Annual Report and Plan for Community Benefit
MemorialCare Orange Coast Medical Center
Fiscal Year 2023 (July 1, 2022 - June 30, 2023)

Submitted to:
Department of Health Care Access and Information
Accounting and Reporting Systems Section
Sacramento, California
November 2023
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About Orange Coast Medical Center

MemorialCare
MemorialCare Orange Coast Medical Center (OCMC) is a member of MemorialCare, an integrated, nonprofit health system headquartered in Fountain Valley, California. MemorialCare is the largest health system headquartered in Orange County, California. MemorialCare includes top hospitals – Orange Coast Medical Center, Saddleback Medical Center, Long Beach Medical Center and Miller Children’s & Women’s Hospital Long Beach. The system also includes MemorialCare Medical Group and Greater Newport Physicians, as well as MemorialCare Select Health Plan and numerous outpatient ambulatory surgery, medical imaging, urgent care, breast health, physical therapy, dialysis and primary care and specialty care centers.

Orange Coast Medical Center
OCMC became a member of MemorialCare in January 1996. In May 1997, the hospital was granted nonprofit status retroactive to December 26, 1995, the date of incorporation. The hospital has 221 licensed beds and is home to the MemorialCare Cancer Institute, MemorialCare Breast Center, MemorialCare Imaging Center, MemorialCare Heart & Vascular Institute, MemorialCare Surgical Weight Loss Center, MemorialCare Joint Replacement Center, Neuroscience Institute, Childbirth Center, Digestive Care Center, and Spine Health Center.

Awards
Orange Coast Medical Center is the recipient of the following awards and accolades:

- **2023-2024 U.S. News & World Report Best Hospitals**
  - Top 5 Hospitals in Orange County

- **Healthgrades 2023 Awards include:**
  - Five- Star Recipient
    - Coronary Bypass Surgery
    - Total Hip Replacement
    - Hip Fracture Treatment
    - Total Knee Replacement
    - Treatment of Heart Attack
    - Treatment of Sepsis
• Consistently voted by *The Orange County Register’s* readers as Best of Orange County Hospital, ranking #1 for the past seven years and a Top Workplace for the 13th time.
• Magnet® designated by American Nurses Credentialing Center’s (ANCC) Magnet Recognition Program® for nursing excellence.
• Diagnostic Imaging and Lung Cancer Screening Centers of Excellence award.
• American College of Radiology Breast Imaging Award.
• Commission on Cancer National Accreditation Program for Breast Centers (NAPBC)
Mission and Values

Mission
To improve the health and well-being of individuals, families and our communities.

Vision
Exceptional People. Extraordinary Care. Every Time.

Values
The iABCs of MemorialCare
The iABCs are a statement of our values—Integrity, Accountability, Best Practices, Compassion and Synergy. They remind us of our commitment to the highest standard of patient care and the active communication of clinical outcomes.

➢ Integrity
Always holding ourselves to the highest ethical standards and values. Doing the right thing, even when no one is watching.

➢ Accountability
Being responsible for meeting the commitments we have made, including ethical and professional integrity, meeting budget and strategic targets, and compliance with legal and regulatory requirements.

➢ Best Practices
Requires us to make choices to maximize excellence, and to learn from internal and external resources about documented ways to increase effectiveness and/or efficiency.

➢ Compassion
Serving others through empathy, kindness, caring and respect.

➢ Synergy
A combining of our efforts so that together we are more than the sum of our parts.

Governance
The MemorialCare Orange County Board of Directors guides the direction of community benefit, with assistance from the Community Benefit Oversight Committee (CBOC).

Board of Directors
Barry Arbuckle, Ph.D.
Sharon Cheever (MHS Board Chair)
Tom Rogers – Chair
Thomas Feldmar – Vice Chair
Community Benefit Oversight Committee
The CBOC (Community Benefit Oversight Committee) is an advisory committee for the hospital’s community benefit programs and reports to the Board of Directors. The CBOC reviews and validates legal and regulatory compliance specific to community benefit mandates, assures community benefit programs and services are effectively meeting identified community health needs, with emphasis on populations with unmet health needs; and increases transparency and awareness of community benefit activities.

The members of the CBOC include:

- Sue Allie, Community Member
- Cheryl Brothers, Community Member
- Tony Coppolino, Community Member
- Beth Hambelton, Senior Program and Community Outreach Liaison, Orange Coast Medical Center
- Erin Hotra-Shinn, Vice President, Strategy and Business Development, Orange Coast Medical Center
- Marc Johnson, EdD, Community Member
- Marcia Manker, Chief Executive Officer, Orange Coast Medical Center and Saddleback Medical Center
- Robin Phillips, Oncology Nurse Navigator, Orange Coast Medical Center
- Kristen Pugh, Vice President, Advocacy & Government Relations, MemorialCare
- Jennifer Zouras, Community Member
Caring for our Community

Orange Coast Medical Center recognizes its obligation to provide services above and beyond its role as a healing facility. In 1997, a group of physicians helped launch one new, unified brand name for a nonprofit integrated health system with hospitals and ambulatory care sites. They knew they could help make clinical care across Orange County and Los Angeles County significantly better – by working together as a system. They created best practices and committed to using evidence-based medicine throughout a new system called MemorialCare. Since then, year over year, MemorialCare consistently excels in improving integration and collaboration for improving patient care.

This report demonstrates tangible ways in which OCMC is fulfilling its mission to improve the health and wellbeing of our community and provide extraordinary care. OCMC provides financial assistance to those in the community who cannot afford services, or whose health insurance does not cover all services rendered. In addition, OCMC invests in the community to increase access to health care services and improve health.

Service Area
Orange Coast Medical Center is located at 9920 Talbert Avenue, Fountain Valley, in Orange County. The service area includes 25 Zip Codes, representing 13 cities or communities. This primary service area was determined by averaging total inpatient ZIP Codes over three years and represents 87% of ZIP Codes of patient origin.

<table>
<thead>
<tr>
<th>Orange Coast Medical Center Service Area</th>
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<tbody>
<tr>
<td><strong>Geographic Areas</strong></td>
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<tr>
<td>Westminster</td>
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Community Snapshot
The population of the OCMC service area is 1,266,738. Children and youth make up 22.4% of service area population, 62.6% are adults, and 15% are seniors, ages 65 and older. The service area has a higher percentage of youth than found in the county (21.6%). In the service area, 42.4% of the population is Hispanic or Latino residents. White residents comprise 28.4% of the population. At 24.5% of the population, Asian residents are the third largest racial and ethnic group in the service area. The remaining races and ethnicities comprise 4.7% of the service area population.

43.7% of residents speak English only in the home. Spanish is spoken in 33.9% of homes and an Asian or Pacific Islander language is spoken in 18.3% of service area homes. 3.3% of residents in the area speak an Indo-European language. Among area residents, 17.3% are at or below 100% of the federal poverty level (FPL) and 23.9% are at 200% of FPL or below (low-income). In the service area, 17.5% of children live in poverty, 11.1% of seniors and 29.5% of female head of households with children live in poverty. In the OCMC service area, 21.3% of adults are high school graduates, and 36.7% of the population has graduated college, lower than the rate for the county (48.6%) and the state (41.8%). Among service area residents, 90.6% of the population have health insurance.
Community Health Needs Assessment

Orange Coast Medical Center completed a Community Health Needs Assessment (CHNA) in FY22 as required by state and federal law. The CHNA is a primary tool used by the hospital to determine its community benefit plan, which outlines how it will give back to the community in the form of health care and other community services to address unmet community health needs. The assessment incorporated components of primary data collection and secondary data analysis that focused on the health and social needs of the service area.

The CHNA examined up-to-date data sources for the service area to present community demographics, social determinates of health, health care access, maternal and infant health, leading causes of death, disability and disease, COVID-19, health behaviors, mental health, substance use, and preventive practices. When applicable, these data sets were presented in the context of Orange County and California and were compared to the Healthy People 2030 objectives.

Primary data were collected through targeted interviews, which were used to gather information and opinions from people who represent the broad interests of the community served by the hospital. Eighteen (18) interviews were completed from November 2021 to January 2022. Interviewees included individuals who are leaders and/or representatives of medically underserved, low-income, and minority populations, local health or other departments or agencies that have current data or other information relevant to the health needs of the community. Input was obtained from the Orange County Health Care Agency.

Priority Health Needs
Health needs were identified from secondary data using the size of the problem (relative portion of population afflicted by the problem) and the seriousness of the problem (impact at individual, family, and community levels). The analysis of secondary data yielded a preliminary list of significant health needs, which then informed primary data collection. 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 to address needs and discover gaps in resources.

The identified significant needs included (in alphabetical order):

- Access to health care
- Chronic diseases
- COVID-19
- Economic insecurity
- Food insecurity
- Housing and homelessness
- Mental health
- Overweight and obesity
- Preventive practices
- Senior health
- Substance use and misuse

The identified significant health needs were then prioritized with input from the community. The community stakeholders were asked to rank order the health needs according to highest level of importance in the community. Among key stakeholder interviewees, access to care, housing and homelessness, mental health, chronic diseases and senior health were ranked as the top five priority needs in the service area.

The complete CHNA report and the prioritized health needs can be accessed at www.memorialcare.org/about-us/community-benefit. Please send your feedback to communitybenefit@memorialcare.org.
Addressing Priority Health Needs

In FY23, Orange Coast Medical Center engaged in activities and programs that addressed the priority health needs identified in the FY23-FY25 Implementation Strategy. OCMC has committed to community benefit efforts that address access to health care, behavioral health, chronic diseases, overweight and obesity, and preventive practices with a focus on older adults, the social determinants of health and health equity. Selected activities and programs that highlight the hospital’s commitment to community health are detailed below.

Access to Care and Preventive Practices
Access to care is a key determinant of health that provides preventive measures and disease management, reducing the likelihood of hospitalizations and emergency room admissions. Preventive health care includes screenings, check-ups, and counseling to prevent illness, disease, or other health problems. Individuals, who receive services in a timely manner, have a greater opportunity to prevent or detect disease during earlier, treatable stages.

Response to Need
Financial Assistance
The Patient Financial Assistance Program was available to everyone in the community. This included people without health insurance and patients with insurance who were unable to pay the portion of their bill that insurance did not cover. Patient Financial Services assisted community members with the financial assistance programs. Additionally, 2,209 uninsured or underinsured persons were assisted with health insurance enrollment.

Health Education, Resources and Community Outreach
OCMC provided support and services for community residents that removed barriers to care and increased access to health care and preventive measures. General health and wellness education, social media postings, blogs, podcasts, and informational articles were presented on topics that included: women’s health, cancer awareness, cardiac health, men’s health, spine health, healthy habits, nutrition and exercise, digestive health, GERD, RSV, and safety education. Over 66,390 community encounters were provided.

Parents-to-be were provided with education, advice, strategies, and tools through prenatal, childbirth and parenting classes. Topics included healthy pregnancy, tips from pediatricians, safety, baby care basics, childbirth, maternal support, childcare and breastfeeding support. Information was provided in English and Vietnamese and reached 3,221 community members. A breastfeeding clinic provided 476 encounters.
The *CareConnection* quarterly newsletter was made available to community residents to provide health education messages and notify the community of free classes, support groups, and screenings offered at the hospital and in the community. Newsletters were mailed to households and the information was also posted on [www.memorialcare.org](http://www.memorialcare.org).

OCMC participated in 52 health fairs around Orange County, providing over 10,000 health education encounters and resources for community residents.

Community vaccine clinics administered 466 COVID-19 vaccines.

**Senior Outreach**
OCMC supported Senior Health Expo Fairs, Medicare and Social Security Classes, senior center events, health fairs, and provided education materials. 687,751 senior community members were served.

The *MemorialCare 55+ program monthly* e-newsletter was sent to senior residents to notify them of free health classes, events, and lifestyles information. This information was also posted on [www.memorialcare.org](http://www.memorialcare.org).

**Vietnamese Community Outreach**
OCMC supported a Vietnamese Community Outreach Coordinator who organized and directed free community education, flu vaccine clinics, and health screenings in the Vietnamese community. The coordinator also assisted with securing medical transportation for the elderly in the Vietnamese community.

Outreach included:
- Offered free skin care screenings to 92 Vietnamese community members.
- Provided 100 flu vaccines.
- Provided 83 free clinical breast exams to Vietnamese women.
- Community education classes were conducted in Vietnamese. Presentations included heart problems, Hepatitis B, lung cancer, prostate problems, diabetes, and coronary artery disease. 278 encounters were provided.
- An updated 40-page pregnancy guide, videos about pregnancy, and breastfeeding position education materials reached 244 Vietnamese expectant mothers.
- Hosted a Vietnamese language website to better serve Vietnamese speaking community members.
• Presented health education and prevention messages to the Vietnamese community through a variety of social media and newsletters. OCMC offered a targeted health outreach program to the Vietnamese community on local radio and cable TV. Information was presented weekly on a variety of topics. Radio listeners called in with questions.

**Support Services**
The hospital offered services to increase access to care and support preventive health care.
• Transportation was provided to 549 individuals who could not easily access medical care and appointments.
• Provided durable medical equipment, infusion services, home health support and medication prescriptions to individuals who could not afford the cost of these services.
• Provided clothing and transportation to people experiencing homelessness.

**Behavioral Health (includes Mental Health and Substance Use)**
Positive mental health is associated with improved health outcomes. The need to access mental and behavioral health services was noted as a high priority among community members.

**Response to Need**
**Behavioral Health Education and Awareness**
Outreach, education classes and support groups increased awareness of mental health issues and connected area residents with available resources. Over 4,000 encounters for mental health education were provided on social gathering and hesitancy, mental health awareness, prolonged grief, emotional wellness during the holidays, mindfulness and wellbeing, and men’s mental health.

**Behavioral Health Integration Program**
MemorialCare health system recognized that physical and mental health should be coordinated in primary care settings. As a result, the Behavioral Health Integration program was launched in 2018. The project has grown to include nine MemorialCare Medical Group Primary Care sites of care throughout our service areas. The primary care physicians screen for mental health conditions and coordinate care options for patients with behavioral health needs. The program included:
• An embedded clinical social worker at each location
• Instant referral to needed services
• Access to a trained psychiatrist via Telehealth
• Tele-video visits to patients enrolled in the program
• Online patient self-management tools through SilverCloud
**SilverCloud**
In response to the unprecedented need for mental health and mental wellbeing services, MemorialCare offered a free online resource to the entire community. SilverCloud is an on-demand, virtual mental health platform that offers digital behavioral health care via evidence-based content, programs and support. The online psychoeducational and therapeutic program aims to help manage anxiety, depression, stress and sleep. Using online programs, the platform is customizable and designed to meet a person’s unique mental health goals. The program does not require a doctor’s order, can be completed at any pace by participants and is accessible any time on smartphone, tablet and computer devices.

**Orange County Rescue Mission**
The OCMC community benefit grant program provided funding for the Orange County Rescue Mission’s Village of Hope (VOH), a 258 bed 24-month transitional housing program for homeless families and individuals. Services include safe shelter, nutritious meals, case management, mentorship, medical and dental care, and mental health services.

Outreach included:
- 399 homeless individuals received 168,771 nutritious meals and 56,080 shelter nights.
- 399 homeless individuals received 1,534 mental health treatments.
- 191 homeless adults received 970 individual and group substance abuse recovery sessions.

**Be Well OC Mental Health and Wellness Campus**
MemorialCare partnered with Be Well OC to open a mental health and wellness campus in Orange. The 60,000 square foot state-of-the-art facility provides best-in-class mental health and substance use disorder services to all Orange County residents who are referred for care. The first of three planned campuses, the facility in Orange features a crisis stabilization center for mental health needs, and a recovery station for substance use disorders. Other services include withdrawal management, adult residential treatment, and an integrated support center.

**Chronic Diseases**
Chronic diseases are long-term medical conditions that tend to progressively worsen. Chronic diseases, such as cancer, heart disease, diabetes and lung disease, are major causes of disability and death. Chronic diseases are also the major causes of premature adult deaths.

**Response to Need**
**Health Education, Resources and Community Outreach**
OCMC provided health education classes, special events, videos, social media posts,
newsletters, and information flyers on topics including colorectal cancer, lung screening, radiation treatment, immunotherapy, breast health, breast cancer, and skin cancer. Additionally, 16,746 encounters were provided on cardiac health awareness education, including heart risk assessment, healthy heart, atrial fibrillation treatment, stroke prevention and treatment, and advanced cardiac care.

Health Screenings
OCMC provided free preventive health screenings, which included blood pressure, total cholesterol, HLD, and non-fasting glucose and lipid panels to 144 community members. Carotid artery doppler ultrasounds were also offered along with thyroid gland ultrasounds. Additionally, OCMC provided 120 free thyroid screenings and 165 colorectal screening education and kits.

Senior Outreach Coordinator
OCMC supported a Senior Outreach Coordinator who collaborated with local agencies and organizations to assist older adults in securing needed services. This included coordinating free medical transportation program for seniors, free health screenings, flu clinics, health education and disease prevention classes, socialization and enrichment events, and directly assisting seniors and their families, as needed.

Outreach included:
- Education on Alzheimer’s prevention, research, early diagnosis and treatments, and maintaining a healthy brain reached 60 individuals.
- Medicare classes, including Understanding Medicare, Social Security, and Medicare 101 which reached 46 individuals.
- Advanced Care Planning classes reached 192 individuals.
- Senior Health Expo Fairs in Huntington Beach, Newport Beach, Fountain Valley and at OCMC reached 694 individuals.
- Supported 200 seniors and caregivers to attend the City of Newport Beach Resource Fair at no cost.
- Provided 164 free medical transportation rides for seniors.

Seniors received health education at the Huntington Beach, Newport Beach and Fountain Valley Senior Expo Health Fairs. Health and wellness education was made available to the public on topics that included: cardiovascular health, cancer, safety, and healthy habits. In addition, support groups for bereavement, cancer and Parkinson’s disease were provided with resources, education and support to individuals, families, and their caregivers.
Parkinson’s Disease Support
OCMC provided health education classes, support groups and special events that focused on Parkinson’s disease. Offerings included support groups provided for individuals with movement disorders, early disease onset and for caregivers. In addition, Parkinson’s classes included wellness recovery, exercise classes and LOUD Crowd (speech preservation) classes. 5,777 encounters were provided.

Cancer Support Services
- The Cancer Resource Center provided one-on-one counseling and phone counseling, free of charge to 31 individuals and provided resources to 325 individuals.
- The Look Good Feel Better program taught 52 women beauty techniques to help them manage their appearance as they underwent cancer treatment.
- Support groups, free and open to the public, were provided for bereavement, cancer care, and women’s cancer care.
- Free clinical breast exams were provided to 83 Vietnamese women.
- 432 community members diagnosed with cancer received referrals, resources, blankets, hats, and wigs through “The Warm Wishes program”.
- 140 individuals undergoing cancer treatment received free wigs from the hospital’s wig bank.
- Port pillows were provided to 55 people.

Vietnamese American Cancer Foundation Cancer (VACF) Navigation and Survivorship Program
The OCMC community benefit grant program provided funding for the Vietnamese American Cancer Foundation’s Cancer Navigation and Survivorship Program. The program alleviated health disparities by addressing cultural, linguistic, and socioeconomic barriers the community faces using lay patient navigators. Most program participants were low-income, Vietnamese speaking adults, over age 50, who were new immigrants. Outreach included:
- VACF increased cancer awareness for 1,010 individuals through seminars, webinars, group calls, and one-on-one calls.
- 299 individuals received community resources navigation, screenings, public service referrals and linkages to care.
- 154 individuals received additional direct support services, such as in-language wellness check-ups, weekly food pantry, transportation vouchers, scheduling coordination, and assistance with technological needs.
**Overweight and Obesity**
Overweight and obesity affect a wide range of health issues and are major risk factors for diabetes, cardiovascular disease, and other chronic diseases. Physical activity plays a key role in levels of overweight and obesity, and in the development and management of chronic diseases. Healthy eating and nutrition programs also promote healthy body weight.

**Response to Need**

**Health Education, Resources and Community Outreach**
OCMC provided support and services for community residents that increased access to health care and preventive measures. Health and wellness education, social media postings, blogs, podcasts, and informational articles were presented on topics that included: healthy snacks, evidence-based nutrition for the future, exercise, and weight loss. These programs provided 5,636 community encounters.

**Meals on Wheels Orange County**
The OCMC community benefit grant program provided funding for Meals on Wheels Orange County (MOWOC). The program provided home-delivered nutritious meals to homebound older adults. Services include three meals a day, five days a week, along with nutrition education, case management services, and home safety checks. Outreach included:
- 1,642 unduplicated older adults received 471,648 meals.
- To meet the needs of the local Vietnamese population, MOWOC offered a Vietnamese menu choice. 69 homebound older adults received 9,298 Vietnamese meals.

**Breastfeeding**
Breastfeeding in infancy is known to help reduce overweight and obesity later in life. OCMC provided breastfeeding classes, breastfeeding counseling, and a breastfeeding clinic available to the public at no cost.
Other Community Benefit Services

Orange Coast Medical Center provided community benefit services in addition to those programs that focused on addressing priority health needs.

Health Professions Education

Continuing Medical Education (CME)
Sixteen CME lectures were offered throughout the year and were available to physicians and health care professionals in the community. There were 745 encounters by health professionals for these lectures.

Nursing Education
OCMC provided precepting for 19 nursing students. Additionally, 5 nurses participated in an MSN Preceptorship, 6 nursing students participated in a Community Health Preceptorship, 4 nursing students worked on their leadership clinical hours, and 1 nurse lactation consultant received precepted hours. OCMC hosted educational presentations on oncology topics that reached 50 nurses.

Other Health Professions
OCMC provided clinical precepting for 22 health professionals. Students were precepted and performed their clinical hours and/or internship rotations for:
- Cardiopulmonary
- Cardiovascular technician
- Genetics counseling
- Pharmacy
- Physical therapy
- Radiology
- Social work
- Surgical technician

Cash and In-Kind Donations

Cash Donations
Orange Coast Medical Center supported community organizations through cash donations that addressed community health needs, health equity and the social determinants of health.

In-Kind Donations
- OCMC provided in-kind donations of shoes, clothing, blankets, and hygiene kits for people
• OCMC employees represented the hospital on community boards and collaboratives that focused on increased access to health and social services, and improved safety, as well as Vietnamese and senior health issues.

**Community Benefit Grant Program**
In FY23, OCMC provided $50,000 in grant funds to support community-based organizations that addressed identified health needs and served vulnerable populations within the hospital service area. Grants were provided to:

- **Meals on Wheels Orange County (MOWOC)**
  - Home delivered nutritious meals to homebound older adults.
- **Orange Coast Rescue Mission (OCRM)**
  - Village of Hope: a 258-bed 24-month transitional housing program for homeless families and individuals.
- **Vietnamese American Cancer Foundation (VACF)**
  - Cancer Navigation and Survivorship Program.

**Community Benefit Operations**
In FY23, community benefit operations included:

- Administrative support
- Community benefit consultants

**Community Building Activities**

**Economic Development**
The hospital supported economic development groups that focused on issues that impacted community health improvement and safety, including:

- Fountain Valley Chamber of Commerce
- Huntington Beach Chamber of Commerce
- Orange County Business Council
Financial Summary of Community Benefit

The Orange Coast Medical Center financial summary of community benefit for FY23 (July 1, 2022 to June 30, 2023) is summarized in the table below. The Hospital’s community benefit costs comply with Internal Revenue Service instructions for Form 990 Schedule H. Costs are determined as part of the VHA Community Benefit package and are based on the Hospital’s overall cost to charge ratio.

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<thead>
<tr>
<th>Community Benefit Categories</th>
<th>Net Benefit</th>
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<tr>
<td>Charity Care/Financial Assistance(^1)</td>
<td>$3,397,850</td>
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<tr>
<td>Unpaid Costs of Medi-Cal(^2)</td>
<td>$23,195,640</td>
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<td>Education and Research(^3)</td>
<td>$1,205,630</td>
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<td>Other for the Broader Community(^4)</td>
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<td><strong>Total Community Benefit Provided Excluding Unpaid Costs of Medicare</strong></td>
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<td>Unpaid Costs of Medicare(^3)</td>
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<tr>
<td><strong>Total Quantifiable Community Benefit</strong></td>
<td><strong>$49,273,720</strong></td>
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1 Financial Assistance includes traditional charity care write-offs to eligible patients at reduced or no cost based on the individual patient’s financial situation.

2 Unpaid costs of public programs include the difference between costs to provide a service and the rate at which the hospital is reimbursed.

3 Costs related to health professions education programs and medical research that the hospital sponsors.

4 Includes non-billed programs such as community health education, screenings, support groups, support services, cash and in-kind donations and community benefit operations.
Community Benefit Plan FY24

As a result of the FY22 Community Health Needs Assessment (CHNA), Orange Coast Medical Center selected significant health needs it will address through its FY23-FY25 Implementation Strategy. The plan outlines the health needs the hospital will and will not address and the strategies it will use to address the selected health needs.

Significant Needs the Hospital Intends to Address
Orange Coast Medical Center intends to take actions to address the following health needs:

- Access to care
- Behavioral health (mental health and substance use)
- Chronic diseases
- Overweight and obesity
- Preventive practices

Using the lens of the social determinants of health and health equity, OCMC will provide some additional attention to senior health and food insecurity as well as bringing community awareness to housing and homelessness as applied to these priority health needs.

Health Need: Access to Care
Goal: Increase access to health care for the medically underserved.

Strategies and Programs
Financial Assistance
Provide financial assistance through free and discounted care for health care services, consistent with the hospital’s financial assistance policy.

Transportation and Prescription Medication Support
Provide transportation support for patients who cannot access health services because of lack of transportation. Coordinate the free OCMC senior medical transportation program. Provided low-income residents with low-cost or no-cost pharmacy assistance.

Community Support
Provide cash and in-kind donations to nonprofit community organizations dedicated to increasing access to health care, including transportation support.
Collaborations
Support collaborative efforts to address the health care needs of older adults. Ensure the OCMC Senior Liaison works with local organizations to assist older adults in securing needed services.

Social Determinants of Health and Health Equity
Collaborate with agencies to address the impact that social determinants of health and health equity have on health care access.

Behavioral Health (Mental Health and Substance Use)
Goal: Increase access to mental health and substance use services in the community.

Strategies and Programs
Health Education and Awareness
Increase community awareness of prevention efforts and availability of resources to address mental health and substance use and misuse concerns. Offer community health education, lectures, presentations, and workshops focused on mental health and substance use topics.

Community Support
Provide cash and in-kind donations to nonprofit community organizations dedicated to increasing behavioral health awareness and access to services.

Collaborations
Support multisector collaborative efforts to increase behavioral health awareness and access to behavioral health services.

Social Determinants of Health and Health Equity
Work in collaboration with community agencies to address the impacts that the social determinates of health and health equity have on behavioral health services.

Chronic Diseases
Goal: Reduce the impact of chronic diseases on health and increase the focus on chronic disease prevention and treatment education.

Strategies and Programs
Health Education and Screenings
Offer health education workshops and presentations on chronic disease prevention, treatment, and management. Provide wellness fairs for older adults, including screenings.
Cancer Support
Provide support for persons with cancer and caregivers with exercise programs, education, counseling, peer mentoring, support groups and life coaches.

Support Groups
Provide support groups to assist those with chronic diseases and their families.

Media and Health Awareness
Provide public health education in the media and community health awareness events to encourage healthy behaviors and prevent chronic diseases.

Community Support
Provide cash and in-kind donations to nonprofit community organizations dedicated to chronic disease prevention and treatment.

Collaborations
Support collaborative efforts to address chronic disease prevention and treatment among older adults.

Social Determinants of Health and Health Equity
Work in collaboration with community agencies to address the impacts that the social determinates of health and health equity have on chronic diseases.

Overweight and Obesity
Goal: Reduce the impact of overweight and obesity on health and increase the focus on healthy eating and physical activity.

Strategies and Programs
Health Education and Screenings
Offer community health education workshops and presentations focused on weight management, healthy eating, and physical activity topics. Host health and wellness fairs that include screenings for BMI, blood pressure, and blood glucose.

Community Support
Provide cash and in-kind donations to nonprofit community organizations dedicated to promoting healthy eating and physical activity.
Collaborations
Support collaborative efforts to address healthy eating and physical activity among older adults.

Media and Health Awareness
Provide public health education in the media and community health awareness events to encourage healthy behaviors.

Nutrition
Provide support for services to improve senior nutrition. Provide support for educational outreach to children and their families on nutrition, healthy food choices, and physical activity.

Social Determinants of Health and Health Equity
Work in collaboration with community agencies to address the impacts that the social determinates of health and health equity have on overweight and obesity.

Preventive Practices
Goal: Improve community health through preventive health practices.

Strategies and Programs
Health Education and Awareness
Provide community health education and resources focused on healthy living and disease prevention.

Screenings and Vaccines
Provide free health screenings to promote preventive care. Provide flu vaccinations, free to the public, in areas easily accessible to the general public.

Community Support
Provide cash and in-kind donations to nonprofit community organizations dedicated to increasing/expanding preventive health services.

Media and Health Awareness
Provide public health education in the media and community health awareness events to encourage healthy behaviors and promote preventive health care.

Collaborations
Support collaborative efforts to provide preventive services to older adults.
**Social Determinants of Health and Health Equity**

Work in collaboration with community agencies to address the impacts that the social determinates of health and health equity have on access to preventive services.
Evaluation of Impact
OCMC is committed to monitoring and evaluating key initiatives to assess the programs and activities outlined in this Implementation Strategy. We have implemented a system for the collection and documentation of tracking measures, such as the number of people reached/served, and collaborative efforts to address health needs. In addition, through our grants program, we track and report program outcomes. An evaluation of the impact of OCMC’s actions to address these significant health needs will be reported in the next scheduled CHNA.

Needs the Hospital Will Not Address
Since OCMC cannot directly address all the health needs present in the community, we will concentrate on those health needs that can most effectively be addressed given our areas of focus and expertise. Taking existing hospital and community resources into consideration, OCMC will not directly address the remaining health need identified in the CHNA, which was economic insecurity.
Contact Information

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