist Hospital has expanded its presence on the Internet that includes a website dedicated to providing health news and information for patients, employees, physicians, volunteers, and visitors, in addition to convenient services such as physician referral, a news library, health information videos, virtual tours, online class registration, and online bill payment. Methodist Hospital also uses social media, via Facebook, Twitter, YouTube, LinkedIn, and Yelp to inform the community about events and services the hospital.

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Section 1: Executive Summary

Mission Statement

To provide high-quality healing services while caring for the patient's emotional and spiritual needs and enabling them to achieve health for life.

Definition of Community Used in the 2016 Community Needs Assessment

For purposes of this health needs assessment, Methodist Hospital defined its service area to include the following communities (in alphabetical order):

- Arcadia
- Azusa
- Baldwin Park
- Bradbury
- Duarte
- El Monte
- Monrovia
- Pasadena East
- Rosemead
- San Gabriel
- Sierra Madre
- South El Monte
- Temple City

Findings from 2016 Community Needs Assessment

Methodist Hospital service area population (2016) is estimated at 626,952 persons. In the next five years, the population in the service area is projected to increase by 3.5 percent, to 648,708 persons. When comparing the service area to Los Angeles County, the service area has a higher proportion of the following: persons age 45 years and older, Asian/Native Hawaiian or Pacific Islander residents; persons speaking Asian or Pacific Island language at home, persons 25 years and older with less than a high school education or GED, households with 3 or more persons, households with children under 18 years of age present, households with annual incomes from \$35,000 to \$74,999, households headed by persons 65 years and older, owner occupied households, and families at or above the poverty level.

When comparing health indicators for the San Gabriel Valley (Service Planning Area 3) and/or Methodist Hospital service area to Healthy People 2020 National Objectives, opportunities for improvement are in the following: non-elderly persons with health insurance, persons with a usual source of ongoing care, persons experiencing delays in getting medical care, persons experiencing delays in getting prescription medicines, deaths due to coronary heart disease and cirrhosis, seniors who received a flu shot in the past year, and seniors diagnosed with high blood pressure.

Following analysis of the community consultation, the following were identified as the community's top health issues (based on frequency of mention): access to health care specific to health insurance coverage, availability of providers in the community, language barriers, and lack of transportation and disease prevention and health promotion specific to diabetes, obesity, heart disease, high blood pressure, cancer, Alzheimer's disease, and vision care including cataracts and glaucoma, eye exams, and glasses.

The 2016 Community Health Needs Assessment identified the following two significant priority health needs:

- Access to health services for adults
- Disease prevention and health promotion addressing diabetes, heart disease, stroke, high blood pressure, obesity, cancer, and Alzheimer's disease

Objectives Addressed in the Community Benefits Plan

During Fiscal Year 2016, Methodist Hospital pursued the following objectives in its community benefits plan:

1. To continue to increase access to healthcare services for the community.
2. To continue to provide health education, support, and screening services for the public based on important health concerns, such as diabetes, heart disease, stroke, high blood pressure, obesity, and cancer.

Community Benefits Plan Activities

In Fiscal Year 2016, Methodist Hospital provided a variety of programs and services in support of these objectives. Some of the services provided were: operating a 26-bed emergency department 24-hours a day, providing charity care for patients without the ability to pay for necessary treatment, absorbing the unpaid costs of care for patients with Medi-Cal, absorbing the unpaid costs of care for patients with Medicare, operating essential community services such as a

Neonatal Intensive Care Unit, Maternal Child Health, and Cardiac Rehabilitation at a loss; providing physician referrals, providing health education, support programs, and screenings on a variety of topics ranging from prepared childbirth to grief and loss; providing health education and information in English and Chinese (Mandarin); conducting free year-round blood pressure screenings, including access to a local mall kiosk; a Senior Services program of health education and information; and a Health Ministries program – assisting local congregations by providing guidance, support, and resources to parish nurses and health cabinets.

Economic Value of Community Benefits Provided

The economic value of community benefits provided by Methodist Hospital in Fiscal Year 2016 is estimated at **\$38,180,918**.

Section 2: Mission, Vision, and Values

Methodist Hospital Mission, Vision, and Values statements follow. These guide our organization's commitment to serving to our community.

Our Mission

To provide high-quality healing services while caring for the patient's emotional and spiritual needs and enabling them to achieve health for life.

Revised December 2012

Our Vision

To provide an exceptional patient experience through compassionate care and create life-long relationships by changing the way health and health care are delivered in our community.

Our Values

SAFETY – We put safety first, for our patients, their families and all who work here.

EXCELLENCE – We advance health through the continuous pursuit of evidence-based, coordinated care.

RESPECT – We treat each other with dignity and value the ideas and perspectives each individual brings.

INTEGRITY – We are open, honest and trustworthy. We live our values.

ACCOUNTABILITY – We take full ownership of our actions and their outcomes.

INNOVATION – We embrace new ideas and thinking to improve what we do.

Section 3: 2016 Community Health Needs Assessment Summary

Process and Methods

This community health needs assessment brings together a variety of demographic and health data and information, gathered from both primary and secondary data sources.

The first phase of the community health needs assessment involved collection and analysis of numerous demographic and health status and data and information for Methodist Hospital Service Area and Service Planning Area (SPA) 3 – San Gabriel Valley. The following types of data were analyzed: population, household and family demographics; birth statistics, death statistics, designated Health Professional Shortage Areas, large-scale household telephone surveys designed to measure health access, utilization of health services, and health behaviors. Wherever possible, the service area health experience was benchmarked to Healthy People 2020 targets. In addition, to assist with providing context to the demographics, Methodist Hospital Service Area is compared to Los Angeles County.

The second phase of the needs assessment focused on qualitative primary research. Representatives from Methodist Hospital agreed that telephone interviews with health department officials and representatives from public and private organizations would be a cost-effective approach to gain an understanding of important health issues and potential opportunities to collaborate with these organizations.

Service Area Determination

Methodist Hospital used the Stark II definition – the lowest number of contiguous ZIP Codes from which the hospital draws at least 75 percent of its inpatients – to determine its geographic service area for purposes of the 2016 community health needs assessment. Using hospital data, there were 16 ZIP Codes that defined 75 percent of the hospital's admissions.

Service Area Definition and Description

Note: Findings are based on 2016 demographic estimates

Methodist Hospital defined its service area for purposes of the 2016 Community Health Needs Assessment to include the following 16 ZIP Codes and corresponding communities:

Service Area Definition

Methodist Hospital Service Area

2016

ZIP Code	Community
91006	Arcadia
91007	Arcadia
91008	Bradbury
91010	Duarte
91016	Monrovia
91024	Sierra Madre
91107	Pasadena East
91702	Azusa
91706	Baldwin Park
91731	El Monte
91732	El Monte
91733	South El Monte
91770	Rosemead
91775	San Gabriel
91776	San Gabriel
91780	Temple City

The service area population (2016) is estimated at 626,952 persons. The population in the service area is forecast to increase 3.5 percent in the next five years, to 648,708 persons. Growth projections for households and families are estimated to increase 3.7 percent and 3.6 percent, respectively. The following table summarizes the service area population, households, and families as well as the percent change projected for 2021 (over a five-year period).

Summary of Population, Households and Families

Methodist Hospital Service Area

2016

Description	Number		Percent Change From 2016 to 2021
	2016	2021	
Demographics			
Population	626,952	648,708	3.5%
Households	184,070	190,945	3.7%
Families	142,653	147,825	3.6%

Source: Nielsen

To assist with providing context to the service area demographics, key statistics are compared to Los Angeles County for 2016 in the following table. Of note, in comparison to Los Angeles County, Methodist Hospital service area has a **higher** proportion of:

- Persons age 45 to 54 years, 55 to 64 years, 65 to 74 years, 75 to 84 years, and 85 years and older
- Persons of Asian/Native Hawaiian or Pacific Islander race
- Persons 5 years and older speaking an Asian or Pacific Island language
- Persons 25 years and older with less than 9th grade education, some high school (no diploma), and high school or GED graduate
- Persons 16 years and older not in the labor force
- Employed persons with blue collar and service and farming occupations
- Households with 3-persons, 4-persons, 5-persons, 6-persons and 7 or more persons
- Households with children under 18 years of age present
- Households with incomes of \$15,000 to \$34,999; \$35,000 to \$74,999; \$75,000 to \$99,999; and \$100,000 to \$149,999
- Households with head of household age 65 years and older
- Owner occupied households
- Families at or above the poverty level

Summary of Demographic Highlights

Methodist Hospital Service Area Compared to Los Angeles County

2016

Indicator	Percent	
	Service Area	LA County
5-Year Change (2016 to 2021)		
Population	3.5%	4.1%
Households	3.7%	4.3%
Families	3.6%	4.1%
Age Group		
0 to 4 Years	6.1%	6.2%
5 to 14 Years	12.6%	12.6%
15 to 20 Years	8.2%	8.2%
21 to 24 Years	5.7%	5.8%
25 to 34 Years	13.9%	15.3%
35 to 44 Years	13.4%	14.0%
45 to 54 Years	13.8%	13.6%
55 to 64 Years	12.3%	11.6%
65 to 74 Years	7.8%	7.2%
75 to 84 Years	4.1%	3.7%
85 Years and Older	1.9%	1.7%
Race/Ethnicity		
White	14.8%	26.3%
Black	1.7%	8.0%
Asian, Native Hawaiian or Pacific Islander	34.1%	14.3%
Hispanic	47.7%	48.7%
American Indian/Alaskan Native	0.2%	0.2%
Some Other Race	0.1%	0.3%
Two or More Races	1.4%	2.2%
Language Spoken at Home by Persons 5 Years and Older		
English Only	30.4%	43.2%
Spanish	37.6%	39.5%
Asian or Pacific Island Language	29.2%	10.8%
European language	2.2%	5.4%
Other language	0.5%	1.1%
Educational Attainment of Adults 25 Years and Older		
Less than 9 th Grade	16.1%	13.6%

Indicator	Percent	
	Service Area	LA County
Some High School, no Diploma	10.0%	9.6%
High School Graduate (or GED)	23.7%	20.5%
Some College, no Degree	16.5%	19.4%
Associate Degree	6.9%	7.0%
Bachelor Degree	17.8%	19.6%
Graduate or Professional Degree	9.0%	10.3%
Employment Status of Persons 16 Years and Older		
In Armed Forces	<0.1%	<0.1%
In Labor Force, Employed	56.0%	57.5%
In Labor Force, Unemployed	6.1%	6.9%
Not in Labor Force	37.9%	35.5%
Occupation Type for Employed Labor Force		
Blue Collar	22.0%	20.3%
White Collar	57.4%	60.1%
Service and Farming	20.6%	19.6%
Household Size		
1-Person	17.3%	24.4%
2-Persons	23.6%	26.1%
3-Persons	18.0%	16.4%
4-Persons	17.1%	14.8%
5-Persons	10.7%	8.8%
6-Persons	6.1%	4.6%
7 or more Persons	7.1%	4.9%
Households by Presence of Children Under 18 Years of Age		
No Children Under 18 Years Present	57.5%	62.4%
Children Under 18 Years Present	42.5%	37.6%
Household Income		
Under \$15,000	9.9%	12.3%
\$15,000 to \$34,999	21.1%	20.1%
\$35,000 to \$74,999	30.2%	28.8%
\$75,000 to \$99,999	12.2%	11.6%
\$100,000 to \$149,999	14.2%	13.8%
\$150,000 to \$199,999	5.8%	5.9%
\$200,000 and over	6.5%	7.5%
Age Group of Head of Household		
15 to 24 Years	2.1%	2.9%

Indicator	Percent	
	Service Area	LA County
25 to 64 Years	74.3%	75.4%
65 Years and Older	23.6%	21.7%
Owner and Renter Occupied Housing Units		
Owner Occupied	55.9%	47.5%
Renter Occupied	44.1%	52.5%
Families by Poverty Status		
Below the Poverty Level	13.5%	14.9%
At or Above the Poverty Level	86.5%	85.1%

Source: Nielsen

Health Care Access and Utilization

Note: Findings are based on the 2014 California Health Interview Survey for SPA 3 and 2014 designated mental health and primary care Health Professional Shortage Areas in the Medical Service Study Areas approximating the service area

When comparing health access indicators in the SPA to Healthy People 2020 objectives, the SPA did not meet the objectives related to: medical insurance (insured all or part of the year), usual source of ongoing care, delays in getting medical care, and delays in getting prescription medicines. The SPA experience compared to Healthy People 2020 national objectives is summarized in the table below.

Summary of Health Access and Utilization Indicators

Los Angeles County Service Planning Area 3 – San Gabriel Valley

2014

Indicator	Age Group	Healthy People 2020 Objective		SPA 3 San Gabriel Valley	
		Good	Target Rate	Rate	Status
Health Access					
Insured All or Part of Year	0 to 64	↑	100%	89.8%	-
Usual Source of Ongoing Care	All Ages	↑	95%	83.9%	-
Delays in Getting Medical Care	All Ages	↓	4.2%	10.3%	-
Delays in Getting Prescription Medicines	All Ages	↓	2.8%	7.5%	-

Notes:

↓ Indicates that the Healthy People 2020 objective is to reduce; ↑ indicates that the objective is to increase

Source: UCLA Center for Health Policy Research

The service area includes five Medical Service Study Areas (MSSA). Within these MSSAs, there is one Primary Care Health Professional Shortage Area (in El Monte).

Health Professional Shortage Areas: Primary Care and Mental Health

Medical Service Study Areas in Methodist Hospital Service Area

2014

Medical Service Study Area (MSSA)	Health Professional Shortage Area	
	Primary Care	Mental Health
Arcadia Central and Northeast/Bradbury/Monrovia/Sierra Madre (78.2xxx)		
Arcadia Southeast/San Gabriel North (78.2dddd)		
Altadena East/Azusa North/Duarte North/Glendora/Pasadena East (78.2gggg)		
El Monte (78.2oo)	▲	
Rosemead/San Gabriel South/South El Monte West/Temple City West (78.2qqq)		

Note:

▲ Indicates that Medical Service Study Area is a designated shortage area

Source: Office of Statewide Planning and Development

Mortality

Note: Findings are based on three-year averages of deaths that occurred among residents of Los Angeles County during 2012 through 2014, the top five causes of premature death in SPA 3 in 2012, and a profile of deaths among residents of the service area in 2012

In 2012, the top three leading causes of premature death in SPA 3 – San Gabriel Valley were coronary heart disease, liver disease, and suicide. The ranking and years of potential life lost before age 75 (YPLL) due to selected leading causes of death are summarized in the table below.

Top Five Leading Causes of Premature Death, Ranked by YPLL

Service Planning Area 3 (San Gabriel Valley)

2012

Rank	Cause of Death	Years of Potential Life Lost Before Age 75	
		Number	Percent
1	Coronary Heart Disease	8,022	11.4%
2	Liver Disease	3,691	5.2%
3	Suicide	3,654	5.2%
4	Diabetes	2,978	4.2%
5	Lung Cancer	2,842	4.0%
—	All Other	49,157	69.9%
—	Total	70,344	100.0%

Source: Los Angeles County Department of Public Health

In 2012, there were 3,759 deaths in the service area. Heart disease and cancer were the top two leading causes of death in the service area, accounting for 51 percent of all deaths. Other leading causes of death in the service area are summarized in the table below.

Profile of Deaths, Ranked by Select Leading Causes of Death

Methodist Hospital Service Area

2012

Select Leading Cause of Death	Number	Percent
Heart Disease	1,008	26.8%
Cancer (All Types)	911	24.2%
Stroke	220	5.9%
Chronic Lower Respiratory Disease	202	5.4%
Influenza and Pneumonia	158	4.2%

Select Leading Cause of Death	Number	Percent
Alzheimer's Disease	157	4.2%
Diabetes Mellitus	157	4.2%
Chronic Liver Disease and Cirrhosis	104	2.8%
Unintentional Injuries (All Accidents)	97	2.6%
Essential Hypertension & Hypertensive Renal Disease	66	1.8%
Nephritis, Nephrotic Syndrome and Nephrosis	60	1.6%
Suicide	52	1.4%
All Other	567	15.1%
All Causes of Death	3,759	100.0%

Source: California Department of Public Health

When comparing age-adjusted death rates in Los Angeles County to Healthy People 2020 objectives, the County did not meet the objectives related to: coronary heart disease and cirrhosis deaths. The County experience compared to Healthy People 2020 national objectives is summarized in the table below.

Summary of Age-Adjusted Death Rates by Cause of Death

Los Angeles County

Three-Year Average (2012 to 2014)

Indicator	Healthy People 2020 Objective		Los Angeles County Rate	
	Good	Target Rate	Rate	Status
Age-Adjusted Death Rate (Per 100,000 Population)				
Coronary Heart Disease	↓	103.4	113.6	-
Stroke	↓	34.8	32.8	+
Cancer (All Sites)	↓	161.4	140.8	+
Lung	↓	45.5	27.5	+
Colorectal	↓	14.5	13.7	+
Prostate	↓	21.8	18.6	+
Female Breast	↓	20.7	21.0	*
Chronic Pulmonary Diseases	↓	None	28.9	○
Influenza/Pneumonia	↓	None	21.2	○
Diabetes	↓	N/A*	22.3	○
Unintentional Injuries (All Types)	↓	36.4	21.0	+
Motor Vehicle Accidents	↓	12.4	6.7	+
Homicide	↓	5.5	5.6	*
Alzheimer's disease	↓	None	26.0	○
Suicide	↓	10.2	7.6	+
Cirrhosis	↓	8.2	12.5	-

Notes:

↓ Indicates that the Healthy People 2020 objective is to reduce

* Healthy People 2020 objective for diabetes is based on both underlying and contributing cause of death which requires use of multiple cause of death files; California's data exclude multiple/contributing causes of death

Source: California Department of Public Health

Maternal and Infant Health

Note: Findings are based on live births that occurred in the service area during 2012

During the three-year period from 2010 through 2012, there were 8,179 births a year in the service area. To assist with providing context to the service area births, key birth demographics are compared to Los Angeles County in the following table. Of note, in comparison to Los Angeles County, the service area has a **higher** proportion of births to:

- Mothers of Asian or Pacific Islander race
- Mothers age 30 to 34 years and 35 years and older

Summary of Birth Demographic Highlights

Methodist Hospital Service Area Compared to Los Angeles County

2012

Description	Service Area	Los Angeles County
Births (Number)		
2010	7,989	133,160
2011	7,901	130,312
2012	8,647	134,260
Three-Year Average	8,179	132,577
Births by Mother's Race/Ethnicity (Percent)		
White	8.4%	17.8%
Black	1.2%	7.1%
Asian or Pacific Islander	35.2%	14.7%
Hispanic	53.8%	57.1%
Native American or Alaskan	0.1%	0.1%
Other and Unknown	1.2%	3.1%
Births by Mother's Age (Percent)		
Under 20 Years	5.9%	6.9%
20 to 29 Years	42.7%	44.4%
30 to 34 Years	29.3%	27.4%
35 Years and Over	22.0%	21.3%
Unknown	0.0%	0.0%

Source: California Department of Public Health

When comparing maternal and infant health indicators in the service area to Healthy People 2020 objectives, the service area met all objectives. The service area experience compared to Healthy People 2020 national objectives is summarized in the table below.

Summary of Maternal and Infant Health Indicators

Methodist Hospital Service Area

2012

Indicator	Healthy People 2020 Objective		Methodist Hospital Service Area	
	Good	Target Rate	Rate	Status
Pregnancy/Birth Outcome				
Early Prenatal Care	↑	77.9%	87.6%	+
Low Birth Weight Infants	↓	7.8%	6.1%	+
Very Low Birth Weight Infants	↓	1.4%	1.0%	+

Notes:

↑ Indicates that the Healthy People 2020 objective is to increase; ↓ indicates that the objective is to reduce

Source: California Department of Public Health

Child and Adolescent Health

Note: Findings are based on 2014 California Health Interview Survey for SPA 3

When comparing child and adolescent health indicators in the SPA to Healthy People 2020 objectives, the SPA results were statistically unreliable for all health access and health behaviors. The SPA experience compared to Healthy People 2020 national objectives is summarized in the table below.

Summary of Child and Adolescent Health Indicators

Los Angeles County Service Planning Area 3 – San Gabriel Valley

2014

Indicator	Age Group	Healthy People 2020 Objective		SPA 3 San Gabriel Valley	
		Good	Target Rate	Rate	Status
Health Access					
Insured All or Part of Year	0 to 17	↑	100%	97.5%	*
Usual Source of Ongoing Care	0 to 17	↑	100%	91.4%	*
Health Behaviors					
Obese	12 to 17	↓	16.1%	22.8%	*
Currently Smoke Cigarettes	14 to 17	↓	16.0%	0%	*
Binge Drinking	12 to 17	↓	8.6%	3.6%	*

Notes:

↓ Indicates that the Healthy People 2020 objective is to reduce; ↑ indicates that the objective is to increase

Source: UCLA Center for Health Policy Research

Adult Health

Note: Findings are based on 2014 California Health Interview Survey for SPA 3 and 2015 Los Angeles County Department of Public Health Survey for SPA 3

When comparing adult health indicators in the SPA to Healthy People 2020 objectives, the SPA did not meet the objectives related to health access for: medical insurance (insured all or part of the year) and usual source of ongoing care. The SPA experience compared to Healthy People 2020 national objectives is summarized in the following table.

Summary of Adult Health Indicators

Los Angeles County Service Planning Area 3 – San Gabriel Valley
2014 and 2015

Indicator	Age Group	Healthy People 2020 Objective		SPA 3 San Gabriel Valley	
		Good	Target Rate	Rate	Status
Health Access					
Insured All or Part of Year	18 to 64	↑	100%	87.1%	-
Usual Source of Ongoing Care	18 to 64	↑	89.4%	81.1%	-
Physical Activity (2015)					
Recommended Aerobic Exercise	18 +	↑	47.9%	64.2%	+
Recommended Aerobic and Muscle Strengthening	18 +	↑	20.1%	31.3%	+
Health Behaviors					
Healthy Weight	20 to 64	↑	33.9%	38.1%	+
Obese	20 to 64	↓	30.5%	25.3%	+
Diagnosed with High Blood Pressure	18 to 64	↓	26.9%	22.6%	+
Currently Smoke Cigarettes	18 to 64	↓	12.0%	10.8%	+

Notes:

↓ Indicates that the Healthy People 2020 objective is to reduce; ↑ indicates that the objective is to increase

Sources: UCLA Center for Health Policy Research and Los Angeles County Department of Public Health

Senior Health

Note: Findings are based on 2014 California Health Interview Survey for SPA 3

When comparing senior health indicators in the SPA to Healthy People 2020 objectives, the SPA did not meet the objectives related to health access for: flu shot received in past year; and related to health behaviors for: healthy weight/obese and diagnosed with high blood pressure. The SPA experience compared to Healthy People 2020 national objectives is summarized in the table below.

Summary of Senior Health Indicators

Los Angeles County Service Planning Area 3 – San Gabriel Valley
2014

Indicator	Age Group	Healthy People 2020 Objective		SPA 3 San Gabriel Valley	
		Good	Target Rate	Rate	Status
Health Access					
Usual Source of Ongoing Care	65+	↑	100%	84.5%	*
Flu Shot in Past Year	65+	↑	90%	71.3%	-
Health Behaviors					
Healthy Weight	65+	↑	33.9%	32.0%	-
Obese	65+	↓	30.5%	33.1%	-
Diagnosed with High Blood Pressure	65+	↓	26.9%	62.9%	-
Currently Smoke Cigarettes	65+	↓	12.0%	10.0%	*-

Note: ↓ Indicates that the Healthy People 2020 objective is to reduce; ↑ indicates that the objective is to increase

Source: UCLA Center for Health Policy Research

Community Consultation

Note: Findings are based on surveys with representatives of community and public organizations conducted over a five-week period beginning in mid-November 2016

The following were identified as the community's top health issues (based on frequency of overall mention):

- Access to health care specific to health insurance coverage, availability of providers in the community, language barriers, and lack of transportation
- Disease prevention and health promotion, specific to diabetes, obesity, heart disease, high blood pressure, cancer, Alzheimer's disease, vision care including cataracts and glaucoma, and eye exams and glasses

According to many of those interviewed, the San Gabriel Valley in general and persons of all ages, regardless of income or racial/ethnic and cultural backgrounds are affected by these health issues. For example, many face challenges associated with health care access and Alzheimer's disease affects all age sixty and older. Neighborhood areas specifically mentioned by those participating in the community interviews included:

- Arcadia
- El Monte
- Baldwin Park
- Monrovia
- Temple City

Those participating in the interviews identified the following populations as particularly vulnerable:

- Working poor
- Individuals newly covered (with health insurance)
- Seniors
- Chinese immigrant families with limited English proficiency
- Racial and ethnic minorities – Asians, Latinos, and African Americans

Participants in our community interviews identified the following activities that they believed the community should undertake to address top health issues, including:

- More free health education – seminars, workshops, health fairs, and support groups
- More community outreach programs
- Availability of locally-based Chinese-speaking medical specialists

- Community liaison available at community centers
- Engagement of cities and schools
- Working collaboratively with others to address issues, such as transportation
- Culturally- and linguistically-trained health care personnel
- More bilingual volunteers
- More personnel familiar with government and community programs
- Availability of free screenings at Federally Qualified Health Centers
- Locally-based medical specialists

Many of those interviewed complimented Methodist Hospital on its efforts to provide services to the local community, commenting that “the Hospital is doing a great job already,” through efforts such as participation in health fairs serving the Asian and Latino communities, partnerships with area community and senior centers, health information classes for the community, educational conferences for Chinese cancer patients, and having a “clean hospital with a very good reputation.”

Participants in the community consultation offered the following suggestions for additional collaborative roles or actions for Methodist Hospital:

- Let community residents know which doctors the Hospital contracts with and which medical insurance plans are accepted at the Hospital (knowledge of this information can help residents in deciding on purchases of their health plans)
- Promote hospital services and their accessibility (including insurance plans accepted by Methodist Hospital and physicians)
- Availability of Chinese and Spanish-speaking nurses on every floor 24/7
- More Chinese-speaking physicians on medical staff (so as not to have to refer patients out of the area for care)
- Improved interpreter/translation services for non-English speaking patients, such as interpreters using FaceTime
- Continued health education offerings on topics such as maintaining health, healthy dieting, breast health and early detection of diabetes and other diseases
- Support groups for Parkinson’s, dementia, and caregivers
- Coordinate efforts with Federally Qualified Health Centers and community organizations
- Collaboration with community organizations about educational offerings at Methodist Hospital so that staff can inform their clients
- Transportation services for cancer patients

Process and Criteria Used

In preparing the community health needs assessment, Methodist Hospital combined quantitative data about service area demographics, availability of health insurance, health access to and utilization of key services, health status, and health behaviors with qualitative data on opinions of important health issues in the community.

The following criteria were used to identify and prioritize significant health needs in the community:

- Healthy People 2020 target not met
- Number of persons affected
- Identification and/or validation as an important health issue in the community consultation
- Identified by community organizations as an opportunity to work collaboratively to address health issue

Significant Priority Health Needs Identified

Note: Findings are based on review of data and information and community input

- Access to health services for adults
- Disease prevention and health promotion addressing diabetes, heart disease, stroke, high blood pressure, obesity, cancer, and Alzheimer's disease

Health Care Facilities and Other Resources

Note: Findings are based on 2015 listings of health care facilities and senior centers located in the service area

The following health care facilities and other resources are located in the ZIP codes of the service area:

- 20 licensed free and community clinics
- 1 licensed rehabilitation clinic (specialty clinic)
- 10 open hospitals (eight general acute care hospitals and two acute psychiatric hospitals)
- 10 senior centers

Section 4: Community Benefits Planning Process and Objectives

Following completion of the 2016 community health needs assessment, Methodist Hospital continued to implement programs and services in response to identified community needs, in context with the hospital's stated mission and expertise.

To prepare this community benefits plan, the hospital continued to distribute community activity forms and logs to staff in hospital departments. The activity form records information regarding the name of the event coordinator, department, cost center, event/project, date of event, location of event, services provided, and number served. In addition, Finance provided information on public insurance program shortfalls, charity care, average hourly rate, and some cost center and department specific data. The following departments provided information and/or completed community activity reports: Finance, Community Outreach, Marketing and Communication, Business Development, Cancer Center, Maternal Child Health, Health Ministries, and Pastoral Care. Prior to submittal of the community benefits plan to the Office of Statewide Health Planning and Development, the Community Benefits Plan was reviewed and approved by Methodist Hospital senior management.

During Fiscal Year 2016, Methodist Hospital pursued the following objectives in its community benefits plan:

1. To provide increased access to healthcare services for the community.
2. To continue to provide health education, support, and screening services for the public based on important health concerns, such as diabetes, heart disease, stroke, high blood pressure, obesity, and cancer.

On an annual basis, Methodist Hospital will monitor and report measures of plan progress. See **Section 5: Community Benefits Plan Update** for a description of programs and services provided by the hospital in support of each of these objectives.

Section 5: Community Benefits Plan Update

This section includes a description of programs and services provided by Methodist Hospital and key measurements of outcomes accomplished in Fiscal Year 2016. Programs and services are organized in response to the two priority health needs identified in **Section 4**.

Access to Healthcare Services

Methodist Hospital community benefit services include: operating a 26-bed emergency department 24-hours a day¹ (55,532 visits), providing charity care for patients without the ability to pay for necessary treatment (532 patients served), absorbing the unpaid costs of care for patients with Medi-Cal (24,641 patients served), and absorbing the unpaid costs of care for patients with Medicare (24,826 patients served).

Given the importance of providing expert care in the community, Methodist Hospital operates several essential hospital services at a financial loss, including a Neonatal Intensive Care Unit, a Maternal Child Health program, and Cardiac Rehabilitation.

To assist area residents with finding a physician, Methodist Hospital offers a free Physician Referral Service. Residents are encouraged to: telephone 1-888-388-2838 to speak with a dedicated physician referral center (average of 140 callers a month); search for a physician on the hospital web site (average of 750 profile clicks a month), or call a dedicated Chinese Hotline to receive referrals (served approximately 200 callers). Physician referrals are fulfilled based on physician specialty, location, gender, language, office hours, and insurance (including Medi-Cal, Medicare, and other health insurance plans).

Methodist Hospital's Health Ministries (Parish Nurse) program develops and supports holistic health programs in faith communities. For more than 20 years, Methodist Hospital provides free education and training, information and resources in the areas of wellness promotion and disease prevention to improve the health of our community. In Fiscal Year 2016, Methodist Hospital continued its formal Health Ministries program with six churches and nine volunteer Faith Community nurses. The Health Ministries program operates at the following locations: Holy Angels

¹ The emergency department is approved for pediatrics and designated as stroke receiving center and STEMI receiving center by Los Angeles County Emergency Medical Services.

Catholic Church (located in Arcadia), First United Methodist Church (Temple City), Faith United Methodist Church (Temple City), Mission Community United Methodist Church (Rosemead), True Light Presbyterian Church (Alhambra); and Westminster Gardens, a retirement community located in Duarte. In addition, Methodist Hospital has a relationship with three “limited” partners (there is no parish nurse commitment), providing education and information to these churches located in Arcadia: Arcadia Presbyterian Church, Santa Anita Church, and Church of the Good Shepherd. In Fiscal Year 2016, Methodist Hospital offered six health-related luncheon programs, with a total attendance of 263 persons.

In Fiscal Year 2016, the Director of Spiritual Care at Methodist Hospital conducted a weekend Health Ministries retreat in January at Casa de Maria in Santa Barbara, hosted eight Health Ministries meetings for faith community nurses (in January, February, March, June, August, September, October, and December) and eight meetings for continuing education for nurses. In addition, the Director of Spiritual Care provided consultations with churches, speaking engagements at various community settings, and facilitated a supervisory peer group of students from other centers.

Health Education, Support, and Screening Services

In Fiscal Year 2016, Methodist Hospital offered health education and information, support, and screening services for the public in many different specialties, including maternal child health, heart disease and stroke, cancer, diabetes, weight management, joint replacement, and senior services. These offerings were available through attendance at community programs, visiting the hospital website (includes a calendar of events, hospital services, and a health encyclopedia), and hospital mailers distributed to targeted households.

Methodist Hospital's recently renovated obstetrics service features nine labor/delivery/recovery suites, four labor rooms, two operating rooms, four post-anesthesia care beds, a 24-bed couplet care unit designed for Family Centered Care featuring twenty private rooms and two semi-private rooms, a newborn nursery, and a 17-bed Neonatal Intensive Care Unit. A comprehensive offering of free maternity orientations/tours and nominally priced pre-natal classes is offered year-round, with classes in English and Chinese (Mandarin). In Fiscal Year 2016, the class offerings included 2-hour afternoon and evening maternity orientations and tours (1,626 persons attended), 2.5-hour breastfeeding classes (288 persons attended), 3-hour baby care basics (374 persons attended), 2-hour Happiest Baby on the Block classes (130 persons attended), 12-hour Prepared Childbirth (Lamaze) classes offered in English over a four-week period or over two weekend days (average of 303 persons attended), one weekend-day Prepared Childbirth (Lamaze) class offered in Chinese (42 persons attended), and 2.5-hour Tot CPR for Family and Friends offered in English (174 persons attended) and Chinese (90 persons attended). For convenience and ease, pre-registration is available through the hospital web site.

Methodist Hospital's highly specialized cardiac services include the availability of a cardiac care team 24-hours a day, seven days a week; dedicated handling of STEMI patients in the hospital's emergency department, three cardiac catheterization laboratories where physicians perform coronary angioplasty, pacemaker insertion, and carotid artery stenting; open-heart surgery and valve replacements in two dedicated operating rooms, specialized care in one of three hospital units (intensive care unit, coronary care unit, and cardiac patient care unit), and inpatient and outpatient cardiac rehabilitation programs. Recently, Methodist Hospital organized a "Mended Hearts" program for cardiac patients and their caregivers. Patients and caregivers who have had experience or have been diagnosed with heart problems such as bypass, heart failure, stent

procedures, high blood pressure or stroke, meet to share experiences, anxieties, and concerns in a light-hearted atmosphere, and to participate in fun social activities to aid in recovery. In Fiscal Year 2016, 12 persons a month participated in the Mended Hearts support group and 13 persons a month participated in a Stroke and Brain Injury support group. In recognition of the importance of convenient and accessible blood pressure testing, Methodist Hospital offered blood pressure screenings on a monthly basis at scheduled times at the Arcadia Community Center, Monrovia Community Center, and Sierra Madre Hart Park House (411 adults served with blood pressure screenings at these locations). Additionally, Methodist Hospital continues to sponsor a Heart Check Center™ free blood pressure testing kiosk at the Westfield Santa Anita Mall in Arcadia, serving approximately 140 mall visitors each day. In addition, staff at Methodist Hospital provided on-site screenings (blood pressure and/or body mass index) and informational lectures at various community events throughout the year, including Asian American Expo on January 16 -17 at the Pomona Fairplex, Lunar New Year Celebration on February 13 at the Alhambra Street Fair, Duarte Health Fair on March 12 at Westminster Gardens, Derby Day 5K Walk/Run on April 9 at Santa Anita Race Track, San Gabriel Mosque Health Fair on April 30 in San Gabriel, Arcadia Pancake Breakfast on May 7 at Arcadia Fire Station 106, Taste of Duarte on May 25 at Westminster Gardens, Hands-Only CPR training on June 2 at Santa Anita Westfield Mall, Chinese Hope Conference on June 18 at Methodist Hospital, Susie's Cause on October 1 at Santa Anita Westfield Mall, Pasadena Heart Walk on October 8 at the Pasadena Rose Bowl, combined Benefits Fair (for Bolton Company, Tetra Tech, and Green Dot) on October 11 in Pasadena, Asian Health Fair on October 23 at Methodist Hospital, World Vision Employee Health Fair on November 14 in Monrovia, and Southern California Women's Conference on December 16 at the Pasadena Convention Center.

Methodist Hospital offers a full complement of oncology services, including early detection cancer screenings, surgery, chemotherapy, reconstructive surgery, pain management, and support. Recently, Methodist Hospital added to these oncology services with the opening of two specialized clinics – a GYN Oncology Institute and a Colorectal Surgery Institute – in order to continue to provide outstanding outpatient services to the community. During the year, Methodist Hospital held a variety of workshops, support groups, and events to raise awareness and assist those with cancer. Methodist Hospital offered Stepping Forward, a free six-week body-and-mind strengthening program for survivors of any type of cancer beginning in February, June, and

October. The program, led by physical and occupational therapists, offered exercise/fitness classes, seminars on nutrition, meditation, community resources, and more, served 53 persons in Fiscal Year 2016. In conjunction with the American Cancer Society, Methodist Hospital offered Look Good, Feel Better (program helps female cancer patients currently in treatment learn to mitigate the appearance-related side effects of chemotherapy and radiation) in March, July, October and December, serving 28 women. Other programs and services addressing lung cancer prevention and tobacco cessation held in community settings during Fiscal Year 2016 included: a presentation on tobacco cessation and resources held on March 12 at the Duarte Health Fair (100 attendees), an educational lecture on lung cancer screening and prevention delivered to 50+ Community Health program members on May 24 (55 attendees), a presentation titled “The True Costs of Smoking” to a Lunch and Learn group on July 26 (18 attendees), a “Head to Toe” Health Fair – with resources provided in English, Spanish, and Chinese – on September 9 (80 attendees), an educational session – in Chinese – at the Asian Health Fair on October 23 (150 attendees), and a presentation to Arcadia High School students on the dangers of Tobacco, Nicotine and E-Cigarettes on December 6 (25 students). In addition, the hospital offered low-cost CT (LDCT) screening for lung cancer at a discounted price for those without health insurance coverage throughout the year.

To assist those with diabetes, Methodist Hospital offered specialized classes in Fiscal Year 2016. A free diabetes management class (4-week series for two hours each session), offered monthly, and taught by a team that includes a registered nurse, diabetes educator, registered dietitian, and a physical therapist, discussed topics such as eating and diabetes, exercise, blood glucose monitoring, medications, and prevention of complications (served approximately 110 persons in Fiscal Year 2016). In addition, a registered dietitian provided community members with education and support for diabetes management, wound healing, obesity and weight loss, and gestational diabetes at various screenings and health fairs throughout the year.

To meet the needs of active, older adults, Methodist Hospital maintains a data base of more than 4,700 email and street addresses of seniors ranging in age from fifty to ninety years. Methodist utilizes this data base to notify seniors about upcoming educational events and screenings.

In Fiscal Year 2016, Methodist Hospital, in collaboration with the Arcadia Community Center hosted eight events, with physicians and other healthcare professionals addressing a variety of

topics, including lung cancer screening and prevention, chronic obstructive pulmonary diseases, heart health, allergies, colorectal surgery, radiation oncology. In Fiscal Year 2016, attendance at these programs totalled approximately 350 persons. In advance of these events, Methodist mailed Save the Date reminder cards, announcing upcoming events, including dates and times, locations, and program descriptions and posted information on Methodist Hospital's website "Calendar of Events." Methodist also utilized social media to announce the dates and times of upcoming events.

Section 6: Economic Value of Community Benefits

In Fiscal Year 2016, the economic value of community benefits provided by Methodist Hospital is estimated at **\$38,180,918**. **Table 6.1** summarizes the unreimbursed costs of these community benefits according to the framework specifically identified by Senate Bill 697:

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

**Table 6.1: Estimated Economic Value of Community Benefits Provided by Methodist Hospital
Fiscal Year 2016**

Senate Bill 697 Category	Programs and Services Included	Unreimbursed Cost¹
Medical Care Services	Medi-Cal Program Shortfall ²	\$25,169,356
	Medicare Program Shortfall ²	\$6,307,773
	Charity Care ³	\$1,648,770
	Emergency Department Care of the Uninsured	\$1,857,748
	Services that meet a Community Need and Operate at a Loss, including NICU, Maternal Child Health, and Cardiac Rehabilitation ⁴	\$1,808,217
Other Benefits for Vulnerable Populations	Assistance to Patients without Financial Resources	\$324,962
Other Benefits for the Broader Community	Community Outreach, Health Information and Education, Support and Screenings; Physician Referral Program, and Lactation Services	\$370,673
Health Research, Education, and Training Programs	Clinical Pastoral Education, Health Professions Education, and Grant Writing for Community Benefit Programs	\$693,419
-	GRAND TOTAL	\$38,180,918

¹ Unreimbursed costs for the Senate Bill 697 categories - other benefits for vulnerable populations, other benefits for the broader community and health research, education and training programs - may include an hourly rate for labor (plus benefits), other expenses such as purchased services, food, supplies, other direct expenses and rooms.

² Medical care services provided to Medicare and Medi-Cal beneficiaries result in financial shortfalls to the hospital. The method for determining these shortfalls is based on a cost-to-charge ratio. The costs are subtracted from the payments received from Medicare and Medi-Cal.

³ Costs are also calculated based on a cost-to-charge ratio. Actual cost is subtracted from any payments received from either public or private insurance payors or patients.

⁴ The method for determining the cost of medical care services that meet community needs and operate at a loss is based on a cost accounting system.