Rady Children’s Hospital and Health Center

Community Benefit Report
For Year Ended June 30, 2013
Executive Summary

Rady Children’s Hospital and Health Center (Rady Children’s) is committed to improve the health status of the community. Rady Children’s provides a variety of programs that address the top health issues for children in the San Diego Region as identified in the San Diego County Needs Assessment that is prepared by the Community Health Improvement Partners, of which Rady Children’s is a founding partner, and other health needs assessments. Each of the programs offered by Rady Children’s is provided through numerous hospital departments and community-based settings to address the physical, mental and social health needs of children in each of the following priority areas:

1. Promoting infant health by reducing mortality and morbidity.
2. Preventing obesity and improving health and fitness.
4. Promoting oral health.
5. Developmental Services, including early childhood.
9. Training healthcare providers to ensure access to care.
10. Mental Health and Trauma Counseling services.

Further, Rady Children’s provides uncompensated and undercompensated medical care services.

Rady Children’s Community Benefit programs can be categorized primarily as one of two types:

- Benefits for vulnerable population
  Benefits for vulnerable population includes: (1) services provided to persons who are economically poor or are medically indigent and cannot afford to pay for healthcare services because they have inadequate resources and/or are uninsured or underinsured; (2) social and health programs that target at-risk or underserved populations to improve the health of participants or involve collaboration with community organizations; and, (3) community building activities.

- Benefits for the broader community
  Benefits for the broader community include community services of community health improvement, in-kind contributions, health professions education, research, and subsidized health services.
Summary of 2013 Community Benefits

In 2013, Rady Children’s Hospital and Health Center provided $38.8 million in quantifiable benefit services to the community, which is in support of our mission to restore, sustain and enhance the health and developmental potential of children through excellence in care, education, research and advocacy. The following table summarizes Rady Children’s investment in medical care and community services for vulnerable population, and benefits for the broader community.

Unsponsored Community Benefit Expense (unaudited)
For year ended June 30, 2013
Total Community Benefits provided: $38,750,638

<table>
<thead>
<tr>
<th>Benefits for Vulnerable populations</th>
<th>Total expense</th>
<th>Offsetting revenue</th>
<th>Net Community Benefit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Financial Assistance and Government Programs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Charity care/Financial Assistance</td>
<td>$ 3,963,919</td>
<td>$</td>
<td>$ 3,963,919</td>
</tr>
<tr>
<td>Unpaid cost of Medicaid</td>
<td>305,721,946</td>
<td>309,127,982</td>
<td>(3,406,036)</td>
</tr>
<tr>
<td>Means tested programs</td>
<td>2,040,818</td>
<td>15,512</td>
<td>2,025,306</td>
</tr>
<tr>
<td>Total Financial Assistance and Government Programs</td>
<td>311,726,683</td>
<td>309,143,494</td>
<td>2,583,189</td>
</tr>
<tr>
<td>Community Services</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community Benefit Operations</td>
<td>385,727</td>
<td></td>
<td>385,727</td>
</tr>
<tr>
<td>Community Building Activities</td>
<td>235,587</td>
<td></td>
<td>235,587</td>
</tr>
<tr>
<td>Community Health Improvement Services</td>
<td>13,990,067</td>
<td>7,990,928</td>
<td>5,999,139</td>
</tr>
<tr>
<td>Research</td>
<td>878,629</td>
<td></td>
<td>878,629</td>
</tr>
<tr>
<td>Subsidized Health Services</td>
<td>8,720,511</td>
<td>5,796,651</td>
<td>2,923,860</td>
</tr>
<tr>
<td>Total for Community Services</td>
<td>24,210,521</td>
<td>13,787,579</td>
<td>10,422,942</td>
</tr>
<tr>
<td>Total Benefits for Vulnerable Populations</td>
<td>335,937,204</td>
<td>322,931,073</td>
<td>13,006,131</td>
</tr>
</tbody>
</table>

Benefits for the Broader Community

| Benefits for the Broader Community |                |                    |                       |
|-------------------------------------|---------------|--------------------|                       |
| Community Services                 |               |                    |                       |
| Community Benefit Operations       | 40,163        |                    | 40,163                |
| Community Building Activities      | 35,558        |                    | 35,558                |
| Community Health Improvement Services | 8,902,072   | 4,565,295          | 4,336,777             |
| Health Professions Education       | 14,255,839    | 4,333,986          | 9,921,853             |
| Research                           | 2,000,414     |                    | 2,000,414             |
| Subsidized Health Services         | 16,549,484    | 7,139,742          | 9,409,742             |
| Total Benefits for Broader Community | 41,783,530   | 16,039,023         | 25,744,507            |
| Total 2013 Community Benefit       | $ 377,720,734 | $ 338,970,096     | $ 38,750,638          |

The total Community Benefit of $38.8 million in fiscal year 2013 includes the impact of the Hospital Provider Fee program in offsetting revenue. Medicare shortfall and patient bad debt are not included in the calculation of total community benefit for fiscal year 2013.
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Rady Children’s Hospital and Health Center
2013 Community Benefit Report

I. Introduction

Rady Children’s Hospital and Health Center (Rady Children’s) is pleased to submit its Community Benefit Report for fiscal year 2013 to the California Office of Statewide Health Planning and Development (OSHPD).

As the sole pediatric hospital and trauma center for San Diego and Imperial Counties, Rady Children’s aims to meet its mission to restore, sustain and enhance the health and developmental potential of children through excellence in care, education, research and advocacy. Rady Children’s is dedicated to providing the best healthcare for its patients and serving as a valuable community resource to improve the health and well-being of children in our community.

Rady Children’s has been an active leader in providing critical support services to vulnerable populations as well as education and outreach to the broader community. Rady Children’s participates in the countywide triennial community health needs assessment (CHNA) with partnering healthcare systems and community-based organizations.

The community based health improvement programs and services that Rady Children’s provides are consistent with our organization’s mission and based on a number of analyses of community need. To address the community’s health and healthcare needs, Rady Children’s utilizes the countywide triennial CHNA, the San Diego County Report Card on Children & Families, as well as other assessments, and participates in numerous community collaboratives, where valuable input is gathered. In the most current needs assessment, “Charting the Course VI, A San Diego County Health Needs Assessment” conducted in 2010 and published in Spring 2011, the top health concerns were identified and organized as follows:

<table>
<thead>
<tr>
<th>Top four overall health issues (rank order)</th>
<th>Overarching health issues</th>
<th>Health-related behaviors</th>
<th>Health outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Health access</td>
<td>Weight status</td>
<td>Diabetes</td>
</tr>
<tr>
<td>2</td>
<td>Social determinants</td>
<td>Physical activity</td>
<td>Heart disease/stroke</td>
</tr>
<tr>
<td>3</td>
<td>Public health infrastructure</td>
<td>Substance abuse</td>
<td>Mental Health</td>
</tr>
<tr>
<td>4</td>
<td>Health information technology</td>
<td>Injury and violence</td>
<td>Cancer</td>
</tr>
<tr>
<td>5</td>
<td></td>
<td>Oral health</td>
<td>Family planning</td>
</tr>
<tr>
<td>6</td>
<td></td>
<td>Immunization</td>
<td>Infectious disease</td>
</tr>
<tr>
<td>7</td>
<td></td>
<td></td>
<td>Respiratory disease</td>
</tr>
</tbody>
</table>

The Rady Children’s team – in the many hospital departments committed to community health improvement – develops, provides and/or tailors programs to address these top and other health needs in each of the following priority areas:

1. Promoting infant health by reducing mortality and morbidity.
This report reflects Rady Children’s commitment to improve the health status of the community. Numerous programs throughout Rady Children’s, which include hospital departments dedicated to community programs, aim to improve the health of the community through outpatient, community-based and in-home settings. Further, Rady Children’s provides uncompensated and undercompensated medical care services. This summary of community benefit activity conducted in fiscal year 2013 has been prepared in accordance with the Catholic Health Association of the United States document, A Guide for Planning and Reporting Community Benefit (2008 edition) and Community Benefits Inventory for Social Accountability (CBISA) User Guide (2008).
II. Community Benefit Programs

Community benefit is a planned and coordinated approach to a healthcare organization’s participation to either directly or indirectly address community health needs and provide measurable improvement in health status. Rady Children’s Community Benefit programs can be categorized primarily as one of two types:

- Benefits for vulnerable population
  Benefits for vulnerable population includes, (1) services provided to persons who are economically poor or are medically indigent and cannot afford to pay for healthcare services because they have inadequate resources and/or are uninsured or underinsured; (2) social and health programs that target at-risk or underserved populations to improve the health of participants or involve collaboration with community organizations; and, (3), community building activities.

- Benefits for the broader community
  Benefits for the broader community include community services of community health improvement, in-kind contributions, health professions education, research, and subsidized health services.

The following is an overview of community benefit programs provided in 2013.

Center for Healthier Communities
The Center for Healthier Communities (CHC) serves as a hub of Rady Children’s community health improvement strategies. The CHC collaborates with health providers, schools, childcare providers, youth-serving organizations, universities, researchers, community leaders, parents, government agencies, the media and the business community to address community-based child health. The CHC analyzes child health issues and develops strategies, convenes and stimulates organizations and individuals to act to improve child health, launches strategically focused interventions, advocates to support health improvement, and links providers with resources to improve health within the community.

Key areas of focus include maternal and infant health, injury prevention, oral health, nutrition and fitness, obesity prevention, adolescent health and positive youth development. CHC has gained recognition for facilitating practical and successful community health outcomes and mobilizing individuals, organizations and systems to combine forces to create healthier communities for children. CHC’s strategically focused initiatives, providing community health services and benefits for the community at large, include:

The Partnership for Smoke Free Families
The Partnership for Smoke-Free Families program (PSF), a comprehensive tobacco control program to reduce tobacco smoke exposure among pregnant women and young children, has been transformed into a totally web-based program. All forms, protocols and information are now available online to the network of providers who screen pregnant women and parents for tobacco use and proactively link them with appropriate interventions. In 2013, services were provided to nearly 400 people.
Anderson Center for Dental Care
Founded in 1996, the Anderson Center strives to improve the oral health of children in San Diego County, particularly young children and children with disabilities, through community and professional education, improved access to care, advocacy and treatment. The Anderson Center works with the San Diego/Imperial County Regional Center for Developmental Disabilities; Oral Health Initiative/Community Clinics Health Network; Juvenile Hall Wellness Team; and other community-based groups to provide both community and professional education, oral health assessment and related services. In 2013, the Anderson Center for Dental Care provided services to approximately 1,450 children; information and education to approximately 770 parents/caregivers and; and training to nearly 300 healthcare professionals.

City Heights Wellness Center
The City Heights Wellness Center is a unique partnership between Scripps Health and Rady Children’s. The Wellness Center is designed to improve the long-term health of children and families in City Heights through a variety of services, including counseling services, healthcare access assistance, nutrition and meal planning, parenting classes, childhood safety programs, and diabetes education. In 2013, approximately 10,000 participants received services through the various programs at the Wellness Center.

Childhood Injury Prevention
The CHC plays a primary leadership role in the community in childhood injury prevention. CHC has served as the lead organization for the San Diego Safe Kids Coalition since 1992, and received funding from the Robert Wood Johnson Foundation to establish the Injury Free Coalition for Kids, San Diego in 2002. In 2005, the CHC was awarded the first of three, $500,000 federally funded grants to provide Safe Routes to School Programs in areas with the highest pedestrian injury rates. These communities include Southeastern San Diego and National City. The Center also partners with other community-based organizations in City Heights and in Escondido to provide Safe Routes to School programming. The CHC’s approach combines the science of epidemiology with community building and advocacy to create safer communities for children. Data from the Rady Children’s Trauma Center and other sources is reviewed to determine priorities and focus, and the information is brought to communities to raise awareness, problem solve, and advocate for public policy and safety regulations.

The childhood injury prevention program served as a valuable resource to prevent unintentional injuries by providing the following in 2013:

- Safety tip information dissemination on a variety of topics that discussed child passenger safety, pool and swimming safety, childproofing one’s home, fire safety and disaster preparedness.
- Product safety information, including highlighting particular areas of concern or safety issues.
- Kohl’s Transportation Safety Program – On a weekly basis, the CHC conducted a Child Passenger Safety event at one of the Kohl’s locations throughout San Diego to provide family injury risk assessments, safety education and demonstrations, and child safety
seat inspections and installations. Child safety seat inspections and information were also available at the Rady Children’s main hospital campus. In 2013, CHC provided services to approximately 41,000 people.

- The Injury Prevention Program provided services to nearly 500 individuals.
- The Safe Kids Program and the Safe Routes to School Program impacted approximately 60,000 people.
- The Safety Store and Safe Kids Coalition provide a variety of presentations to community groups on the most prevalent injury types. These presentations are scheduled on a weekly basis. In 2013, more than 100 hundred classes were provided on a variety of topics.

**FACES for the Future**

In 2009, the CHC launched the FACES for the Future program at Hoover High School. FACES prepares high school students, many from families with no high school graduates much less college attendees, for careers in healthcare. FACES is a three-year internship program, in which students perform clinical rotations at Rady Children’s Hospital, as well as local community rotations, while exploring a variety of health care professions. Students also receive individualized counseling, mentorship and leadership development. In 2013, 90 students were enrolled in the FACES program.

**Juvenile Hall Health and Mid-City Wellness Team**

The Center for Healthier Communities, under a contract with the County Health and Human Services Agency, launched the Health and Wellness Team at the Kearny Mesa Juvenile Detention Facility in 2002 and expanded its services to include the East Mesa Juvenile Detention Facility in 2004. The Wellness Team works in conjunction with medical, mental health and probation staff to promote healthier lifestyles and assist minors in avoiding high-risk behaviors through increasing the incarcerated minors’ knowledge of pertinent health issues, connecting them to outside health services, and encouraging minors and/or their families to obtain health insurance coverage.

The Wellness Team conducts weekly health education classes, as well as one-on-one health education counseling. In the individual health education sessions, the Wellness Team works with each minor to assess their needs, tailors the session to address those needs, and facilitates further screening as appropriate. To promote continuity of healthcare, the team conducts discharge planning by referring the minor to community-based healthcare services. In 2013, there were approximately 4,600 class attendees.

**San Diego County Childhood Obesity Initiative**

CHC is providing leadership to champion the implementation of the county-wide plan to prevent childhood obesity. Collaborating partners include health plans, health providers, hospitals, community-based agencies, and the County of San Diego.

**Chadwick Center for Children and Families**

The primary focus of the Chadwick Center for Children and Families at Rady Children’s is the prevention, detection and treatment of child abuse and neglect, domestic violence, and post-traumatic stress in children. The Center staff is composed of a variety of professional disciplines from medicine and nursing to child development, social work, and psychology. In addition, the
Chadwick Center provides professional education to providers. The Center served children, parents and professionals in fiscal year 2013 through the following program areas:

**Trauma Counseling**
Approximately 975 individual children and parents that were involved in child abuse, domestic violence and other forms of trauma were provided trauma counseling services in 2013. Other programs and persons served in 2012 included the following:

- The Child Abuse Treatment (CHAT) Program served 120 children and adolescents, which provides evidence based therapy services to treat the after-effects of a traumatic event experienced by a child.
- The Kids and Teens in Court Program assisted nearly 190 children and adolescents by providing support to help reduce their fear and anxiety to testify in court in front of an individual who hurt them.
- The Family Integrated Treatment (FIT), in conjunction with the County of San Diego Child Welfare Services and Alcohol and Drug Services, is a program to provide treatment and support to mothers struggling with methamphetamine and other drug addictions.
- San Diego County selected Rady Children’s to design and manage the KidSTART system for San Diego focusing on very young children with severe emotional and developmental challenges, often associated with extreme trauma exposure. This is a joint project of the Chadwick Center, Developmental Services and Psychiatry departments at Rady Children’s with the Chadwick Center leading the young child mental health treatment component (see KidSTART Center and Clinic). In KidSTART, in 2013, approximately 230 individual children were provided therapy sessions.

**Forensic and Medical Services**
In 2013, approximately 1,000 children received expert medical assessment or a forensic interview for abuse. This does not include the children assessed by Chadwick doctors at the US Navy or at Riverside County, which the Chadwick Center continues to support. In addition, the Failure to Thrive Program aims to improve the health and developmental potential of at-risk infants through multidisciplinary assessment and care planning. Failure to Thrive assisted nearly 140 young children in 2013 through providing assessments and case management sessions.

**Family Support**
The Center adopted the research based SafeCare model, which is an in-home parenting model program that provides direct skill training to parents in child behavior management and planned activities training, home safety training, and child health care skills to prevent child maltreatment.

In addition, the Center provides training to foster parents under the Options Foster Parent Training program. In 2013, 160 foster parents were trained.
Professional and community education
The Center provided professional education to more than 1,500 professionals from throughout the United States and numerous countries. The Chadwick Center’s Clinical Training Program provided training in the assessment and treatment of child abuse to professionals nationally and at the Center.

To improve the dissemination of evidence-based treatment, the Chadwick Center conducted multiple trainings to professionals in a variety of formats, including the clearinghouse on evidence based best practices. The California Evidence Based Best Practices Clearinghouse served approximately 183,000 in 2013. In addition, in 2013, the Chadwick Center managed the California Mandated Reporter Training website (www.MandatedReporterCA.com), which is composed of six modules designed to train mandated child abuse reporters so they may carry out their responsibilities properly.

The Chadwick Center also provides administrative support and evaluation of abused, neglected and abandoned children at the Polinsky Children’s Center (see Polinsky Children’s Center). In 2013, nearly 640 children awaiting foster care placement were served.

Child Life Services
The healthcare environment brings many new and sometimes stressful experiences for children, teenagers, and families. The Child Life Specialists at Rady Children’s work with patients and their families to help them understand and cope with these experiences.

On any day, at almost any time of day, Child Life Specialists help a child get ready for a frightening medical procedure. Based on the child's individual needs and developmental level, Child Life Specialists have provided:

- Psychological preparation, pre-operative tours, and education to help patients and siblings understand and cope with upcoming healthcare experiences.
- Emotional support and coping techniques, such as relaxation, diversion, and deep breathing.
- Medical and therapeutic play to become more familiar with medical equipment and procedures, and encourage expression of feelings.
- Preparing siblings to see their brother or sister (who looks very different with bandages or tubes) for the first time after surgery.
- Resource information on child development and effects of healthcare.
- Activity room programming to promote healing, creativity, peer interaction and independence, which are all vital to normal growth and development.
- School visits or consultations to promote classmates' understanding of illness and healthcare.

Child Life Specialists accompany special visitors to the Hospital, such as athletes and celebrities, and support the work of our volunteers.

Customer Service and Referral Center
The Customer Service and Referral Center helps facilitate access to care for children in our community by identifying community-based providers, as well as providing support to families in pursuing coverage from Medi-Cal and Healthy Families. In 2013, approximately 6,700 persons
were served. In addition, Rady Children’s has implemented follow-up phone calls to parents or caregivers of children discharged from the Emergency Department and Pediatric Intensive Care Unit.

**Developmental Services**

The Developmental Services department at Rady Children’s provides a continuum of integrated services across various disciplines and community partners to support early brain development, social/emotional development, and the needs of the whole child through every aspect of care delivery. Developmental Services rehabilitates children and adolescents with disorders related to congenital anomalies, injuries, illnesses and other special needs. A variety of programs are provided that emphasize early identification, diagnosis and intervention through access to community resources.

**Developmental Evaluation Clinic (DEC)**

At the Developmental Evaluation Clinic, specially trained clinical and developmental psychologists provide diagnostic developmental evaluations for infants, preschoolers, and school-age children to identify developmental, learning and social delays and determine the need for further intervention. Once delays have been identified, referrals are made to a variety of public education programs as well as public and private therapy programs.

Reasons for evaluations include premature birth and other neonatal complications, slow development, kindergarten readiness, behavioral problems, social concerns such as autism, or family history of learning disabilities. Of the children assessed for developmental delays, 90 percent were identified as having developmental or behavioral needs, and nearly 20 percent were diagnosed with an autism spectrum disorder. In 2013, approximately 1,540 persons were served.

**Developmental Screening and Enhancement Program (DSEP) and Children’s Care Connection (C3)**

DSEP provides developmental and behavioral assessment and linkage to services for children birth to six years upon entry into the child welfare system following removal from their homes for abuse and neglect. Approximately 50 to 60 percent of children in foster care have developmental delays, compared with 10 to 12 percent in the general population. Addressing these needs can improve long-term placement and developmental outcomes for children in foster care. Nearly all of the children screened in DSEP were successfully linked to recommended services. The success of the DSEP program demonstrates the need for standardized and routine developmental and behavioral check-ups for children in child welfare. In 2013, nearly 1,300 persons were served.

C3 provides services to identify and address developmental and behavioral concerns in children up to five years of age prior to kindergarten entry. Program participant children and their families participated in a variety of treatment services, which included behavior classes taught by professional speech, occupational, physical and developmental/behavioral therapists. These developmental classes are offered to facilitate healthy development of the mind and body, and to introduce skills that will prepare children for kindergarten. Speech and language classes help parents understand the age-appropriate milestones for language
and speech development and learn how to facilitate their children’s development. The program provided over 5,970 interventions in 2013.

**Healthy Development Services (HDS) – First Five Program**

To improve school readiness, the Healthy Development Services program identifies and treats developmental and behavioral concerns in children from birth to five years of age. The HDS program coordinates developmental screenings, assessments, referrals and treatment. Care Coordinators work with families to navigate the healthcare system to obtain services for their child(ren). In addition, the program provides hearing and vision screening; behavioral health services; and parenting classes. In 2013, approximately 2,800 clients were served.

**High Risk Infant Clinic (HRI)**

The High Risk Infant Clinic provided neurodevelopmental evaluation and follow-up to approximately 460 infants in 2013 that were cared for in a Neonatal Intensive Care Unit (NICU) setting. A pediatric nurse practitioner (PNP) coordinates the program and works closely with NICU staff to identify patients and educate families regarding follow-up services. The PNP conducts a comprehensive history and physical examination, developmental screening, neurological assessment, and family psychosocial assessment. Coordination of referral to services in the community is also provided. The PNP also teaches at weekly NICU parent discharge classes to ensure parents have an understanding of their infant’s growth and development. The HRI Program helps infants from San Diego, Imperial and Riverside counties.

**KidSTART Center and Clinic**

In 2011, Rady Children’s launched the KidSTART Center (KidSTART) through a grant funded by the County of San Diego. KidSTART provides a centralized program of comprehensive triage, assessments, referral and treatment for children ages birth through five with complex developmental and psycho-social behavioral health problems to help client children receive timely treatment and reach their highest potential. The child’s needs are at the center of case-planning through a “home-based” delivery model. A multidisciplinary team, including pediatricians, clinical psychologists, speech pathologists, occupation and physical therapists, mental health therapists, early intervention specialists and school representatives, work together to develop and implement the comprehensive plan of care. The principles that guide service delivery are developmental knowledge based on current research and follows the model of care of S.T.A.R.T.:

- Screening – Developmental, socio-emotional and behavioral health screening by community providers.
- Triage – Evaluations by clinical psychologist and care coordinator to determine the appropriate level of care.
- Assessment – Family centered transdisciplinary assessments and treatment plan development.
- Referral – Linkages to additional diagnostic, therapeutic and community resources.
- Treatment – Integrated developmental and mental health services and ongoing care coordination.
The KidSTART program tracks and measures outcomes to assess effectiveness of interventions and treatment plans. The KidSTART Center served approximately 300 children in 2013.

**Pediatric Down Syndrome Center**
Using a multidisciplinary approach, the Pediatric Down Syndrome Center provides diagnostic evaluation services, comprehensive case management in collaboration with education and clinical stakeholders, genetic counseling, patient advocacy, resource referral and social services to improve the consistency of care for children with Down Syndrome. The Center also serves as a resource to healthcare professionals and strengthens the social network for families. Rady Children’s Hospital was selected by DS Action to establish the Pediatric Down Syndrome Center in 2008, the only one in Southern California. Down Syndrome is the most common genetic cause of cognitive and developmental disabilities. To help children with Down Syndrome reach their fullest potential, the Center provides crucial support to families, medical care and access to a team that includes a pediatric clinical geneticist, developmental specialists, social workers, and occupational, physical and speech therapists. In 2013, approximately 150 persons were served.

**The Autism Discovery Institute (ADI)**
Autism is a developmental disorder that affects multiple aspects of a child’s functioning, characterized by difficulties in communication, impairment in social interactions, and behavioral symptoms. The prevalence of autism appears to be on the rise and is the third most prevalent developmental disorder occurring in 1 of 150 births. The Autism Discovery Institute serves children with Autistic Spectrum Disorders (ASD) through a multidisciplinary approach, and provides a forum for research. A variety of intervention strategies are provided in naturalistic settings. Also, the ADI provides one of the nation’s only research and clinical collaborations that fosters knowledge exchange to enhance treatment for autistic children. Finally, the ADI is bringing together many of Developmental Services’ expert, multidisciplinary programs on autism under one roof, including developmental evaluations and an inclusive educational program – Alexa’s Playful Learning Academy for Young Children’ (Alexa’s PLAYC).

**Diabetes education**
The Rady Children’s Endocrine Department provides education to parents, caregivers and patients on diabetes management, nutrition and meal planning, and product usage (advanced pumps). Workshops are provided twice a year and nearly 100 people attended in 2013.

**Disaster preparedness**
A disaster can occur without warning. Rady Children’s has prepared for the possibility to provide any and all assistance possible to handle a large influx of victims and to help victims cope and heal from trauma. Rady Children’s established the Rady Children’s Hospital Emergency Incident Command System (CHEICS) as a guide in responding to a disaster. Rady Children’s personnel are oriented to CHEICS, and trained for their specific department.

**Fresh Start Clinic**
Rady Children’s launched a joint venture with Fresh Start Surgical Gifts in 2010 to improve services in our community and beyond, which includes a clinic that provides diagnostic and surgical services for the treatment of certain physical deformity conditions regardless of ability to pay. Fresh Start Surgical Gifts provides free reconstructive plastic surgery and related medical services to disadvantaged children and young people with physical deformities on a wide variety of conditions including Microtia, Hemangioma, Neurofibromatosis, Hairy Nevus, Cleft lip and Cleft palate, Treacher Collins Syndrome, Portwine stains, and Hemifacial Microsomia. Services include surgery, dental, laser and speech clinics, which are provided by volunteer teams of surgeons and medical professionals. In 2013, it is estimated that over 1,500 hours of service was provided.

**Health Professions Education**
Rady Children’s engages in a multitude of ongoing educational programs to provide continuous learning opportunities for clinicians and community-based stakeholders. By doing so, Rady Children’s aims to provide the highest level of quality care to patients. Programs include:

- Continuing Medical Education
- Education and development
- Neonatal outreach education
- Residents Training
- Pediatric outreach education
- Student program

**Health Sciences Library**
The Rady Children’s Health Sciences Library combines clinical pediatric literature and a Family Resource Library that can be used to conduct research. Open to the parents of Rady Children’s patients, as well as staff, physicians and visitors, the Library provides a sound reference collection and computers with online access to the Internet. Parents are encouraged to learn more about their child’s illness by accessing information at the Library.

**Healthcare Support Services – Financial Counseling**
Financial Counselors proactively explore and assist patients in applying for appropriate alternative sources of payment and coverage from public and private payment programs. At Rady Children’s, Medi-Cal eligibility workers are available on-site to assist families. Also, Rady Children’s Financial Counselors coordinate with Healthy Families and CCS enrollment programs.

When a family is denied insurance coverage from a government payor, the Financial Counselors pursue other avenues with local patient advocacy groups to explore obtaining health insurance for those families that had been previously denied coverage. Rady Children’s partners with local agencies to improve access to healthcare for uninsured patients.

**Outpatient Psychiatry**
Mental health services has been identified as a top health need in San Diego County. The Rady Children’s Outpatient Psychiatry department is unique because it provides comprehensive mental health and psychosocial services to children and their families within a full-service pediatric medical facility. Its state-of-the-art, cost-effective clinical programs are also available at outpatient clinics, schools and homes throughout the County. Services include:
- Diagnostic assessments;
- Individual, family or group therapy;
- Psychological testing; and
- Medication evaluation and follow-up.

Depression and suicidal ideation, attention deficit disorder and oppositional disorders are the most frequently treated diagnoses. Other diagnoses include chemical dependency, eating disorders, learning disabilities and developmental delays, and sleep disorders. In 2013, the Outpatient Psychiatry department treated approximately 2,500 patients.

From September through June, the Rady Children’s Outpatient Psychiatry department hosts Grand Rounds on a variety of behavioral health topics three times per month. The Grand Rounds are open to clinicians in the community; approximately 1,100 providers attended Grand Rounds in 2013. The aim is to provide cutting-edge and evidence based treatment and research information to providers to increase their knowledge base and accelerate the spread of best practices.

Polinsky Children’s Center
Numerous departments at Rady Children’s Hospital work with the San Diego County’s Polinsky Children’s Center, which serves as an emergency shelter for approximately abused, abandoned and neglected children each year. Children stay an average of 10 to 12 days while they wait to be placed with relatives or in foster care. Services include:

- Management support by the Rady Children’s Chadwick Center.
- Developmental screening and evaluation of abused children.
- Medical evaluation of children is provided 24/7 by physicians affiliated with Rady Children’s Hospital, along with nursing, Nurse Practitioner, and Developmental Screening personnel.

Rady Children’s Hospital Emergency Transport
The Rady Children’s Hospital Emergency Transport (“CHET”) Pediatric and Neonatal Teams provides emergency transports, including seriously ill and injured children and neonates. CHET provides immediate response to hospitals, clinics, and physician offices in San Diego, Imperial and Riverside Counties. The CHET air and ground transportation vehicles are outfitted with self-contained medical equipment to provide expert pediatric and neonatal critical care to its patients. In 2013, approximately 1,775 children were transported.

Rady Children’s Regional Pediatric Trauma Center
The Hospital’s Regional Pediatric Trauma Center (the “Trauma Center”) was formally designated by the County of San Diego as the sole provider of pediatric trauma care in 1984. While clinical trauma care is the primary focus of the Trauma Center, it is also committed to providing a wide range of non-clinical community services, including providing injury data to a wide spectrum of community, state and national agencies; advocating for keeping children safe by functioning as media spokespersons on key topics; providing professional (pre-hospital and hospital providers) educational forums; providing community group informational and educational forums; and participating in front line injury prevention programs such as car safety seat/restraint and helmet
distribution and education. The Trauma Center also functions as a community resource in disaster planning for children.

Each year, the Trauma Center provides education to allied health professionals to improve pediatric trauma knowledge. The Trauma Center staff also makes available ongoing educational interface with pre-hospital providers by providing “real time” feedback on clinical care, as well as participating in case review, regarding children transported to Rady Children’s, at agency meetings. Finally, the Trauma Center provides outreach and education to improve child safety and prevent injury. In 2013, over 600 persons benefitted from community health improvement, and professional training activities.

Research studies
Rady Children’s participates in clinical research to identify new solutions to treat childhood illnesses and conditions and to promote child health. Rady Children’s and the Research Center are participating in research in collaboration with UCSD, which includes the specialty areas of oncology, hematology, neonatology, emergency medicine, genetics, orthopedics, autism, pulmonology, infectious disease, mental health, endocrinology, gastroenterology, cardiology, and cardiovascular surgery.

Support Groups
Rady Children’s offers over 20 support groups to families on a variety of topics. Ranging from oncology to cardiology, from parenting to school readiness, Rady Children’s is proud to fulfill our mission through supporting families and helping children and families heal. The following is a small sample of topics that are offered to families free of charge:

- ADHD
- Adolescent Issues
- Anger Management
- Autism
- Behavior Management
- Bereavement
- Families Supporting Families
- Kardiac Kids
- Parent Education and Support
- Parents – Cancer support groups in English and Spanish
- Passages – A social skills group for children with Autistic Spectrum Disorders
- Sibling Support Group
- Some of My Best Friends are Bald
- Transplant Patient Support

Web Team
The Web Team at Rady Children’s provides customized web sites on health, medical and safety information for families and patients, and the community.

- The Rady Children’s web site provides comprehensive health, medical and safety information in English and Spanish. All content is reviewed and revised annually by a
clinical team. Pediatric health topics are designed especially for parents to help them determine how sick their child is and if they should seek medical help, and provides instructions for treating their child at home when it is safe to do so. The health tips section is continually being expanded on a variety of subjects and includes “50 ways to keep your child healthy”, methods for treating bites and stings, advice on proper dental care, how to treat a fever, child’s behavior and parenting, and injury prevention and safety (including age-related dangers, seatbelt use, bicycle helmets). The web site also provides information to the community on poison prevention, and how to choose day care and healthcare for their child.

- Rady Children’s provides the option for parents of patients to develop a personalized web page to update family and friends on their child’s condition through CaringBridge, a free web page service.

- A special section of the Rady Children’s website is devoted to kids and teens, which provides topics that they may be interested in and can access themselves. For kids, topics include asthma, first aid and back-to-school worries. For teens, answers or guidance on some common health concerns, including acne, alcohol and drugs, talking to parents, yoga and fitness, and suicide prevention. This section also provides information on the “Youth-to-Youth Helpline”, which is the only hotline that is run by and for teens.

- KidsHealth, including its TeenHealth module of educational and information topics, a nationally established and physician-reviewed online information tool for families about child health is also included on the website. Information is available in English and Spanish. Links to valuable information are available on a wide-array of topics, including:
  - General health and medical problems
  - Infections
  - Emotions and behavior
  - Growth and development
  - Nutrition and fitness
  - Pregnancy and newborns
  - Positive parenting
  - First aid and safety
III. Benefits for low-income patients and financial assistance

Rady Children’s is a freestanding and self-supporting organization that is not part of another major medical center. Serving a unique role in the community, Rady Children’s is proud of our commitment to provide the highest quality of care:

- The safety net provider for children (no County hospital)
- Sole pediatric Level 1 Trauma Center
- Provides over 80 percent of all inpatient pediatric care in San Diego County
- Partners with UCSD, Sharp HealthCare, Scripps Health, Palomar Health, Southwest Healthcare System (Southern Riverside County) and virtually all medical groups
- San Diego County’s only regional Level 3C full scope NICU (the highest level, including surgery)
- PICU ranked among top intensive care units in nation
- Winner of the prestigious Ernest A. Codman Award for Quality from The Joint Commission

Rady Children’s provides medically necessary care to patients regardless of their ability to pay. Over half of our patients have no private health insurance, and most patients are covered by Medi-Cal, which usually covers only approximately 25 percent of costs. Medical care services include, but are not limited to, charity care, uncompensated care, Medi-Cal payment shortfalls, county shortfalls, dental care, immunizations, and other direct medical/clinical services.

Rady Children’s is committed to providing financial assistance to persons who have healthcare needs and are low-income, uninsured, ineligible for a government program and are otherwise unable to pay for medically necessary care based on their individual family financial situations. Rady Children’s provides a Charity Care Financial Assistance Program to provide partial and/or full charity care, which will be based upon the guarantor’s ability to pay as defined by the Federal Poverty Income Guidelines. Through our efforts, Rady Children’s strives to ensure that the financial capacity of families whose children need healthcare services does not prevent them from seeking or receiving care.

Eligibility for Financial Assistance

- Eligibility for financial assistance is considered for those patients/guarantors who are uninsured, ineligible for any government healthcare benefit program, and unable to pay for their care, based upon a determination of financial need in accordance with this policy.

- The granting of financial assistance is based on an individualized determination of financial need, and does not take into account age, gender, race, socio-economic status, sexual orientation or religious affiliation.

- Rady Children’s may determine or re-determine a patient’s/guarantor’s eligibility for charity care any time information on the patient’s/guarantor’s eligibility becomes available.
Determination of Financial Need

- Financial need is determined through an individual assessment of financial need, including an application process in which the patient/guarantor is required to supply all documentation necessary to make the determination of financial need. Ideally, identification of patients/guarantors eligible for financial assistance will occur prior to service or at the point of service.

- Rady Children’s values providing excellent quality care and customer service, and this value is reflected in the application process, financial need determination, and granting of financial assistance. Requests for financial assistance are processed promptly, and Rady Children’s notifies the applicant in writing of the decision.

Financial Assistance Guidelines in 2013

- Rady Children’s provides medically necessary healthcare services for uninsured patients/guarantors whose income is less than or equal to 250 percent of the Federal Poverty Level (FPL) free of charge, except that uninsured patients/guarantors at or below 250 percent of the FPL must pay a co-payment according to the following schedule:

<table>
<thead>
<tr>
<th>Hospital or Physician service</th>
<th>Hospital Service Co-payment</th>
<th>Physician Service Co-payment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinic visit</td>
<td>$10.00/visit</td>
<td>$10.00/visit</td>
</tr>
<tr>
<td>Emergency Department</td>
<td>$25.00/visit</td>
<td>$10.00/visit</td>
</tr>
<tr>
<td>Urgent Care Center</td>
<td>$25.00/visit</td>
<td>None</td>
</tr>
<tr>
<td>Inpatient admission</td>
<td>$100.00/admission</td>
<td>$50.00/admission</td>
</tr>
<tr>
<td>Emergency Department resulting in an inpatient admission</td>
<td>$100.00/admission</td>
<td>$50.00/admission</td>
</tr>
</tbody>
</table>

Other than the instant co-payment, Rady Children’s policy is to not bill uninsured patients/guarantors at or below 250 percent of the FPL for any amount.

- Rady Children’s will provide partial charity care for patients/guarantors in accordance with financial need as determined by the FPL as follows:
  - For patients/guarantors with household income between 251 percent and 350 percent of the Federal Poverty Level that receive services at Rady Children’s or services from a Rady Children’s Specialists of San Diego (RCSSD) Emergency Room physician and other RCSSD providers, provide a discount, whereby the expected reimbursement would be equivalent to Medi-Cal reimbursement rates, including government subsidy allocation.
  - For patients/guarantors with household income between 351 percent and 450 percent of the FPL, provide a discount of 50 percent off of charges.
For patients/guarantors with household income greater than 450 percent of the FPL, patients will be provided a discounted prompt pay Private Pay Fee Schedule, which provides an approximate 25 percent discount off of charges.

Rady Children’s also provides catastrophic eligibility financial assistance when patient/guarantor liability exceeds a substantial portion of the patient’s/guarantor’s income.

Financial Counseling and Assistance

As discussed Section II, Rady Children’s provides healthcare support services to the community through the Financial Counseling Team. Rady Children’s Financial Counselors proactively explore and assist patients/guarantors in applying for health insurance coverage from public and private payment programs.
IV. Unsponsored Community Benefit Expense

The following is an economic valuation summary of Rady Children’s community service for the year ended June 30, 2013, which includes medical care and community services for vulnerable population, and benefits for the broader community.

Rady Children’s Hospital and Health Center
Unsponsored Community Benefit Expense (unaudited)
For year ended June 30, 2013
Total Community Benefits provided: $38,750,638

<table>
<thead>
<tr>
<th>Benefits for Vulnerable populations</th>
<th>Total expense</th>
<th>Offsetting revenue</th>
<th>Net Community Benefit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Financial Assistance and Government Programs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Charity care/Financial Assistance</td>
<td>$ 3,963,919</td>
<td>$</td>
<td>$ 3,963,919</td>
</tr>
<tr>
<td>Unpaid cost of Medicaid</td>
<td>305,721,946</td>
<td>309,127,982</td>
<td>(3,406,036)</td>
</tr>
<tr>
<td>Means tested programs</td>
<td>2,040,818</td>
<td>15,512</td>
<td>2,025,306</td>
</tr>
<tr>
<td>Total Financial Assistance and Government Programs</td>
<td>311,726,683</td>
<td>309,143,494</td>
<td>2,583,189</td>
</tr>
<tr>
<td>Community Services</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community Benefit Operations</td>
<td>385,727</td>
<td></td>
<td>385,727</td>
</tr>
<tr>
<td>Community Building Activities</td>
<td>235,587</td>
<td></td>
<td>235,587</td>
</tr>
<tr>
<td>Community Health Improvement Services</td>
<td>13,990,067</td>
<td>7,990,928</td>
<td>5,999,139</td>
</tr>
<tr>
<td>Research</td>
<td>878,629</td>
<td></td>
<td>878,629</td>
</tr>
<tr>
<td>Subsidized Health Services</td>
<td>8,720,511</td>
<td>5,796,651</td>
<td>2,923,860</td>
</tr>
<tr>
<td>Total for Community Services</td>
<td>24,210,521</td>
<td>13,787,579</td>
<td>10,422,942</td>
</tr>
<tr>
<td>Total Benefits for Vulnerable Populations</td>
<td>335,937,204</td>
<td>322,931,073</td>
<td>13,006,131</td>
</tr>
<tr>
<td>Benefits for the Broader Community</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community Services</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community Benefit Operations</td>
<td>40,163</td>
<td></td>
<td>40,163</td>
</tr>
<tr>
<td>Community Building Activities</td>
<td>35,558</td>
<td></td>
<td>35,558</td>
</tr>
<tr>
<td>Community Health Improvement Services</td>
<td>8,902,072</td>
<td>4,565,295</td>
<td>4,336,777</td>
</tr>
<tr>
<td>Health Professions Education</td>
<td>14,255,839</td>
<td>4,333,986</td>
<td>9,921,853</td>
</tr>
<tr>
<td>Research</td>
<td>2,000,414</td>
<td></td>
<td>2,000,414</td>
</tr>
<tr>
<td>Subsidized Health Services</td>
<td>16,549,484</td>
<td>7,139,742</td>
<td>9,409,742</td>
</tr>
<tr>
<td>Total Benefits for Broader Community</td>
<td>41,783,530</td>
<td>16,039,023</td>
<td>25,744,507</td>
</tr>
<tr>
<td>Total 2013 Community Benefit</td>
<td>$ 377,720,734</td>
<td>$ 338,970,096</td>
<td>$ 38,750,638</td>
</tr>
</tbody>
</table>

1 The total Community Benefit of $38.8 million in fiscal year 2013 includes the impact of the Hospital Provider Fee program in offsetting revenue. Medicare shortfall and patient bad debt are not included in the calculation of total community benefit for fiscal year 2013.