

# Mark Twain Medical Center

## Community Benefit 2024 Report and 2025 Plan



**Adopted November 2024**



## A message from

Doug Archer, President, and Kathy Northington, Chair of the Dignity Health Mark Twain Medical Center Community Board.

Dignity Health’s approach to community health improvement aims to address significant health needs identified in the Community Health Needs Assessments that we conduct with community input, including from the local public health department. Our initiatives to deliver community benefit include financial assistance for those unable to afford medically necessary care, a range of prevention and health improvement programs conducted by the hospital and with community partners, and investing in efforts that address social drivers of health.

Mark Twain Medical Center shares a commitment with others to improve the health of our community and promote health equity, and delivers programs and services to help achieve that goal. The Community Benefit 2024 Report and 2025 Plan describes much of this work. This report meets requirements in California (Senate Bill 697) that not-for-profit hospitals produce an annual community benefit report and plan. We are proud of the outstanding programs, services and other community benefits our hospital delivers, and are pleased to report to our community.

In fiscal year 2024 (FY24), Mark Twain Medical Center provided \$1,385,999 in patient financial assistance, unreimbursed costs of Medicaid, community health improvement services and other community benefits. The hospital also incurred \$5,028,830 in unreimbursed costs of caring for patients covered by Medicare fee-for-service.

The hospital’s Community Board reviewed, approved and adopted the Community Benefit 2024 Report and 2025 Plan at its November 22, 2024 meeting.

Thank you for taking the time to review our report and plan. We welcome any questions or ideas for collaborating that you may have, by reaching out to Charanjit Singh.

Doug Archer  
President

Kathy Northington  
Chairperson, Board of Directors

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## At-a-Glance Summary





**Hospital HCAI ID:** 106050932

**Report Period Start Date:** July 1, 2023

**Report Period End Date:** June 30, 2024

**This document is publicly available online at:**

<https://www.dignityhealth.org/central-california/locations/marktwainmedical/about-us/community-benefits>

<p><b>Community Served</b></p> 	<p>Mark Twain Medical Center (MTMC) is in San Andreas, CA and primarily serves the residents of Calaveras County. The population of the MTMC service area is 45,709.</p>					
<p><b>Economic Value of Community Benefit</b></p> 	<p>\$1,385,999 in patient financial assistance, unreimbursed costs of Medicaid, community health improvement services, community grants and other community benefits</p> <p>\$5,028,830 in unreimbursed costs of caring for patients covered by Medicare fee-for-service.</p> <p>The hospital's net community benefit expenses for services to vulnerable populations and to the broader community are listed by category in the Economic Value of Community Benefit section of this report.</p>					
<p><b>Significant Community Health Needs Being Addressed</b></p> 	<p>The significant community health needs the hospital is helping to address and that form the basis of this document were identified in the hospital's most recent Community Health Needs Assessment (CHNA). Needs being addressed by strategies and programs are:</p> <table border="1" data-bbox="407 1203 1404 1379"> <tr> <td data-bbox="407 1203 841 1312"> <p>Access to health care (primary and specialty)</p> </td> <td data-bbox="846 1203 1404 1312"> <p>Behavioral Health (mental health and substance use)</p> </td> </tr> <tr> <td colspan="2" data-bbox="407 1318 1404 1379"> <p>Housing and Homelessness</p> </td> </tr> </table>		<p>Access to health care (primary and specialty)</p>	<p>Behavioral Health (mental health and substance use)</p>	<p>Housing and Homelessness</p>	
<p>Access to health care (primary and specialty)</p>	<p>Behavioral Health (mental health and substance use)</p>					
<p>Housing and Homelessness</p>						
<p><b>FY24 Programs and Services</b></p> 	<ul style="list-style-type: none"> <li>• The hospital delivered several programs and services to help address identified significant community health needs. These included:             <ul style="list-style-type: none"> <li>○ In addition to the hospital, Mark Twain Medical Center's Rural Health Clinics address these and other needs in an accessible way throughout the county.</li> <li>○ Our goal is to enhance the integration of quality and safety efforts across the continuum of care, from community prevention, to outpatient, to inpatient and emergency care when necessary.</li> <li>○ The hospital also engages with the local public health department, the schools and other community organizations on these and other initiatives to collaboratively address health needs.</li> </ul> </li> </ul>					

## FY25 Planned Programs and Services



The hospital intends to take several actions largely continuing FY24 activities, with a focus on the 2023 CHNA’s significant needs, including:

- Access to health care
- Financial assistance
- Rural Health Clinics
- Flu vaccines
- Preventive screenings
- Community Health Improvement Grants Program

Behavioral health (substance use and mental health)

- Psychiatric telehealth
- Substance Abuse Counseling Support Services
- Behavioral health treatment and resource partnerships

Written comments on this report can be submitted to MarkTwain Medical Center, c/o Charanjit Singh, 768 Mountain Ranch Road, San Andreas, CA 95249, or by e-mail to [charanjit.singh@dignityhealth.org](mailto:charanjit.singh@dignityhealth.org).

## Our Hospital and the Community Served

### About Mark Twain Medical Center

Mark Twain Medical Center is a member of Dignity Health, which is a part of CommonSpirit Health.

Mark Twain Medical Center (MTMC) is a part of CommonSpirit Health, one of the largest nonprofit health systems in the U.S., with more than 1,000 care sites in 21 states coast to coast, serving 20 million patients in big cities and small towns across America. MTMC is located at 768 Mountain Ranch Road, San Andreas, CA 95249. Founded in 1951, MTMC is a 25-bed, critical access hospital providing inpatient acute care, outpatient services and emergency services. The Medical Staff provides a broad range of specialties that ensure access to high quality medical care in a rural community. In addition to being a major provider of health services, MTMC is also one of the area’s largest employers. More than 300 people are employed at the hospital, Specialty Care Centers, and four Family Medical Centers.

### Our Mission

As CommonSpirit Health, we make the healing presence of God known in our world by improving the health of the people we serve, especially those who are vulnerable, while we advance social justice for all.

### Our Vision

A healthier future for all – inspired by faith, driven by innovation, and powered by our humanity.

## Financial Assistance for Medically Necessary Care

It is the policy of CommonSpirit Health to provide, without discrimination, emergency medical care and medically necessary care in CommonSpirit hospital facilities to all patients, without regard to a patient's financial ability to pay. This hospital has a financial assistance policy that describes the assistance provided to patients for whom it would be a financial hardship to fully pay the expected out-of-pocket expenses for such care, and who meet the eligibility criteria for such assistance. The financial assistance policy, a plain language summary and related materials are available in multiple languages on the hospital's website.

## Description of the Community Served

The hospital serves 20 ZIP Code Tabulation Areas (ZCTA) located primarily in Calaveras County. A summary description of the community is provided below, and additional details can be found in the CHNA report online.

The population of the MTMC service area is 45,709. Children and youth, ages 0-17, make up 16.7% of the population, 55.3% are adults, ages 18-64, and 28% of the population are seniors, ages 65 and older. In the service area, 80.2% of the population are non-Hispanic White residents, 12.5% are Hispanic or Latino residents. 3.7% of the population are multiracial (two-or-more races) residents, 1.9% are Asian residents, and 1% are Black or African American residents. 0.6% of the area population are American Indian or Alaskan Native residents, 0.1% are a race and ethnicity not listed, and 0.04% are Native Hawaiian or Pacific Islander residents. 91.8% of the population, 5 years and older, speak only English at home. Among the area population, 5.3% speak Spanish, and 1.6% speak an Asian or Pacific Islander language in the home.



Among the residents in the service area, 11.4% are at or below 100% of the federal poverty level (FPL) and 29% are at 200% of FPL or below. Among children in Calaveras County, 18.7% lived in households that experienced food insecurity. Educational attainment is a key driver of health. In the hospital service area, 10.3% of adults, ages 25 and older, lack a high school diploma, which is lower than the state rate (16.7%). 20% of area adults have a bachelor's or higher degree. Calaveras County has areas designated as Health Professional Shortage Areas (HPSAs) for primary care, dental health and mental health.

## Community Assessment and Significant Needs

The hospital engages in multiple activities to conduct its community health improvement planning process. These include, but are not limited to, conducting a Community Health Needs Assessment with community input at least every three years, identifying collaborating community stakeholder organizations, describing anticipated impacts of program activities and measuring program indicators.

## Community Health Needs Assessment

The health issues that form the basis of the hospital's community benefit plan and programs were identified in the most recent CHNA report, which was adopted in May 2023. The hospital makes the CHNA report widely available to the public online at <https://www.dignityhealth.org/central-california/locations/marktwainmedical/about-us/community-benefits> and upon request from the hospital's Community Health office.

This document also reports on programs delivered during fiscal year 2024 that were responsive to needs prioritized in the hospital's previous CHNA report.

The CHNA contains several key elements, including:

- Description of the assessed community served by the hospital;
- Description of assessment processes and methods;
- Presentation of data, information and findings, including significant community health needs;
- Community resources potentially available to help address identified needs; and
- Discussion of impacts of actions taken by the hospital since the preceding CHNA.

### **Community Groups that Attended or Engaged in the CHNA:**

- Area 12 on Aging
- Calaveras County Health and Human Services
- Calaveras County Sheriff's Office
- Calaveras Unified School District
- Calaveras Crisis Center
- First Five Calaveras
- Mark Twain Health Care District
- The Resource Connection Food Bank

### **Vulnerable Populations Represented by These Groups:**

- Unhoused people
- Those with mental health disorders

## Significant Health Needs

The CHNA identified the significant needs in the table below, which also indicates which needs the hospital intends to address. Identified needs may include specific health conditions, behaviors and health care services, and also health-related social needs that have an impact on health and well-being.

Significant Health Need	Description	Intend to Address?
Access to health care	Access to health care refers to the availability of primary care and specialty care services. Health insurance coverage is considered a key component to ensure access to health care. Barriers to care can include lack of transportation, language and cultural issues.	X
Chronic diseases	A chronic disease or condition usually lasts for three months or longer and may get worse over time. Chronic diseases can usually be controlled but not always cured. The most common types of chronic diseases are cancer, heart disease, stroke, diabetes, and arthritis.	
COVID-19	The Coronavirus disease (COVID-19) is an infectious disease caused by the SARS-CoV-2 virus. In the U.S., over one million persons have died as a result of contracting COVID.	
Economic insecurity	Economic insecurity is correlated with poor health outcomes. Persons with low incomes are more likely to have difficulty accessing health care, have poor-quality health care, and seek health care less often.	
Food insecurity	The USDA defines food insecurity as limited or uncertain availability of nutritionally adequate foods or an uncertain ability to acquire foods in socially acceptable ways.	
Housing and homelessness	Homelessness is known as a state of being unhoused or unsheltered and is the condition of lacking stable, safe, and adequate housing.	X
Mental health	Mental health includes emotional, psychological, and social well-being. It affects how we think, feel, and act.	X
Overweight and obesity	Overweight and obesity are common conditions that are defined as the increase in size and amount of fat cells in the body. Obesity is a chronic health condition that raises the risk for heart disease and is linked to many other health problems, including type 2 diabetes and cancer.	



Significant Health Need	Description	Intend to Address?
Preventive practices	Preventive practices refer to health maintenance activities that help to prevent disease. For example, vaccines, routine health screenings (mammogram, colonoscopy, Pap smear) and injury prevention are preventive practices.	
Substance use <sup>1</sup>	Substance use is the use of tobacco products, illegal drugs or prescription or over-the-counter drugs or alcohol. Excessive use of these substances or use for purposes other than those for which they are meant to be used, can lead to physical, social or emotional harm.	X

**Significant Needs the Hospital Does Not Intend to Address**

Taking existing hospital and community resources into consideration, MTMC will not directly address chronic disease, COVID-19, economic insecurity, food insecurity, housing and homelessness, overweight and obesity, and preventive practices as priority health needs. Knowing that there are not sufficient resources to address all the community health needs, MTMC chose to concentrate on those health needs that can most effectively be addressed given the organization’s areas of focus and expertise. The hospital has insufficient resources to effectively address all the identified needs and, in some cases, the needs are currently addressed by others in the community.

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<sup>1</sup> Substance use will be addressed within the scope of the behavioral health need

## 2024 Report and 2025 Plan

This section presents strategies and program activities the hospital is delivering, funding or on which it is collaborating with others to address significant community health needs. It summarizes actions taken in FY24 and planned activities for FY25, with statements on impacts and community collaboration. Program Highlights provide additional detail on select programs.

Planned activities are consistent with current significant needs and the hospital's mission and capabilities. The hospital may amend the plan as circumstances warrant, such as changes in community needs or resources to address them.

## Creating the Community Benefit Plan

The hospital is dedicated to improving community health and delivering community benefit with the engagement of its management team, board, clinicians and staff, and in collaboration with community partners.

The following criteria were used by the hospital to determine the significant health needs MTMC will address in the Implementation Strategy:

- Existing Infrastructure: There are programs, systems, staff and support resources in place to address the issue.
- Established Relationships: There are established relationships with community partners to address the issue.
- Ongoing Investment: Existing resources are committed to the issue. Staff time and financial resources for this issue are counted as part of our community benefit effort.
- Focus Area: The hospital has acknowledged competencies and expertise to address the issue and the issue fits with the organizational mission.



MTMC engaged hospital leaders in Marketing, Communications and Philanthropy and Executive Leadership, to examine the identified health needs according to these criteria. The CHNA served as the resource document for the review of health needs as it provided statistical data on the severity of issues and also included community input on the health needs. As well, the community prioritization of the needs were taken into consideration. As a result of the review of needs and application of the above criteria, MTMC chose to focus on: access to care and behavioral health (mental health and substance use). For each health need the hospital plans to address, the Implementation Strategy describes: actions the hospital intends to take, including programs and resources it plans to commit, anticipated impacts of these

actions, and planned collaboration between the hospital and other organizations. In most cases, the

## Community Health Core Strategies

Driven by a commitment to equity and social justice, we envision a future where health and well-being are attainable by all regardless of background or circumstance.

The hospital believes that program activities to help address significant community health needs should reflect a strategic use of resources and engagement of participants both inside and outside of the health care delivery system.




CommonSpirit Health has established three core strategies for community health improvement activities. These strategies help to ensure that program activities overall address strategic aims while meeting locally-identified needs.

- Extend the care continuum by aligning and integrating clinical and community-based interventions.
- Strengthen community capacity to achieve equitable health and well-being.
- Implement and sustain evidence-based health improvement program initiatives.

## Report and Plan by Health Need

The tables below present strategies and program activities the hospital has delivered or intends to deliver to help address significant health needs identified in the community health needs assessment.

They are organized by health need and include statements of strategy and program impact, and any collaboration with other organizations in our community.

 <b>Health Need: Access to Health Care</b>			
Strategy or Program	Summary Description	Active FY24	Planned FY25
Financial assistance for	Provides financial assistance to those who have health care needs and are uninsured, underinsured, ineligible for a government program or otherwise unable to pay.	X	X

the uninsured or underinsured			
Rural health clinics	Expands primary and specialty care services in rural health clinics.	X	X
Flu vaccines	Distributes flu shots in partnership with the Public Health Department.	X	X
Screening	Provides free lipid panel screening to identify persons with high cholesterol levels.	X	X

**Goal and Impact:** The hospital’s initiatives to address access to care are anticipated to result in increased access to primary and specialty health care for the medically underserved and reduced barriers to care.

**Collaborators:** Key partners include Calaveras County Public Health Department, Rural Health Clinics, and community-based organizations.



### Health Need: Behavioral Health (Mental Health and Substance Use)

Strategy or Program	Summary Description	Active FY24	Planned FY25
Psychiatric telehealth	Utilizes telehealth for psychiatric assessments and provides medication prescriptions and recommendations for treatment and suggestions for appropriate disposition	X	X
Substance use counseling support services	Partners with Health and Human Services to refer patients in need of substance use support services.	<input type="checkbox"/>	X
Community health education and resources	Addresses a variety of behavioral health care topics and provides local resources.	X	X

**Goal and Impact:** The hospital’s initiatives to address behavioral health are anticipated to result in increased access to mental health and substance use services in the community, and improved screening and identification of mental health and substance use needs.

**Collaborators:** Key partners include behavioral health providers, Calaveras County Public Health Department, schools and school districts, community-based organizations, Professional Mental Health Countywide task force.

## Community Health Improvement Grants Program

One important way the hospital helps to address community health needs is by awarding financial grants to non-profit organizations working together to improve health status and quality of life. Grant funds are used to deliver services and strengthen service systems, to improve the health and well-being of vulnerable and underserved populations related to CHNA priorities.

In FY24, the hospital awarded the grant below totaling \$41,980.

Grant Recipient	Project Description	Health Needs Addressed	Amount
Habitat For Humanity Calaveras	Service to elderly residents and persons with disabilities, to make safety and fall-prevention modifications to their homes, including wheelchair ramps, grab bars, widened doorways and other changes. These changes allow people who cannot otherwise afford it to remain safe in their homes.	Housing and Homelessness	\$41,980

## Calaveras Rural Street Health and Hospital Discharge Pilot Program

Dignity Health invested in Calaveras county's service capacity to unhoused individuals and families by making a \$250,000 Homeless Health Initiative grant to Sierra HOPE, for the Calaveras Rural Street Health and Hospital Discharge Pilot Program. Mark Twain Medical Center is a collaborator in the work of this grant, which also includes the Calaveras County Public Health Division, Valley Springs Health and Wellness Center, Mark Twain Health Care District, Anthem Blue Cross and Health Net.

The rural street outreach component of the initiative is led by the county public health department, with the grant funding a shower trailer and mobile clinic supplies, and the hospital providing laboratory services. An interim housing element of the project includes use of the grant funds to renovate Sierra HOPE's Hope House to provide safe and comfortable recuperative care for Medicaid patients. These services are a part of a larger CalAIM collaboration in Calaveras County.

## Other Programs and Non-Quantifiable Benefits

**Calaveras County Fair** – MTMC staffs the first aid station with registered nurses and additional support staff during the four day event for 12 hour shifts. We also are a major sponsor of the Fair.

**Community Leadership** - MTMC's hospital leadership oversees community benefit activities for the hospital as it strives to meet the health and wellness needs of the local community. Several members of Mark Twain's senior and middle management team serve the community on a variety of community-based not-for-profit Boards, such as Homeless Task Force, Habitat for Humanity, Soroptomist International, Economic Development Corporation, local Churches and Chamber of Commerce to name a few.

**Community Health Education Center** - Calaveras County suffers from a scarcity of meeting rooms. MTMC provides meeting room space in the Community Health Education Center at no cost to health and community related groups as our schedule permits. On hold due to COVID.

**Disaster Preparedness** – Throughout the pandemic Mark Twain Medical Center has partnered with; the local health department to supply and support COVID testing and vaccination programs; support the County Office of Education with supplies and testing options for staff and students; support first responders with personal protective supplies and processes to test 1st responders in the event of COVID exposures; regularly report on hospital and community clinic operations impacts to the County Office of Emergency Services, Public Health Department, and the Board of Supervisors; and liaison with other healthcare organizations to monitor and support community health status across county lines. Mark Twain Medical Center is proud of the relationships it has nurtured with other agencies in advance of this unprecedented event which has led to today's more effective communications and support for the whole healthcare community.

**Sponsorships and Donations** - As a member of the community, Mark Twain Medical Center responds to requests for direct funding and goods and services to support community organizations and activities such as Grad Night, Door of Hope, Youth Programs, Gardens to Grow in, and Habitat for Humanity, Cancer Support Group, High School Medical Sciences Project, etc.

## Economic Value of Community Benefit

The economic value of all community benefits is reported at cost. Patient financial assistance (charity care) reported here is as reported to the Department of Health Care Access and Information in Hospital Annual Financial Disclosure Reports, as required by Assembly Bill 204. The community benefit of financial assistance, Medicaid, other means-tested programs and Medicare is calculated using a cost-to-charge ratio to determine costs, minus revenue received for providing that care. Other net community benefit expenses are calculated using a cost accounting methodology. Restricted offsetting revenue for a given activity, where applicable, is subtracted from total expenses to determine net benefit in dollars.

<b>Mark Twain Medical Center</b>					
<b>Complete Summary - Classified (Programs) Including Non Community Benefit (Medicare)</b>					
<b>For period from 07/01/2023 through 06/30/2024</b>					
	<u>Persons</u>	<u>Expense</u>	<u>Offsetting Revenue</u>	<u>Net Benefit</u>	<u>% of Expenses</u>
<b><u>Benefits for Poor</u></b>					
Financial Assistance	1,503	\$1,190,345	\$0	\$1,190,345	1.4%
Medicaid	24,865	\$16,687,912	\$17,589,906	\$0	0.0%
Other Means Tested Programs	2	\$954	\$0	\$954	0.0%
<b>Community Services</b>					
E - Cash and In-Kind Contributions	1	\$191,537	\$0	\$191,537	0.2%
<b>Totals for Community Services</b>	<b>1</b>	<b>\$191,537</b>	<b>\$0</b>	<b>\$191,537</b>	<b>0.2%</b>
<b>Totals for Benefits for Poor</b>	<b>26,371</b>	<b>\$18,070,748</b>	<b>\$17,589,906</b>	<b>\$1,382,836</b>	<b>1.6%</b>
<b><u>Benefits for Broader Community</u></b>					
<b>Community Services</b>					
A - Community Health Improvement Services	130	\$3,163	\$0	\$3,163	0.0%
<b>Totals for Community Services</b>	<b>130</b>	<b>\$3,163</b>	<b>0</b>	<b>\$3,163</b>	<b>0.0%</b>
<b>Totals for Broader Community</b>	<b>130</b>	<b>\$3,163</b>	<b>\$0</b>	<b>\$3,163</b>	<b>0.0%</b>
<b>Totals - Community Benefit</b>	<b>26,501</b>	<b>\$18,073,911</b>	<b>\$17,589,906</b>	<b>\$1,385,999</b>	<b>1.6%</b>
<b>Medicare</b>	<b>36,238</b>	<b>\$35,604,816</b>	<b>\$30,575,986</b>	<b>\$5,028,830</b>	<b>5.9%</b>
<b>Totals Including Medicare</b>	<b>62,739</b>	<b>\$53,678,727</b>	<b>\$48,165,892</b>	<b>\$6,414,829</b>	<b>7.6%</b>
<p>*For the Medicaid provider fee program effective for the two-year period of January 1, 2023 - December 31, 2024, the State of California received Centers for Medicare &amp; Medicaid Services approval in December 2023. As such, during the fiscal year July 1, 2023 - June 30, 2024, the hospital recognized provider fee net income of \$8,297,850 covering 18 months dating back to January 2023. Subtracting the six months of net provider fee attributable to the prior fiscal year, FY24 Medicaid net benefit would be \$3,598,303 and total community benefit including Medicare would be \$10,013,132.</p>					

\*\*Consistent with IRS instructions and Catholic Health Association guidance, Medicaid is reported at \$0 net benefit because offsetting revenue was greater than expense in FY24.



## Hospital Board and Committee Rosters

MTMC CEO – Doug Archer

MTMC Chief of Staff - Dr. Shannon Linton

District Nominee – Debbie Sellick (VICE CHAIR)

Community Board Liaison - Kathy Kohrman

At Large – Kathy Northington (CHAIRPERSON)

At Large - Nick Baptista

At Large – Kathy Dodge

At Large – Scott Blevins

At Large – Tim Oskey (SECRETARY)

At Large – Larry Smith