community benefit report

for the fiscal year ending June 30, 2007

the right care. right here.
A message to the community

Dear friends:

Each year at this time, El Camino Hospital provides a report to the State of California outlining the services we provide which are considered community benefit programs. As a not-for-profit organization, it is both our obligation and our commitment to use our tax-exempt status for the good of the community that supports us. That means we devote a portion of our revenue to helping people who cannot pay and who might not have ready access to services unless we provided them. We also provide financial support to programs that are necessary to maintain the quality of health care in the community.

The report, which we also make available to the community, contains a few select examples of the work we do as part of our community benefit program. We’ve chosen a few programs that we haven’t highlighted in past reports; the full list appears on the back inside cover.

Each year when we prepare our community benefit report, we are struck anew by how much the idea of helping the community is woven throughout El Camino Hospital and its programs. We hear stories from individuals and departments about holiday gift baskets, food drives, donations to the emergency department clothes closet, spending weekends building houses for poor families, calling patients at home after their hospital stays to make sure all is well, listening to the concerns of new moms and dads and many more acts of kindness than we can list here. That’s why we can say confidently that at El Camino Hospital, while community benefit has a form, structure and guidelines, it also has a heart. Caring for the community and the patients we serve is an essential value at El Camino Hospital and we’re exceptionally proud of the vital role that we continue to play in our community’s health.

Sincerely,

Kenneth D. Graham
Chief Executive Officer
El Camino Hospital’s mission is to be an innovative, publicly accountable and locally controlled comprehensive health care organization that cares for the sick, relieves suffering and provides quality, cost competitive services to improve the health and well being of our community.

Our vision for the future is that we will create the preferred community health care destination of Silicon Valley, focused on quality, innovation, the individualized patient experience and community accountability: integrating technology and efficiency within a caring environment.
A history of helping

More than an obligation or a list of programs, community outreach at El Camino Hospital is an essential part of its beginnings, its history and traditions, and its identity today.

El Camino Hospital is located among communities that have prospered with the emergence and growth of Silicon Valley. Many in the community, however, still can’t easily get the medical care they need because they cannot afford health insurance, are unemployed, or are frail, elderly or poor. El Camino Hospital is committed to ensuring these individuals and any others who need help, get the health care they need and deserve.

The hospital offers several valuable community programs such as the RotaCare Clinic; free immunizations for uninsured children and adults; lectures and screenings to inform people about preventing disease and managing their health.

Going beyond community programs, the hospital’s generous charity care policy ensures that individuals who cannot pay for treatments and medications can still receive the care they need. For individuals without insurance or for individuals electing to pay cash, the hospital offers a 75% discount on hospital bills when paid at the time of service.

The hospital also maintains several services even at a financial loss because the community needs them — services such as the hospital’s three outpatient dialysis centers located throughout Santa Clara County; mental health services, such as a 24-hour psychiatric line; free breastfeeding services for new mothers, regardless of whether the baby was born at El Camino Hospital; nurses’ and social workers’ funds that can be activated with no red tape to help someone in need; scholarships for struggling students.

El Camino Hospital is proud to be a partner with this community, helping people when they need it most in ways both large and small.

What is community benefit?

Community benefit refers to programs or activities that provide treatment and/or promote health and healing as a response to identified community needs. To be considered a community benefit, a program must meet one of the following criteria:

- It doesn’t cover the cost of providing care.
- It responds to needs of special populations such as persons living in poverty and other disenfranchised persons.
- It supplies services or programs that would likely be discontinued, or would need to be provided by another not-for-profit or government provider, if the decision were made on a purely financial basis.
- It responds to public health needs.
- It involves education or research that improves overall community health.

Source: A Guide for Planning and Reporting Community Benefit, Catholic Health Association
Life goes on

“Nothing is impossible unless you make it so,” says dialysis patient David F., San Jose. David, 23, has been on dialysis since 2004, but hasn’t let the four times a week treatments at El Camino Hospital’s Evergreen Dialysis Center slow him down from his goals. A student at Foothill College, David is certified as a medical assistant, is well on his way to getting his EMT certification and plans to become a nurse practitioner, specializing in pediatrics. In his spare time, he tutors and works weekends at Great America doing customer service.

“I look forward to getting a kidney transplant someday,” he says, “but in the meantime, I’m not letting dialysis slow me down. You just can’t let conditions like a chronic illness disable you.”

El Camino Hospital’s three outpatient dialysis centers serve about 740 patients a year. As a not-for-profit community hospital, El Camino Hospital strives to meet the health needs of the community even if it means providing services at a financial loss. Because Medicare does not adequately reimburse the hospital for the costs of the dialysis program, it is considered a subsidized service and therefore a community benefit. Other services in this category at El Camino Hospital are emergency care, subacute care and behavioral health services as well as palliative care.
Starting her dialysis treatments on September 10, 2001, Star N. felt sure the horrible events that followed one day later were a bad omen. Six years later, she tells a different story — one of success and hope. It started when a dialysis technician told her not to focus on her treatments as mandatory, even though they are, but instead to think of the daily visits as going to the health spa. “That really worked,” she says. “Once done for the day, I can spend the rest of my time doing what I want.” With the encouragement of the social worker and the dialysis staff, she took advantage of an early retirement package and started taking classes at West Valley College. Since enrolling, she has secured her AA degree and is now working on her Bachelors. “My next step is to get a kidney transplant,” she says, “but while I’m waiting, I’m so thankful to be living in a time when technology can keep me not just alive, but thriving.”
More than a free clinic

Four-year-old Juan came to the RotaCare Clinic for his very first physical in mid-2007. Juan and his family had moved to the United States from Mexico only four months earlier. At the clinic, new immigrant children automatically get scheduled for a lab test that screens for lead exposure. Juan’s initial results came back positive. A second test showed a marked increase in Juan’s lead level.

Lead poisoning is one of the most common and preventable pediatric health problems in the United States today. Although legislation has decreased the amount of lead in gasoline, paint and metal components, lead is still present in older houses, lead-based crystal or pottery, and consumer products. Exposure to lead in the early years of life can be devastating, even resulting in coma and death. Low levels of exposure may result in reduced IQ, slowed body growth, hearing difficulties, kidney damage and behavior and attention problems.
Juan was one of the lucky ones. The clinic contacted the Lead Exposure Program at the Santa Clara County Health Department. Staff there made a visit to Juan’s home where they located the cause of the lead poisoning — the pottery the family had brought from Mexico and was using for their daily meals. Lead exposure tests on all other members of Juan’s household came out negative, except for a two-year-old sibling. Juan and his sibling receive ongoing care and testing at Valley Medical Center through the Lead Exposure Program. Neither child is expected to have any long term medical problems.

Now in its 11th year, the RotaCare Clinic at El Camino Hospital provides medical services to individuals who are uninsured or underinsured. In addition to basic care, such as an exam and medications, the clinic has expanded its services so that patients have access to a range of specialty services (see sidebar). This kind of care is especially difficult to obtain through the county health system because the system has become so impacted with people seeking care. This level of service is possible at the RotaCare Clinic because so many physicians in the community have made the commitment to volunteer service through the clinic.

### RotaCare Clinic services
- Episodic care
- Cardiology
- Children’s physicals
- Chronic disease case management
- Dermatology
- Gynecology
- Endocrinology
- Nephrology
- Nutrition counseling
- Otolaryngology (ENT)
- Orthopedics
- Psychological counseling
- Pulmonology
- Rheumatology
- Ophthalmology/optometry

### Thank you to our volunteers!

**Number:**
270 of which 91 are physicians

**Type:**
Physicians (primary care and specialists)
Physician’s assistants
Nurse practitioners
Pharmacists
Nurses
Medical assistants
Pharmacy techs
Interpreters
Medical students
Lay volunteers
Removing barriers to care

In El Camino Hospital’s community, no one in need should have to go without medical care.

Any individual who cannot pay the bill for emergency services or the cost of a hospital stay and who meets the hospital’s guidelines for charity care, is eligible for a reduction and even the elimination of a hospital bill.

“We are committed to letting our community know that if you are down on your luck, between jobs, or without insurance, that it’s very possible that El Camino Hospital will be able to provide the care you need even if you cannot pay,” says Grace Sanders, director of patient accounts.

The number of people who apply for financial assistance is not as high as it would be if El Camino Hospital was located in the inner city, or if it served a more transient population. Nevertheless the need is definitely real.

“Our financial counselors give information about the hospital’s self pay discount and charity care policies to many, many patients. They are not all indigent. Many of the people who need financial assistance are passing through some difficult phase in their lives — they’re divorced or have just lost a job. Many are contractors or otherwise self employed and have limited incomes and no health insurance.

Most come in through the emergency department,” she continues. “They don’t have a regular doctor and they wait as long as they can before seeking help. Many times that means more than a simple emergency visit — it turns into a lengthy and expensive hospital stay.”
With the cost of living in Silicon Valley higher than in most areas, El Camino Hospital has set its threshold for charity care higher than the national standard: an individual or family must show earnings at or below 400% of the Federal poverty level. The recommended guideline set by the State of California for non-profit hospitals is 350% of the Federal poverty level.

Using this formula, if an individual does not qualify for state and federal programs (Medi-Cal and Medicare) and makes no more than $39,200 annually, he or she qualifies for charity care at El Camino Hospital. If a family — mother, father and a child — make no more than $66,400 per household per year, they qualify.

For patients who make above this standard, the hospital can offer a second option: a 75% cash discount policy for patients who pay in cash. If they choose to do so, the hospital will spread out the remaining 25% in five monthly payments at no interest, and works with an agency in the community who has extended payments up to 12 months, also interest free.

**Highlights of our charity care program**

- El Camino Hospital strives to ensure that the financial capacity of our patients does not prevent them from seeking or receiving medical care at El Camino Hospital.

- Policy applies to both inpatients and outpatients.

- Applies to patients who are uninsured, underinsured, ineligible for government programs, and are otherwise unable to pay for their medical services.

- Patients must be at or below 400% of Federal poverty level (FPL).

- All information is kept confidential.

- To learn more about El Camino Hospital’s charity care program, go to www.elcaminohospital.org/charitycare, or call 650-940-7220.
A unique community need

Since early 2006, 800 participants have been screened for evidence of heart disease risk factors at the hospital’s South Asian Heart Center. Research shows that South Asians have a four times higher risk of coronary artery disease compared to the general population, with the disease often developing at an earlier age.

Results of the first 17 months of screenings include:

- The mean age of participants was 44 ± 11 years.
- Most participants were born on the Indian subcontinent.
- Nearly a quarter (23 percent) had hypertension.
- Ten percent had diabetes.
- 36 percent had a family history of cardiovascular disease.
- 51 percent were overweight.
- 19 percent had an elevated fasting blood sugar reflecting insulin resistance or frank diabetes.
- There were alarming rates of cholesterol disorders, including low HDL levels.
- 15 percent of men and 9 percent of women had metabolic syndrome — a combination of conditions linked to blood vessel inflammation, atherosclerosis and diabetes.

Participants coming to the Center reflect the Silicon Valley South Asian population (three percent of the area’s population). They are young, highly educated, and mostly male. The percent-age with risk factors for cardiovascular disease, even in individuals under the age 40, is extraordinarily high.

“The data clearly shows that risk stratification and treatment of the Bay Area South Asian population is an unmet clinical need,” says Dr. Cesar Molina, medical director of the center.

“One of the most important differences in our approach is the age at which we’re screening individuals in our program,” he says. “More than half of heart attacks among South Asians occur by age 50, and a quarter below the age of 40. The best available data indicates that habits that tend to protect individuals from heart disease — such as a vegetarian lifestyle, not smoking and being physically active — may not fully protect this population. That's why it is critical that we change the thinking not only of physicians, but also the South Asian community that is so profoundly affected.”
By 2010, it is estimated that South Asians — who trace their ancestry from India, Bangladesh, Pakistan, Nepal and Sri Lanka — will bear 60 percent of the world’s heart disease burden. At this rate, by 2015 more than 60 million South Asians will suffer from coronary artery disease. The South Asian Heart Center is the first non-profit organization in the world devoted to combating this worldwide epidemic.

With input from a community-wide task force of cardiologists, internists, nurses, nutritionists and family physicians, the Center developed a comprehensive health risk assessment, factoring in family history, medical history, diet, activity, stress and advanced lipid and metabolic testing.

Since the launch of the South Asian Heart Center at El Camino Hospital, the center has conducted outreach to primary care physicians, cardiologists and endocrinologists to raise awareness of the unique coronary artery disease risks of this population and to ask them to adopt these screening protocols for their South Asian patients. More than 400 physicians have attended its symposia, lectures and workshops.
Simple checkup likely saved his life

When Sunnyvale resident Lori Chavers saw the ad for a free skin cancer screening clinic at El Camino Hospital last May she quickly phoned to make appointments for her family. She knew how valuable regular cancer screenings can be; just four years previously, her husband’s regular physical checkup revealed prostate cancer, caught and treated in its earliest stages.

Her husband, 54-year-old Sidney Chavers, wasn’t surprised when El Camino Hospital dermatologist Dr. Andrew Menkes, who examined Chavers at the screening, suggested a biopsy for one of Chavers’ moles. His regular dermatologist had singled out the still-small, but suspicious-looking spot for “wait-and-see” consideration.

Nonetheless, Chavers was stunned when the biopsy came back positive for melanoma, the most serious type of skin cancer. Fortunately, melanoma is nearly 100 percent curable if caught early enough and Chavers’ cancer was in an early stage.

“People are usually shocked when they are told that they have a suspicious lesion, because they do not expect it, which is the point of doing the screening,” said Dr. Menkes. “The fact is that few people know what a cancerous lesion looks like.”

Despite a myriad of warnings in recent years, most people still don’t appreciate what a serious threat skin cancer can be,
as El Camino Hospital’s recent screening demonstrated. Of the 228 people screened, 43 (19 percent) had conditions serious enough to be recommended for biopsy, a procedure that collects a tiny piece of skin for microscopic analysis. While nearly all skin cancers can be successfully treated when caught early, many people miss or ignore the warning signs.

Chavers, who does custom interiors for hot rods, was lucky enough to catch his condition early. The American Cancer Society estimates that nearly 8,100 not-so-lucky people will die from melanoma this year, with 60,000 new cases occurring. And, that’s just one of the three skin cancers that together result in more than 1.3 million new cases annually in the U.S.

Over 90 percent of skin cancers are caused by excess, unprotected sun exposure. Chavers, a lifelong water skier who suffered countless sunburns before becoming aware of the potential associated risks, is now a dedicated user of sun screen and wears long sleeves.

“It’s hard to convince people they should get screened regularly and take precautions against over-exposure,” Chavers said. “I have friends in their 30’s and 40’s who resist the idea of any kind of check-up. But it’s so easy. Go now. Get it done! It’s literally a no-brainer.”

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**Early detection a key to good health**

Each year, El Camino Hospital offers a variety of health screenings to the community. Screenings this year stressed the importance of early detection for skin cancer and for peripheral vascular disease (PVD) — clogged arteries in the legs.

### Skin cancer screening — May 2007
- People screened: 228
- Biopsies recommended: 43 or 18%
- Referrals: 118 people or 52%

### PVD screening — September 2006
- People screened: 36
- Abnormal ABI (ankle/brachial index): 11 people or 30.56%
- Brachial blood pressure >= 140: 3 people or 8.33%

### PVD screening — November 2006
- People screened: 69
- Abnormal ABI: 15 people or 21.7%
- Brachial pressure >= 140: 10 people or 14.5%
- Brachial pressure >=160: 3 people or 4.3%
Two who took time out to help others

For Nidia Farruguia, outreach medical services coordinator at the RotaCare Clinic, it was a little four-year-old boy, badly burned by hot water while his family was cooking breakfast, who confirmed for her why she had decided to go to Cusco, Peru with Interplast in early March 2007. The boy had been treated by Interplast doctors before. After his surgery, he told his father that he would be okay — the strangers who were helping him were doing it because they love him. “Although he was only four, he was able to see that when people help each other — whether providing assistance at a clinic like RotaCare or by doing a life changing plastic surgery through Interplast — they do it because of love.”
Obstetrician Dr. Ann Wong and a colleague took some time out in autumn 2006 to work at a 50-bed hospital in Northern Pakistan. “Because we live in such abundance here in the United States, this medical mission was a way, although small, to be able to give and offer help to others,” she says. Throughout the day, she and her colleagues saw many patients in the clinic who would travel to the hospital in the morning and wait until they were able to be seen. Accompanying Dr. Wong constantly was a young female Pakistani family practice doctor who wanted more OB/GYN training, and who also served as her interpreter. Dr. Wong performed gynecologic surgeries, did cesarean sections, managed many high-risk OB patients, encountered perinatal emergencies, stillbirths, neonatal deaths. They also attended an infant who died from malnutrition. “The trip offered me insight into the practice of medicine in a completely different cultural setting. With limited resources, good medical care may still be rendered. Perspectives change when you learn not to take anything for granted.”
# Community benefit data summary
**Fiscal Year 06–07**

<table>
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<tr>
<th>Category</th>
<th>Amount</th>
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<tr>
<td>Traditional charity care</td>
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<td>Unpaid costs of Medicare</td>
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<td>Unpaid costs of Medi-Cal</td>
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<td>Other public programs</td>
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<td>Community health services</td>
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<td>Health professions education</td>
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<td><strong>Total</strong></td>
<td><strong>$56,000,077</strong></td>
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*Community benefit calculations of financial assistance, Medi-Cal and Medicare costs are based on the uncompensated cost of care, not charges.*
2006-2007 Community Benefit Programs

Advance health care planning/
  Advance Directive assistance
Behavioral health services
Blood pressure screening
Charity care program
Clinical trials
Community Wellness Lecture Series
Diabetes management
Dialysis services
Education and training for future
  health care professionals
Eldercare services
Emergency care
Flu shot program
Grants through El Camino Hospital
  Foundation
Health insurance counseling
Health Library & Resource Center
Health screenings
HICAP counseling for seniors
Immunization program
Lifeline
Maternal Connections services
Older Adults Transition
  Program (OATS)
Palliative care program
RoadRunners transportation service
RotaCare Clinic
Scholarships
Speakers bureau
Subacute care
Support groups
Wellness programs

If you would like more information about these programs or how to access any of our
community services, call our community relations department, 650-988-7703, or visit
our website, www.elcaminohospital.org.
El Camino Hospital, a not-for-profit hospital in Mountain View, California, is located on a 41-acre campus in the heart of Silicon Valley. A recipient of numerous awards for quality of care, patient satisfaction and use of health information technology, El Camino Hospital has been named a Distinguished Hospital for Clinical Excellence by HealthGrades and is the first hospital in the Bay Area to be designated as a nursing magnet hospital by the American Nursing Credentialing Center.

For more than four decades, El Camino Hospital has been distinguished by its high caliber staff and affiliated physicians, comprehensive and innovative services and a long history of responding to the needs of the community it serves.

To learn more about El Camino Hospital, visit our web site at www.elcaminohospital.org. For a physician referral, visit our web site or call 800-216-5556.