

Stanyan Hospital

Community Benefit 2025 Report and 2026 Plan

Adopted January 2026



A message from James Bennan, Interim Chief Operating Officer

This report details activities of Stanyan Hospital from July 1, 2024 – June 31, 2025. Over that period both UCSF Health and Dignity Health owned Stanyan Hospital. In consultation with the California Department of Health Care Access and Information, the entity that oversees the Senate Bill 697 compliance, this report satisfies both UCSF Health Stanyan and Dignity Health’s SB 697 commitment as it reports on the activities that were undertaken while the hospitals were owned by each entity.

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

Stanyan Medical Center shares a commitment with others to improve the health of our community, and delivers programs and services to help achieve that goal. The Community Benefit 2025 Report and 2026 Plan describes much of this work. This report meets requirements in California state law (Senate Bill 697) that not-for-profit hospitals produce an annual community benefit report and plan. We are proud of the outstanding programs, services and other community benefits our hospital delivers, and are pleased to report to our community.

In fiscal year 2025 (FY25), Stanyan Hospital provided \$48,446,772 patient financial assistance, unreimbursed costs of Medicaid, community health improvement services and other community benefits. The hospital also incurred \$92,900,114 in unreimbursed costs of caring for patients covered by Medicare fee-for-service.

The hospital’s Community Board reviewed, approved and adopted the Community Benefit 2025 Report and 2026 Plan at its January 29 2026 meeting. The hospital’s Community Advisory Board reviewed the report at its December 19, 2025 meeting.





Thank you for taking the time to review our report and plan. We welcome any questions or ideas for collaborating that you may have, by reaching out to Stanyan Hospital Community Health Office, 450 Stanyan St., San Francisco CA 94117 or by e-mail to Alexander.Mitra@ucsf.edu

James Bennan
Chief Operating Officer
UCSF Health Hyde and Stanyan Hospitals

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At-a-Glance Summary

<p>Community Served</p> 	<p>The Hyde and Stanyan Hospitals serve the City and County of San Francisco. The City and County of San Francisco, with 827,526 people is the fourth-most populous city in California and the 17th-most populous city in the United States. Its 46.9 square miles is often rounded up to 49, to connect to 1849, the year that started the gold rush and the nickname for San Franciscans as the 49ers.</p>
<p>Economic Value of Community Benefit</p> 	<p>\$48,446,772 in patient financial assistance, unreimbursed costs of Medicaid, community health improvement services, community grants and other community benefits</p> <p>\$92,900,114 in unreimbursed costs of caring for patients covered by Medicare</p>
<p>Significant Community Health Needs Being Addressed</p> 	<p>The hospital intends to take several actions and to dedicate resources to these needs, including:</p> <p>Access to Care Access to healthcare includes aging, patient and family-centered care, disability, oral health, and transportation. In San Francisco, access is shaped by affordability, provider availability, transportation, and cultural responsiveness, with disparities persisting in historically neglected communities.</p> <p>Behavioral Health Behavioral health includes mental health and substance use and is shaped by emotional, social, and environmental factors. Access to resources, socioeconomic status, housing conditions, and severe negative experiences all impact behavioral health.</p> <p>Economic Opportunity Economic security includes education, employment, food security, housing and homelessness, and income. It is essential for accessing basic resources like food, healthcare, education, transportation, and housing.</p>
<p>FY25 Programs and Services</p> 	<p>The hospital intends to take several actions and to dedicate resources to these needs, including:</p> <p>Access to Care Sister Mary Philippa Health Center (SMPHC) Work with care partners to support patient’s access to Cal-AIM benefits Street-Based Medicine Outreach for homeless patients Serious Illness Program for Chinese Seniors Diabetes Services Community Grants Program Patient Financial Assistance</p>

Behavioral Health

Counseling Enriched Education Program (CEEP)
Convening with SFPD, DPH, SFFD on Care for Patients Under 5150 Holds
Cal-AIM
Medication Assisted Treatment in the Emergency Room
Substance Use Navigator
San Francisco Health Improvement Partnership

Economic Opportunity

Graduate Medical Education
California Advancing and Innovating Medi-Cal
Health Professions Education
Community Grants

**FY25 Planned
Program and
Services**

The hospital plans to continue prior year programs and activities to address significant community health needs. As the coronavirus pandemic continues, the hospital will work with its partners to continue to address the evolving health needs.

This document is publicly available online at <https://sfcommunityhospitals.ucsfhealth.org/st-marys/about-us/community-benefit>

Written comments on this report can be submitted to Stanyan Medical Center Community Health Department at 450 Stanyan Street, San Francisco CA 94117 or by e-mail to alexander.mitra@ucsf.edu

Our Hospital and the Community Served

About Stanyan Hospital

Stanyan Hospital is currently a hospital within UCSF Health's Network Division. On August 1, 2024 the hospital was purchased by UCSF Health, which means that in the month of July 2024 the hospital was part of CommonSpirit Health. The work described for FY25 was conducted under UCSF Health and CommonSpirit Health, while the FY26 plan was devised under UCSF Health.

The hospital was founded by the Sisters of Mercy and has cared for the people of the San Francisco Bay Area since 1857. In 1986 it was one of the founding hospitals of Dignity Health. A fully accredited teaching hospital in the heart of San Francisco, it has 275 licensed beds, over 1000 employees, and 476 physicians and credentialed staff.

For 166 years, Stanyan has built a reputation for quality, personalized care, patient satisfaction, and exceptional clinical outcomes. Key service lines include orthopedics, cardiovascular, oncology, adolescent psychiatry, and acute rehabilitation. Stanyan offers a full range of diagnostic services and a 24-hour Emergency Department.

Our Mission

The mission of UCSF Health is Caring, Healing, Teaching and Discovering.

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

Our Vision

The vision of UCSF Health is to be the best provider of health care services, the best place to work and the best environment for teaching and research.

The vision of CommonSpirit Health is a healthier future for all – inspired by faith, driven by innovation, and powered by our humanity.

Financial Assistance for Medically Necessary Care

UCSF Health treats all patients who require our services, without regard to race, color, religion, national origin, citizenship or other protected characteristics. We are committed to these responsibilities and vigorously enforce UC nondiscrimination and privacy policies. We do not release immigration related information to federal agencies or others without a warrant or subpoena or as otherwise required by law.

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

Description of the Community Served

San Francisco is the cultural and commercial center of the Bay Area and is the only consolidated city and county jurisdiction in California. At roughly 47 square miles, it is the smallest county in the state, but is the most densely populated large city in California (with a population density of 18,595 residents per square mile) and the second most densely populated major city in the US, after New York City.

San Francisco has a 2020 population of 873,965. It has grown by 8.5% since 2010. Of note, the City and County of San Francisco experienced a change in population in 2020 due to the COVID pandemic. Despite an average household income of \$160,396, there remain significant pockets of poverty (as evidenced in the Community Needs Index which follows) particularly in the African American and Hispanic/Latino communities.



The population is aging and the ethnic shifts continue with an increase in the Asian and Pacific Islander population, increase in multiethnic populations and a decrease in the Black/African American population. San Francisco has a relatively small proportion of households with children (19 percent) compared to the state overall (34 percent).

Despite areas of affluence, there remain significant pockets of poverty (as evidenced in the Community Needs Index which follows), particularly in the African American and Hispanic/Latino communities.

Total Population	873,965
Race	
Asian/Pacific Islander	36.0%
Black/African American - Non-Hispanic	5.6%
Hispanic or Latino	15.2%
White Non-Hispanic	40.2%
All Others	3.0%
% Below Poverty	10.0%
Unemployment	2.2%*
No High School Diploma	11.4%
Medicaid	30%+
Uninsured	5.2%

Source: Census Bureau, 2020 Census.

*Employment Development Department, May 2022

+ American Community Survey, 2015-2019

Community Assessment and Significant Needs

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

Community Health Needs Assessment

The health issues that form the basis of the hospital’s community benefit plan and programs were identified in the most recent CHNA report, which was adopted in June, 2022.

The 2022 CHNA contains several key elements, including:

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

Significant Health Needs

The 2022 CHNA identified the significant needs in the table below, which also indicates which needs the hospital intends to address. Identified needs may include specific health conditions, behaviors and health care services, and also health-related social needs that have an impact on health and well-being.

These foundational issues play a significant role in creating and intensifying the health needs identified in the community health needs assessment:

Significant Health Need	Description	Intend to Address?
Access to Welcoming Healthcare	Access to Welcoming Healthcare refers to the right to accessible and affordable, culturally grounded, relevant, and competent acute and preventative healthcare. Welcoming care is delivered in local neighborhoods, by healthcare professionals who are from the communities they are serving, are grounded in anti-racism and interpersonal bias, have knowledge of the community's historic relationship with (and harm done by) the healthcare system, and are equitably compensated for their work.	•
Behavioral Health & Substance Use	Behavioral Health and Substance Use refers to access, stigma, availability, and affordability of behavioral and mental health professionals and services. Substance use refers to substance access, use, and availability of support for substance misuse. Behavioral Health also refers to the freedom from external and environmental trauma. Community violence decreases the real and perceived safety	•

Significant Health Need	Description	Intend to Address?
	of a neighborhood disrupting social networks by inhibiting social interactions, causing chronic stress among residents who are worried about their safety, and acting as a disincentive to engage in social interactions.	
Economic Opportunity	Economic opportunity refers to the financial and socioeconomic conditions which allow for an individual and community to effectively afford the tangible and intangible materials and resources necessary to thrive. Additionally, economic opportunity includes (but is not limited to) exposure to environmental/climate-related factors and/or hazards, freedom from violence and trauma, and the ability to obtain nutrient-dense, culturally relevant food items, and affordable housing.	●

Significant Needs the Hospital Does Not Intend to Address

The hospital intends to take actions to address all of the prioritized significant health needs in the CHNA report, both through its own programs and services and with community partners. Lists and descriptions of those planned actions are included in this report.

2025 Report and 2026 Plan

This section presents strategies and program activities the hospital is delivering, funding or on which it is collaborating with others to address significant community health needs. It summarizes actions taken in FY25 and planned activities for FY26, with statements on impacts and community collaboration. Program Highlights provide additional detail on select programs.

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

Creating the Community Benefit Plan

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



Hospital and health system participants included Care Coordination, Emergency Department, Nursing, Graduate Medical Education, Surgery, Business Development, Mission, and Palliative Care. Department leaders were asked about their staff and patient needs, connection to community resources, and department goals. Staff shared that valuable insights such as need to break down silos in the organization, support patients with services pre- and post-hospitalization, access city services and increase safety for staff in the Emergency Department.

Community input or contributions to this implementation strategy included the Asian Health Collaborative and the San Francisco Health Improvement Partnership and monthly meeting on the Care for patients under 5150 holds. Through these groups Stanyan Hospital heard the need for coordination of services and access issues due to the complex nature of San Francisco care delivery system.

From this input the Hospital decided to focus its efforts on supporting three priority populations:

- Medi-Cal and Medi-Care patients
- Dual Diagnosis patients
- Seniors

The programs and initiatives described here were selected on the basis of existing programs with evidence of success and impact, research into effective interventions, access to appropriate resources and addressing immediate goals of the hospital.

Community Health Strategic Objectives

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

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



Create robust alignment with multiple departments and programmatic integration with relevant strategic initiatives to optimize system resources for advancing community health.



Scale initiatives that complement conventional care to be proactive and community-centered, and strengthen the connection between clinical care and social health.



Work with community members and agency partners to strengthen the capacity and resiliency of local ecosystems of health, public health, and social services.




Partner, invest in and catalyze the expansion of evidence-based programs and innovative solutions that improve community health and well-being.

Report and Plan by Health Need

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

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




 Health Need: Economic Opportunity			
Strategy or Program Name	Summary Description	Active FY25	Planned FY26
Community Grant to Asian Health Collaborative	Provide post-discharge support for Asian patients and families. Includes linkages to short term family housing, and case management.	☒	☒
Diabetes Education Program	Our diabetes educators provide a continuously repeating 6 week series of classes on aspects of diabetes self-care for any member of the community. Done remotely during COVID.	☒	☒
Cal-AIM	Cal-AIM is a re-imagining of the Medi-Cal system to create investments into upstream determinants of health. Saint Francis and Stanyan are looking to ensure staff know how to refer patients to program perks like case management, medically tailored meals and housing navigation.	☒	☒
Sr. Mary Philippa Health Center	Social worker at the health clinic connects patients to rent support and housing resources to continue to live in place. Connect patients with lawyers who can assist them.	☒	☒
Donations of clothing, meals and transportation to homeless patients	Upon discharge the hospital offers homeless patients clothing, a meal and transportation to their destination.	☒	☒
Impact: The hospital’s initiatives to address housing security and homelessness are anticipated to result in: improved pathways to employment and opportunities for healthy choices and wraparound services among currently or formerly homeless individuals.			

Collaboration:

PATH CalAIM Collaborative: San Francisco Department of Homelessness and Supportive Housing, A Anthem Blue Cross, San Francisco Health Plan, Chapman Consulting, San Francisco Department of Public Health, Project Open Hand, San Francisco Dept. of Disability & Aging Services, Independent Living Systems, Stepping Stone Health, North East Medical Service, Curry Senior Center, Kaiser Permanente

Asian Health Collaborative: Self-Help for the Elderly, All-American Medical Group, Chinatown YMCA, Gum Moon Women’s Shelter

 Health Need: Access to Welcoming Healthcare			
Strategy or Program Name	Summary Description	Active FY25	Planned FY26
Sr. Mary Philippa Health Center	Serves as Medical Home to low income patients where participants in the Graduate Medical Education program serve as primary care providers with supervision by preceptors.	☒	☒
Financial assistance for uninsured/underinsured and low income residents	The hospital provides discounted and free health care to qualified individuals, following Dignity Health’s Financial Assistance Policy. Fundraising is also done to assist with providing care.	☒	☒
Serious Illness Project for Chinese Seniors	With Self-Help for the Elderly and All-American Medical Group, Saint Francis and Stanyan are collaborating to create a holistic wrap around model to support the health of Chinese seniors with support from a Stupski grant. Along with post discharge support, the program includes palliative care/Advanced Care Plans, and AI directed primary care outreach using AAMG’s insurer database.	☒	☒
Graduate Medical Education	Residents in medicine, orthopedics, and podiatry are prepared in a clinical setting while providing direct services to people in need.	☒	☒
Internships for health professionals in training	Nursing, Physical Therapy, Occupational Therapy, Speech Therapy, Dietician, Marriage Family Therapy and Nursing Assistant students are supervised in clinical settings.	☒	☒
Breast Cancer Second Opinion Panel	Multidisciplinary panel reviews cases and makes clinical recommendations at no cost to patients.	☒	☒
HIV Services	Education in various topics as well as assistance to patients in obtaining needed drugs.	☒	☒

Transportation Assistance	Van service, taxi vouchers or bus tokens provided to patients who need assistance with access to our facilities	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
San Francisco Health Improvement Partnership	Stanyan Hospital participated in the San Francisco Health Improvement Partnership to conduct the Community Health Needs Assessment (CHNA) with partner hospitals, Joint Health Equity groups and the San Francisco Department of Public health. After the needs assessment, SFHIP is scoping out future venues for collaboration by exploring each partners implementation strategy to address the needs identified in the CHNA.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Human Trafficking Awareness	Work with internal and external stakeholders to train staff to identify and refer survivors of human trafficking.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Impact: People have better access to care and education that will keep them healthy. Health professions students and interns will have clinical experiences and mentoring that further their skills.

Collaboration: University of San Francisco, Samuel Merritt University, Dominican University, San Francisco State University, Unitek, City College of San Francisco, UCSF, UC Berkeley, University of St. Augustine, USC, San Diego State University, Self-Help for the Elderly, All-American Medical Group, San Francisco Health Improvement Partnership



Health Need: Behavioral Health & Substance Use

Strategy or Program Name	Summary Description	Active FY25	Planned FY26
Counseling Enriched Education Program	Offers qualified students of SF Unified School District classroom instruction by SFUSD teachers with mental health professions on-site to provide intensive therapy and treatment. Resumed during COVID following protocols.	☒	☒
Convening Group on the Care for Patients under 5150 holds	With the support of Stanyan and Saint Francis Emergency Department leadership, the hospital began convening meetings with SFPD: CIT, SFDPH: Comprehensive Crisis Services around coordinating care for patients under 5150 holds. The meetings have grown to encompass SFFD: SCRT and SFDPH: AOT, and have been helpful in creating clearer connections between the various partners worked	☒	☒
Breast Cancer Support Group	Ongoing group offered support free of cost. Meeting held remotely during COVID.	☒	☒
Medication Assisted Treatment and Substance Use Navigator (formerly Alcohol & Other Drugs Counselor	As a result of a 2018 pilot, Saint Francis Hospital's leadership, physicians and support staff saw that the need for increased substance use disorder (SUD) and medication assisted treatment (MAT) services far exceed the current capacity to provide treatment options to patients. Stanyan Hospital has followed Saint Francis Hospital's model and hired a Substance Use Navigator to support patients of Stanyan Hospital.	☒	☒

Impact: Students in need of behavioral health care receive it along with the opportunity to complete appropriate level of classroom education.

Collaboration: San Francisco Police Department, San Francisco Fire Department, San Francisco Department of Public Health, San Francisco Unified School District, Psychologist leader of support group

Community Health Improvement Grants Program

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


In FY24, the hospital awarded the grants below in conjunction with St. Francis Memorial Hospital totaling \$275,888 for both hospitals.

Grant Recipient	Project Name	Amount
Code Tenderloin	Nights and Weekends Street Navigation Project	\$50,000 (\$100,000 total*)
Self Help for the Elderly	Asian Health Collaborative	\$50,000 (\$100,000 total*)
18 Reasons	Nourishing Pregnancy	\$9,398 (\$18,796 total*)
SF City Vitals	Vehicle for Patient Navigation	\$9,398 (\$18,796 total*)
Healing Well	Recovery Support Services	\$9,398 (\$18,796 total*)
Good Shepherd Gracenter	Transitional Housing and Addiction Recovery Program for Homeless Women	\$9,750 (\$19,500 total*)

*Hyde and Stanyan Hospitals jointly funded these projects

Program Highlights

The following pages describe a sampling of programs and initiatives listed above in additional detail, illustrating the work undertaken to help address significant community health needs.

 Sister Mary Philippa Health Center	
Significant Health Needs Addressed	<ul style="list-style-type: none"> • Economic Opportunity • Access to Welcoming Healthcare • Behavioral Health and Substance Abuse
Program Description	<p>The Sister Mary Philippa Health Center (SMPHC) serves as a Medical Home to approximately 900 underinsured and uninsured patients. The Clinic offers adult primary care and specialty care to citizens of San Francisco who meet financial eligibility criteria. Specialties include: HIV/AIDS services, Cardiology, Gastroenterology, General surgery, Oncology, Optometry, Orthopedics, Psychiatry, Podiatry, Pulmonary, Urgent Care, Urology. Additional ancillary services include case management, and pharmacy. The hospital provides staff, space, and supplies. Participants in the Graduate Medical Education Program serve as primary care physicians and are supervised by preceptors.</p>
Population Served	Underinsured and uninsured patients
Program Goal / Anticipated Impact	Our goal is to continue to serve underinsured and uninsured patients with primary care, specialty services listed above and wrap around services.
FY 2025 Report	
Activities Summary	In FY25 continued to enrolled patients provided with ongoing care either in person or via telehealth and had 8,600 visits for the clinics' patients.
Performance / Impact	The Sister Mary Philippa Health Center provides Medical Home services for primary care, specialty and ancillary services. On-site pharmacy, interpreter services, social work services, diabetes education services, and HIV services, continue to be available to support our patient population. In FY25 the clinical staff worked to increase patient's visits to the clinic and manage the patients' diabetes symptoms.
Hospital's Contribution / Program Expense	The hospital highly subsidizes care for patients of the clinic to increase access to primary care.
FY 2026 Plan	
Program Goal / Anticipated Impact	The clinics' goal is to continue to serve underinsured and uninsured patients through the Clinic. Staff will continue to focus will be to create linkages to the Emergency Department at SMMC to connect patients that use to the ED for primary care services. We anticipate that the Health San Francisco patient population at the clinic will rise as federal government restrictions remove

Planned Activities	Connect clinic staff to High Utilizer meetings.
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Counseling Enriched Education Program

Significant Health Needs Addressed	Access to Welcoming Healthcare Behavioral Health and Substance Abuse
Program Description	Stanyan Medical Center partners with the San Francisco Unified School District and San Francisco Department of Public Health to host a Counseling Enriched Education Program in Stanyan McAuley building. The program offers qualified students of SFUSD specialized academic instruction and support by SFUSD teachers with mental health professions on-site to provide intensive therapy and treatment. While at the program students receive a healthy breakfast and lunch and are supervised during physical activities.
Population Served	Qualifying students as determined by the SFUSD
Program Goal / Anticipated Impact	Students in need of behavioral health care will receive it along with the opportunity to complete appropriate level of classroom education.

FY 2025 Report

Activities Summary	Intensive therapy and treatment provided as well as nutritious meals and physical activity.
Performance / Impact	Students in need of behavioral health care receive it along with the opportunity to complete appropriate level of classroom education.
Hospital's Contribution / Program Expense	\$872,495 Hospital provides professional psychiatric staff, space and support to the program.

FY 2026 Plan

Program Goal / Anticipated Impact	Counseling services for students will help the students integrate into the broader community, while keeping up with their studies.
Planned Activities	Stanyan plans to continue this longstanding partnership with the San Francisco Unified School District and the San Francisco Department of Public Health.



California Advancing and Innovating Medi-Cal (CalAIM)

Significant Health Needs Addressed	Access to Welcoming Healthcare
Program Description	Stanyan Hospital is working with a variety of community partners to bring wrap around supports to patients under Medi-Cal. These supports

	include Enhanced Case Management, Community Supports, and Medical Respite.
Population Served	Medi-Cal Population
Program Goal / Anticipated Impact	The hospital seeks to reduce the Medi-Cal and Medicare readmission rate at Stanyan Hospital to the statewide average of 13.1%. In CY24 Medi-Cal readmission rate was 18.8% (85/451) and Medicare rate was 14.6% (294/2,019).

FY 2025 Report

Activities Summary	<p>Hospital staff created partnerships with Enhanced Case Managers and created referral protocols to connect at-risk medi-cal patients to CalAIM services.</p> <p>Stanyan Hospital made a \$950,000 seek grant in FY24 to Curry Senior Center to establish a new Medical Respite service for seniors that was partially funded by CalAIM dollars. Staff continues to consult on the project, pulling data and bringing in partners to sit on the advisory council and approach for additional implementation dollars.</p> <p>Stanyan Hospital continued work on their Housing and Homelessness Incentive Program (HHIP) grant from the San Francisco Health Plan to support the work of the Substance Use Navigators in the Emergency Department to screen and refer medi-cal patients to mental health and substance use treatment.</p> <p>Stanyan Hospital’s Care Coordination and Community Health Directors were invited to present at DHCS’ Best Practices for Hospitals in CalAIM work to share their work leveraging CalAIM to support their medi-cal patients. The presentation centered around standardizing referrals using dot-phrases, and partnering with ECM providers to connect patients, rather than start their own program.</p>
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Performance / Impact	Increased use of primary care services for Medi-Cal patients.
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Hospital’s Contribution / Program Expense	Grants to CalAIM entities, and staff time.
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FY 2026 Plan

Program Goal / Anticipated Impact	The hospital seeks to reduce the Medi-Cal readmission rate at Stanyan Hospital from 18.8% in CY 2024 (85/451) to the statewide average of 13.1%.
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Planned Activities	<p>Bring ECM providers on-site at Stanyan to support faster on-boarding.</p> <p>Build relationships with ECM providers that represent Stanyan Hospital’s friendly faces.</p> <p>Continue to support Curry Senior Center in the Medical Respite Project.</p>
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Other Programs and Non-Quantifiable Benefits

The hospital delivers community programs, services and non-quantifiable benefits in addition to those described elsewhere in this report. Like those programs and initiatives, the ones below are a reflection of the hospital's mission and its commitment to improving community health and well-being.

Advocacy

SFH staff advocate for local and state health policy. SFH staff engages with elected and appointed officials at the local, state and federal level as well as a diversity of healthcare thought leaders from the public and private sector in support of SFH and TLHIP strategic objectives.

Charity Care

SFH continues to work hand in hand with the Department of Public Health on the issues of health reform and Charity Care. The Charity Care Workgroup, which includes representatives from the San Francisco Department of Public Health and all of the city's hospitals, meets periodically throughout the year to discuss the annual citywide Charity Care Report and examine issues related to charity care.

Healthy San Francisco

The goal of Healthy San Francisco is to make healthcare services accessible and affordable to uninsured San Francisco residents. The program is not designed as insurance but as an innovative reinvention of the City's healthcare safety net, enabling and encouraging residents to access primary and preventive care. The San Francisco Health Plan, in partnership with the San Francisco Department of Public Health, administers Healthy San Francisco.

Human Trafficking

In the fall of 2014, Dignity Health launched the Human Trafficking Response (HTR) Program to ensure that trafficked persons are identified in the health care setting and that they are appropriately assisted with victim-centered, trauma-informed care and services. SFH staff leads a local, facility taskforce to implement the HTR Program which provides staff education and response procedures.

San Francisco Health Improvement Partnership (SFHIP)

SFH staff are active in the SFHIP leadership and steering committees. SFHIP is motivated by a common vision, values, and community-identified health priorities and as such SFHIP will drive community health improvement efforts in San Francisco. The SFH community health plan and strategy is designed to align with SFHIP priorities.

San Francisco Hep B Free

SFH continues to be an active partner in the Hepatitis B Coalition, participating in coalition activities including sponsoring the annual gala.

Economic Value of Community Benefit

Stanyan Hospital

Complete Summary - Classified (Occurrences) - Including Non Community Benefit (Medicare)

For period from 07/01/2025 through 06/30/2026

	<u>Persons</u>	<u>Total Expense</u>	<u>Offsetting Revenue</u>	<u>Net Benefit</u>
<u>Benefits for Vulnerable Populations</u>				
Financial Assistance	1,887	\$6,760,821	\$2,144,522	\$4,616,299
Medicaid	8,487	\$48,938,782	\$17,690,739	\$31,248,043
Means Tested Programs	304	\$238,251	\$0	\$238,251
Community Services				
A Community Health Improvement Services	19,746	\$497,679	\$0	\$497,679
E Cash and In-Kind Contributions	1	\$137,944	\$0	\$137,944
F Community Building Activities	1	\$11,666	\$0	\$11,666
G Community Benefit Operations	2	\$283,796	\$0	\$283,796
Totals for Community Services	19,746	\$931,085	\$0	\$931,085
Totals for Vulnerable Populations	30,684	\$56,868,939	\$19,835,261	\$37,044,678
<u>Benefits for Broader Community</u>				
Community Services				
A Community Health Improvement Services	236	\$2,203,459	\$1,322,344	\$881,115
B Health Professions Education	197	\$12,844,507	\$2,445,091	\$10,399,416
E Cash and In-Kind Contributions	1	\$6,750	\$0	\$6,750
G Community Benefit Operations	1	\$125,813	\$0	\$125,813
Totals for Community Services	433	\$15,180,529	\$3,767,435	\$11,413,094
Totals for Broader Community	433	\$15,180,529	\$3,767,435	\$11,413,094
Total Community Benefit	31,117	\$72,049,468	\$23,602,816	\$48,446,772
Medicare	27,095	\$183,917,815	\$91,017,701	\$92,900,114
Totals with Medicare	58,212	\$255,967,283	\$114,620,517	\$141,346,886

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

Hospital Board and Roster

Community Hospital Board			
First Name	Last Name	Title	
Joshua	Adler, MD*	Chief Medical Officer	UCSF Health
Benjamin	Durie	Senior Principal Counsel	UCSF Health
Suresh	Gunasekaran	Chief Executive Officer	UCSF Health
Fernando	Morano	Chief Financial Officer	UCSF Health Network

*Board Chair

Community Advisory Board of the Community Hospitals			
Name First	Last Name	Title	Organization
Diana	Aycinena, RN	Associate Director of Street-Based Services	San Francisco Community Health Center
Ruben	Chavez	Deputy Director	Curry Senior Services
Anni	Chung	Executive Director	Self Help for the Elderly
Ray	Difasio	Member	Stanyan and Hyde Patient Experience Council
Rommel	Gotico	Assistant Nurse Manager - Bothin Burn Center	Hyde Hospital, UCSF Health
Donna	Hilliard	Executive Director	Code Tenderloin
Clem	Jones, MD	Orthopedic Surgeon	San Francisco Spine Doctors
Johanna	Liu	Executive Director	San Francisco Community Clinic Consortium
Joyce	Maxion	Care Coordination Assistant	Stanyan Hospital, UCSF Health
Richard	Podolin, MD	Physician	Cardiovascular Medical Group
Edwin	Poon	Chief Equity Officer	San Francisco Health Plan