



2024-2025
COMMUNITY BENEFITS PLAN
REPORT
AND
2025-2026
COMMUNITY BENEFITS GOALS

Introduction

Since first opening our doors in 1962, St. Rose Hospital (St. Rose) has been committed to meeting the challenges of identifying and providing access to healthcare services to the residents of Hayward and the surrounding communities served by St. Rose.

The enactment of SB697 not only provides St. Rose with the opportunity to reflect on what it has done to meet the needs of the community during the past fiscal year, but it also helps to validate St. Rose’s position as an advocate for healthcare in the community. St. Rose is proud to share its accomplishments in meeting the needs of our residents during the 2024-2025 Fiscal Year (10/1/24 – 9/30/25) and to set forth its goals and objections for the 2025-2026 Fiscal Year (10/1/25 – 9/30/26).

Mission Statement

St. Rose Hospital provides quality health care to our community with respect, compassion and professionalism. We work in partnership with our highly valued physicians and employees to heal and comfort all those we serve.

Vision

St. Rose Hospital will be the health care provider of choice in central and southern Alameda County. We actively seek partnerships with all groups and individuals dedicated to improving the overall health of the diverse community we serve.



Commitment of Board of Directors and Leadership Team

The mission of St. Rose is firmly supported by its Board of Directors, the St. Rose Hospital Foundation’s Board of Directors, and St. Rose’s leadership team.

St. Rose’s Board of Directors consists of individuals from the community who believe in and are committed to carrying out the mission of St. Rose. A list of St. Rose’s Board of Directors during FY 2024-2025 is attached hereto as **Appendix A**.

St. Rose Hospital Foundation’s (the Foundation) Board of Directors includes community leaders and other prominent members from the City of Hayward and the surrounding communities served by St. Rose who believe and support St. Rose’s goal of providing access to healthcare to all members of the community. The Foundation and its Board of Directors raise much-needed funds to expand services, and purchase equipment and technology to aid our healthcare team in providing quality care to our patients. The Foundation also assists and supports St. Rose’s community

outreach efforts and much-needed programs/projects. A list of the Foundation’s Board of Directors during the 2024-2025 fiscal year is attached hereto as **Appendix B**.

St. Rose’s leadership team is also firmly committed to St. Rose’s Mission and Values. St. Rose’s goal is to continually develop and enhance programs that improve healthcare standards and delivery of and access to care. St. Rose strives to break down barriers that impede a person’s access to quality healthcare.

The Community Served by St. Rose

St. Rose is located in the City of Hayward, which today is known as the “Heart of the Bay” because of its central and convenient location in Alameda County. Hayward is the third largest city in Alameda County and ranked the 36 th most populous municipality in California. Hayward’s population has strong cultural and economic diversity. The city’s population of 159,201 is diverse. 41.3% of the residents are Hispanic or Latino, 16.4% of the residents are Caucasian, 30.5% of the residents are Asian, 7.9% of the residents are African American, 1.2% of the residents are Native American or Alaska Natives, and 15.0% of the residents are two or more races. For more than 61.8% of the residents over the age of 5 years old, language other than English is spoken at home. 9.6% of the residents live in poverty with 6.9% of the residents having no health insurance. St. Rose primarily serves the residents of Hayward and Union City with residents from Hayward and Union City making up the majority of patients discharged form St. Rose but also serves residents of Fremont, San Leandro, and San Lorenzo.

Community Health Needs Assessment (CHNA) Process

Working together with the Hospital Council of Northern and Central California as well as other hospitals in the community, St. Rose conducts a Community Health Needs Assessment (CHNA) every three years and produces a report setting forth the findings of the CHNA. The Hospital Council of Northern and Central California, on behalf of St. Rose, Washington Hospital, John Muir Hospital, Stanford Health Care Tri Valley and UCSF Benioff Children’s Hospital Oakland, partnered with Actionable Insights (AI) to conduct the CHNA and St. Rose issued a report related to the CHNA in August 2025 which is available for review on St. Rose’s website. Despite the wide diversity in background and responsibilities represented by the participants included in the CHNA, there was surprising consistency about the specific health needs of the communities involved.

Analysis of CHNA Information

The data gathered as part of the CHNA and set forth in the report is used by St. Rose and other participants to inform the hospital community about the health status of the county and city residents; to identify gaps in services; and to assist in developing programs and services that guide decision making related the health needs of our community.

St. Rose has been faithful in its mission of providing access to healthcare to the community and uses the CHNA report to identify issues to address and develop the Community Benefit Plan.

Language /Culturally Appropriate Services/Access

St. Rose recognizes the need to provide culturally appropriate services and access to all members of the community and to address barriers faced by its non-English speaking patients as they seek access to healthcare. In order to address these barriers, St. Rose utilizes a nationally recognized translation and sign language service provider to communicate with our non-English speaking patients and their families and hearing-impaired patients and their families. The service provider provides translation services for over 200 languages as well as ASL interpreters. St. Rose also has a culturally diverse workforce and many of its employees also speak Spanish and a variety of other languages, such as Hindi, Urdu, Chinese, Tagalog and American Sign Language, which assists in meeting the growing needs of our diverse community.

Health Education

Health education plays an important role in the overall health and wellbeing of the community. St. Rose is very active in providing education that reaches all ages in our community from prenatal education to senior aging issues.

Insurance/Health Coverage/Access to Healthcare

In addition to providing access to healthcare to all members of the community, St. Rose also works with its patients and their families to qualify patients for Medi-Cal and other governmental programs so that patients will have ongoing access to care when they leave the hospital settings. St. Rose participates in Medi-Cal’s Hospital Presumptive Eligibility Program, a program by Medi-Cal after the passage of the Affordable Care Act that provides Medi-Cal benefits for an initial period of 60 days, and also works with patients to qualify patients and their families for Medi-Cal benefits beyond the initial 60-day period. St. Rose has contracted with a third-party provider that is an expert in helping patients navigate the Medi-Cal enrollment process to assist patients (at no cost to the patient) in securing Medi-Cal benefits.

Intra-County Disparities

St. Rose Hospital plays an active role in minimizing local disparities by serving as a bridge between our community and others. Hospital staff from many departments within St. Rose serve on committees and advisory boards to make sure that the local community’s needs have a voice in county health planning.

Cardiovascular and Pulmonary Health Issues

In order to meet the cardiovascular and pulmonary needs of the communities served by St. Rose, St. Rose offers Cardiovascular and Diagnostic Imaging Services so that patients can receive life-saving care in the community rather than having to leave the community for such care.

Alameda County Emergency Medical Services has designated St. Rose Hospital as a “STEMI Receiving Center”. In FY 2024-2025, St. Rose performed a total of 300 percutaneous coronary interventions and maintained an average door to balloon time for those interventions involving a

balloon of 84 minutes, complying with the American College of Cardiology's (ACC) recommendation that door to balloon time should be 90 minutes or less. Not only is St. Rose exceeding the recommendations of ACC, it also provides a team of highly qualified cardiologists and staff in the Cardiac Cath Lab, Outpatient Surgery, Quality Improvement, Medical Surgical Unit, and Intensive Care Unit to best reestablish blood flow to the heart muscle in a timely and safe manner.

Summary

St. Rose is dedicated to being an active participant in the provision of healthcare services to the community as evidenced by its involvement in meeting these critical issues identified by the CHNA. St. Rose's goal is to continue to meet these needs through direct service and community collaboration.

Community Benefit Plan Update

St. Rose’s Community Benefit Plan for FY 2024-2025 identified four (4) goals and supporting objectives. Each of the goals and supporting objectives are set forth below along with an update regarding St. Rose’s progress in meeting the goals.

A. Healthcare Access and Delivery

Goal A1 Improve Low-Income Community Members’ Access to Health Care

- Provide quality health care services to uninsured and underinsured patients including Medi-Cal beneficiaries, patients who qualify for Alameda County HealthPAC’s program, and indigent patients who would otherwise struggle to access care.
- Provide financial assistance in the form of no-cost and low-cost care to patients who are eligible under St. Rose’s financial assistance policy and who do not have access to public or private health coverage.
- Provide a Financial Counselor to qualify patients under Medi-Cal Hospital Presumptive Eligibility Program and to determine if underserved patients qualify for health insurance or other financial aid.

Update on Goal A1:

Objective 1

During FY 2024-2025, St. Rose participated in the Medi-Cal Program and maintained a contract with Alameda Alliance for Health, the Medi-Cal managed care plan for Alameda County. In FY 2024-2025, St. Rose provided inpatient and outpatient care to thousands of Medi-Cal beneficiaries.

St. Rose experienced a funding shortfall of at least \$26,540,720 associated with providing care to Medi-Cal patients during FY 2024-2025.

Payor	Charges	Cost to Provide Care	Direct Offsetting Revenue	Shortfall/Expense
Medi-Cal & Medi-Cal HMO	\$199,001,163	\$55,712,622	\$29,171,902	\$26,540,720

During FY 2024-2025, St. Rose continued to serve as a participating provider in Alameda County’s HealthPAC program and provided inpatient and outpatient services to patients participating in the HealthPAC Program. St. Rose incurred expenses of at least \$367,917 to provide this care for which it received no direct reimbursement for such care.

Program	Charges	Cost to Provide Care	Direct Offsetting Revenue	Expense
HealthPAC	\$1,378,190	\$390,218	\$0	\$390,218

Objective 2

During FY 2024-2025, St. Rose continued to offer charity care and provided charity care to more than 211 patients. St. Rose incurred costs of at least \$1,019,803 to provide charity care to more than 211 patients for which it received no reimbursement.

Program	Charges	Cost to Provide Care	Direct Offsetting Revenue	Expense
Charity Care	\$3,889,188	\$1,092,411	\$0	\$1,092,411

Objective 3

During FY 2024-2025, St. Rose employed a Patient Advocate who qualified 650 individuals for coverage under Medi-Cal’s Hospital Presumptive Eligibility Program with total charges of \$11,950,016.13.

During FY 2024-2025, St. Rose continued to engage a third-party provider to qualify patients for Medi-Cal benefits beyond the 60-day period provided under Medi-Cal’s Hospital Presumptive Eligibility Program.

Goal A2 Improve Community Members’ Access to Preventative Medicine & Specialized Care

- Make calls to discharged in-patients and out-patients to maximize medication and follow up appointment compliance.
- Provide Case Management/Social Services for referrals and follow-up on patients transferred to Skilled Nursing Facilities.

Update on Goal A2

Objective 1

During FY 2024-2025, St. Rose continued to make follow-up calls to discharged inpatients to maximize medication and follow-up appointment compliance.

Objective 2

During FY 2024-2025, St. Rose’s Case Managers and Social Workers provided referrals and follow-up on the more than 703 patients who were transferred from St. Rose to a skilled nursing facility upon their discharge from St. Rose.

B. Economic Security

Goal B1 – Building Community Members’ Employable Skills

- Support FACES for the Future healthcare internships and academic support for at-risk high school students.
- Support Raising Leaders Program operated by the Hayward Adult School.
- Continue to offer clinical education rotations in collaboration with various healthcare training programs and schools.

Update on Goal B1

Objective 1

During FY 2024-2025, St. Rose’s staff spent time with 21 students from the FACES for the Future program who spent 258 hours at St. Rose learning about careers in healthcare.

Objective 2

During FY 2024-2025, St. Rose’s staff spent time with 5 students from the Raising Leaders Program operated by Hayward Adult School who spent 420 hours at St. Rose.

Objective 3

During FY 2024-2025, St. Rose continued to host students for their clinical rotations required as part of various healthcare degree programs. During FY 2024-2025, St. Rose hosted 187 students for a total of 19,569 hours as described in the table below:

Student Type	Clinical Hours	Community Benefit Expense
Registered Nurses	14,095	\$1,068,260
Respiratory Therapists	2,214	\$127,704
Sterile Processing Techs	1,112	\$402,299
Pharmacy Technicians	368	\$14,212
Surgical Technicians	500	\$24,005
Dietitians	80	\$3,563
Pharmacists	1,200	\$94,800
TOTALS:	19,569	\$1,372,843

C. Behavioral Health

Goal C1 Increase Community Members’ Access to Behavioral Health Care Through Care Coordination

- Allocate resources to:
 - Case Management/Social Services evaluation and referrals for:
 - Mental health services for patients; and
 - Drug and alcohol treatment programs for patients.
- Real-time, telehealth mental health services provided by a licensed health care professional to Emergency Department patients who are determined to need a mental health evaluation.

Update on Goal C1

Objective 1

During FY 2024-2025, St. Rose’s Case Managers and Social Workers evaluated patients and provided referrals for mental health services and drug and alcohol programs for St. Rose’s patients.

Objective 2

During FY 2024-2025, St. Rose provided telehealth mental health services to patients who presented to its emergency department and determined to be in a need of a mental health evaluation.

Amount Spent on Community Benefits for Fiscal Year 2024-2025

During the FY 2024-2025, St. Rose spent at least \$29,396,192 on community benefits as set forth below and in further set forth in **Appendix C**.

Financial Assistance and Means-Tested Government Programs	Total Community Benefit Expense	Direct Offsetting Revenue	Net Community Benefit Expense
Financial Assistance at Cost	\$1,092,411	\$0	\$1,092,411
Medicaid (Medi-Cal)	\$55,712,622	\$29,171,902	\$26,540,720
Cost of Other Means-Tested Government Programs	\$390,218	\$0	\$390,218
Total – Financial Assistance and Means-Tested Government Programs	\$57,195,251	\$29,171,902	\$28,023,349
Other Benefits			
Health Professions Education	\$1,372,843	\$0	\$1,372,843
Total: Other Benefits	\$1,372,843	\$0	\$1,372,843
Total Financial Assistance and Means-Tested Government Programs & Other Benefits	\$58,568,094	\$29,171,902	\$29,396,192

Goals & Objectives for Fiscal Year 2025-2026

St. Rose has set the following goals and objectives for FY 2025-2026 (10/1/25 – 9/30/26):

A. Healthcare Access and Delivery

Goal A1 - Improve Low-Income Community Members' Access to Health Care

- Provide quality health care services to uninsured and underinsured patients including Medi-Cal beneficiaries, patients who qualify for Alameda County HealthPAC's program, and indigent patients who would otherwise struggle to access care.
- Provide financial assistance in the form of no-cost and low-cost care to patients who are eligible under St. Rose's financial assistance policy and who do not have access to public or private health coverage.
- Provide a Financial Counselor to qualify patients under Medi-Cal Hospital Presumptive Eligibility Program and to determine if underserved patients qualify for health insurance or other financial aid.

Goal A2 – Improve Community Members' Access to Preventative Medicine & Specialized Care

- Make calls to discharged in-patients and out-patients to maximize medication and follow up appointment compliance.
- Provide Case Management/Social Services for referrals and follow-up on patients transferred to Skilled Nursing Facilities.

B. Economic Security

Goal B1 – Building Community Members' Employable Skills

- Support FACES for the Future healthcare internships and academic support for at-risk high school students.
- Support Raising Leaders Program operated by the Hayward Adult School.
- Continue to offer clinical education rotations in collaboration with various healthcare training programs and schools.

C. Behavioral Health

Goal C1 – Increase Community Members’ Access to Behavioral Health Care Through Care Coordination

- Allocate resources to:
 - Case Management/Social Services evaluation and referrals for:
 - Mental health services for patients; and
 - Drug and alcohol treatment programs for patients.
- Real-time, telehealth mental health services provided by a licensed health care professional to Emergency Department patients who are determined to need a mental health evaluation.

APPENDIX A
ST. ROSE HOSPITAL'S BOARD OF DIRECTORS
(10/1/2024 – 9/30/2025)

10/1/24 to 10/31/24

Garret Contreras, Chair

Katrina Semmes

Jay Harris

Michael Marchiano, M.D.

Fred Naranjo

Rishi Kapila, M.D., Chief of Medical Staff (Ex Officio)

11/1/24 to 9/30/25

Mark Fratzke, Chair

Romoanetia Lofton

Kimberly Miranda

Garrett Contreras

Elizabeth Mahler, MD

Rishi Kapila, M.D., Chief of Medical Staff (Ex Officio)

APPENDIX B
ST. ROSE HOSPITAL FOUNDATION OF BOARD OF DIRECTORS
(10/1/2024– 9/30/2025)

Ronald G. Peck, *Chair*

Jeanette De La Torre, *Vice-Chair*

Rosemarie Marchiano, *Immediate Past Chair*

Catherine E. Carlson

Alan McIntosh

Michael Cobb, *Executive Director*

Ridhima "Amanda" Ahuja

Alexandra Budde, *DVM*

Nicky E. Henkelman

Brian Hughes

Michael Jones

Lucy Lopez

Robert G. Mallon

Arun M. Mehta, MD

Lawrence J. Ratto

Linda Renteria

Hayward City Mayor Mark Salinas

Hayward City Councilmember J. Francisco Zermeño

APPENDIX C
AMOUNT SPENT ON COMMUNITY BENEFITS
10/1/2024 TO 9/30/2025

Financial Assistance and Means-Tested Government Programs	Total Community Benefit Expense	Direct Offsetting Revenue	Net Community Benefit Expense
Financial Assistance at Cost	\$1,092,411	\$0	\$1,092,411
Medicaid (Medi-Cal)	\$55,712,622	\$29,171,902	\$26,540,720
Cost of Other Means-Tested Government Programs	\$390,218	\$0	\$390,218
Total – Financial Assistance and Means-Tested Government Programs	\$57,195,251	\$29,171,902	\$28,023,349
Other Benefits			
Health Professions Education	\$1,372,843	\$0	\$1,372,843
Total: Other Benefits	\$1,372,843	\$0	\$1,372,843
Total Financial Assistance and Means-Tested Government Programs & Other Benefits	\$58,568,094	\$29,171,902	\$29,396,192