



Kaiser Permanente Woodland Hills Medical Center

2025 Community Benefits Plan

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1. Introduction

a. Kaiser Permanente's Mission Statement

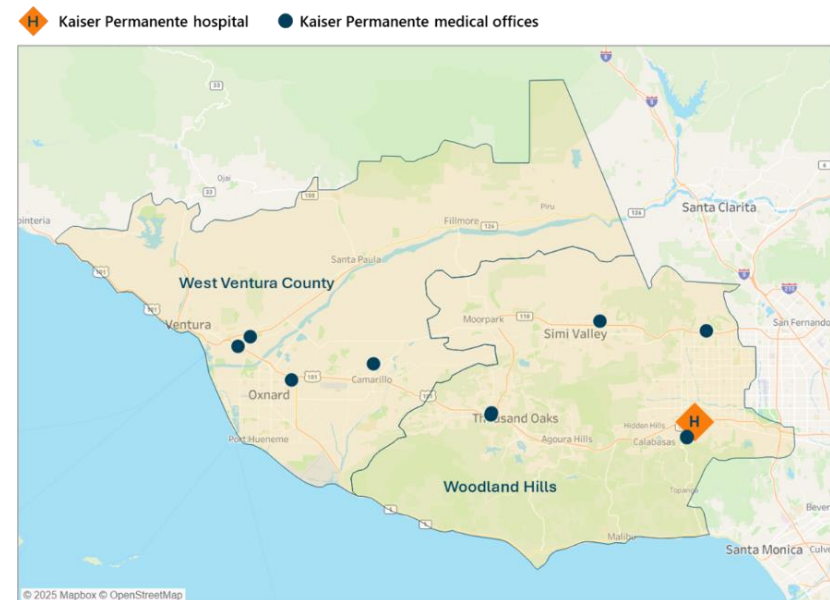
Kaiser Permanente is an integrated health care delivery system comprised of Kaiser Foundation Hospitals, Kaiser Foundation Health Plan, and physicians in the Permanente Medical Groups. We are recognized as one of America's leading health care providers and nonprofit health plans.

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 Woodland Hills 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 Woodland Hills 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 Woodland Hills 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 \(https://public.tableau.com/app/profile/kp.chna.data.platform/viz/2025CommunityHealthNeedsDashboard/1a_StartHere\)](https://public.tableau.com/app/profile/kp.chna.data.platform/viz/2025CommunityHealthNeedsDashboard/1a_StartHere).

Kaiser Permanente Woodland Hills Medical Center is a member of the Ventura County Community Health Improvement Collaborative (VCCHIC).

Hospitals that collaborated on the CHNA: Kaiser Permanente Panorama City 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 Woodland Hills Medical Center prioritized the following significant health needs, in priority order:

- 1. Access to care:** Within the Woodland Hills service area, residents are less likely to be insured than the California average. Geographic disparities in insurance rates, including insured children, are also associated with race: ZIP codes with a higher percentage of vulnerable populations tend to have a lower percent of individuals insured (both for adult and children). A fear of embarrassment about accessing services such reproductive health services, mental health services, and substance use services was also identified, particularly in West Ventura. Health education among the general public was also identified as a concern in both West Ventura and Woodland Hills, including a lack of understanding of available services, and a misunderstanding of vaccines. A lack of transportation to services and a lack of culturally or linguistically appropriate services was also identified.
- 2. Education:** Residents of the West Ventura service area have less formal education than the average American. In addition, 4th grade students in West Ventura scored worse on state exams than the national average. In both West Ventura and Woodland Hills, additional geographic disparities are closely associated with race: areas with a higher percentage of vulnerable populations tend to have fewer adults with a high school diploma and lower preschool enrollment rates. In addition, expanding partnerships with schools, particularly for the purpose of improving health education, was recommended.
- 3. Housing:** The median rental cost in the Woodland Hills service area is roughly \$2,200, and in the West Ventura service area is roughly \$1,700, both of which are much higher than the national rate. The percentage of income spent on mortgage costs is also

much higher than the national average in both service areas. In addition, ZIP codes with a higher percentage of vulnerable populations tend to have lower home ownership rates in both service areas, and more overcrowded housing in the Woodland Hills service area. The lack of permanent supportive housing for people experiencing homelessness was also identified as one of the biggest challenges to addressing health needs in both service areas.

4. Mental & behavioral health: In both Woodland Hills and West Ventura, mental health was identified as a need of growing concern, especially since the start of the COVID-19 pandemic. A lack of staff and a lack of specialized services were listed as some of the biggest challenges to addressing mental health needs. In addition, improved coordination with other health services, eliminating payment inequities for mental health staff, and providing improved health education (to reduce mental health stigma) were recommended. Additional education for health care providers and employers related to trauma informed care and cultural humility was also identified as a need, and as a strategy that could reduce health disparities and inequities.

5. Chronic disease & disability: Heart disease, diabetes, and asthma are more prevalent in the Woodland Hills service area compared to the national average. Asthma is also more prevalent in the West Ventura service area compared to the national average. However, in the city of Oxnard, diabetes and obesity rates are relatively high, as are self-described rates of “fair or poor” health. Adding or expanding additional community health organizations, healthy food options, and early intervention programs in schools were identified as effective points of intervention in preventing and reducing the negative impact of chronic disease and disability.

6. Income & employment: Significant geographic disparities in income are closely associated with race in both West Ventura and Woodland Hills. Higher poverty rates and lower median household incomes are more prevalent in ZIP codes with a higher percent of vulnerable populations. In addition, higher unemployment rates are also more prevalent in these ZIP codes in West Ventura. Income and employment needs are also closely associated with other needs, including housing, education, and access to care. Providing jobs training for underemployed and unemployed individuals, including training that can help address health care provider shortages were recommended.

d. Health Needs Identified but Not Addressed

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

Kaiser Permanente Woodland Hills 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 Woodland Hills 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.

Access to Care			
Name of Community Partner	Title of Grant/Partnership	Service Areas Impacted	Description
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	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.
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.
County of Ventura	Ensuring Access to Coverage for All in Ventura County	Woodland Hills	Ventura County Public Health's Health Care for All initiative expanded Medi-Cal enrollment and health coverage access for underserved and

			uninsured residents by conducting targeted outreach, communications, and program education, addressing the estimated tens of thousands of Californians who remain uncovered despite eligibility due to awareness gaps, language barriers, and the complexity of navigating the state's health coverage programs.
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.			

Education			
Name of Community Partner	Title of Grant/Partnership	Service Areas Impacted	Description
Boys & Girls Clubs of Greater Oxnard and Port Hueneme	STEAM Innovation Labs	Woodland Hills	Boys and Girls Clubs of Greater Oxnard and Port Hueneme's STEAM Innovation Center engaged youth in hands-on, curriculum-based science, technology, engineering, arts, and math programming that built academic confidence and career pathways, addressing

			the significant learning setbacks experienced by vulnerable students in majority-minority schools who fell disproportionately behind during pandemic-era learning disruptions.
Future Leaders of America	Higher Education for All!	Woodland Hills	Future Leaders of America's Higher Education for All program supported low-income and first-generation youth in Ventura County in overcoming educational barriers and accessing college and career opportunities by collaborating with schools and districts to provide ongoing academic support, addressing the well-documented link between educational attainment and improved health behaviors, quality of life, and long-term economic outcomes.

Housing			
Name of Community Partner	Title of Grant/Partnership	Service Areas Impacted	Description
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.
National Health Foundation	Ventura Behavioral Interventionist Implementation	Woodland Hills	National Health Foundation improved access to mental health care and crisis intervention for recuperative care guests in Ventura by hiring a

			skilled behavioral interventionist to provide on-site crisis intervention, staff mental health support, and advocacy for individuals experiencing homelessness whose unaddressed mental health needs are compounded by physical illness and create barriers to recovery and stable housing.
United Way of Ventura County	United to End Homelessness Landlord Engagement Program and Homelessness Prevention	Woodland Hills	United Way of Ventura County advanced homelessness prevention and housing stability in Ventura County through its Landlord Engagement Program and Home Safe Program, growing services that prevent returns to homelessness for seniors and other vulnerable residents while advocating for increased homelessness prevention funding in a county where the unhoused population continues to face acute needs.
California Rural Legal Assistance Inc.	Enhancing Housing Stability in Ventura County through Legal Assistance Addressing Patients' Social Determinants of Health	Woodland Hills	California Rural Legal Assistance provided eviction defense, habitability, foreclosure prevention, and fair housing legal services to low-income tenants and homeowners in Ventura County through a medical-legal partnership with local health clinics, educating health professionals on housing conditions as health determinants and addressing the severe cost burden facing over half of Ventura County renter households.

Mental & Behavioral Health			
Name of Community Partner	Title of Grant/Partnership	Service Areas Impacted	Description
RaisingHOPE, Inc.	RaisingHOPE Foster Youth Mental Health Stability and Empowerment Project	Woodland Hills	RaisingHOPE expanded its mentorship program capacity to more effectively integrate and address the mental health needs of foster youth ages 13 to 18 in Ventura County and the

			Conejo Valley by providing staff trainings and community events, recognizing that youth who have experienced abuse or neglect require trauma-informed mentorship that goes beyond traditional programming to support healing and resilience.
Public Health Institute	Cypress Resilience Project: Learning Community and Support for CA Youth Mental Health Initiative Grantees, NCAL Grant split with SCAL	All Licensed Hospitals	Cypress Resilience Project strengthened the organizational capacity and staff well-being of Kaiser's California Youth Mental Health Initiative grantees by facilitating monthly learning communities, delivering professional development workshops on trauma, grief, and mental health, and providing management coaching to leaders 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.
Child and Family Guidance Center	Youth Mental Health First Aid Training for Parents	Woodland Hills	Child and Family Guidance Center reduced mental health stigma and increased awareness of youth and adult mental health in Ventura County communities through education and outreach, addressing the persistent stigma that prevents individuals from seeking care in a region where suicide remains a leading cause of death among teens and young adults and one in three young adults experiences a mental health challenge annually.
Coalition for Family Harmony	Counseling Services for Individuals in Ventura County	Woodland Hills	Coalition for Family Harmony provided free counseling sessions to survivors of interpersonal violence in Ventura County through its offices, emergency domestic violence shelters, and virtual services, serving as the only rape crisis center in the county and addressing the thousands of domestic violence and sexual violence allegations reported

			annually that disproportionately affect low-income women and children.
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Chronic Disease & Disability			
Name of Community Partner	Title of Grant/Partnership	Service Areas Impacted	Description
Students for Eco-Education and Agriculture, Inc.	VC Farm-to-Food Lab & Youth Wellness Initiative	Woodland Hills	Students for Eco-Education and Agriculture delivered hands-on agricultural, nutrition, and wellness education to students and families in Ventura County through its Farm-to-Food Lab and Youth Wellness Initiative, increasing food literacy and promoting healthier lifestyles in Title I school communities where high rates of poverty, food insecurity, and limited access to fresh produce create significant barriers to healthy eating and chronic disease prevention.
California State University Northridge Foundation	Let's Cook, Move, and Grow Healthy Program: 2025-2026	Woodland Hills	CSUN's Marilyn Magaram Center delivered nutrition education, cooking demonstrations, and wellness programming to low-income residents of the West San Fernando Valley through its Let's Cook, Move, and Grow Healthy Program, addressing the high rates of adult and childhood obesity and food insecurity in communities.

Income & Employment			
Name of Community Partner	Title of Grant/Partnership	Service Areas Impacted	Description
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; South Bay; West Los Angeles; Woodland Hills	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 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.
Center for Living and Learning	Peer Employment Support Project	Woodland Hills	Center for Living and Learning expanded employment opportunities for individuals transitioning from treatment, incarceration, and other at-risk situations in the Woodland Hills area by providing supervised job search support and dedicated employment services, addressing the income and employment disparities that undermine economic security and long-term health stability for community members facing multiple barriers to entering the workforce.
Rescue Mission Alliance	Lighthouse for Women and Children - Transitional Housing, Vocational Training, and Support Services	Woodland Hills	Rescue Mission Alliance's Lighthouse for Women and Children supported homeless women in Ventura County in achieving independence and financial stability by providing vocational training, employment assistance, financial literacy education, and comprehensive case management, addressing

			the urgent and growing needs of women and children experiencing homelessness in a county where the unhoused population continues to rise.
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3. 2026 Community Benefits Plan

a. 2026-2028 Implementation Strategies

Kaiser Permanente Woodland Hills 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 Woodland Hills 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. Housing
2. Education
3. Food and nutrition security
4. Access to care
5. Mental and behavioral health

Housing

Strategy	Expected outcomes	Available resources and planned collaboration
<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"> • Improve access to and quality of resources provided by community organizations providing social care • Improve health outcomes 	<ul style="list-style-type: none"> • Resources: Charitable contributions, and technical assistance • Planned collaboration: Government agencies, including local and state public health departments, community organizations, schools and school districts, and other hospitals
<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"> • Improve access to and quality of resources provided by community organizations providing social care • Improve health outcomes 	<ul style="list-style-type: none"> • Resources: Charitable contributions, and technical assistance • Planned collaboration: Government agencies, including local and state public health departments, community organizations, schools and school districts, and other hospitals

Education

Strategy	Expected outcomes	Available resources and planned collaboration
<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"> • Decrease health care workforce shortages • Improve cultural competency • Improve health outcomes 	<ul style="list-style-type: none"> • Resources: Charitable contributions, health professions education and training programs, and health care career exposure programs • Planned collaboration: National organizations, community organizations, and safety net providers

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"> • Improve access to and quality of resources provided by community organizations providing social care • Improve health outcomes 	<ul style="list-style-type: none"> • Resources: Charitable contributions, and technical assistance • Planned collaboration: Government agencies, including local and state public health departments, community organizations, schools and school districts, and other hospitals
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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"> • Improve access to and quality of resources provided by community organizations providing social care • Improve health outcomes 	<ul style="list-style-type: none"> • Resources: Charitable contributions • Planned collaboration: Food banks and pantries, community organizations, and government agencies
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"> • Improve access to and quality of resources provided by community organizations providing social care • Improve health outcomes 	<ul style="list-style-type: none"> • Resources: Charitable contributions, and technical assistance • Planned collaboration: Government agencies, including local and state public health departments, community organizations, schools and school districts, and other hospitals

Access to care

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"> • Increase access to care and coverage • Increase utilization of clinical and social care • Improve health outcomes 	<ul style="list-style-type: none"> • Resources: Charitable contributions, and subsidized care and coverage programs such as Medical Financial Assistance, Charitable Health Coverage, and Medicaid/Medi-Cal

		<ul style="list-style-type: none"> • Planned collaboration: Government agencies, including local and state public health departments, community organizations, and safety net clinics
Grow a culturally competent health care workforce in order to improve equitable access to health care services.	<ul style="list-style-type: none"> • Decrease health care workforce shortages • Improve cultural competency • Improve health outcomes 	<ul style="list-style-type: none"> • Resources: Charitable contributions, health professions education and training programs, and health care career exposure programs • Planned collaboration: National organizations, community organizations, and safety net providers
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"> • Improve access to and quality of resources provided by community organizations providing social care • Improve health outcomes 	<ul style="list-style-type: none"> • Resources: Charitable contributions, and technical assistance • Planned collaboration: Government agencies, including local and state public health departments, community organizations, schools and school districts, and other hospitals

Mental and behavioral health

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"> • Increase access to care and coverage • Increase utilization of clinical and social care • Improve health outcomes 	<ul style="list-style-type: none"> • Resources: Charitable contributions, and subsidized care and coverage programs such as Medical Financial Assistance, Charitable Health Coverage, and Medicaid/Medi-Cal • Planned collaboration: Government agencies, including local and state

		public health departments, community organizations, and safety net clinics
Grow a culturally competent health care workforce in order to improve equitable access to health care services.	<ul style="list-style-type: none"> • Decrease health care workforce shortages • Improve cultural competency • Improve health outcomes 	<ul style="list-style-type: none"> • Resources: Charitable contributions, health professions education and training programs, and health care career exposure programs • Planned collaboration: National organizations, community organizations, and safety net providers
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"> • Improve access to and quality of resources provided by community organizations providing social care • Improve health outcomes 	<ul style="list-style-type: none"> • Resources: Charitable contributions, and technical assistance • Planned collaboration: Government agencies, including local and state public health departments, community organizations, schools and school districts, and other hospitals
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"> • Improve access to and quality of resources provided by community organizations providing social care • Improve health outcomes 	<ul style="list-style-type: none"> • Resources: Charitable contributions, and technical assistance • Planned collaboration: Government agencies, including local and state public health departments, community organizations, schools and school districts, and other hospitals

b. Evaluation of the Community Benefit Plan's Effectiveness

Kaiser Permanente Woodland Hills 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 Woodland Hills 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.

Financial Assistance and Means-Tested Government Programs	Vulnerable Population	Broader Community	Total
Traditional Charity Care	\$ 13,536,377		\$ 13,536,377
Medi-Cal	\$ 21,285,313		\$ 21,285,313
Other Means-Tested Government (Indigent Care)	\$ 0		\$ 0
Sum Financial Assistance and Means-Tested Government Program	\$ 34,821,690		\$ 34,821,690
Other Benefits			
Community Health Improvement Services	\$ 120,874	\$ 78,585	\$ 199,459
Community Benefit Operations	\$ 0	\$ 327,475	\$ 327,475
Health Professions Education	\$ 1,852,721	\$ 463,180	\$ 2,315,901
Subsidized Health Services	\$ 0	\$ 0	\$ 0
Research	\$ 284,582	\$ 146,603	\$ 431,185
Cash and in-kind Contributions for Community Benefits	\$ 1,904,336	\$ 112,162	\$ 2,016,498
Other Community Benefits	\$ 0	\$ 16,647	\$ 16,647

Total Other Benefits	\$ 4,162,513	\$ 1,144,652	\$ 5,307,165
Community Benefits Spending			
Total Community Benefits*	\$ 38,984,203	\$ 1,144,652	\$ 40,128,855
Medicare (non-IRS)	\$ 68,051,156		\$ 68,051,156
Total Community Benefits with Medicare	\$ 107,035,359	\$ 1,144,652	\$ 108,180,011

*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