

Before the Pandemic

- In 2021, Madera Community Hospital celebrated its 50th year serving residents of the rural Central Valley after it was founded by a group of local leaders who saw a need for health care delivery closer than the 20-plus-mile drive to Fresno.
- Madera Community Hospital serves a large Hispanic population, and nearly 60% of patients are covered by Medi-Cal. It is also one of the largest employers in the region, with 1,100 part- and full-time staff.
- The not-for-profit hospital serves patients in its 106-bed acute care facility, but also in a variety of outpatient clinics, including a rural safety net clinic in Mendota, a city whose per capita income is less than \$7,000.

“Every community needs a hospital to service their community – especially for a low-income service area, where people don’t have transportation – the founders of Madera Community Hospital had the foresight to see that we need these services here. We are a farming community; our patients have language barriers, transportation barriers, limited access to primary care.” – Karen Paolinelli, CEO, Madera Community Hospital

COVID Takes Its Toll

- On March 6, 2020, Madera Community Hospital received the first COVID-19 patient in the Central Valley, a passenger who had recently disembarked from a cruise ship. Like many hospitals, Madera endured the peaks and valleys of the pandemic, at one point caring for a patient census that was 65% COVID-positive.
- Since the pandemic began, Madera has lost more than \$15.6 million, and a \$7.5 million federal relief package did not even cover half of those losses. With nursing costs topping \$250 an hour, the hospital is now losing between \$1 million and \$1.5 million per month.
- To get through the surges and into the current phase of the pandemic, the hospital had to rely heavily on additional federal military medical support and the generosity of the community, which came out to support its hospital with donations of food (local restaurants provided countless meals), supplies (schools donating N95s and farms donating safety goggles), and more.

“Before the pandemic, we were able to make ends meet, barely; we had good cash reserves, enough cash on hand for a small, independent hospital. We’re now operating in the red; we’re devastated financially and there’s not enough relief to help sustain us. During COVID, the team felt physically exhausted, but nurses came together – it’s what they do. We’re now at a point where there aren’t enough resources and it feels like we’re on our own.” – Karen Paolinelli, CEO, Madera Community Hospital

What Now?

- Madera Community Hospital is exploring every option to remain open and ready to care for its community, including affiliation with a health system.
- The threat of closure of services, including remote clinics that serve low-income communities, is real. If options to save or get additional funding for the hospital do not materialize, the hospital could close its doors permanently.

“We know we can’t survive – this will be the end of our hospital as it is today. Hospitals have stepped up during the pandemic but needed more support from the government to give additional funding to small rural hospitals such as ours. State and federal government funding has been insufficient. We’re not making money on COVID; we’re just not. We have to invest more in health care, in health care workers. We have to make sure people are taken care of. We just want to continue to have a hospital in our community and we know we can’t do that as a small, independent hospital anymore.”

– Karen Paolinelli, CEO, Madera Community Hospital