Intermountain® Healthcare

Community Health Impact Report 2020

Looking toward the past to design a path forward

COVID-19. Never have our communities been faced with such a challenge, bringing to light the full spectrum of heartache and resiliency. Our public health infrastructure stood firm from the chronic stress to the sense of community that comes with a shared traumatic event. It showed us that we could overcome anything together. As I reflect on the meetings, planning sessions, and collaborations, I also pause to remember the toll individuals and families have felt around the globe. We learned many lessons along the road, including the importance of a strong community health focus. Working together is always better for the people we serve.

I see a striking imperative where physicians learned from others across the globe to determine the best course of treatment. We saw medical curiosity arise in people banding together to address a looming threat. And we saw caregivers from across the spectrum work tirelessly to address the needs of their community.

We learned lessons on how to better engage with our communities. For example, when we saw the disparity in Intermountain Healthcare's Spanish-speaking populations, we adjusted. We held Spanish press conferences and worked with community leaders and organizations to reach our Latinx communities. Our collaborations with the Mexican Consulate in Salt Lake City led us to dispatch mobile vaccination units according to their recommendations. This work created strong relationships with our community leaders and led to better health outcomes.

As I consider what the rest of 2021 and beyond looks like, I'm encouraged by what I see and the importance of our healthcare infrastructure: It saves lives. Collaboration is becoming the new norm, with previous rivals coming together to innovate and create. We have been allowed to design a new path. We'll use this opportunity to catalyze change to improve the health of our communities further.

Warmly,

Mikelle Moore

Senior Vice President and Chief Community Health Officer
Intermountain Healthcare

Highlights

At Intermountain Healthcare, we are:

1. Understanding and Addressing Needs: Understanding the needs of our community is core to our mission and vision, and the Community Health Needs Assessment and Community Health Implementation Strategy process helps us understand and address needs and measure impact.

2. Prioritizing Our Work and Measuring Outcomes: We determined that our communities greatest needs where we can have the most impact are:

a. Improving mental well-being
b. Preventing avoidable disease and injury
c. Improving air quality

3. Improving Access for Underrepresented Community Members: We have established and are growing the Behavioral Health Network that provides free mental health visits to our underrepresented communities. We offered $850,000 of funding, resulting in more than 10,900 free visits to uninsured community members in 2020. We also support networks in community clinics, school clinics, and dental services.

Highlights *Continued*

4. Giving to the Community: Through purposeful alignment with our Community Health Needs Assessment, we provided more than $87 million in charitable contributions and grants in 2020. These contributions and grants help support evidence-based community initiatives, provide financial support for our community members to receive access to healthcare services, and create new economic opportunities. More than 240 not-for-profit community organizations were supported through this work.

5. Preventing Avoidable Disease and Injury: Community members can avoid many preventable diseases with vaccines. That's why we're teaming up with multiple organizations and experts that make up the Immunization Community Collaborative to build and implement strategies to administer the Flu, HPV, and COVID-19 vaccines to as many community members as we can.

6. Improving Air Quality: We are improving our air quality by moving fleet vehicles to alternative fuel, and we're partnering with Utah Clean Cities to install anti-idling signage at our facilities

7. Addressing Community Equity: Our Equitable Health Insurance Coverage Committee is helping us expand access to health insurance coverage. In addition, we're engaging with diverse chambers of commerce and supporting the OneTen initiative.

8. Impacting Social Determinants of Health and Addressing Social Needs: We create and implement numerous pilots and programs each year that support our community members in the areas of housing instability, food insecurity, and interpersonal violence prevention. Our learnings from the Alliance for the Determinants of Health were invaluable. We will soon scale them across our health system and numerous community clinics. We have also launched several initiatives that support our caregivers and ensuring we are meeting their social needs.

9. Preventing Deaths of Despair: Through strong community partnerships, we are leading efforts to prevent deaths of despair through focused work in suicide prevention and opioid misuse initiatives.

10. Preventing Adverse Childhood Experiences (ACEs): ACEs significantly impact our community members' long-term health and well-being. We have launched pilots and initiatives to screen for ACEs in our clinics and communities and connect those with needs to resources. We are also piloting an interpersonal violence screening program to ensure patients at Intermountain can receive help from domestic violence.

Community Health Needs Assessment

Understanding the needs of our community is core to our mission and vision. Our Community Health Needs Assessment (CHNA) and Community Health Implementation Strategy (CHIS) guide the strategic focus of our work. The CHNA looks at data from our healthcare system combined with data from the Utah Department of Health, national databases, and dozens of community input meetings in the areas we serve. The data we gather helps us identify current and emerging community health needs. The CHIS includes ways to address what we discover in the CHNA.

We base our CHNA and CHIS evaluations on the following criteria:

- **Affordability:** Addressing this health issue can result in more affordable healthcare
- **Alignment:** Alignment with our key stakeholder organizations' missions
- **Community input:** Community input meetings highlighted the health issue as significant
- **Feasibility:** Health issue is feasible to change with evidence-based interventions
- **Health equity:** Health issue disproportionately affects population subgroups by race/ethnicity
- **Seriousness:** Health issue is associated with severe outcomes such as mortality and morbidity
- **Size:** The number of people affected by the health issue
- **Upstream:** The degree to which the health issue is upstream from and a root cause of other health issues

From this market assessment and prioritization process, we identify the most pressing health needs (aims) and the drivers that impact long-term change.

DRIVERS

Adverse Childhood Experiences (ACES)

Addressing Social Determinants of Health

Improving Access to Timely, Quality Care

Influencing Internal and Public Policy

Promoting Protective Beliefs and Behaviors

Strengthening Community Infrastructure

AIMS

1. Improve Mental Well-Being

2. Prevent Avoidable Disease and Injury

3. Improve Air Quality

Our Intermountain Identified Community Health Needs (Aims) And Drivers

AIM 1: IMPROVE MENTAL WELL-BEING

Reduce suicide rate by **10%**

Reduce overdose mortality rate by **10%**

Move Utah to top **25 states** in Mental Health America access ranking

STRATEGIES

1. Population-Oriented Prevention
2. Access to Effective and Affordable Care
3. Social Connection and Social Norms
4. Policy Engagement and Influence

9.5 Million
Fewer opioids prescribed

7.13%
Reduction in prescriptions over 90 MME

4,611
Naloxone kits distributed

2,374
Providers trained in suicide prevention interventions

34,000
Caregivers completed a suicide prevention module

33,061
Gun locks distributed

10,900
10,900 free visits to uninsured community members

Examples of our pilots and programs aimed to improve mental well-being

Behavioral Health Network

The Behavioral Health Network provides funding and support to not-for-profit providers to increase behavioral health access for our most vulnerable populations. The Behavioral Health Network means people with mental health concerns can gain access quickly and without any cost.

In 2020, this program grew to include 11 networks across Utah and Southwest Idaho, covering all our 23 Intermountain hospital service areas. The networks provide timely and affordable treatment for behavioral health, substance use disorder, and medication management to uninsured and underinsured community members. In 2020, we offered $850,000 of funding, resulting in more than 10,900 free visits to uninsured community members.

SelectHealth Members Behavioral Health Pilot

In 2020, our Community Health Team, in partnership with internal and external stakeholders, completed a nine-month pilot to improve post-discharge outcomes among SelectHealth members admitted to McKay-Dee Hospital's inpatient behavioral health unit (BHU). We joined existing Intermountain and SelectHealth resources in a highly collaborative work process. The pilot showed promising results that advance our enterprise-wide commitment to improving behavioral health access, quality, and outcomes.

Our pilot served SelectHealth members ages 18 and older (excluding those on Medicaid) admitted to the McKay-Dee BHU and disconnected from care. Our intervention included connection to a SelectHealth care manager, a collaborative family meeting, coordinated discharge, and post-discharge care management. As a result of the pilot, fewer patients returned to the hospital and fewer patients visited the emergency room within 30 days of discharge.

Suicide Fatality Reviews

When death by suicide occurs in one of our communities, it's important to understand health system and community infrastructure gaps that we can improve to prevent these situations in the future. Therefore, we collaborated with the Utah Department of Health Office of the Medical Examiner, the Utah Division of Substance Abuse and Mental Health, and the University of Utah Zero Suicide initiative to create an advanced process to evaluate patient suicide fatality reviews. We complete these reviews under the auspices of the Office of the Medical Examiner. Our suicide fatality reviews identify areas of opportunity for improved patient care.

The most significant advancement in this work comes after the review when we evaluate each healthcare system process that may have failed the patient. After identifying the gaps, our group develops and shares recommendations to improve quality and create changes that may prevent future suicide deaths.

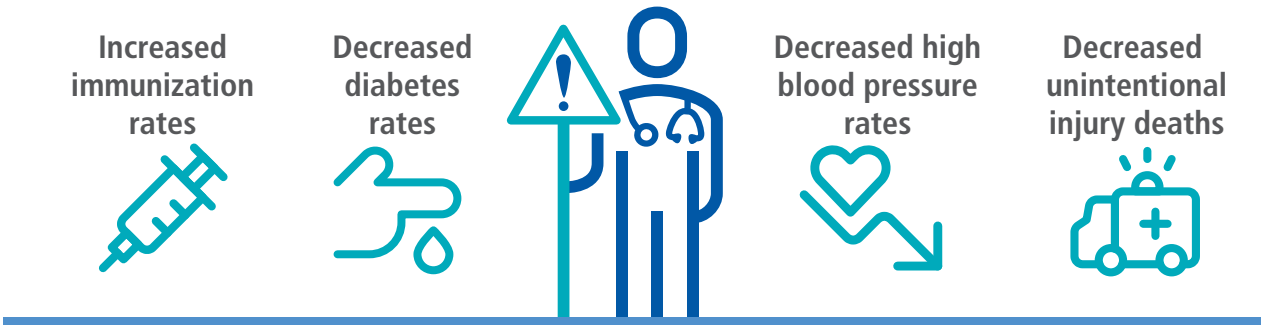
Suicide Prevention Education and Training

Our Community Health team provides ongoing gatekeeper suicide prevention training in collaboration with community-based and state organizations to community members. Additionally, community health works with Employee Assistance Program (EAP) to provide Question, Persuade, Refer (QPR) training to EAP participants across the network.

Opioid Overdose Prevention

Opioid overdoses remain a consistent concern across geographies. As a result, our Community Health Team developed a training focused on opioid education and naloxone distribution in collaboration with Pharmacy Services. The partnership with Utah Naloxone aims to distribute 870 naloxone kits to prevent overdose deaths.

AIM 2: DECREASE AVOIDABLE DISEASE AND INJURY



STRATEGIES

1. Population-Oriented Prevention
2. Access to Effective and Affordable Care
3. Social Connection and Social Norms
4. Policy Engagement and Influence

8,670
Children's ATV helmets, car seats and safety lanyards distributed

239
Chronic Conditions Class participants

100
Omada diabetes prevention program participants funded

202,737
Flu vaccination administered in the community

Immunization Community Collaborative

This pilot focuses on increasing Flu and HPV immunizations rates. To do this, we inform, plan, and implement Flu and HPV strategies through data sharing and meaningful partnerships with community organizations. Collaboration projects include:

- Participating in the Utah Grand Challenge Grant with the Huntsman Cancer Institute
- Participating in the Extension for Community Health Outcomes series educational training with American Cancer Society
- Presenting best practices to Utah Association of Family Practice and Utah American Association of Pediatrics
- Joining the American Cancer Society HPV Learning Collaborative
- Supporting organizations with resources and white-labeled materials to educate and inform
- Funding grants to increase state vaccination rates
- Maintaining alignment with state and local health departments
- Creating and sharing a Utah Statewide Immunization Information System (USIIS) data dashboard for both Flu and HPV vaccines

AIM 3: IMPROVE AIR QUALITY

Decreased bad air days (Ozone > 0.07, PM 2.5 > 35)

STRATEGIES

1. Population-Oriented Prevention

3. Social Connection and Social Norms

4. Policy Engagement and Influence

Improving air quality is a community health issue that emerged as a focus area during our most recent CHNA. The air quality monitors in in Davis, Salt Lake, Utah, and Weber counties indicate violations of the 2015 ozone National Ambient Air Quality Standards (NAAQS) based on the 2016 design values. This indicator measures the average exposure of the public to particulate matter of 2.5 microns (PM2.5) or less in size based on a 3-year average.

PM2.5 is a specific measure of air quality. Particulate matter can get deep inside the lungs, exacerbate respiratory infections, trigger asthma attacks and symptoms, and cause temporary reductions in lung capacity. As a result, air pollution increases rates of low birth weight, premature birth, infant mortality and certain childhood cancers like leukemia. In addition, recent studies show increases in heart attacks, strokes, and high blood pressure due to air pollution.

Air Quality Improvement Projects Include:

- Moved 22% of our system fleet vehicles to alternative fuel
- Partnered with Utah Clean Cities to collaborate on anti-idling signage to implement systemwide
- Created a new community partnership with the UCAIR Program

Our contribution and collaboration with UCAIR supports education and awareness among Utah residents, businesses, nonprofits and government entities and encourage investement in emissions reducing and energy efficient technology to reduce measurable emission annually.

DRIVER: SOCIAL DETERMINANTS OF HEALTH

We identified the social determinants—those non-medical factors that affect health, such as food insecurity, housing instability, interpersonal violence, and transportation—as a primary driver of our community's prioritized health needs. As such, strategies supporting the three main aims consider social determinants of health and social needs. Below are a few pilots to highlight the work in this area:

Upstream Focus on Impacting the Social Determinants of Health

At Intermountain Healthcare, we see ourselves as an anchor institution in the communities we serve. The Health Anchor Network defines an anchor mission approach as "a commitment to intentionally apply an institution's long-term, place-based economic power and human capital in partnership with the community to mutually benefit the long-term well-being of both." Under this framework, we developed strategies to link our assets to support health and well-being and equitably address health disparities. Many of these activities inform and affect our daily business practices to further improve community health.

Examples of our pilots and programs aimed to address the social determinants of health

Purchasing from local and diverse suppliers

Inclusively hiring a diverse workforce

Engaging in place-based impact investing

Increasing sustainability in all our operations

Local Purchasing Helps Grow the Economy in Our Communities

As an anchor institution, in the communities we serve, we understand we can improve community health in ways beyond providing access to high-quality care. We are committed to bringing all our assets to bear in helping people live the healthiest lives possible, including our supply chain. As we intentionally purchase supplies from our diverse communities, we improve community health. We have joined 11 other health systems, some of the largest companies in their states, to announce shifts in our procurement strategies to help address the economic, racial, and environmental disparities that impact health outcomes in our communities. We are striving to increase the percentage of our materials sourced from local suppliers and invite potential suppliers to attend our "Suppliers Days" event to learn more.

Hiring a Diverse and Local Workforce

Hiring a diverse and local workforce positions us to provide the best possible care while positively impacting the economies in our service areas. We are working to ensure our workforce represents Utah gender, ethnicity, and age census data. While we have found our workforce is representative of our community in some comparisons, we see opportunities to increase diversity. For example, in 2019, 78% of Utahns were White, while 85% of our caregivers are White. Approximately 7% of our workforce is Hispanic, yet 15% of Utahns were Hispanic in 2019. Our Talent Acquisition and Human Resource departments are creating additional resources for our recruiters and hiring managers to support inclusive recruiting and hiring practices. One of the resources currently in the works is a 'Diversity Dashboard' that will show our recruiters the diversity breakdown of the applicant pools for their positions.

We are participating in the Rural Economic Development Incentive program, and we're working on recruiting and hiring candidates in rural areas. The COVID-19 pandemic accelerated the development of telework technology and its use. As a result, our leaders and teams are growing more comfortable with collaborating remotely. We have identified and are posting many fully remote positions available to future caregivers from rural settings.

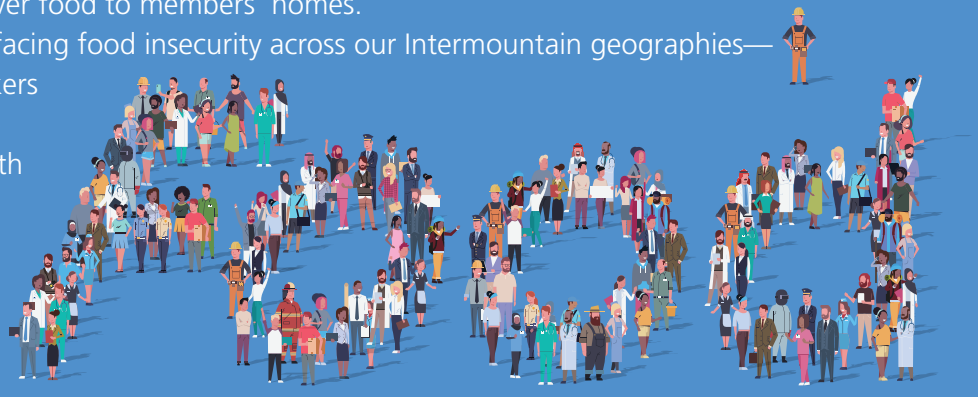
We acknowledge and understand that diversity is more than race or ethnicity, and we intend to pursue diverse candidates of all kinds with a specific focus in the coming years.

Nutrition Security

We have assembled a team to address food security across all our populations (patients, members, caregivers, and community). In addition, our food security work supports community organizations striving to solve food insecurity (or other social needs). Currently, we collaborate with Holy Cross Ministries, Salt Lake County Multi-Cultural Commission, United Way, Utah Food Bank, and Utahns Against Hunger.

Here is how we are working to support each population:

- **Patients:** Identifying patients facing food insecurity, discharging them with food bags and take-home meals, and connecting them to food banks after discharge. We are working on establishing food pharmacies.
- **Caregivers:** When MyHR or other sources identify and notify us of caregivers experiencing food insecurity, we send nutritional boxes to their homes within 24 hours.
- **Members:** Members can work directly with food pantries supported by our funding. Community health workers deliver food to members' homes.
- **Community:** Identifying those facing food insecurity across our Intermountain geographies—support community health workers and food distribution to COVID-19-positive individuals. Work with sustainability on potential community gardens on our Intermountain properties.



"Something better for me and my kids."

Crystal is a single parent who has been undergoing treatments for cancer for the last two years. She came to Utah in 2016 "looking to rebuild my life, something better for me and my kids." She started working for Intermountain Healthcare shortly after and has worked in various settings, including dietary services and, more recently, in COVID-19 testing. As her medical bills mounted, Crystal became concerned about her ability to pay for her basic living expenses. "I have always been a woman of strength and courage." A coworker and friend suggested that she reach out to the Caregiver Assistance Program. Through the program, she received support to keep her current housing and money to keep her utilities working. We sent her an Intermountain Food Box, which helped feed her family for more than a week.

Housing

ACTIVITIES

$10.1 million to construct and preserve affordable housing

$3 million to support locally owned businesses

$13,100,000

OUTPUTS

491 total housing units constructed or preserved

81 rural housing units constructed or preserved

103 employees of small business supported

OUTCOMES

Improved Housing Quality 23 preservation units were updated for health and safety standards

Increased Residential Stability 100% of housing investments include services designed to help stabilize tenants

Improved Housing Affordability

EXPECTED IMPACTS

Healthier childhood development

Improved physical health

Improved educational outcomes

Improved employment outcomes

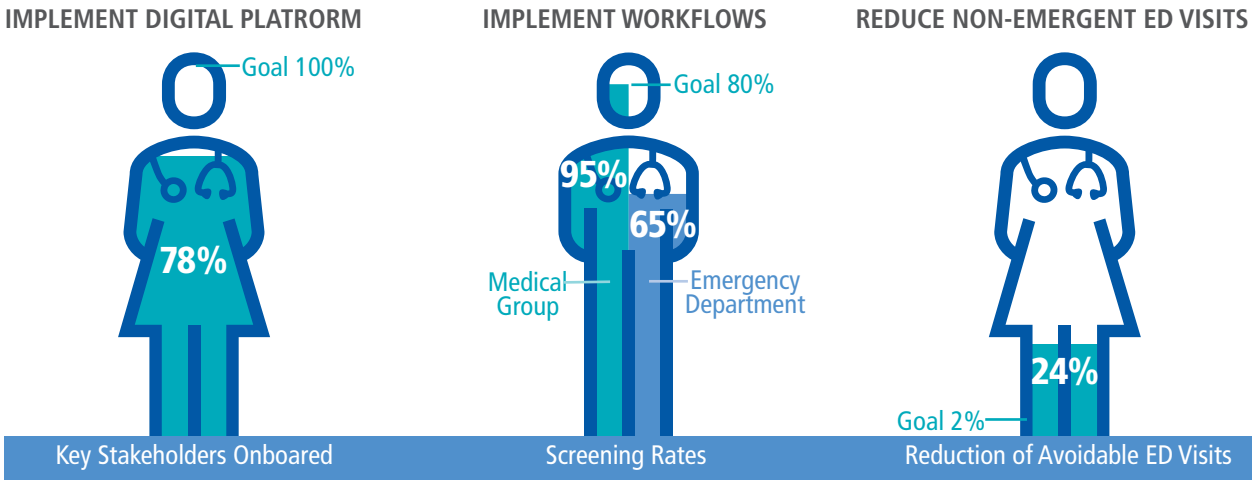
Improved mental health and wellbeing

Addressing Social Needs Through the Alliance for the Determinants of Health

The Alliance for the Determinants of Health (the Alliance) is a 3-year research demonstration and community collaborative that concludes at the end of 2021. It is focused on learning and evaluating best practices for addressing the health-related social needs patients and members, such as housing, nutrition, transportation, personal safety, and employment. The pilot includes SelectHealth Community Care (Medicaid) members who reside in Washington and Weber counties. Intermountain primary care providers and emergency departments, and community partners, such as Federally Qualified Health Centers and Local Mental Health Authorities, work together to identify patients with social needs and connect them to community and government assistance resources. The Alliance partners use a digital platform to manage social care referrals and community health workers to provide additional assistance to those at higher risk. As the Alliance pilot ends, we have numerous learnings from the pilot that we will scale across the system in partnership with Castell.

Key Learnings We Are Scaling Across the System and With Community Partners

1. Implement consistent workflows for administering social needs screening with coordinated follow-up
2. Implement predictive analytics to move social risk identification upstream and across a broader population
3. Integrate community health workers (CHWs) into partner and community clinics to create a smoother transition process between the clinician and the CHW
4. Provide ongoing healthcare navigation support for enrolled patients
5. Ensure adoption of UniteUs (digital social care coordination platform) in community clinical settings through improved support and incentives
6. Provide regular opportunities for ongoing training and internal case conferencing for CHWs



45%
of our highest risk Alliance members have been screened

73.5%
engagement of those referred to a Community HealthWorker

97
organizations on boarded to the UniteUs platform

880
referrals sent

1,118
community members served

A traffic accident left the member and his wife unemployed

Under the Alliance program, a SelectHealth Medicaid member was referred to a community health worker (CHW) by an Intermountain caregiver trained to screen for social needs. A traffic accident left the member and his wife unemployed and struggling to afford food and medical treatment. The CHW helped the client apply for Social Security Disability Insurance and apply for financial assistance through the hospital to help with the extensive medical bills. The CHW also learned that this member struggled with food insecurity and helped him apply for SNAP benefits to help provide food for his family. In addition, because of the accident, the member needed to apply for a new driver's license. While waiting for his license, the CHW connected him with a Medicaid transportation service to provide rides to and from appointments.

DRIVER: ACCESS TO HEALTHCARE SERVICES

Our CHNA identified "access to healthcare" among the top needs in the community health needs assessment. We support this community need by providing access to healthcare services for low-income and uninsured populations in the communities we serve, often in collaboration with our partners and programs listed below.

Examples of Our Pilots and Programs to Increase Access to Healthcare Services

Financial Assistance

Our patients are eligible to receive medically necessary services regardless of their ability to pay. We help eligible patients apply for financial assistance and government programs. In 2020, we provided more than $169 million in financial aid to 223,327 patients.

Community Clinics and School Clinics

We own and operate four community and school clinics located in geographic areas with limited or no other healthcare providers; we charge fees on a sliding scale based on federal poverty guidelines. We also provide funding to clinics that we do not own but provide care to our underserved communities. In 2020, we provided more than $3.9 million in funding to community and school clinics.

Voucher Program

We have agreements with 59 non-Intermountain clinics and sites serving people living below 200% of federal poverty guidelines to provide vouchers for diagnostic imaging, lab tests, and specialty care services. We offered 18,680 vouchers to patients of these clinics to obtain diagnostic and specialty care services in our Intermountain facilities and hospitals in 2020.

Mobile Clinics

We provide funding and operations for multiple mobile screening, diagnostic, and primary care units. In addition, we operate a mobile mammography unit and primary care mobile clinic. We also fund a mobile clinic with a variety of specialty care providers utilized by community partners. We are committed to continuing to support efforts to increase access to timely and quality care.

DRIVER: ADVERSE CHILDHOOD EXPERIENCES (ACEs)

We identified Adverse Childhood Experiences (ACEs) as a driver of our Intermountain prioritized health needs. ACEs are potentially traumatic events that occur in childhood. According to the Centers for Disease Control, studies show that ACEs have a tremendous impact on lifelong health and well-being.

Examples of our pilots and programs aimed to prevent adverse childhood experiences

Intimate Partner Violence (IPV) Screening

According to Utah's Social Services Appropriations Committee, since 2000, 42% of Utah's homicides are domestic violence-related. More than 80 Utah children witness their mother's murder or attempted murder by an intimate partner every year. IPV significantly impacts families and their long-term health and well-being and is a focus area for community health. We created a pilot intimate partner violence screening program in women's health and internal medicine clinics in response to this significant community need. Providers receive education about the importance of screening, best practice guidelines for screening developed with local and national advocates, and referral pathways for individuals that screen positive. We focus on providing screening in a private environment and securing results within the patient's medical record to remain confidential.

Nurse-Family Partnerships

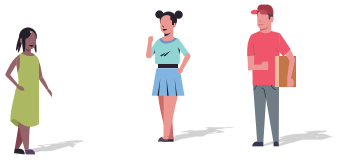
We have partnered with community nonprofits to fund and support Nurse-Family Partnerships (NFP) in Weber County. NFP is the gold standard of maternal home visitation programs for high-risk, first-time mothers. And we have committed to secure ongoing funding for this program through private-public partnerships. We are also working with local home visitation providers in Weber County to streamline the referral process and increase access for expectant mothers to the various home visitation programs currently operating.

ACEs Public Education Campaign

We recognize the need for public education around ACEs and resiliency topics to the general public. We are developing a statewide strategy to support an ACEs public education campaign tailored to different audiences through relationships with community groups.

ACEs Community Collaborative

Community Health works with local providers in Washington County to educate and provide technical assistance around screening for ACEs in early childhood. We are also committed to building provider capacity in rural areas by training local mental health therapists in trauma-focused treatment modalities so that children can access appropriate treatment for their behavioral health needs close to home. Finally, we are committed to building a network of local advocates, schools, medical providers, and local mental health authorities to move work around ACEs forward on a local level.



COMMUNITY EQUITY

Intermountain is committing to bold new initiatives and invites collaboration with government and community partners to address inequities in health, housing, and education. For Intermountain to always be an entirely equitable and inclusive organization—where everyone can bring their whole selves to our facilities—we must all be part of the solution.

Examples of our pilots and programs aimed to improve equity

Community Health Multi-Year-Goal (MYG)

Our community-based Equitable Coverage Committee collectively aims to increase enrollment by 25% by 2023. We seeded this work with a $6.3M contribution. In addition, we have funded external partners to increase insurance outreach and registration assistance and are working with internal operational partners to understand enrollment procedures, barriers, and opportunities.

Chamber of Commerce Engagement and Membership

Intermountain created a task force to identify, join, and support diverse and equity-related chambers of commerce and joined 9 of 12 in Utah, Las Vegas, and Idaho service areas. We have continued to engage with chambers to grow relationships and support their work. For example, we have helped and funded the Utah Black Chamber to support the Black Success Center. In addition, we are in conversations with the Latino Chamber of Commerce to provide leadership support and resources.

OneTen Initiative

We have joined the OneTen initiative, and we developed and joined other healthcare organizations to declare that systemic racism is a public health crisis. We are supporting 'Black Voices in Healthcare' through the Utah Black Chamber. The Alliance for the Determinants of Health is reaching its third and final year. It is engaging in an independent evaluation. Findings from an independent evaluation of The Alliance's work show a 12.7% reduction in ED use.

Community Health Needs Assessment

We are finalizing the study protocol for the 2022 CHNA with an expanded focus on reaching under-represented groups. The protocol also focuses on engaging community members and leaders in coordinated and targeted efforts to measure and address equity.

COMMUNITY GIVING OVERVIEW IN 2020

Our community giving portfolio includes corporate giving from our IHC Health Services arm and grants from our Intermountain Community Care Foundation (ICCF). We provide funding availability to qualifying not-for-profit organizations in Utah, Idaho, and Nevada that align with the community health needs we identified in our CHNA.

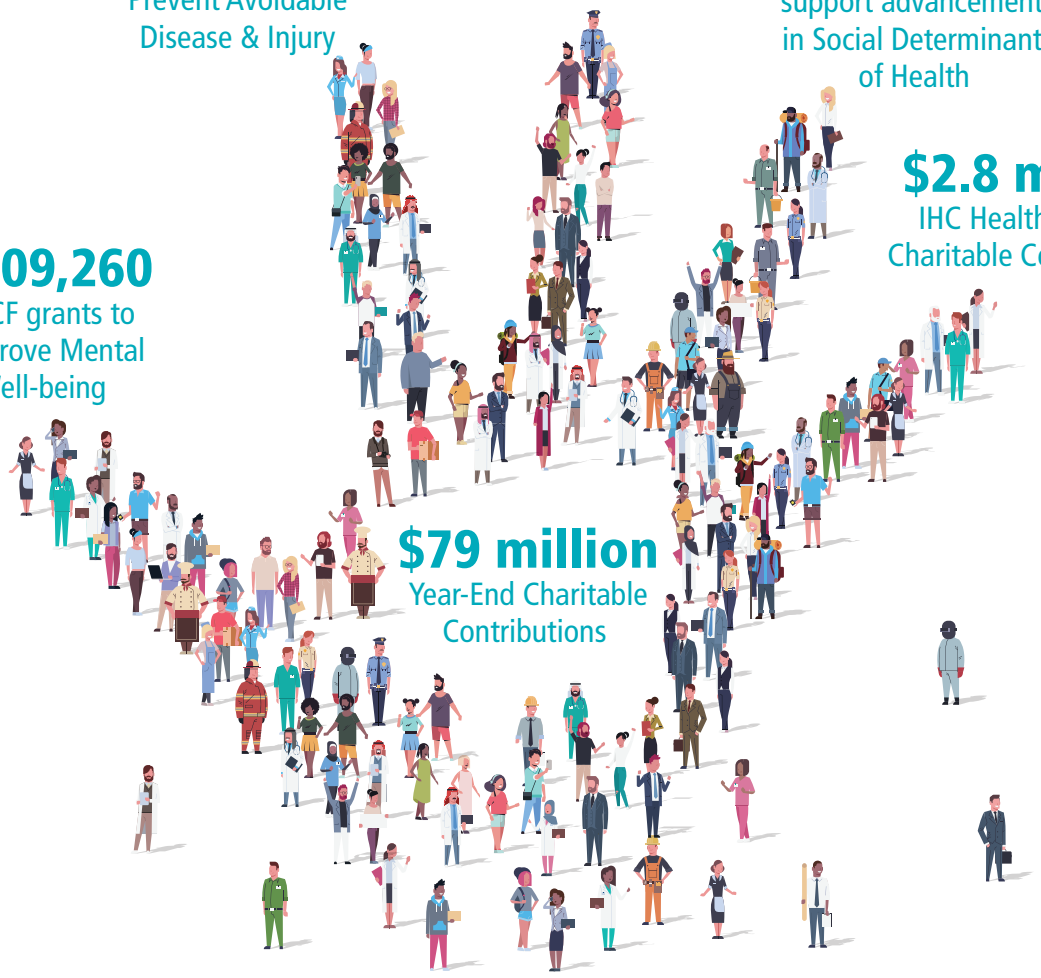
$4,169,136
ICCF grants to improve access to healthcare services

$90,351
ICCF grants to Prevent Avoidable Disease & Injury

$601,420
IFFC grants to support advancements in Social Determinants of Health

$2.8 million
IHC Health Services Charitable Contributions

$409,260
ICCF grants to Improve Mental Well-being



$79 million
Year-End Charitable Contributions

$87 million
Total Charitable Contributions and Grants in 2020

Equitable Community Giving

In 2020, we gave $495,000 to nine educational partners to support diversity scholarships in healthcare. We funded and collaborated on a program with the University of Utah to transform medical education to be inclusive of population health and social needs. This contribution included $50 million to establish the University of Utah Intermountain Healthcare Population Health Student Scholars Program. We provided financial support to the statewide implementation of community health workers to support individuals infected with COVID-19 in remaining socially isolated and financially stable. More than 6,000 individuals have been served and connected to resources for food security, rental, and utility payments.

Examples of a few initiatives funded in 2020

Latinos in Action

We support Latinos In Action (LIA) through multiple community giving channels, bridging Latino students' graduation and opportunity gap. LIA operates a year-long elective course that focuses on empowering Latino youth to lead and strengthen their communities through college and career readiness. The program includes four pillars: excelling in leveraging personal and cultural assets, excelling in education, serving the community, and developing leadership skills. Recently, our partnership has expanded to include the integration of health screenings to help connect patients to appropriate medical care.

Utah Housing Preservation Fund

In 2020, our Intermountain Community Care Foundation provided a grant to the Utah Housing Preservation Fund (UPFH) and Utah Partners for Health for $310,000 dispersed over three years. The UPFH and Utah Partners for Health will use funds to purchase 46 public housing units to ensure they are available to current tenants and low-income residents. These units, which have ample square footage and multiple bedrooms, are very scarce and are invaluable for larger households living at low income.

In addition to assisting with the unit purchase cost, the Utah Partners for Health will use a portion of the grant to cover the cost of administering medical services to residents in the newly purchased units. UPFH will continue to provide services to the residents through mobile clinic programs and brick and mortar clinics offering a sliding fee discount schedule for those who qualify. The project aims to improve housing stability and the residents' health and well-being.

Community Health Workers to Support with COVID-19 recovery

In 2020, we created a COVID-19 Emergency Fund, under our Intermountain Community Care Foundation, that provided an additional funding opportunity for community organizations struggling during the pandemic. Through this funding, we provided a grant for $126,000 to the Association for Utah Community Health (AUCH) to fund and deploy Community Health Workers (CHWs) that would support high-risk individuals that tested positive for COVID-19. The focus population included people of color, uninsured community members, and Medicaid enrollees often experiencing social isolation and social needs such as loss of income, food insecurity, and housing instability. The CHWs supported these community members to address these needs and help with recovery from COVID-19.

Intermountain provided funding to more than 240 not-for-profit organizations in 2020

A Little Love Village Inc
Ability Found
Alliance Community Services
Alliance House
American Foundation for Suicide Prevention
American Red Cross National
American Red Cross Utah
Asian Association of Utah
Assistance League of Salt Lake City
Association for Utah Community Health
Bangerter Highway Underpass
Bear River Health Department
Boys & Girls Clubs of Greater Salt Lake
Brain Injury Alliance of Utah
Breathe Utah
Bridgerland Technical College
Canyon Creek Services
Canyon Creek Women's Crisis Center - DBA Canyon Creek Services
Catholic Community Services of Utah
Center for Women and Children in Crisis
Central Utah Counseling Center - Sanpete
Central Utah Counseling Center - Sevier
Central Utah Public Health Department
Centro Hispano
Cherish Families
Cherished Families
Child and Family Support Center of Cache County, Inc, DBA: The Family Place
Children's Service Society
Christian Center of Park City
Citizens Against Physical and Sexual Abuse (CAPSA)
Common Ground Outdoor Adventures
Community Action Services and Food Bank
Community Health Centers, Inc
Community Health Connect
Community Nursing Services
Creek Valley Health Clinic
Crohn's & Colitis Foundation
Crossroads Urban Center
Davis Behavioral Health
Davis County Sheriff's Office
Davis Education Foundation
Davis School District
Davis Technical College
Doctors Volunteer Clinic
Doctors Volunteer Clinic of St. George
DOVE Center
EATS Park City
Encircle LGBTQ+ Youth and Family Resource Center
English Language Center of Cache Valley, Inc
Eye Care 4 Kids
Family Counseling Service of Northern Utah
Family Health Care
Family Health Services Corporation
Family Institute of Northern Utah - Bear River
Family Institute of Northern Utah - Cache County & Logan
Family Planning Elevated
Family Summit Foundation-A Center For Grieving Children
Family Support Center of Southwestern Utah
Fight Against Domestic Violence
First Step House
Fit To Recover
Fractured Atlas
Friends for Sight
Friends of Switchpoint
Friends of the Children
Friends of Utah County Children's Justice Center
Get Healthy Utah
GK Folks Foundation
Granite Education Foundation
Granite Technical Institute
Green Urban Lunch Box
Guadalupe Center Educational Programs, Inc.
Guadalupe School
Health Access Project
Healthy Dixie Council
Holy Cross Ministries of Utah
HOPE4Utah
House of Hope
Housing Connect Fund
I.J. & Jeanné Wagner Jewish Community Center
Impact Mental Health d.b.a. Polizzi Foundation
In-House Pharmacies - Utah Partners for Health
In-House Pharmacies - Family Healthcare
Institute for Continued Learning
Intermountain Dixon Middle School Clinic (Provo)
Intermountain Liberty Elementary School Clinic
Intermountain North Temple Clinic
Intermountain Rose Park Elementary School Clinic
Intermountain Therapy Animals
James Madison Elementary School Clinic (Ogden)
Lantern House (DBA St. Anne's Center)
Latino Behavioral Health Services
Latinos in Action
Learning Center for Families dba Root for Kids
Maliheh Free Clinic
Midtown Community Health Center
Millcreek High School (St George)
Moab Free Health Clinic
Moab Valley Multicultural Center
MOSAIC Inter-Faith Ministries
Mountainland Technical College
Mountainlands Community Health Center
Mountainlands Family Health Center
NAACP Salt Lake Branch
National Ability Center
National Alliance on Mental Illness, Utah
National Association for Mental Health
National Multiple Sclerosis Society - Utah-Southern Idaho Chapter
New Hope Crisis Center of Box Elder
New Horizons Crisis Center
North Sanpete School District
Odyssey House
Ogden CAN
Ogden-Weber Technical College Foundation
Orem Junior High School
Park City Tots Inc (PC Tots)
Peace House
People Helping People
People's Health Clinic
Playworks Utah
Postpartum Support International - Utah Chapter
Prevent Child Abuse Utah
Red Barn Farms
Ronald McDonald House Charities of the Intermountain Area
Root for Kids
Roseman University of Health Sciences
Safe Harbor Crisis Center
SafeNest
Salt Lake Community Action Program DBA Utah Community Action
Salt Lake Community College
Salt Lake Community College Dental Clinic
Salt Lake County
Salt Lake Donated Dental Services
Sanpete Pantry
Scottish Rite Foundation of Utah/RiteCare of Utah
Seager Memorial Clinic
Seekhaven, Inc
Sego Lily Center for the Abused Deaf
Senior Charity Care Foundation
Shelter the Homeless
Sleeping Bags for the Homeless
South Davis Sewer District
South Sanpete School District
South Valley Services
Southern Utah Bicycle Alliance
Southwest Utah Community Health Center
Special Olympics Utah
Stop the Violence
Summit County Clubhouse
Summit County Health Department
Tabitha's Way Local Food Pantry
Tall Mountain Wellness
The Children's Center
The Road Home
TreeUtah
United Angels Foundation
United Way Dixie
United Way of Northern Utah
United Way of Salt Lake
United Way of Utah County
University of Utah
University of Utah Department of Pediatrics - Utah Naloxone
University of Utah Medical School
Urban Indian Center of Salt Lake
Utah AIDS Foundation
Utah Community Builders
Utah County Government
Utah Department of Health
Utah Department of Health - Health Informatics Office
Utah Department of Substance Abuse and Mental Health
Utah Division of Indian Affairs
Utah Division of Substance Abuse and Mental Health
Utah Domestic Violence Coalition
Utah Food Bank
Utah Foster Care
Utah Health & Human Rights
Utah Health Policy Project
Utah Housing Coalition
Utah Housing Preservation Fund
Utah Nonprofit Housing Corporation
Utah Nonprofits Association
Utah Open Lands Conservation Association
Utah Pacific Islander Health Coalition
Utah Partners for Health (Mid-Valley Community Clinic)
Utah Pediatric Quality Improvement Initiative
Utah Pet Partners, aka Therapy Animals of Utah
Utah Pride Center
Utah Public Health Association (UPHA)
Utah Safety Council
Utah State University
Utah State University Blanding Extension
Utah Support Advocates for Recovery Awareness
Utah Valley Refugees
Utah Valley University
Volunteer Care Clinic
Volunteers of America, Utah
Wasatch Community Foundation
Wasatch Community Gardens
Wasatch Forensic Nursing
Wasatch Homeless Health Care DBA Fourth Street Clinic
Wasatch Mental Health
Washington County
Wayne Community Health Center
Weber Human Services
Weber State University
Westminster College
Westside Coalition
Women of the World
Work Activity Center
YCC Family Crisis Center
Youth Futures
YWCA Utah
Zero Fatalities - Utah Highway Safety Office