



Kaiser Permanente South Bay Medical Center

2025 Community Benefits Plan

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# 1. Introduction

## a. Kaiser Permanente's Mission Statement

Kaiser Permanente is an integrated health care delivery system comprised of Kaiser Foundation Hospitals, Kaiser Foundation Health Plan, and physicians in the Permanente Medical Groups. We are recognized as one of America's leading health care providers and nonprofit health plans.

Founded in 1945, Kaiser Permanente has a mission to provide high-quality, affordable health care services and to improve the health of our members and the communities we serve. We currently serve nearly 12.6 million members in 8 states and the District of Columbia.

Care for members and patients is focused on their total health and guided by their personal Permanente Medical Group physicians, specialists, and team of caregivers. Our expert and caring medical teams are empowered and supported by industry-leading technology advances and tools for health promotion, disease prevention, state-of-the-art care delivery, and world-class chronic disease management. Kaiser Permanente is dedicated to care innovations, clinical research, health education, and the support of community health.

## b. Definition of the Community

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



## 2. Community Health Needs Assessment (CHNA)

### a. Approach to CHNA

Every three years Kaiser Permanente South Bay Medical Center conducts a community health needs assessment (CHNA). The CHNA process is driven by Kaiser Permanente's commitment to improve health equity and is intended to be transparent, rigorous, and collaborative. Our Community Health team has identified and prioritized needs unique to our service area, based on community-level quantitative data and input from those who represent the broad interests of the community. We prioritize health equity in our CHNA process — including the data collection and analysis stages — and we are committed to gathering community perspectives on the impact of social health factors and health disparities. To meet this commitment, we engage with other hospitals, public health, and community organizations committed to advancing health for vulnerable populations.

To view or download the Kaiser Permanente South Bay Medical Center CHNA report and three-year Implementation Strategy (IS), please refer to Kaiser Permanente Community Health Needs Assessments (<https://www.kp.org/chna>). The IS also will be filed with the Internal Revenue Service using Form 990, Schedule H.3.

### b. Community Engagement in Development of the Plan

Kaiser Permanente's approach to CHNA prioritizes collecting qualitative data primarily through key informant interviews with individuals representing the broad interests of the community, including expertise in public health and knowledge about challenges affecting those disadvantaged by their social or economic status, geographic location, and environment. The key informant selection process aims to represent a range of community voices across all populations in that community, especially vulnerable populations. In the most recent CHNA process key informants included leaders from organizations representing local, state, and/or tribal public health, key sectors engaged in solutions (e.g., housing, economic opportunity), and those serving specific communities (e.g., people with disabilities, people who are unhoused).

As part of the CHNA process, Kaiser Permanente considers both quantitative and qualitative data to inform the prioritization of health needs for a community. Community voice through qualitative data is weighed highly in the prioritization process, above quantitative measures. In addition, Kaiser Permanente is committed to partnering with hospitals, local and tribal public health agencies, and community organizations to understand needs and advance health and health equity in the communities we serve.

Kaiser Permanente also developed a free, web-based data platform that provides access to a core set of 85 publicly available indicators using the County Health Rankings population health framework, which emphasizes social and environmental determinants

of health. The public is able to view and download information from the [Community Health data platform](https://public.tableau.com/app/profile/kp.chna.data.platform/viz/2025CommunityHealthNeedsDashboard/1a) (<https://public.tableau.com/app/profile/kp.chna.data.platform/viz/2025CommunityHealthNeedsDashboard/1a> StartHere).

Kaiser Permanente South Bay Medical Center collaborates with other local hospital systems on the CHNA. Hospitals that collaborated on the CHNA: Kaiser Permanente West Los Angeles Medical Center, Kaiser Permanente Downey Medical Center

*For a full list of consulted community stakeholders, refer to Appendix B. Community Input of the 2025 CHNA.*

### **c. List of Prioritized Needs**

In the 2022 Implementation Strategies, Kaiser Permanente South Bay Medical Center prioritized the following significant health needs, in priority order:

**1. Housing:** The South Bay service area has a much lower affordability index (70.6) than the state (88.1). Given the rise in the cost of real estate, the home ownership rate in the service area (48.8 percent) is lower than the state average (54.8 percent). In general, housing in the South Bay service area is not considered affordable, because residents spend an average of 36.4 percent of their income on mortgage compared to the state average of 30.8 percent. This scarcity of affordable housing in the South Bay service area has exacerbated housing challenges faced by vulnerable populations. According to community leaders, programs such as Project Homekey are critical to address housing needs of unhoused individuals and those at risk of homelessness.

**2. Mental & behavioral health:** Pre-pandemic data show that depression rates within the South Bay service area vary by service planning area (SPA), with SPA 6 having higher rates of adults with current depression and higher rates of adults at risk for major depression than SPA 8. Mental and behavioral challenges such as anxiety, depression, and suicide ideation are on the rise due to the COVID-19 pandemic, particularly among vulnerable populations. Communities across the country are experiencing a critical lack of capacity to meet the increased demand for mental health services. Community representatives noted that there is limited access to mental health services for individuals with severe mental health needs, detox treatment locations, mental health providers, and culturally responsive care in the South Bay service area.

**3. Income & employment:** People with steady employment are less likely to have an income below poverty level and more likely to be healthy. The unemployment rate in the South Bay service area exceeds the state (16.5 percent compared to 15.8 percent). Data

shows that there is a correlation between unemployment rate and racial identity. As the percentage of vulnerable populations increases, the unemployment rate also increases. Community representatives noted that even prior to the pandemic, there were some residents who did not have access to regular employment due to limited skills or knowledge to navigate the workplace. Due to the COVID-19 pandemic, South Bay service area residents, particularly vulnerable populations, faced multiple challenges. Many vulnerable populations are essential workers, which increased their likelihood of contracting COVID-19 and thus out of work due to illness. For others working in the hospitality or entertainment industry, they may have lost their employment and income due to stay at home orders/mandates.

**4. Access to care:** Throughout the South Bay service area, a higher percentage of the population is uninsured (8.2 percent) compared to the state (7.5 percent). Within the South Bay service area, there is a correlation between the percentage of uninsured individuals and percentage of vulnerable populations, such that zip codes with a higher percentage of vulnerable populations also have a higher percentage of uninsured people. Insurance by itself does not guarantee access to appropriate care, and many community members experience barriers to receiving regular care due to language needs, lack of health education, limited access to technology, transportation options, medical mistrust, lack of culturally responsive providers, and limited health care resources.

**5. Structural inequities:** In the South Bay service area, health disparities vary by zip code, and more than 50 percent of the community identifies as a vulnerable population. This mirrors historical evidence of overinvestment of resources to advantage one group, while disinvesting through policies and practices, thereby disadvantaging other groups especially vulnerable populations. For example, the city of Compton, where 99 percent of the population identify as a vulnerable population, has lower health insurance rates, lower life expectancy, higher percentage of low birth weights and higher rates of infant death.

**6. Food insecurity:** As a region, the South Bay service area has lower SNAP enrollment rates than the state average. However, examination of zip-code level SNAP enrollment data show that the communities of Compton, Gardena, Harbor City, Hawthorne, Lawndale, Los Angeles, Long Beach, San Pedro, and Wilmington have higher enrollment rates than the State. Due to the impact of COVID-19 on income and employment, food insecurity rates increased for all households since 2020. Other barriers to food access identified by community representatives included language barriers, immigration status, transportation needs, limited access to grocery stores, cost of food, and lack of awareness of existing resources (e.g., food banks, food distribution events).

#### **d. Health Needs Identified but Not Addressed**

The significant health need identified in the 2022 CHNA that Kaiser Permanente South Bay Medical Center does not plan to address is shown below, along with the reasons for not addressing that need.

Kaiser Permanente South Bay Medical Center addressed all of the significant needs identified in the 2022 CHNA.

*For information about the process and criteria used to select these health needs and the health needs that were not selected (and the rationale), please review the [2022 CHNA Report and the 2023-2025 Implementation Strategy Report](http://www.kp.org/chna) (<http://www.kp.org/chna>).*

#### **e. Activities Taken to Address the Needs of the Community**

The following are the health needs Kaiser Permanente South Bay Medical Center addressed during the 2023-2025 Implementation Strategy period.

All Kaiser Foundation Hospitals planned for and drew on a broad array of resources and strategies to improve the health of our communities. Resources and strategies deployed to address the identified health needs of communities include grantmaking, in-kind resources, and collaborations with community-based organizations such as local health departments and other hospital systems. Kaiser Permanente also leverages internal programs such as Medicaid, charitable health coverage, medical financial assistance, health professional education, and research to address needs prioritized in communities. Grants to community-based organizations are a key part of the contributions Kaiser Permanente makes each year to address identified health needs, and we prioritize work intended to reduce health disparities and improve health equity. In addition to contributing financial resources, we leveraged assets from across Kaiser Permanente to help us achieve our mission to improve the health of communities. The table below highlights a partial list of key grantmaking, collaborations, and partnership activities undertaken in 2025 to address community needs identified in the 2023–2025 Implementation Strategy period. Refer to the table in the Financial Summary section for financial investments made towards addressing the prioritized community needs. Additionally, Kaiser Permanente SCAL provided significant contributions to the California Community Foundation (CCF) in the interest of funding effective long-term, strategic community benefit initiatives. These CCF managed funds are not included in the financial totals for 2025.

<b>Housing</b>			
<b>Name of Community Partner</b>	<b>Title of Grant/Partnership</b>	<b>Service Areas Impacted</b>	<b>Description</b>
National Health Care for the Homeless Council	Strengthening Recuperative Care services in Southern CA through knowledge sharing, policy changes, and care transitions	All Licensed Hospitals	National Institute for Medical Respite Care strengthened the recuperative care system across Southern California by expanding the L.A. Recuperative Care Learning Network to four surrounding counties, developing standardized protocols for integrating ADL assistance into recuperative care programs, advocating for state policy alignment, and building referral networks with skilled nursing facilities and short-term post-hospitalization housing, creating a more cohesive and equitable continuum of care for unhoused patients transitioning out of hospitals.
Golden State Recuperative Care	GSRC ADL Pilot Program Participation	Downey; Los Angeles; South Bay; West Los Angeles	Golden State Recuperative Care expanded access to recuperative care for unsheltered individuals with Activities of Daily Living needs in Los Angeles County by staffing a Licensed Vocational Nurse and Certified Nursing Assistant to coordinate and deliver direct caregiving services, addressing a critical gap that has historically prevented homeless individuals with physical disabilities from being placed in recuperative care settings following hospitalization.
The People Concern	SOLAR Recuperative Care	Downey; Los Angeles; South Bay; West Los Angeles	The People Concern improved health outcomes and recovery for homeless individuals at its SOLAR recuperative care program by adding an on-site laundry facility and a second case manager, strengthening the program's capacity to deliver coordinated wellness checks, medication support, wound care, behavioral

			health services, and primary care connections that reduce hospital readmissions and support long-term stability for clients with complex health needs.
Inner City Law Center	MLP Initiative Southern California	Los Angeles; South Bay	Inner City Law Center improved housing stability for homeless and at-risk low-income Angelenos, including veterans, by providing direct legal services through two Medical-Legal Partnerships and training VA medical and social service providers to identify and refer housing-related legal issues, addressing the legal barriers that are among the most persistent obstacles to stable housing and healthcare for Los Angeles's unhoused population.

<b>Mental &amp; Behavioral Health</b>			
<b>Name of Community Partner</b>	<b>Title of Grant/Partnership</b>	<b>Service Areas Impacted</b>	<b>Description</b>
Connected to Lead	Project Pathways	South Bay	Connected to Lead expanded its organizational capacity to address the lack of accessible and culturally relevant mental health programs for youth by developing Peer Mental Health Mentors, implementing a staff wellness program, expanding therapy services, and investing in team capacity building, recognizing that sustainable youth mental health support requires investing in the well-being and skills of the providers delivering those services.
Public Health Institute	Cypress Resilience Project: Learning Community and Support for CA Youth Mental Health Initiative	All Licensed Hospitals	Cypress Resilience Project strengthened organizational capacity and staff well-being by facilitating monthly learning communities, delivering professional development workshops on trauma, grief, and mental health, and providing management coaching to leaders

	Grantees NCAL Grant split with SCAL		navigating vicarious trauma and burnout, ensuring that frontline organizations serving young people had the resilience, skills, and peer support needed to sustain and deepen their impact.
Jewish Family & Children's Service of Long Beach-West Orange County	Low-Income Counseling Program (LIC)	South Bay	Jewish Family and Children's Service of Long Beach and Orange County's Low-Income Counseling program provided mental health treatment, social services, and protective services to adults, youth, and children without adequate health insurance or financial resources in the greater Long Beach area, serving as one of the only nonprofits in the region offering mental health care across the full age spectrum regardless of ability to pay.
One in Long Beach, Inc.	Mental Health Services	South Bay	LGBTQ Center Long Beach expanded mental health access for historically underserved individuals in the greater Long Beach area by providing subsidized counseling services to individuals with economic need and hosting community workshops on mental health awareness and available resources, addressing the significant financial, insurance, and discrimination-related barriers that prevent marginalized community members from seeking mental health support.
Mental Health America of Los Angeles	Project Resilience: Strengthening Student Mental Health Through Evidence-Based Training	South Bay	Mental Health America of Los Angeles delivered real-time, trauma-informed resilience training to college students in the South Bay who face barriers to accessing mental health services, addressing an unprecedented youth mental health crisis where rates of depression and anxiety among college students have surged dramatically and mental health challenges have become the leading barrier to academic success.

<b>Income &amp; Employment</b>			
<b>Name of Community Partner</b>	<b>Title of Grant/Partnership</b>	<b>Service Areas Impacted</b>	<b>Description</b>
Asian American Drug Abuse Program, Inc.	Health Careers Program	Downey; Los Angeles; South Bay; West Los Angeles	Asian American Drug Abuse Program expanded access to healthcare career pathways for underrepresented residents of South Los Angeles by providing targeted outreach, enrollment support, individualized employment planning, and comprehensive case management to help disadvantaged individuals complete vocational nursing and nursing assistant training programs, addressing both the region's high unemployment rates and the urgent demand for a more diverse and skilled healthcare workforce.
California WIC Association	Improving Access: Streamlining Referrals and WIC Enrollment	All Licensed Hospitals	California WIC Association expanded access to the WIC program for eligible but unenrolled families across California by streamlining electronic referral systems, supporting Memoranda of Understanding between WIC local agencies and Medi-Cal managed care plans, and advancing policy and systems improvements that reduce enrollment barriers for pregnant individuals and young children, addressing a coverage gap of hundreds of thousands of eligible Californians who are missing out on a program proven to improve birth outcomes and reduce healthcare costs.
Communities Lifting Communities	Impact Purchasing in Health Care Initiative	Anaheim_Irvine; Baldwin Park; Downey; Fontana_Ontario; Los Angeles; Moreno Valley; Panorama City; Riverside;	Communities Lifting Communities advanced health equity and economic resilience across Southern California by building hospital capacity for inclusive procurement, expanding regional data collection on supplier diversity, and strengthening cross-sector collaboration

		South Bay; West Los Angeles; Woodland Hills	through the Regional Impact Purchasing Collaborative, creating pathways for local and diverse-owned businesses to access hospital supply chains and driving economic investment in vulnerable populations.
Sharefest Community Development, Inc.	Career Connections	South Bay	Sharefest provided workforce development for at-risk high school students in Los Angeles's South and Harbor regions through an accredited school-based curriculum, career panels, field trips, mentoring, and post-graduation job placement support, reaching students at continuation and alternative high schools who face the greatest risk of dropout and have historically had the least access to career preparation and economic opportunity.
The RightWay Foundation	Operation Emancipation	South Bay	RightWay Foundation provided current and former foster youth with trauma-informed employment and career services integrated with mental health and emotional support, addressing the disproportionate rates of PTSD, unemployment, homelessness, and incarceration among youth who exit the foster care system without the healing-centered support needed to achieve financial stability and self-sufficiency.

<b>Access to Care</b>			
<b>Name of Community Partner</b>	<b>Title of Grant/Partnership</b>	<b>Service Areas Impacted</b>	<b>Description</b>
County of Los Angeles Department of Public Health	Southern California Community Health Outreach	Baldwin Park; Downey; Los Angeles; Panorama City; South Bay; West Los Angeles; Woodland Hills	Los Angeles County Department of Public Health improved healthcare access for vulnerable and low-income families across Los Angeles County by delivering culturally responsive outreach, one-on-one enrollment assistance, healthcare navigation support, and

			recertification services, addressing the systemic and individual barriers that prevent underserved communities from accessing, understanding, and retaining the healthcare coverage they need.
The California Health Care Safety-Net Institute	Safety Net Organizational Capacity Building	All Licensed Hospitals	<u>The California Health Care Safety Net Institute supported efforts to strengthen public health care systems by providing peer learning, technical assistance, expert access, and collaboration with the Department of Health Care Services, while also building its internal capacity to collect and analyze system data through the development of a data warehouse.</u>
Southside Coalition of Community Health Centers	Safety Net Organizational Capacity Building	Downey; South Bay; West Los Angeles	Southside Coalition of Community Health Centers expanded organizational capacity to support its member health centers serving nearly 300,000 patients annually in South Los Angeles by strengthening health coverage education, outreach and enrollment, patient navigation, and quality improvement services, protecting access to care for low-income, uninsured, and multi-ethnic residents in the region with the highest poverty and uninsured rates in Los Angeles County.
California School-Based Health Alliance	Expanding Capacity of School-Based Health & Wellness Centers Through California, NCAL - Grants splits with SCAL	All Licensed Hospitals	California School-Based Health Alliance strengthened the capacity of Local Education Agencies and community-based health organizations to deliver health and mental health services in California schools by providing training, technical assistance, and regional coalition support, expanding school-based health and wellness centers in areas of greatest need while centering youth voice through peer-led health advocacy convenings.

**Medi-Cal**

Kaiser Permanente provides coverage to Medi-Cal members in 22 counties in California through both direct contracts with the Department of Health Care Services (DHCS), and through delegated arrangements with other Medi-Cal managed care plans (MCPs). Kaiser Permanente also provides subsidized health care on a fee-for-service basis for Medi-Cal beneficiaries not enrolled as KFHP members. Reimbursement for some services is usually significantly below the cost of care and is considered subsidized care to non-member Medi-Cal fee-for-service patients.

**Community Health Coverage Program (CHCP)**

Kaiser Permanente's CHCP provides health care coverage to people who have low-income and don't have access to other public or private health coverage. CHCP enrolls qualifying individuals in a Kaiser Permanente Individual and Family Health Plan. Through CHCP, members' monthly premiums are subsidized, and members do not have to pay copay or out-of-pocket costs for most care at Kaiser Permanente facilities. Through CHCP, members have a medical home that includes comprehensive coverage, preventive services and consistent access through the "front door" of the health delivery system.

**Medical Financial Assistance (MFA)**

Kaiser Permanente's Medical Financial Assistance program (MFA) improves health care access for people with limited incomes and resources and is fundamental to Kaiser Permanente's mission. Our MFA program helps patients who are low-income, uninsured, or underinsured cover the costs of care. The program provides temporary financial assistance or free care to patients who receive health care services from our providers, regardless of whether they have health coverage or can't afford to pay.

**Structural Inequities**

<b>Name of Community Partner</b>	<b>Title of Grant/Partnership</b>	<b>Service Areas Impacted</b>	<b>Description</b>
BOSS Inc	Thriving by Design: Building Healthy Minds, Habits, and Futures	South Bay	BOSS Inc's Thriving by Design program equipped economically disadvantaged youth in Long Beach, Carson, Inglewood, and San Pedro with the habits, mindsets, and leadership skills needed to thrive mentally, emotionally, and socially, addressing foundational academic gaps that lock youth out of high-paying STEM careers and long-term economic mobility in communities where over 80% of students are not meeting grade-level math standards.
Volunteer Center South Bay Harbor Long Beach	Impact Makers - Youth Mental Health Program	South Bay	Volunteer Center South Bay Harbor Long Beach's Impact Makers program provided a 12-week social-emotional wellness and service-learning experience to high school youth in the

			South Bay and Long Beach regions, integrating group-based mental health education, community service, and peer support circles under licensed mental health guidance to build resilience and connection among young people navigating an unprecedented youth mental health crisis.
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<b>Food Insecurity</b>			
<b>Name of Community Partner</b>	<b>Title of Grant/Partnership</b>	<b>Service Areas Impacted</b>	<b>Description</b>
Feeding America	Healthy Food, Healthy Futures: Increasing Access to Fresh Produce, Protein, and Dairy, PO - Grants splits with	Anaheim_Irvine; Baldwin Park; Downey; Kern; Los Angeles; Moreno Valley; Panorama City; Riverside; San Diego; San Marcos; South Bay; West Los Angeles; Woodland Hills	Feeding America expanded equitable access to nutrient-rich foods for families facing hunger across its national network of partner food banks by deepening agricultural partnerships, strengthening sustainable fresh food procurement models, maximizing federal program coordination, and leveraging 11 regional cooperatives to ensure that fresh produce, dairy, and protein reach the communities with the greatest nutrition gaps and health disparities at a time when food insecurity has reached its highest level in nearly a decade.
Sustainable Economic Enterprises of Los Angeles	Market Match: Fruit and Vegetable Incentives	Downey; Los Angeles; South Bay	Food Access LA supported the Market Match fruit and vegetable incentive program by providing additional incentives to low-income shoppers using CalFresh and/or WIC benefits in South Los Angeles neighborhoods, including Watts-Willowbrook, Compton, and surrounding areas. This program helped make fresh fruits and vegetables more affordable and accessible.
Food Forward	Increasing Access to Healthy Food in Southern California	All Licensed Hospitals	Food Forward increased community access to fresh fruits and vegetables by optimizing workflows and transportation to handle larger

			volumes of recovered produce and implementing feedback systems to improve distribution through partner organizations. The project benefited individuals experiencing food insecurity in Los Angeles County.
Los Angeles Regional Food Bank	Enhancing Access to Healthy Food and Healthy Cultural Food Traditions in Underserved LA County Communities	All Licensed Hospitals	The Los Angeles Regional Food Bank supported an initiative to improve access to healthy and culturally relevant foods in underserved Los Angeles County communities. The program distributed fresh produce and culturally appropriate foods to individuals and households experiencing food insecurity through 4–6 partner agencies in underserved areas.
Project Angel Food	Medically tailored meals, nutrition services, and emergency food assistance for clients with diet-related diseases	Baldwin Park; Downey; Fontana_Ontario; Los Angeles; Panorama City; South Bay; West Los Angeles; Woodland Hills	Project Angel Food delivered home-delivered grocery gift cards to critically ill clients facing CalFresh benefit disruptions and provided medically tailored meals with registered dietitian counseling to clients with diabetes and heart disease in Los Angeles County, advancing health equity for individuals living at the intersection of poverty, food insecurity, and chronic illness where evidence shows these interventions reduce hospitalizations, improve blood sugar control, and restore dignity for some of the region's most vulnerable residents.

### **3. 2026 Community Benefits Plan**

#### **a. 2026-2028 Implementation Strategies**

Kaiser Permanente South Bay Medical Center has developed an implementation strategy (IS) for the priority needs it will address over the next three years 2026-2028, considering both Kaiser Permanente's and the community's assets and resources.

Kaiser Permanente South Bay Medical Center Community Health has identified the strategic focus, strategies, and expected impact for each priority health need, described in the tables below. While we recognize that IS strategies can address multiple health needs, each strategy is associated with the needs where we expect to see the greatest impact. Included with each strategy are expected outcomes and examples of available Kaiser Permanente resources and planned collaborations.

1. Access to care
2. Housing
3. Food and nutrition security
4. Income and employment
5. Mental and behavioral health

## Access to care

Strategy	Expected outcomes	Available resources and planned collaboration
<p>Increase equitable access to care and affordability of care for low-income community residents.</p>	<ul style="list-style-type: none"> <li>• Increase access to care and coverage</li> <li>• Increase utilization of clinical and social care</li> <li>• Improve health outcomes</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Resources:</b> Charitable contributions, and subsidized care and coverage programs such as Medical Financial Assistance, Charitable Health Coverage, and Medicaid/Medi-Cal</li> <li>• <b>Planned collaboration:</b> Government agencies, including local and state public health departments, community organizations, and safety net clinics</li> </ul>
<p>Grow a culturally competent health care workforce in order to improve equitable access to health care services.</p>	<ul style="list-style-type: none"> <li>• Decrease health care workforce shortages</li> <li>• Improve cultural competency</li> <li>• Improve health outcomes</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Resources:</b> Charitable contributions, health professions education and training programs, and health care career exposure programs</li> <li>• <b>Planned collaboration:</b> National organizations, community organizations, and safety net providers</li> </ul>
<p>Increase access to and quality of resources that improve social and environmental factors by investing in community organizations, schools, districts, or other public entities and by enhancing coordination between community and health care.</p>	<ul style="list-style-type: none"> <li>• Improve access to and quality of resources provided by community organizations providing social care</li> <li>• Improve health outcomes</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Resources:</b> Charitable contributions, and technical assistance</li> <li>• <b>Planned collaboration:</b> Government agencies, including local and state public health departments, community organizations, schools and school districts, and other hospitals</li> </ul>

## Housing

Strategy	Expected outcomes	Available resources and planned collaboration
Implement strategies to improve the health of homeless populations and reduce housing insecurity by strengthening the availability and coordination of community and health care resources.	<ul style="list-style-type: none"> <li>• Improve access to and quality of resources provided by community organizations providing social care</li> <li>• Improve health outcomes</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Resources:</b> Charitable contributions, and technical assistance</li> <li>• <b>Planned collaboration:</b> Government agencies, including local and state public health departments, community organizations, schools and school districts, and other hospitals</li> </ul>
Increase access to and quality of resources that improve social and environmental factors by investing in community organizations, schools, districts, or other public entities and by enhancing coordination between community and health care.	<ul style="list-style-type: none"> <li>• Improve access to and quality of resources provided by community organizations providing social care</li> <li>• Improve health outcomes</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Resources:</b> Charitable contributions, and technical assistance</li> <li>• <b>Planned collaboration:</b> Government agencies, including local and state public health departments, community organizations, schools and school districts, and other hospitals</li> </ul>

## Food and nutrition security

Strategy	Expected outcomes	Available resources and planned collaboration
Improve food and nutrition security and address diet-related health conditions by increasing equitable access to and affordability of nutritious and culturally relevant food options.	<ul style="list-style-type: none"> <li>• Improve access to and quality of resources provided by community organizations providing social care</li> <li>• Improve health outcomes</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Resources:</b> Charitable contributions</li> <li>• <b>Planned collaboration:</b> Food banks and pantries, community organizations, and government agencies</li> </ul>
Increase access to and quality of resources that improve social and environmental factors by investing in	<ul style="list-style-type: none"> <li>• Improve access to and quality of resources provided by community organizations providing social care</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Resources:</b> Charitable contributions, and technical assistance</li> </ul>

community organizations, schools, districts, or other public entities and by enhancing coordination between community and health care.	<ul style="list-style-type: none"> <li>• Improve health outcomes</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Planned collaboration:</b> Government agencies, including local and state public health departments, community organizations, schools and school districts, and other hospitals</li> </ul>
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### Income and employment

Strategy	Expected outcomes	Available resources and planned collaboration
Increase equitable access to care and affordability of care for low-income community residents.	<ul style="list-style-type: none"> <li>• Increase access to care and coverage</li> <li>• Increase utilization of clinical and social care</li> <li>• Improve health outcomes</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Resources:</b> Charitable contributions, and subsidized care and coverage programs such as Medical Financial Assistance, Charitable Health Coverage, and Medicaid/Medi-Cal</li> <li>• <b>Planned collaboration:</b> Government agencies, including local and state public health departments, community organizations, and safety net clinics</li> </ul>
Grow a culturally competent health care workforce in order to improve equitable access to health care services.	<ul style="list-style-type: none"> <li>• Decrease health care workforce shortages</li> <li>• Improve cultural competency</li> <li>• Improve health outcomes</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Resources:</b> Charitable contributions, health professions education and training programs, and health care career exposure programs</li> <li>• <b>Planned collaboration:</b> National organizations, community organizations, and safety net providers</li> </ul>
Improve food and nutrition security and address diet-related health conditions by increasing equitable access to and affordability of nutritious and culturally relevant food options.	<ul style="list-style-type: none"> <li>• Improve access to and quality of resources provided by community organizations providing social care</li> <li>• Improve health outcomes</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Resources:</b> Charitable contributions</li> <li>• <b>Planned collaboration:</b> Food banks and pantries, community organizations, and government agencies</li> </ul>

<p>Implement strategies to improve the health of homeless populations and reduce housing insecurity by strengthening the availability and coordination of community and health care resources.</p>	<ul style="list-style-type: none"> <li>• Improve access to and quality of resources provided by community organizations providing social care</li> <li>• Improve health outcomes</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Resources:</b> Charitable contributions, and technical assistance</li> <li>• <b>Planned collaboration:</b> Government agencies, including local and state public health departments, community organizations, schools and school districts, and other hospitals</li> </ul>
<p>Increase access to and quality of resources that improve social and environmental factors by investing in community organizations, schools, districts, or other public entities and by enhancing coordination between community and health care.</p>	<ul style="list-style-type: none"> <li>• Improve access to and quality of resources provided by community organizations providing social care</li> <li>• Improve health outcomes</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Resources:</b> Charitable contributions, and technical assistance</li> <li>• <b>Planned collaboration:</b> Government agencies, including local and state public health departments, community organizations, schools and school districts, and other hospitals</li> </ul>

**Mental and behavioral health**

<b>Strategy</b>	<b>Expected outcomes</b>	<b>Available resources and planned collaboration</b>
<p>Increase equitable access to care and affordability of care for low-income community residents.</p>	<ul style="list-style-type: none"> <li>• Increase access to care and coverage</li> <li>• Increase utilization of clinical and social care</li> <li>• Improve health outcomes</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Resources:</b> Charitable contributions, and subsidized care and coverage programs such as Medical Financial Assistance, Charitable Health Coverage, and Medicaid/Medi-Cal</li> <li>• <b>Planned collaboration:</b> Government agencies, including local and state public health departments, community organizations, and safety net clinics</li> </ul>
<p>Grow a culturally competent health care workforce in order to improve equitable access to health care services.</p>	<ul style="list-style-type: none"> <li>• Decrease health care workforce shortages</li> <li>• Improve cultural competency</li> <li>• Improve health outcomes</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Resources:</b> Charitable contributions, health professions education and training programs, and health care career exposure programs</li> </ul>

		<ul style="list-style-type: none"> <li>• <b>Planned collaboration:</b> National organizations, community organizations, and safety net providers</li> </ul>
Implement strategies to improve the health of homeless populations and reduce housing insecurity by strengthening the availability and coordination of community and health care resources.	<ul style="list-style-type: none"> <li>• Improve access to and quality of resources provided by community organizations providing social care</li> <li>• Improve health outcomes</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Resources:</b> Charitable contributions, and technical assistance</li> <li>• <b>Planned collaboration:</b> Government agencies, including local and state public health departments, community organizations, schools and school districts, and other hospitals</li> </ul>
Increase access to and quality of resources that improve social and environmental factors by investing in community organizations, schools, districts, or other public entities and by enhancing coordination between community and health care.	<ul style="list-style-type: none"> <li>• Improve access to and quality of resources provided by community organizations providing social care</li> <li>• Improve health outcomes</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Resources:</b> Charitable contributions, and technical assistance</li> <li>• <b>Planned collaboration:</b> Government agencies, including local and state public health departments, community organizations, schools and school districts, and other hospitals</li> </ul>

### b. Evaluation of the Community Benefit Plan’s Effectiveness

Kaiser Permanente South Bay Medical Center will monitor and evaluate the strategies listed above to assess progress and document the impact of those strategies on expected outcomes. Evaluation of the impact includes monitoring grantee progress (how many people were reached) and measuring short and intermediate term outcomes (e.g., what was the impact on the individuals served). Additionally, for each prioritized health need, the number of grants made, the number of dollars invested, and the number of community-based organizations supported are tracked.

In addition to the strategies developed as part of the CHNA and three-year IS process, many health needs are addressed by Kaiser Permanente business practices that contribute to community well-being, including environmentally responsible purchasing, waste reduction, and purchase of clean energy for facilities. We also conduct high-quality health research and disseminate findings intended to contribute to the literature by enhancing understanding of the impact of interventions designed to improve health outcomes.

## 4. Financial Summary

### a. Explanation of Methodology Used to Determine Cost

#### **Total Community Benefit expenditures are reported as follows:**

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

#### **Resource allocations are reported as follows:**

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

### b. Kaiser Permanente South Bay Medical Center Community Benefits Provided in 2025

This report outlines the hospital's net community benefit expenditures categorized into the following framework: medical care services, other services for vulnerable populations, other services for the broader community, and health research, education and training programs. Kaiser Permanente generates a range of nonquantifiable benefits, including community engagement through volunteerism, environmental stewardship, supplier diversity, and partnerships with community organizations, municipal leaders, and public health champions that address community needs.

<b>Financial Assistance and Means-Tested Government Programs</b>	<b>Vulnerable Population</b>	<b>Broader Community</b>	<b>Total</b>
Traditional Charity Care	\$ 16,288,699		\$ 16,288,699
Medi-Cal	\$ 37,313,575		\$ 37,313,575
Other Means-Tested Government (Indigent Care)	\$ 0		\$ 0
<b>Sum Financial Assistance and Means-Tested Government Program</b>	\$ 53,602,274		\$ 53,602,274
<b>Other Benefits</b>			
Community Health Improvement Services	\$ 1,840,924	\$ 76,461	\$ 1,917,385
Community Benefit Operations	\$ 0	\$ 318,627	\$ 318,627
Health Professions Education	\$ 1,080,116	\$ 270,029	\$ 1,350,145
Subsidized Health Services	\$ 0	\$ 0	\$ 0
Research	\$ 276,893	\$ 142,642	\$ 419,535
Cash and in-kind Contributions for Community Benefits	\$ 2,315,664	\$ 72,793	<b>\$ 2,388,458</b>
Other Community Benefits	\$ 0	\$ 16,197	\$ 16,197

<b>Total Other Benefits</b>	<b>\$ 5,513,597</b>	<b>\$ 896,749</b>	<b>\$ 6,410,347</b>
<b>Community Benefits Spending</b>			
<b>Total Community Benefits*</b>	<b>\$ 59,115,871</b>	<b>\$ 896,749</b>	<b>\$ 60,012,621</b>
Medicare (non-IRS)	\$ 70,112,812		<b>\$ 70,112,812</b>
<b>Total Community Benefits with Medicare</b>	<b>\$ 129,228,683</b>	<b>\$ 896,749</b>	<b>\$ 130,125,433</b>

\*Sum of Financial assistance, Means-Tested Government Programs and Other Benefits.

## 5. Certification Statement

Kaiser Permanente leadership reviewed and attested to the validity of the hospital Community Benefit Plan. The data and information reported is true, correct, and completed as required by Health and Safety Code sections 127340-127360 and Article 2 of Chapter 8.2 of Division 7 of Title 22 of the California Code of Regulations requiring all non-profit hospitals report on the community benefits they provide.

- John Yamamoto, VP, Community Health & Benefit, Government Relations, & Community Engagement
- Michelle Gaskill-Hames, Regional President