Consolidated Community Benefit Plan

FISCAL YEAR 2024

Kaiser Foundation Hospitals in California

LOS ANGELES

Southern California Region

Submitted to the California Department of Health Care Access and Information in compliance with Senate Bill 697, California Health and Safety Code Section 127350

KAISER PERMANENTE®

Kaiser Foundation Hospitals (KFH)
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I. Introduction and Background

A. About Kaiser Permanente

Kaiser Permanente is an integrated health care delivery system comprised of Kaiser Foundation Hospitals, Kaiser Foundation Health Plan, and physicians in the Permanente Medical Groups. For more than 75 years, Kaiser Permanente has been committed to shaping the future of health and health care — and helping our members, patients, and communities experience more healthy years. We are recognized as one of America's leading health care providers and nonprofit health plans.

Kaiser Permanente is committed to helping shape the future of health care. Founded in 1945, Kaiser Permanente has a mission to provide high- quality, affordable health care services and to improve the health of our members and the communities we serve. We currently serve 12.4 million members in 8 states and the District of Columbia. Care for members and patients is focused on their total health and guided by their personal Permanente Medical Group physicians, specialists, and team of caregivers. Our expert and caring medical teams are empowered and supported by industry-leading technological advances and tools for health promotion, disease prevention, state-of-the-art care delivery, and world-class chronic disease management. Kaiser Permanente is dedicated to care innovations, clinical research, health education, and the support of community health.

B. About Kaiser Permanente Community Health

At Kaiser Permanente, we recognize that where we live and how we live has a big impact on our health and well-being. Our work is driven by our mission: to provide high-quality, affordable health care services and to improve the health of our members and our communities. It is also driven by our heritage of prevention and health promotion, and by our conviction that good health is a fundamental right.

As the nation's largest nonprofit, integrated health system, Kaiser Permanente is uniquely positioned to improve the health and wellbeing of the communities we serve. We believe that being healthy is not just a result of high-quality medical care. Through our resources, reach, and partnerships, we are addressing unmet social needs and community factors that impact health. Kaiser Permanente is accelerating efforts to broaden the scope of our care and services to address all factors that affect people's health. Having a safe place to live, enough money in the bank, access to healthy meals and meaningful social connections is essential to total health. Now is a time when our commitment to health and values compels us to do all we can to create more healthy years for everyone. We also share our financial resources, research, nurses and physicians, and our clinical practices and knowledge through a variety of grantmaking and investment efforts.

Learn more about Kaiser Permanente Community Health at https://about.kaiserpermanente.org/community-health.

For information on the CHNA, refer to the 2022 Community Health Needs Assessments and Implementation Strategies (http://www.kp.org/chna).

C. Purpose of the Report

Since 1996, Kaiser Foundation Hospitals (KFH) in Northern and Southern California (NCAL, SCAL) have annually submitted to the California Department of Health Care Access and Information (HCAI) a Consolidated Community Benefit Plan, commonly referred to as the SB 697 Report (for Senate Bill 697 which mandated its existence). This plan fulfills the annual year-end community benefit reporting regulations under the California Health and Safety Code, Section 127340 et seq. The report provides detailed information and financial data on the Community Benefit programs, services, and activities provided by all KFH hospitals in California.

II. Overview and Description of Community Benefit Programs Provided

A. California Kaiser Foundation Hospitals Community Benefit Financial Contribution

In California, KFH owns and operates 36 hospitals: 21 community hospitals in Northern California and 15 in Southern California, all accredited by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO). KFH hospitals are located in Anaheim, Antioch, Baldwin Park, Downey, Fontana, Fremont, Fresno, Irvine, Los Angeles, Manteca, Modesto, Moreno Valley, Oakland, Ontario, Panorama City, Redwood City, Richmond, Riverside, Roseville, Sacramento, San Diego, San Francisco, San Jose, San Leandro, San Marcos, San Rafael, Santa Clara, Santa Rosa, South Bay, South Sacramento, South San Francisco, Vacaville, Vallejo, Walnut Creek, West Los Angeles, and Woodland Hills.

In 2024, Kaiser Foundation Hospitals in Northern and Southern California Regions provided a total of $**1,817,728,928** in Community Benefit for a diverse range of community projects, medical care services, research, and training for health and medical professionals. These programs and services are organized in alignment with SB697 regulations:

- Medical Care Services for Vulnerable Populations
- Other Benefits for Vulnerable Populations
- Benefits for the Broader Community
- Health, Research, Education and Training

A breakdown of financial contributions is provided in Table A. Note that ‘non-quantifiable benefits’ will be highlighted in the Year end Results section of KFH Community Benefit Plan, where applicable.

Table A

2024 Community Benefits Provided by Kaiser Foundation Hospitals in California (Endnotes in Appendix)

Category	Total Spend
Medical Care Services for Vulnerable Populations	
Medi-Cal shortfall[1]	$713,469,866
Charity care: Medical Financial Assistance Program[2]	$775,417,176
Grants and donations for medical services[3]	$32,093,429
Subtotal	***$1,520,980,471***
Other Benefits for Vulnerable Populations	
Watts Counseling and Learning Center[4]	$4,405,591
Educational Outreach Program[4]	$805,369
Youth Internship and Education programs[5]	$5,909,392
Grants and donations for community-based programs[6]	$44,509,093
Community Benefit administration and operations[7]	$10,303,073
Subtotal	***$65,932,518***
Benefits for the Broader Community	
Community health education and promotion programs	$1,405,096
Community Giving Campaign administrative expenses	$461,693
Grants and donations for the broader community[8]	$9,385,626
National Board of Directors fund	$742,602
Subtotal	***$11,995,017***
Health Research, Education, and Training	
Graduate Medical Education[9]	$131,903,855
Non-MD provider education and training programs[10]	$42,155,356
Grants and donations for the education of health care professionals[11]	$4,163,885
Health research	$40,597,825
Subtotal	***$218,820,921***
TOTAL COMMUNITY BENEFITS PROVIDED	**$1,817,728,928**

B. Medical Care Services for Vulnerable Populations

Medi-Cal

Kaiser Permanente provides coverage to Medi-Cal members in 32 counties in California through both direct contracts with the Department of Health Care Services (DHCS), and through delegated arrangements with other Medi-Cal managed care plans (MCPs). Kaiser Permanente also provides subsidized health care on a fee-for-service basis for Medi-Cal beneficiaries not enrolled as KFHP members. Reimbursement for some services is usually significantly below the cost of care and is considered subsidized care to non-member Medi-Cal fee-for-service patients.

Charitable Health Coverage

The Charitable Health Coverage program provides health care coverage to low-income individuals and families who do not have access to other public or private health coverage. CHC programs work by enrolling qualifying individuals in a Kaiser Permanente Individual and Family Health Plan. Through CHC, members' monthly premiums are subsidized, and members do not have to pay copays or out-of-pocket costs for most care at Kaiser Permanente facilities. Through CHC, members have a medical home that includes comprehensive coverage, preventive services and consistent access through the "front door" of the health delivery system.

Medical Financial Assistance

The Medical Financial Assistance program (MFA) improves health care access for people with limited incomes and resources and is fundamental to Kaiser Permanente's mission. Our MFA program helps low-income, uninsured, and underinsured patients receive access to care. The program provides temporary financial assistance or free care to patients who receive health care services from our providers, regardless of whether they have health coverage or are uninsured.

C. Other Benefits for Vulnerable Populations

Watts Counseling and Learning Center (SCAL)

Since 1967, the Watts Counseling and Learning Center (WCLC) has been a valuable community resource for low-income, inner-city families in South Central Los Angeles. WCLC provides mental health and counseling services, educational assistance to children with learning disabilities, and a state-licensed and nationally accredited preschool program. Kaiser Permanente Health Plan membership is not required to receive these services, and all services are offered in both English and Spanish. This program primarily serves the KFH-Downey, KFH-South Bay and KFH-West LA communities.

Educational Outreach Program (SCAL)

Since 1992, Educational Outreach Program (EOP) has been empowering children and their families through several year-round educational, counseling, and social programs. EOP helps individuals develop crucial life-skills to pursue higher education, live a healthier lifestyle through physical activity and proper nutrition, overcome mental obstacles by participating in counseling, and instill confidence to advocate for the community. EOP primarily serves the KFH-Baldwin Park community.

Youth Internship and Education Programs (NCAL and SCAL)

Youth workforce programs such as the Summer Youth Employment Programs, IN-ROADS or KP LAUNCH focus on providing underserved students with meaningful employment experiences in the health care field. Educational sessions and motivational workshops introduce them to the possibility of pursuing a career in health care while enhancing job skills and work performance. These programs serve as a pipeline for the organization and community-at-large, addressing workforce shortages and enhancing cultural competency within the health care workforce.

D. Benefits for the Broader Community

Community Health Education and Health Promotion Programs (NCAL and SCAL)

Health Education provides evidence-based clinically effective programs, printed materials, and training sessions to empower participants to build healthier lifestyles. This program incorporates tested models of behavior change, individual/group engagement and motivational interviewing as a language to elicit behavior change. Many of the programs and resources are offered in partnership with community-based organizations, and schools.

E. Health Research, Education, and Training Programs

Graduate Medical Education (GME)

The Graduate Medical Education (GME) program provides training and education for medical residents and interns in the interest of educating the next generation of physicians. Residents are offered the opportunity to serve a large, culturally diverse patient base in a setting with sophisticated technology and information systems, established clinical guidelines and an emphasis on preventive and primary care. The majority of medical residents are studying within the primary care medicine areas of family practice, internal medicine, ob/gyn, pediatrics, preventive medicine, and psychiatry.

Non-MD Provider Education and Training Programs

Kaiser Permanente provides a range of training and education programs for nurse practitioners, nurses, radiology and sonography technicians, physical therapists, post-graduate psychology and social work students, pharmacists, and other non-physician health professionals. This includes Northern California Region's Kaiser Permanente School of Allied Health Sciences, which offers 18-month training programs in sonography, nuclear medicine, and radiation therapy, and Southern California Region's Hippocrates Circle Program, which was designed to provide youth from underserved communities with an awareness of career opportunities as a physician.

Health Research

Kaiser Permanente's research efforts are core to the organization's mission to improve population health, and its commitment to continued learning. Kaiser Permanente researchers study critical health issues such as cancer, cardiovascular conditions, diabetes, behavioral and mental health, and health care delivery improvement. Kaiser Permanente's research is broadly focused on three themes: understanding health risks; addressing patients' needs and improving health outcomes; and informing policy

and practice to facilitate the use of evidence-based care. Kaiser Permanente is uniquely positioned to conduct research due to its rich, longitudinal, electronic clinical databases that capture virtually complete health care delivery, payment, decision-making and behavioral data across inpatient, outpatient, and emergency department settings.

III. Community Served

A. Kaiser Permanente's Definition of Community Served

Kaiser Permanente defines the community served by a hospital as those individuals residing within its hospital service area. A hospital service area includes all residents in a defined geographic area surrounding the hospital and does not exclude low-income or underserved populations.

B. Demographic Profile of Community Served

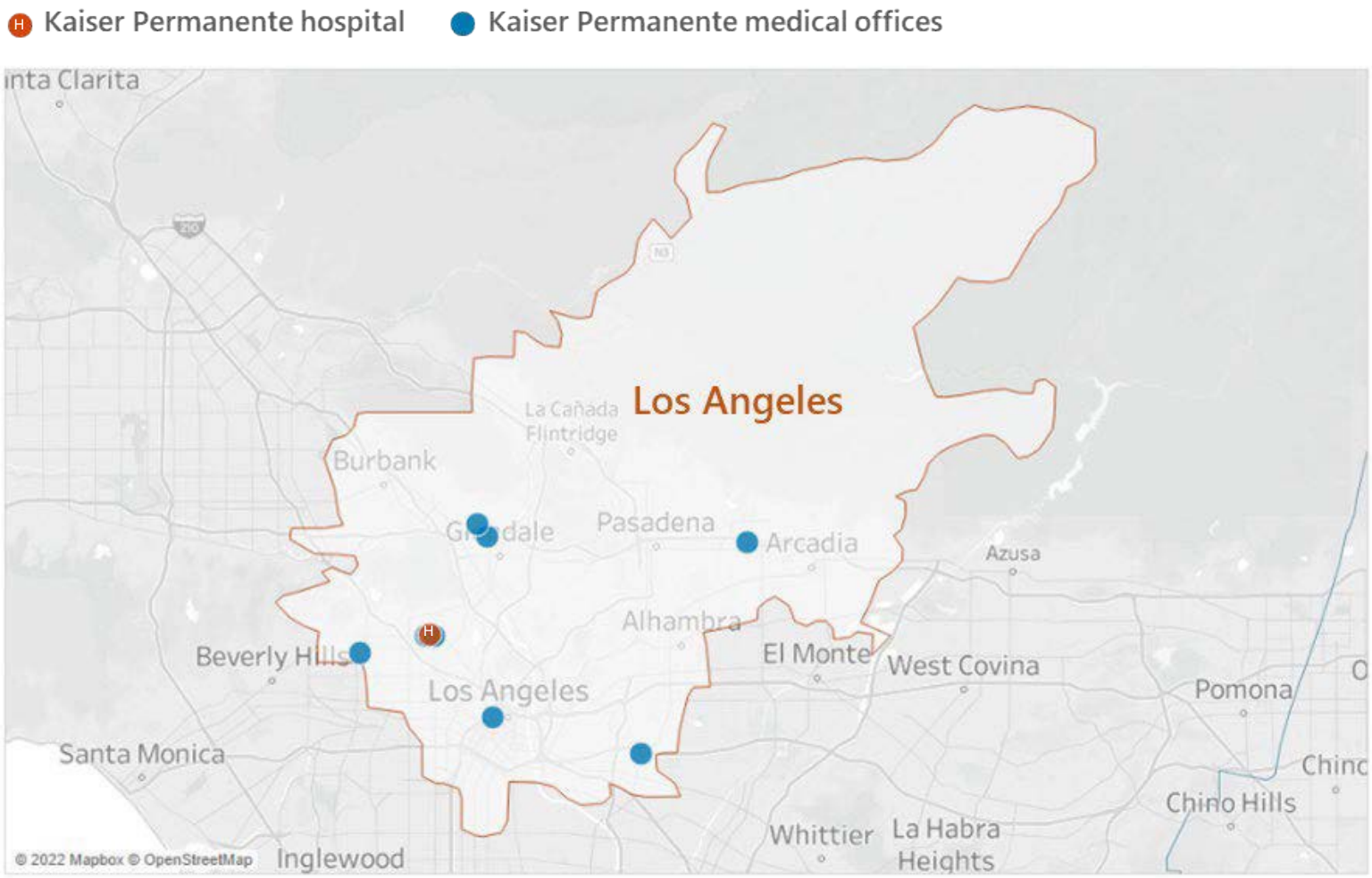
KFH- Los Angeles service area demographic profile

Total population:	**2,185,672**
American Indian/Alaska Native	0.1%
Asian	20.5%
Black	4.0%
Hispanic	47.1%
Multiracial	2.2%
Native Hawaiian/other Pacific Islander	0.1%
Other race/ethnicity	0.2%
White	25.8%
Under age 18	19.2%
Age 65 and over	13.6%

SOURCE: AMERICAN COMMUNITY SURVEY, 2015-2019

C. Map and Description of Community Served

KFH- Los Angeles service areas



The KFH-Los Angeles service area includes Alhambra, Altadena, Arcadia, Burbank, Glendale, La Cañada Flintridge, La Crescenta, Los Angeles, Monrovia, Monterey Park, Montrose, Pasadena, San Gabriel, San Marino, Sierra Madre, South Pasadena, and West Hollywood (East). Communities include Atwater, Boyle Heights, Chinatown, City Terrace, Downtown, Eagle Rock, East Los Angeles, Echo Park, El Sereno, Glassell Park, Hancock Park, Highland Park, Hollywood, Hollywood Hills, Laurel Canyon, Los Feliz, Montecito Heights, and Silverlake.

IV. Description of Community Health Needs Addressed

KFH- Los Angeles is addressing the following health needs during the 2023-2025 Implementation Strategy period. For information about the process and criteria used to select these health needs and the health needs that were not selected (and the rationale), please review the 2022 CHNA Report and the 2023-2025 Implementation Strategy Report. (http://www.kp.org/chna).

A. Health Needs Addressed

1. **Mental & behavioral health:** Communities across the country are experiencing a critical lack of capacity to meet the increased demand for mental health services. Los Angeles County residents, like many residents across the state, experience mental and behavioral health challenges that were further exacerbated due to the COVID-19 pandemic. For example, Los Angeles County residents report 3.6 poor mental health days per month, compared to 3.7 days across California and 4 days nationwide. Interviewees highlighted the interconnectedness of mental health and substance use issues. Feelings of depression or anxiety can lead people to use or abuse substances, which further exacerbate mental health conditions. Interviewees highlighted how mental health concerns are more prevalent for some the populations they work with in the Los Angeles service area including those experiencing homelessness, those with previous experience with the criminal justice system, Trans individuals, particularly Trans women, and youth.
2. **Income & employment:** In the Los Angeles service area, the unemployment rate is 17 percent, which is higher than both the state (15.8 percent) and national (13 percent) rates. While the median household income in the Los Angeles service area ($66,770) is slightly less than the national average ($70,036), there are significant differences when it comes to per capita income. Across Los Angeles County, Black residents earn $29,500 less than their white counterparts, and Latino/a communities earn roughly $40,000 less. Community experts shared that although many residents hold multiple part-time jobs, they do not receive benefits through employment. They also indicated that many of the jobs in the service area are low paying, require minimal skill (e.g., jobs in retail or food service), and are within small businesses that are often unable to increase employee wages. Community experts offered strategies for improving the economic situation in the county including creating supportive guidance through employment. This includes different methods of spreading information about new job opportunities, and cooperation with businesses to create systems that ensure sustained employment for those with additional mental health needs.
3. **Housing:** In the Los Angeles service area 33 percent of residents own their home compared to 55 percent across the state. In the Los Angeles service area, 44 percent of Los Angeles service area residents have housing costs that are greater than 50 percent of their income and 13 percent of residents live in overcrowded housing. In the Los Angeles service area, communities of color and immigrant families are likely to experience severe housing burden and live in overcrowded housing. Community representatives shared that homelessness is a huge concern that continues to grow throughout Los Angeles. Many local experts noted the interconnectedness between

homelessness, mental health, and substance use. Interviewees shared their current strategies and initiatives to provide housing support to residents including LA City Homeless Initiative's housing and rental assistance, Project Home Key and Hollywood Housing.

4. **Access to care:** In the Los Angeles service area, 12 percent of the population is uninsured. Within the service area, there are also disparities in access to care. In the southwest and east portions of the service area, more than 50 percent of the population are people of color and they also have a higher percentage of uninsured residents compared to other regions of the service area. Interviewees shared that some residents may be concerned about accessing care because of their immigration status. Community representatives also talked about the lack of culturally responsive providers and those focused on the specific care needs of communities of color and LGBTQ+ individuals. They also identified strategies to address access to care including partnering with the local education system to develop mobile clinics, hosting guest lecturers for health education, or creating internships and additional clinical placements.
5. **Sexual health:** According to the County of Los Angeles Public Health, in 2019, early syphilis rates were the highest among Pacific Islanders (141 per 100,000) and Black (135 per 100,000) residents. In 2019, both Black males and females had the highest rate of HIV diagnoses compared to other ethnicities. Among men the highest rates of diagnoses were seen in Central, Hollywood-Wilshire, and Southeast Health Districts. The highest rates for women were seen in Central, South, Long Beach, Southwest and Inglewood Health Districts. Community experts shared that STIs are a concern for the LGBTQ+ and homeless populations. Interviewees also identified that those who use substances may also be at high risk for STIs. Interviewees shared current resources and partnerships that provide support for sexual health within the Los Angeles service areas. Several community-based organizations provide regular education and outreach to community members. There are also partnerships within the service area to provide free HIV testing and treatment for the homeless population.
6. **Structural inequities:** Centuries of structural inequities, reflected in local, state, and national policy, have resulted in extreme differences in opportunity and have fueled enduring health inequities. In the Los Angeles service area, Service Planning Areas (SPAs) 4 and 6 both SPAs have a high percentage of People of Color (95 percent of community residents in SPA 6 and 75 percent in SPA 4). Within these SPAs, some of the outcomes of long-term structural inequities manifest within communities of color. For example, within SPA 4, there are neighborhoods (i.e., Boyle Heights, Chinatown, Downtown Los Angeles, East Los Angeles, Koreatown, Hollywood, Pico Heights, and West Hollywood) that have higher rates of poverty than the state and more than 50 percent of the population identifies as a person of color.

B. Health Needs Not Addressed

KFH- Los Angeles is addressing all significant needs identified in the 2022 CHNA implementation strategy.

V. Year-End Results

A. Community Benefit Financial Resources

Total Community Benefit expenditures are reported as follows:

- Medical care services for vulnerable populations include unreimbursed inpatient costs for participation in Kaiser Permanente-subsidized and government-sponsored health care insurance programs.
- Since 2006, figures for subsidized products have been reported on a cost-basis, (e.g., the difference of total revenues collected for services less direct and indirect expenses).
- Grant and donations are recorded in the general ledger in the appropriate amount and accounting period on an accrual, not cash basis. The amount reported reflects hospital-specific, unreimbursed expenditures. When hospital-specific expenditures are not available, dollars are allocated to each hospital based on the percentage of KFHP members.
- The unreimbursed portion of medical, nursing, and other health care professional education and training costs are included.

Resource allocations are reported as follows:

- Financial expenditures are reported in exact amounts, if available, by hospital service area.
- If exact financial expenditure amounts are not available by hospital service area, then regional expenses are allocated proportionally based on KFHP membership or other quantifiable data.

Table B

KFH-Los Angeles Community Benefits Provided in 2024 (Endnotes in Appendix)

Category	Total Spend
Medical Care Services for Vulnerable Populations	
Medi-Cal shortfall[1]	$29,314,454
Charity care: Medical Financial Assistance Program[2]	$26,733,899
Grants and donations for medical services[3]	$87,857
Subtotal	***$56,136,210***
Other Benefits for Vulnerable Populations	
Youth Internship and Education programs[5]	$388,256
Grants and donations for community-based programs[6]	$937,674
Community Benefit administration and operations[7]	$394,891
Subtotal	***$1,720,821***
Benefits for the Broader Community	
Community health education and promotion programs	$102,749
Community Giving Campaign administrative expenses	$12,081
Grants and donations for the broader community[9]	$84,706
National Board of Directors fund	$21,397
Subtotal	***$220,933***
Health Research, Education, and Training	
Graduate Medical Education[10]	$23,659,251
Non-MD provider education and training programs[11]	$1,470,802
Grants and donations for the education of health care professionals[12]	$37,759
Health research	$535,842
Subtotal	***$25,703,653***
TOTAL COMMUNITY BENEFITS PROVIDED	**$83,781,616**

B. Examples of Activities to Address Selected Health Needs

All Kaiser Foundation Hospitals planned for and drew on a broad array of resources and strategies to improve the health of our communities. Resources and strategies deployed to address the identified health needs of communities include grantmaking, in-kind resources, and collaborations with community-based organizations such as local health departments and other hospital systems. Kaiser Permanente also leverages internal programs such as Medicaid, charitable health coverage, medical financial assistance, health professional education, and research to address needs prioritized in communities. Grants to community-based organizations are a key part of the contributions Kaiser Permanente makes each year to address identified health needs, and we prioritize work intended to reduce health disparities and improve health equity. In addition to contributing financial resources, we leveraged assets from across Kaiser Permanente to help us achieve our mission to improve the health of communities. The complete 2022 IS report is available at https://www.kp.org/chna.

For each priority health need in the 2022 Implementation Strategy, examples of stories of impact are described below. Additionally, Kaiser Permanente SCAL provided significant contributions to the California Community Foundation (CCF) in the interest of funding effective long-term, strategic community benefit initiatives. These CCF -managed funds are not included in the financial totals for 2024.

Access to care

KFH-Los Angeles ensures access to care by serving those most in need of health care through Medicaid, medical financial assistance, and charitable health coverage.

Care and coverage programs, KFH-Los Angeles

Year	Care & coverage details	Medicaid, CHIP, and other government-sponsored programs	Charitable Health Coverage	Medical Financial Assistance	Total
2024	**Investment**	$29,314,454	$0	$26,733,899	$56,048,353
2024	**Individuals served**	42,482	49	21,961	64,492

The Los Angeles service area had a high rate of uninsured people (12%) compared to the state (8%). Low-income, people of color in the Los Angeles service area were more likely to be affected by disparities in accessing health care and interviewed community leaders expressed a lack of culturally responsive providers. In an effort to combat health coverage and enrollment barriers, Kaiser Permanente partnered with numerous organizations, such as Asian Pacific Health Care Venture, City of Pasadena, Los Angeles Unified School District, Maternal and Child Health Access Project, Program for Torture Victims, and Young and Healthy in Los Angeles to enroll as many people as possible through Medi-Cal Expansion, transition to marketplace coverage, and other coverage options such as Kaiser Permanente’s Community Health Care Program. Focused on outreach, engagement, retention, and education on coverage options and benefits, this partnership provided various levels of support including insurance enrollment, pre-screening, direct application assistance, and dissemination of print and digital materials to the community. The services targeted low-income and immigrant families and communities with incomes of up to 300% of the federal poverty level. The partnership aimed to reach and enroll approximately 8,400 individuals in health insurance programs.

Housing

Like many areas in Los Angeles County, the Los Angeles service area is prohibitively expensive, disproportionately affecting communities of color and households with low incomes. There are significant proportions of the service area population that experience severe housing burdens, live in overcrowded housing, and face housing instability and homelessness. With the aim of increasing housing stability, preventing evictions, and ensuring adequate, affordable, safe, and stable housing for community residents, Kaiser Permanente has established a partnership with Neighborhood Legal Service of Los Angeles to strengthen their legal aid capacity and Medical-Legal Partnership programs. The funding supported increased access to housing-related legal services provided by professional staff to offer a variety of legal support to protect tenants' rights, and to resolve and arrive at acceptable landlord-tenant agreements. These legal services were supplemented with case management and linkages to other

government-funded programs. To date, this partnership has assisted over 700 individuals and families facing housing insecurity and at risk of homelessness.

Income & employment

Income and employment remain important needs in the Los Angeles service area, especially for neighborhoods with a higher percentage of people of color who have lower job accessibility. Community experts shared that many residents hold multiple part-time jobs, many of which are low paying, require minimal skills, and are within small businesses that are often unable to increase employee wages. To address this, Kaiser Permanente teamed up with P.F. Bresee Foundation and Neighborhood Housing Services of Los Angeles to support low- to moderate-income individuals and households to improve their financial health and stability through increased access to financial coaching, credit building knowledge, safe financial products, and tax preparation services. Through the support from Kaiser Permanente, these organizations also received training to improve and expand upon their financial coaching services. With this collaboration, approximately 4,045 low-income individuals and households were reached.

Mental & behavioral health

Mental health affects all areas of life, including a person's physical well-being, ability to work and perform well in school, and to participate fully in family and community activities. Community leaders highlighted the interconnectedness of mental health and substance use issues, especially prevalent for some of the populations they work with in the Los Angeles service area, such as those experiencing homelessness, those with previous experience with the criminal justice system, transwomen, and youth. As a strategy to overcome this, Kaiser Permanente teamed up with Rainbow Labs Mentoring, Inc., to develop the next generation of LGBTQ+ leaders through "LGBTQ+ Youth Empowerment Pathways," a nine-month program led by LGBTQ+ adult mentors and facilitators. This initiative targets LGBTQ+ youth ages 13 to 18 throughout Los Angeles County and features leadership workshops, panels, advocacy training, financial literacy curriculum development and education, and mentorship to foster personal growth and community engagement among LGBTQ+ teens. The initiative aims to better equip staff, mentors, and volunteers with the skills and knowledge to support youth mental health and well-being, increase awareness and utilization of mental health services and resources among youth participants, and improve emotional resilience, leadership skills, and positive social connections for youth. Approximately one hundred youth, parents and caregivers, staff, and volunteers were reached through the program.

Sexual health

The Los Angeles service area is experiencing higher rates of sexually transmitted infections (STIs) compared to the state average. Although many STIs are preventable and community-based organizations in the Los Angeles service area provide regular education and outreach to community members, there is a higher chlamydia rate and number of HIV deaths compared to the state and a higher rate of HIV/AIDS prevalence compared to the national rate. To address this issue, Kaiser Permanente is in collaboration with the Asian Pacific AIDS Intervention Team, a division of Special Service for Groups, who is one of the nation's largest providers to HIV/AIDS prevention and care services for the Asian and Pacific Islander communities as well as Bienestar Human Services, a community-based social services organization that focused on identifying and addressing emerging health issues faced by Hispanic

or Latino and LGTBQ+ populations. The goal in partnership is to implement the HIV/STI Testing Program to serve underrepresented communities and LGBTQ+ individuals living with or at increased risk for HIV/AIDS and STIs through increased access to HIV/STI testing, prevention, and treatment through an equitable client-centered approach that addressed barriers to culturally informed care. The expected outcomes were for clients to receive access to HIV testing, referrals to care, Pre-Exposure Prophylaxis (PrEP) services, and increased knowledge of safe sex behaviors. The partnership aims to reach approximately 100 individuals at risk of HIV and other sexually transmitted infections.

Structural inequities

In the Los Angeles service area as in many other communities throughout the country, people of color were more likely to have certain chronic health conditions than their white counterparts as a result of structural inequities. To address this in the Los Angeles service area, Kaiser Permanente partnered with Public Health Foundation Enterprises (PHFE), Inc. to increase engagement with WIC (Women, Infants & Children) among Black and African American women, infants, and children. Under the Black Maternal Health Initiative, “CinnaMoms” was created, which was a space where providers were committed to supporting, encouraging, and creating a welcoming space for Black/African American families on their breastfeeding and parenthood journey. The goal is to enhance community care in the Crenshaw District by further developing CinnaMoms’ evidence-based model and strengthening the capacity of CinnaMoms to address the social drivers of maternal health. Through these efforts, by November 30, 2025, approximately 250 Black and African American women in the program received education and enrollment support for WIC and other federal and state programs, parenting essentials, and ride-share support.

VI. Appendix

Appendix A
2024 Community Benefits Provided by Hospital Service Area in California

NORTHERN CALIFORNIA HOSPITALS	
Hospital	**Amount**
Antioch	$47,720,034
Fremont	$22,970,664
Fresno	$34,586,158
Manteca	$71,760,342
Modesto	$36,893,159
Oakland	$99,321,992
Redwood City	$26,948,137
Richmond	$47,225,724
Roseville	$81,181,909
Sacramento	$124,225,099
San Francisco	$50,536,977
San Jose	$54,457,366
San Leandro	$53,802,209
San Rafael	$20,297,900
Santa Clara	$77,243,071
Santa Rosa	$40,236,328
South Sacramento	$106,133,891
South San Francisco	$22,693,794
Vacaville	$38,961,577
Vallejo	$53,996,988
Walnut Creek	$41,424,543
Northern California Total	**$1,152,617,863**

SOUTHERN CALIFORNIA HOSPITALS	
Hospital	**Amount**
Anaheim	$30,956,879
Baldwin Park	$40,954,828
Downey	$61,000,446
Fontana	$95,164,025
Irvine	$18,244,549
Los Angeles	$83,781,616
Moreno Valley	$26,631,059
Ontario	$11,541,841
Panorama City	$44,037,549
Riverside	$47,736,423
San Diego (2 hospitals)	$65,670,970
San Marcos	$14,424,173
South Bay	$39,041,738
West Los Angeles	$59,341,185
Woodland Hills	$26,583,785
Southern California Total	**$665,111,065**

Appendix B
Endnotes

[1] Amount includes hospital-specific, unreimbursed expenditures for Medi-Cal Managed Care members and Medi-Cal Fee-for-Service beneficiaries on a cost basis.

[2] Amount includes unreimbursed care provided to patients who qualify for Medical Financial Assistance on a cost basis.

[3] Figures reported in this section for grants and donations consist of charitable contributions to community clinics and other safety-net providers and support access to care.

[4] Applicable to only SCAL - Watts Counseling and Learning Center's service expenses are divided among three hospitals: KFH-Downey, KFH-South Bay, and KFH-West Los Angeles. Educational Outreach Program service expenses are only applicable to KFH-Baldwin Park.

[5] Figures reported in this section are expenses for youth internship and education programs for under-represented populations.

[6] Figures reported in this section for grants and donations consist of charitable contributions to community-based organizations that address the nonmedical needs of vulnerable populations.

[7] The amount reflects the costs of the community benefit department and related operational expenses.

[8] Figures reported in this section for grants and donations are aimed at supporting the general well-being of the broader community.

[9] Amount reflects the net expenditures for training and education for medical residents, interns, and fellows.

[10] Amount reflects the net expenditures for health professional education and training programs.

[11] Figures reported in this section for grants and donations consist of charitable contributions made to external nonprofit organizations, colleges, and universities to support the training and education of students seeking to become health care professionals.