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Gabriel Dillard,
Managing Editor
The Business Journal

Editor's Note

Every year, this guide tries to answer the same basic question: what does health care actually look like in the Central Valley right now? This year, we decided to answer it with numbers.

Putting together this edition meant going back years through hospital financial filings, emergency department records, charity care reports and discharge data across Fresno, Kings, Madera and Tulare counties. The result is a set of rankings and trend lines that, frankly, took longer to compile than almost anything else in this book. But the patterns that come out of even a few years of data tell you things a single conversation can't — where investment is growing, where capacity is strained, and where the numbers move slower or faster than the headlines suggest.

We also wanted to show, not just tell. Robotic surgery has moved from a novelty to a standard tool in Valley operating rooms, and our main story digs into how that shift happened and what it means for patients. We also examine the Medline fire in Tracy, and how it represents a new challenge for Valley caregivers.

None of this replaces the reporting our team does on the ground, talking to administrators, clinicians and the people running these systems day to day. The data is a starting point, not the whole story. But in a region growing as fast as ours, with health systems expanding, consolidating and competing for the same patients and the same workforce, the numbers are worth sitting with.

This guide is meant to be useful first. We hope it helps you understand the systems you and your employees rely on, and gives you a clearer sense of where Central Valley health care is headed next.



Photo via Saint Agnes | One of the leading robotic-specialty surgeons on the West Coast, Dr. Russell Martin has deep connections to Saint Agnes Medical Center; his mother worked as an ER nurse at the hospital, helping influence his future in the health care industry.

How a Fresno surgeon became one of the West Coast's busiest robotic hands

Dr. Russell Martin has performed 3,000 robotic procedures at Saint Agnes Medical Center, and he's not slowing down

By Ben Hensley

Dr. Russell Martin calls it a fancy forklift.

In early 2026, the chief of surgery at Saint Agnes Medical Center performed the 3,000th robotically assisted procedure of his career, a milestone that places him among the top robotic surgeons on the West Coast. More than two decades after Saint Agnes became the first hospital in the Central Valley to introduce the technology, Martin has watched it move from a novelty into standard practice in his operating room.

"At the end of the day, if you can keep it minimally invasive, there's no comparison," Martin said. "There's less pain, faster recovery, less infections."

That shift is playing out beyond Saint Agnes as well. In 2025, Adventist Health Hanford added a second da Vinci robotic surgical system to accommodate growing demand and physician adoption. Saint Agnes expanded its own program the same year with the addition of the Intuitive da Vinci 5 surgical system, one of the company's newest platforms.

While the technology comes with a steep price tag — da Vinci 5 models start at just under $2 million — healthcare leaders say the investment may be offset by faster recovery times, reduced complications and physician recruitment.

A fancy forklift, not an autopilot

To many patients, robotic-assisted surgery still sounds like science fiction: machines operating autonomously while physicians stand nearby.

In practice, Martin said, the reality looks much different.

"It's basically a fancy forklift for surgery," he said.

During robotic procedures, surgeons remain in complete control, seated at a console near the operating table using hand controls, foot pedals and three-dimensional visualization to direct robotic instruments through small incisions, a far cry from the autonomous Autodoc technology depicted in the 1979 film "Alien."

Rather than replacing surgeons, the systems enhance minimally invasive surgery procedures.

Compared with traditional laparoscopic tools, robotic platforms offer greater dexterity, additional instrument control and enhanced visualization, allowing physicians to complete more complex procedures without resorting to open surgery.

"You have four arms, 3D vision and better articulation than traditional laparoscopic surgery," Martin said. "You can do more complex cases and keep it minimally invasive."

The procedures can treat a growing list of conditions including colon cancer, gallbladder disease, hernias and esophageal disorders.

More hands, not fewer, in the operating room

Ironically, robotics often means more, not fewer, people inside an operating room.

"It actually is not less people," Martin said. "We have more humans to keep it running more efficiently and faster."

Still, proponents argue the economics make sense when looking beyond the initial procedure.

Reducing complications and readmissions can help offset costs for both patients and hospitals by lowering the likelihood of emergency visits, repeat procedures and prolonged recovery times.

"Every time you have a comeback or somebody coming back into the ER after surgery, that's a red flag," Martin said. "If you can decrease that, you're helping the patient and decreasing the cost."

Saint Agnes pioneered robotic surgery in the Valley, introducing its first unit in 2001 and establishing an early foothold in a field that has since become increasingly mainstream.

Few surgeons have watched that evolution as closely as Martin.

From Valley kid to West Coast leader

Born and raised in the Central Valley, Martin's connection to Saint Agnes began long before he started his career in 2018.

"My first stitches I ever got, my

Robotic Surgery | Page 4

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Photo via Saint Agnes | In March 2026, Dr. Russell Martin completed his 3,000th robotic-assisted procedure.

Robotic Surgery | From 2

mom got herself, were at Saint Agnes in the ER," Martin said. "I have a strong relationship with Saint Agnes. It's always been a fantastic hospital for the Valley."

Medicine surrounded him early, with his mother working as an emergency room nurse while an uncle practiced surgery.

"My mom would always pass me silverware or utensils like a surgical instrument," Martin said with a laugh. "I'm like, 'What if I wasn't a surgeon, mom?'"

Ultimately, surgery stuck.

"I love fixing things," Martin said. "My grandfather was a carpenter, my father had an automotive shop and I learned how to fix cars. I love doing that for patients."

After being introduced to robotic surgery procedures during residency, Martin became an early adopter of the technology in general surgery, a specialty slower than urology, gynecology and colorectal medicine to embrace robotic systems.

What convinced him, he said, were the outcomes.

"I got to see his cases and his patients and his outcomes," Martin said of an early robotic surgeon he observed during training. "To me, it was just obviously better, faster recovery."

Training surgeons across state lines

Eventually, his experience extended beyond Fresno.

Today, Martin serves as a proctor for Intuitive Surgical, mentoring and training physicians learning robotic techniques across the state and beyond, including surgeons trained at institutions such as Stanford and practices in Beverly Hills.

"I've proctored surgeons from California to Buffalo, New York," Martin said.

He also works extensively with physicians across the region, consulting on cases stretching from Bakersfield to Modesto.

A tool for keeping healthcare local

For hospitals competing with larger healthcare systems in the Los Angeles and Bay Areas, robotics is increasingly becoming more than a patient-care investment. It's also rapidly becoming a recruiting tool.

Martin knows because access to robotic surgery influenced where he initially considered practicing after training.

"I was attracted initially to another hospital system coming out of training because they had robots," Martin said.

Today, younger physicians entering medicine increasingly train with robotic systems from the beginning of residency, something that just a decade ago was not yet commonplace.

"Robotic surgical innovation requires not only developing technology, but also developing surgeons who will use it," Dr. Thomas Cohn, chief medical officer at AdventHealth, wrote in an analysis of emerging surgical technologies.

Saint Agnes currently operates three robotic systems, providing physicians around-the-clock access to the technology.

Martin said the availability matters for physicians determining where they want to practice, much like he did following his own residency.

"It used to be kind of a joke because I was always the guy doing robotics," Martin said. "Now I'm seeing people ask, 'How many systems do you have?'"

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Robotic Surgery | From 4

AI and the next generation of surgical tools

If robotic surgery already sounds transformative, healthcare leaders say the next frontier may involve technology that sounds even more futuristic.

Researchers and medical technology companies are increasingly exploring how artificial intelligence may assist surgeons through analysis, surgical planning and greater operating room precision.

Surgery from 12,500 miles away

Long-distance robotic surgery, sometimes called telesurgery, is also beginning to move from theory to practice.

Earlier this year, medical technology company SS Innovations announced what it described as one of the world's longest-distance robotic telesurgeries. The procedure involved a surgeon operating on a patient in Indore, India, from Georgetown, Guyana, roughly 12,500 miles away.

Medical researchers are also studying how robotics and AI could further improve complex abdominal and hernia procedures through enhanced planning and precision.

Will robots replace the surgeon?

For Martin, the possibilities are exciting, though balancing innovation with human judgment remains critical.

"I think the simple answer is yes," Martin said when asked whether automation could eventually reshape medical jobs.

He points to fields such as radiology and pathology, where pattern recognition already aligns closely with artificial intelligence and technology.

Human touch

But surgery, he argues, still depends on judgment, trust and human connection.

"Not everything is an algorithm," Martin said. "There are a lot of subtleties and complex medical issues that come with anybody and making those decisions."

Even in an increasingly technological healthcare system, Martin believes patients will continue to value human interaction, especially when facing life-changing decisions.

"It is nice to talk to a human," he said. "That's the human comfort and professionalism people expect."

For now, he sees robotics as an enhancement rather than a replacement, a way to improve care while keeping surgeons firmly in control.

And after 3,000 procedures, Martin says the focus remains where it always has been: helping patients heal while continuing to push medicine forward.

"We live in the most fascinating times," Martin said. "Keep building for the future."

BY THE NUMBERS

2001 – Year Saint Agnes Medical Center introduced the Valley's first robotic surgical system

3,000 – Robotically assisted procedures performed by Dr. Russell Martin as of early 2026

3 – Robotic surgical systems currently operated by Saint Agnes Medical Center

2 – da Vinci robotic surgical systems now in use at Adventist Health Hanford

$2 million – Approximate starting price for an Intuitive da Vinci 5 surgical system

12,500 miles – Distance between Indore, India, and Georgetown, Guyana, the span of a recent robotic telesurgery performed by SS Innovations

2018 – Year Martin began his career at Saint Agnes

4 – Robotic arms used in a typical da Vinci-assisted procedure



Photo via Saint Agnes | The da Vinci 5 Surgical System is operated by both hand controls and pedal controls, giving the operator dexterity and precision during surgical procedures.



Photo via Kaweah Health | Pictured from left: Dr. Bradlee Bachar, cardiac anesthesiologist; Vida Halsey, RN; Norman Solis, RN; Dr. Trung Ly Tran, cardiothoracic surgeon; Marivy Contreras, cardiac surgical tech; Juan Diaz Torres, cardiac surgical tech; and Cindy Tapia, cardiac surgical tech.

Kaweah Health surgeon performs system's first robotic lung cancer surgery

Dr. Trung Ly Tran's milestone procedure signals a growing shift toward robotic-assisted care across the Central Valley

By Ben Hensley

Kaweah Health's Dr. Trung Ly Tran performed the hospital's first robotic lung cancer surgery in June 2026, offering an early look at the growing role of assisted procedures in healthcare.

Kaweah Health Medical Center is one of just a few hospitals with the capacity for robotic-assisted thoracic surgery services, joining the ranks of Community Health System and Saint Agnes Medical Center, which pioneered the technology in 2001.

Tran, who joined the cardiothoracic program in April to help expand Kaweah Health's lung cancer program, explained the benefits of robotic-assisted procedures, including reduced chances of blood loss and infection, as well as reduced pain, minimal scarring and shortened recovery and hospital timetables.

Kaweah Health operates a comprehensive lung cancer screening program featuring low-dose CT scans to detect early signs for lung cancer. The painless scan can provide health professionals with potential warning signs years before they would appear on an X-ray.

Tran said that surgery is possible when lung cancer is caught early.

"Surgery can be the cure in those cases," Tran said.

Mako system

Kaweah Health also performed its first Mako SmartRobotics procedure on June 24, utilizing the technology for the first time in a joint-replacement procedure. The procedure, carried out by orthopedic surgeon Dr. Jun Kim, utilized Mako's capacity to perform a highly-detailed CT scan to provide a virtual map of the surgical site.

The Mako device will primarily be utilized in joint replacement procedures, specifically for the knee and hip.

Mako SmartRobotics are also used at Fresno Surgical Hospital, Saint Agnes Medical Center and Sierra View Medical Center and are designed to improve surgical precision through patient-specific planning and real-time guidance during procedures.

Robotic surgery's expansion

While Kaweah Health's recent procedure marks a milestone for its lung cancer program, robotic-assisted surgery has become an increasingly common option throughout the Central Valley as hospitals invest in advanced technology and specialized surgical teams.

Saint Agnes Medical Center pioneered robotic-assisted surgery in 2001 and has continued expanding its capacity across multiple specialties. The Fresno hospital recently highlighted a milestone of more than 3,000 robotic procedures performed by surgeon Dr. Russell Martin, who has become one of the region's leading advocates for the technology.

Martin said its capabilities can reduce pain and infections and expedite patient recovery. He also noted that robotic surgery programs are becoming increasingly important recruiting tools as younger physicians seek opportunities to work with new technologies.

Community Health System has also expanded its use of robotic-assisted procedures in recent years, incorporating robotic technologies across multiple specialties. Local health care leaders say the systems not only improve patient outcomes but also help attract highly-trained clinicians to the region.



Photo via Kaweah Health | A da Vinci Xi surgical system, the type of robotic-assisted platform used in procedures like Kaweah Health's first robotic lung cancer surgery.

Keeping the Valley's heart beating strong for 50 years



In 1976, Saint Agnes performed its first open heart surgery, paving the way for 50 years of exceptional, award-winning and life-saving cardiac care for Valley patients.

Open heart surgery continues to play a vital role in treating patients with severe cardiovascular disease, including heart failure, valve dysfunction, coronary artery disease and complex rhythm disorders. These procedures often involve repairing or replacing damaged valves, bypassing blocked arteries and implanting devices like pacemakers or defibrillators to restore heart function and improve quality of life.

Long-time Valley Cardiothoracic Surgeon and Medical Director of Saint Agnes Care Cardiothoracic Surgery, Dr. Richard Gregory says, "Saint Agnes has an impressive history of performing adult open heart surgery in Fresno. The hospital dedicates significant resources to advancing care delivery and technologies to ensure successful outcomes and improved patient satisfaction."

Saint Agnes employs a team approach to open heart care, leaning on the expertise of surgeons, anesthesiologists, therapists and specialists. Nurses in the Cardiovascular Intensive Care Unit (CVICU) also complete a comprehensive 13-week training program focused on the latest evidence-based practices, helping ensure patients receive seamless support from surgery through rehabilitation.

A history of firsts

Since the launch of our open heart program, Saint Agnes has led the way in cardiovascular care, often becoming the first hospital in the area to introduce new technologies and procedures.

Cardiovascular Milestones

- **1976:** Doctors perform the first open-heart surgery at Saint Agnes.
- **1979:** Opened the region's first cardiac rehabilitation program.
- **1993:** Introduced coronary stent technology to the Valley.
- **1996:** Performed the first minimally invasive cardiac surgical procedure.
- **2001:** First in the region to utilize the da Vinci robotic surgical system for minimally invasive cardiac surgery.
- **2014:** Performed the Valley's first Transcatheter Aortic Valve Replacement (TAVR).
- **2017:** Introduced the Micra® TPS – the only leadless pacemaker available in the United States at the time.
- **2024:** Introduced FARAPULSE Pulsed Field Ablation (PFA) System, TriClipTM Transcatheter Edge-to-Edge Repair (TEER) system, and AVEIRTM DR Dual Chamber Leadless Pacemaker.

"By investing in new technologies, Saint Agnes has opened the doors to advanced cardiac care, so patients no longer need to travel hours out of the way to get expert treatment for their conditions," says Dr. Peter Birnbaum, Saint Agnes Care Cardiothoracic Surgeon. "Having heart surgery is stressful enough without trying to navigate travel logistics. We want our patients to receive expert care close to home, surrounded by the people and support systems that matter most."

In addition to advancing cardiovascular care, Saint Agnes has earned national recognition for clinical excellence. Recently, Saint Agnes was named a 2026 Blue Distinction Center+ for Cardiac Care and a 2025-2026 Best Hospital by U.S. News & World Report, listed as High Performing for Heart Attack, Heart Failure, Aortic Valve Surgery, Heart Arrhythmia, Pacemaker Implantation and Transcatheter Aortic Valve Replacement.

Growing to meet the Valley's needs

While open heart surgery remains a cornerstone of Saint Agnes' cardiovascular program, advancements in technology and treatment options have expanded the specialized care available to the Central Valley.

Today, the Cardiac Catheterization Lab (Cath lab) represents the next generation of minimally invasive heart care at Saint Agnes. Valve repair and rhythm management procedures can be performed through a small incision near the wrist or groin. Physicians then guide flexible catheters with implantable devices to the heart using live imaging technology. These minimally invasive approaches often result in faster recovery times, lower risk of complications, shorter hospital stays and less pain.

"In alignment with our Catholic identity, our core mission is to care for our patients – body, mind and spirit," says Glyniss D'Mello, Saint Agnes Director of Telemetry and Cardiovascular Services. "As cardiovascular care continues to evolve, we remain committed to investing in the people, technology and programs that help our community live healthier lives."

For 50 years, Saint Agnes has helped shape the future of heart care in the Central Valley. From groundbreaking open-heart procedures to today's minimally invasive innovations, we continue to redefine cardiovascular care, ensuring patients and families across the region have access to expert, compassionate heart care close to home for generations to come.

Learn more about our advanced cardiac services at samc.com/50YearsOfHeart.



Charles
Open Heart Patient

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Adventist Health's Hanford investment shows in hospital rankings

By Ben Hensley

The hospital landscape in the Central Valley continues to evolve, with several facilities expanding capacity while others remain steady.

Big state hospitals

Coalinga State Hospital remains the largest healthcare facility in the region with 1,500 licensed beds, followed by Porterville Developmental Center with 1,210 beds.

Coalinga State Hospital, opened in 2005, serves repeat sexual offenders who have completed their prison sentence and have been committed for extended treatment. It had a population of 1,341 as of 2024. Nearly 2,500 employees work there.

Originally opened in 1953 as Porterville State Hospital, Porterville Development Center has about 200 residents with intellectual and developmental disabilities. They have been charged with a crime, but were found "incompetent to stand trial."

Acute care rankings

Among traditional acute-care hospitals, Community Regional Medical Center strengthened its position as the Valley's largest hospital, growing from 685 licensed beds in 2024 to 921 beds in 2025 and maintaining that level in 2026. As Fresno's flagship trauma and tertiary-care center, Community Regional serves as a critical referral destination for patients throughout Central California.



Photo Ben Hensley | The hospital entrance at Adventist Health Hanford, where the bed count grew from 173 in 2025 to 235 in 2026.

Kaweah Health remained the fourth-largest hospital in the region despite a slight reduction in licensed beds from 639 in 2025 to 613 in 2026. The Visalia-based health system reported 705 physicians, 5,250 local employees and 1,200 registered nurses.

Saint Agnes Medical Center, Valley Children's Hospital and Clovis Community Medical Center maintained stable bed counts at 436, 358 and 352 beds, respectively. Together, these institutions form the backbone of Fresno County's acute-care network, providing everything from pediatric specialty services to advanced cardiac and surgical care.

Growth in Hanford

One of the most notable year-over-year changes occurred at Adventist Health Hanford, which increased its licensed bed count from 173 in 2025 to 235 in 2026. The growth suggests continued investment in Kings County healthcare capacity as the region experiences population growth and increasing demand for services.

Several smaller hospitals also maintained important niche roles. Sierra View Medical Center in Porterville reported 167 beds and more than 1,000 employees, while Madera Community Hospital, which reopened after a highly publicized closure, continued operating with 103 licensed beds. Behavioral health providers such as River Vista Behavioral Health, Central Star Psychiatric Health Facility and Exodus Fresno also remained key components of the region's mental health infrastructure.

BY THE NUMBERS

1,500 beds: Coalinga State Hospital, largest facility in the region.

921 beds: Community Regional Medical Center, largest acute-care hospital.

613 beds: Kaweah Health.

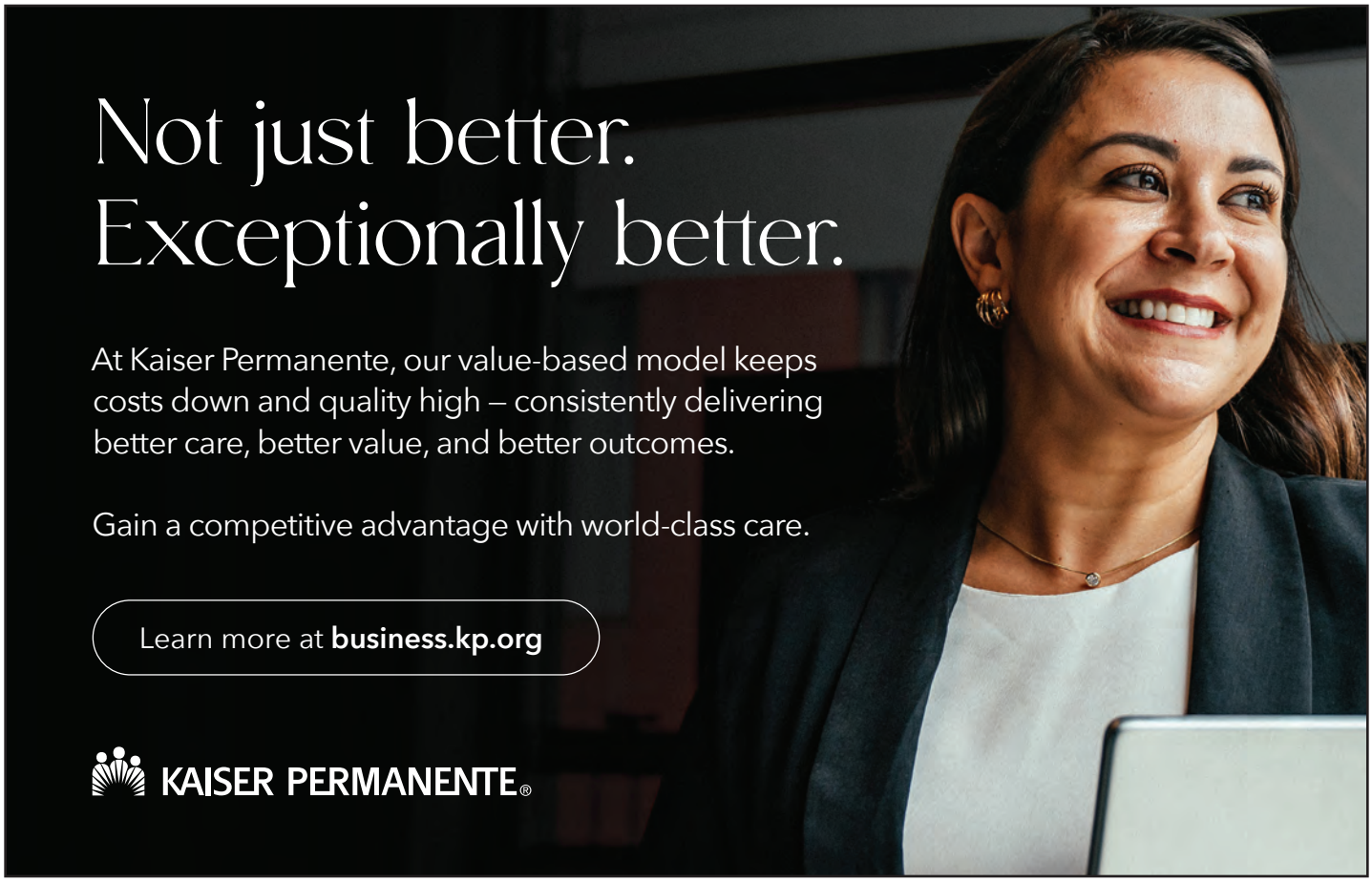
235 beds: Adventist Health Hanford after major expansion.

5,250 employees: Kaweah Health workforce.

1,200 registered nurses: Kaweah Health.

FAST FACTS

- Four hospitals have more than 350 licensed beds.
- State-operated facilities account for the two largest facilities by bed count.
- Community Regional Medical Center added 236 beds between 2024 and 2025.
- Adventist Health Hanford added 62 beds between 2025 and 2026.
- Madera Community Hospital remains operational following its reopening.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Hospitals

In the Central San Joaquin Valley - ranked by number of licensed beds-if tied, by number of employees

	Company name Location	Contact info	# Beds, Licensed	# Physicians # Employees, Local # Nurses, Registered	Special Services Offered	Profit Status IRS Designation	Executive(s) Year Founded
1 (1)	**Coalinga State Hospital** 24511 W. Jayne Ave. Coalinga, Calif. 93210	559-935-4300	1,500	WND WND WND	Cognitive behavioral & relapse prevention training, reconditioning & pharmacological treatments, substance abuse treatment, and more	WND State funded	Brandon Price, executive director 2005
2 (2)	**Porterville Developmental Center** 26501 Ave. 140 Porterville, Calif. 93258	559-782-2222	1,210	WND WND WND	Home residences, training/work sites, auditorium, athletic field, religious center and more	WND State funded	Gabriela Maleszewski, executive director 1953
3 (3)	**Community Regional Medical Center** 2823 Fresno St. Fresno, Calif. 93721	559-459-6000	921	WND WND WND	Neuroscience, orthopedics, primary stroke center, burn, trauma, cardiovascular services, neonatal intensive care, cancer treatment & more	Nonprofit 501c(3)	Craig A. Wagoner, president/CEO 1897
4 (4)	**Kaweah Health** 400 W. Mineral King Ave. Visalia, Calif. 93291	559-624-2000	613	705 5,250 1,200	More than 40 services offered at 48 locations. Kaweah Health is a community health care organization and teaching hospital providing comprehensive care.	Nonprofit Political subdivision of the State of California	Marc Gregory Mertz, CEO 1961
5 (5)	**Saint Agnes Medical Center** 1303 E. Herndon Ave. Fresno, Calif. 93720	559-450-3000	436	WND WND WND	Emergency medicine, acute medical and surgical services, cardiothoracic surgery, robotic and minimally invasive surgery, interventional radiology, wound care and hyperbaric medicine, oncology, interventional cardiology, cardiac rehab, OB emergency department, labor and delivery, antepartum, infusion services, orthopedic surgery, metabolic & bariatric surgery, imaging services, endoscopy	Nonprofit 501c(3)	Gurvinder Kaur, president and market leader 1929
6 (6)	**Valley Children's Hospital** 9300 Valley Children's Place Madera, Calif. 93636-8761	559-353-3000	358	WND WND WND	Valley Children's Healthcare provides Central California's only high-quality, comprehensive care exclusively for children, from before birth to young adulthood. Our network offers highly specialized medical and surgical services to care for children with conditions ranging from common to the highly complex at its 358-bed stand-alone children's hospital. The network includes specialty care centers, pediatric primary care practices and women's health services.	Nonprofit 501c(3)	Todd Suntrapak, president/CEO 1952
7 (7)	**Clovis Community Medical Center** 2755 Herndon Ave. Clovis, Calif. 93611	559-324-4000	352	WND WND WND	24-hour emergency care, women's services/gynecology, breast care services, advanced surgical services, orthopedic, ICU, cancer care, cardiac services	Nonprofit 501c(3)	Craig A. Wagoner, president/CEO 1965
8 (8)	**Adventist Health Hanford** 115 Mall Drive Hanford, Calif. 93230	559-582-9000	235	WND WND WND	Emergency care, intensive care, surgical outpatient and inpatient, cardiovascular services, stroke care, birth center, joint replacement center, laboratory services and imaging services.	Nonprofit 501c(3)	Timothy Haydock, operations executive, Jason Wells, president of Adventist Health Central California Network 2010
9 (9)	**Kaiser Permanente Fresno** 7300 N. Fresno St. Fresno, Calif. 93720	559-448-4500	169	WND WND WND	Oncology, radiology, surgery, women's services and birthing center available with medical-surgical, telemetry and intensive care units	Nonprofit 501c(3)	Tracy Bertagnole, MHA, FACHE, interim senior VP/area manager 1986
10 (10)	**Sierra View Medical Center** 465 West Putnam Avenue Porterville, Calif. 93257	559-784-1110	167	11 1,015 177	Emergency and critical care, stroke care, cancer treatment, cardiac services, surgery, orthopedics and rehabilitation, women's health, urology, wound healing, imaging and laboratory services, pharmacy and respiratory therapy, skilled nursing, and outpatient care.	Nonprofit Non-profit Organization	Donna Hefner, President/CEO 1958
11 (12)	**Coalinga Regional Medical Center** 1191 Phelps Ave. Coalinga, Calif. 93210	559-821-6100	123	WND WND WND	Emergency Medical Services, Inpatient Medical Services, Swing Bed Services, DPS SNF, Rural Health Clinic, Outpatient Medical Services, Outpatient Physical Therapy	Profit WND	Amardeep Brar, CEO, John Esteban, quality director, Allen Ackley, director of nursing 1938
12 (13)	**Adventist Health Tulare** 869 N. Cherry St. Tulare, Calif. 93274	559-688-0821	108	WND WND WND	108-bed acute care facility, 24-hour emergency care, inpatient and outpatient surgical services, intensive care, imaging (newly upgraded CT and MRI), clinical laboratory services and now offering outpatient cardiovascular services.	Nonprofit N/A	Jason Wells, president Adventist Health Central California Network 2018
13 (14)	**Madera Community Hospital** 1250 E. Almond Ave. Madera, Calif. 93637	559-675-5555	103	WND WND WND	Expedited symptom diagnosis & medical treatment, including onsite laboratory and x-ray services	WND 501c(3)	Sony Sidhu, CEO 1971
14 (15)	**San Joaquin Valley Rehabilitation Hospital** 7173 N. Sharon Ave Fresno, Calif. 93720	559-436-3600	62	WND WND WND	Stroke, amputation, spinal cord injury, speech therapy, balance & dizziness, brain injury	WND LLC	Eric Mueller, CEO 1991
15 (16)	**Adventist Health Reedley** 372 W. Cypress Ave. Reedley, Calif. 93654	559-638-8155	49	WND WND WND	Primary care, specialty care, dental, pediatrics, behavioral health	Nonprofit 501(c)3	Jason Wells, president of Adventist Health in the Central Valley 2011
16 (17)	**Fresno Surgical Hospital** 6125 N. Fresno St. Fresno, Calif. 93710	559-431-8000	27	WND 368 WND	Delivers affordable, advanced care designed to promote comfort, relaxation, and healing. Surgeons work hard to meet each patient's individual needs	WND Limited partnership	Joe Clark, CEO, Josh Lamb, regional vice president 1984
17 (18)	**Central Star – Psychiatric Health Facility** 4411 Kings Canyon Rd #319 Fresno, Calif. 93702	559-892-1128	16	WND WND WND	WND	WND WND	Chris Esqueda, CEO
17 (18)	**Exodus Fresno** 4411 Kings Canyon Rd. Fresno, Calif. 93702	559-600-7180	16	WND WND WND	Provides quality psychiatric and chemical dependency treatment services	WND WND	Luana Murphy, president/CEO

WND-Would Not Disclose. NR-Not Ranked. All data has been provided by representatives of the hospitals listed, The Business Journal research and Office of Statewide Health Planning and Development (OSHPD).

Research: Alex Light
Publication Date: June 19, 2026
Email: alex@thebusinessjournal.com



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Cultivating Future Physicians At CHSU's Medical School

100% Residency Match Rate for the Third Consecutive CHSU Cohort of Medical Students!

ABOUT CHSU COLLEGE OF OSTEOPATHIC MEDICINE

The California Health Sciences University (CHSU) medical school campus in Clovis continues to celebrate the achievements of its medical students, graduates, faculty, and leadership with the local community. Here is a snapshot of CHSU College of Osteopathic Medicine matriculated medical students since inception:

88% from California

35% from Central Valley

CLASSES OF 2024, 2025 & 2026 - BY THE NUMBERS

100% Residency Match Rate from all three cohorts

306 Graduates Now Serving as Resident Physicians

Primary Care Specialties 65%

California Residencies 70%

Central Valley Residencies 29%

> *"We are proud that a large number of CHSU medical school graduates are completing residencies locally - especially in primary care specialties – to help advance our mission to train physicians here in the Central Valley and provide more equitable access to health care.*
>
> **John Graneto, DO**
> Dean, College of Osteopathic Medicine

CLINICAL TRAINING

CHSU medical students receive training during clinical clerkships in years three and four of medical school with:

1,200+ physician preceptors and sites

16 medical groups within the Central Valley

200+ physicians who joined CHSU as clinical faculty since its inaugural cohort began clinical clerkship rotations.

NEW PM&R RESIDENCY PROGRAM

CHSU leadership and faculty are helping to establish local residency programs to help increase the number of physicians in the region. CHSU partnered with the United Health Centers of the San Joaquin Valley to create the first Physical Medicine and Rehabilitation (PM&R) residency program in the Central Valley. The program has received Initial Accreditation from the Accreditation Council for Graduate Medical Education (ACGME) with approval to train up to six residents, with the first two second-year residents starting in July 2026. This important PM&R residency plays a key role in preparing physicians to address rehabilitation and functional health needs in the Central Valley.

CHSU CALIFORNIA HEALTH SCIENCES UNIVERSITY
COLLEGE OF OSTEOPATHIC MEDICINE

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File photo | Community Regional Medical Center in Downtown Fresno remains the Valley's largest provider of charity care.

Hospital charity care surges in Valley as safety-net burden grows

By TBJ Staff

Central San Joaquin Valley hospitals are providing significantly more charity care than they were just a few years ago, highlighting the growing financial strain facing both healthcare providers and uninsured patients.

Community's role

Community Regional Medical Center remains the Valley's largest provider of charity care by a wide margin. The Fresno-based hospital reported writing off $94.07 million in patient bills as charity care in 2024, up from $67.5 million in the previous reporting period and $57.5 million just two years earlier. The increase reflects Community Regional's role as the region's primary safety-net hospital and trauma center, serving a disproportionate share of uninsured and underinsured patients.

Clovis Community Medical Center recorded one of the largest percentage increases among major hospitals. Charity care climbed from $12.69 million in 2023 to $20.79

Hospitals | Page 16

Hospital Charity Care

In the Central San Joaquin Valley - ranked by amount of patient medical bills - charity care - written off between January 1, 2024 through December 31, 2024

2025 2024	Name of hospital Address	Phone	Amount of charity care Unpaid medical bills	Operating revenue	Indigent inpatient discharges Total discharges	Indigent outpatient visits Total outpatient visits	Top local executive Yr. founded locally
1 (1)	**Community Regional Medical Center** 2823 Fresno St. Fresno, CA 93721	559-459-6000	$94.07 million $64.91 million	WND	547 38,107	27,165 307,008	Craig A. Wagoner, president/ CEO 1897
2 (3)	**Clovis Community Medical Center** 2755 Herndon Ave. Clovis, CA 93611	559-324-4000	$20.79 million $26.27 million	$757.57 million	65 21,920	3,884 240,572	Craig A. Wagoner, president/ CEO 1965
3 (2)	**Kaweah Health** 400 W. Mineral King Ave. Visalia, CA 93291	559-624-2000	$17.15 million $10.05 million	$868.84 million	150 23,885	4,398 610,263	Marc Gregory Mertz, CEO 1961
4 (5)	**Saint Agnes Medical Center** 1303 E. Herndon Ave. Fresno, CA 93720	559-450-3000	$11.83 million $5.62 million	$621.93 million	33 25,436	248 170,429	Gurvinder Kaur, president and market leader 1929
5 (6)	**Kaiser Permanente Fresno** 7300 N. Fresno St. Fresno, CA 93720	559-448-4500	$10.33 million $56,039	$501.22 million	0 8,049	0 287,215	Tracy Bertagnole, MHA, FACHE, interim senior VP/area manager 1986
6 (4)	**Adventist Health Hanford** 115 Mall Drive Hanford, CA 93230	559-582-9000	$5.8 million $11.51 million	$445.63 million	4 9,757	62 255,476	Timothy Haydock, operations executive, Jason Wells, president of Adventist Health Central California Network 2010
7 (7)	**Adventist Health Reedley** 372 W. Cypress Ave. Reedley, CA 93654	559-638-8155	$4.16 million $244,815	$223.49 million	0 1,662	7,897 605,120	Jason Wells, president of Adventist Health in the Central Valley 2011
8 (8)	**Adventist Health Tulare** 869 N. Cherry St. Tulare, CA 93274	559-688-0821	$1.89 million $3.37 million	$76.08 million	1 1,896	397 35,773	Jason Wells, president Adventist Health Central California Network 2018
9 (9)	**Valley Children's Hospital** 9300 Valley Children's Place Madera, CA 93636-8761	559-353-3000	$310,556 $13.29 million	$810.78 million	5 10,080	70 466,820	Todd Suntrapak, president/ CEO 1952
10 (10)	**Sierra View Medical Center** 465 West Putnam Avenue Porterville, CA 93257	559-784-1110	$118,661 $4.18 million	$162.3 million	0 5,283	0 164,184	Donna Hefner, President/CEO 1958

ND-Not Disclosed. All data has been provided by The Business Journal research and the Department of Health Care Access and Information. Unpaid medical bills represents the amount of medical bills determined uncollectible.

Research: Alex Light
Publication Date: Nov. 14, 2025
Email: alex@thebusinessjournal.com

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Discharge data reveal competitive dynamics for hospitals

By TBJ Staff

The Central San Joaquin Valley's hospital market continues to evolve as patient volumes shift among major providers, according to three years of discharge data that reveal changing competitive dynamics across the region.

Community Regional Medical Center remains the Valley's largest hospital by a wide margin, reporting 34,975 discharges in 2024. That figure was down from 37,441 in 2023 but remained slightly above its 2022 total of 34,851 discharges.

While Community Regional maintained its dominant position, some of the most notable growth occurred elsewhere.

Hospital discharge growth

Saint Agnes Medical Center posted the strongest three-year increase among the region's major hospitals. The Fresno hospital grew from 22,431 discharges in 2022 to 24,086 in 2023 before jumping to 29,011 in 2024. The nearly 30% increase since 2022 reflects one of the most significant volume gains in the market.

Clovis Community Medical Center also continued its steady rise. Discharges increased from 18,234 in 2022 to 19,739 in 2023 and reached 21,911 in 2024. The hospital added nearly 3,700 annual discharges over the three-year period.

Kaweah Health followed a similar trajectory. After reporting 23,915 discharges in 2022, the Visalia-based system recorded 23,051 in 2023 before climbing sharply to 27,343 in 2024. The increase pushed Kaweah well ahead of most competitors and solidified its position among the Valley's largest healthcare providers.

The rankings suggest healthcare demand remains strong throughout the region despite ongoing challenges facing hospitals statewide, including workforce shortages, reimbursement pressures and rising operating costs.

Specialty role

Specialty providers also continue to play a critical role.

Valley Children's Healthcare remained one of the Valley's busiest institutions, reporting more than 10,000 discharges in 2024 and maintaining its position as the region's leading pediatric provider. Behavioral health providers, including Community Behavioral Health Center and newcomer River Vista Behavioral Health, point to growing demand for mental health services.

Not every provider experienced growth. Kaiser Permanente Fresno reported 8,448 discharges in 2022, 8,542 in 2023 and 7,959 in 2024, while Fresno Heart & Surgical Hospital also saw volumes decline over the most recent year.

Another noteworthy development is the return of Madera Community Hospital to the rankings following its reopening efforts, restoring healthcare access for portions of Madera County.

Taken together, the data show a healthcare market that is becoming increasingly competitive. Community Regional remains the Valley's largest hospital, but sustained growth at Saint Agnes, Clovis Community and Kaweah Health suggests patient volumes are becoming more broadly distributed among the region's major providers.



Photo by Ben Hensley | Saint Agnes Medical Center in Fresno reported 29,011 patient discharges in 2024, a nearly 30% increase from 2022, making it one of the fastest-growing hospitals in the Central San Joaquin Valley in that metric.

Hospitals | From 14

million in 2025, a nearly 64% increase over the three-year period. The hospital also reported increases in both inpatient discharges and outpatient visits, suggesting growing demand for services across the Fresno-Clovis market.

Kaweah sees decline

At Kaweah Health in Visalia, charity care reached $24.55 million in 2024 before falling to $17.15 million in 2025. Even with the decline, the health system remains one of the region's largest providers of uncompensated care. Kaweah continues to serve more than 600,000 outpatient visits annually while operating one of the largest hospital networks in Tulare County.

Saint Agnes Medical Center also experienced significant fluctuations. Charity care declined from $20.45 million in 2023 to $11.83 million in 2025, while bad debt write-offs dropped dramatically from more than $23 million to $5.62 million.

Kaiser Permanente Fresno reported one of the most notable shifts. Charity care more than doubled from $4.92 million in 2023 to $10.33 million in 2025, while unpaid medical bills nearly disappeared, dropping from $4.8 million to just $56,039.

Smaller facilities give

Among smaller facilities, Adventist Health hospitals in Hanford, Reedley and Tulare continued to provide millions of dollars in free care despite operating in smaller rural markets. Reedley alone reported nearly 8,000 indigent outpatient visits in 2025.

Overall, the data illustrates the difficult balancing act hospitals face. While many facilities are seeing increased patient volumes and rising operating costs, they are simultaneously providing millions of dollars in uncompensated care. With healthcare affordability remaining a challenge for many Valley residents, charity care is likely to remain a critical component of hospital operations throughout the region.



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559.203.6660

Dinuba Community Health Center
888 N. Alta Avenue
559.595.1000

Dinuba Community Health Center
Behavioral Health Services
920 N. Alta Avenue
559.595.1000

Golden Plains Unified School District Community Health Center - Tranquillity
6171 S. Daniels Avenue
559.364.2984

San Joaquin Health Center
21890 W. Colorado Ave
559.693.2462

Kerman Dental Center / Valley Optometric Center
942 S. Madera Ave
559.364.2980

Firebaugh Community Health Center
689 N Street
559.659.3037

Kingsburg Community Health Center
121 W. Sierra Street
559.326.5320

Kerman Unified School District Community Health Center
702 S. Eighth Street
559.364.2975

Bishop Community Health Center
459 W. Line Street, Suite C
760.784.7020

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Hospital Discharges

In the Central San Joaquin Valley - ranked by number of discharges in 2024

	Name of hospital Address	Total Discharges 2024/2023	Surgical Discharges 2024/2023	Intensive Care Discharges 2024/2023	Perinatal Discharges 2024/2023	Pediatric Discharges 2024/2023	Number of licensed beds	Administrator Title Year founded locally
1 (1)	**Community Regional Medical Center** 2823 Fresno St. Fresno, CA 93721	34,975 37,441	26,934 25,948	961 897	4,379 3,616	654 811	791	Craig A. Wagoner, president/CEO 1897
2 (2)	**Saint Agnes Medical Center** 1303 E. Herndon Ave. Fresno, CA 93720	29,011 24,086	23,942 18,320	356 416	4,260 4,799	0 0	436	Gurvinder Kaur, president and market leader 1929
3 (3)	**Kaweah Health** 400 W. Mineral King Ave. Visalia, CA 93291	27,343 27,469	4,334 3,889	484 505	4,838 4,773	466 508	613	Marc Gregory Mertz, CEO 1961
4 (4)	**Clovis Community Medical Center** 2755 Herndon Ave. Clovis, CA 93611	21,911 19,739	16,853 14,708	477 383	4,321 4,352	WND WND	352	Craig A. Wagoner, president/CEO 1965
5 (5)	**Valley Children's Hospital** 9300 Valley Children's Place Madera, CA 93636-8761	10,077 9,574	0 4	163 288	0 0	8,723 0	358	Todd Suntrapak, president/CEO 1952
6 (7)	**Adventist Health Hanford** 115 Mall Drive Hanford, CA 93230	8,239 7,915	5,669 5,458	190 194	2,380 2,263	WND WND	173	Timothy Haydock, operations executive, Jason Wells, president of Adventist Health Central California Network 2010
7 (6)	**Kaiser Permanente Fresno** 7300 N. Fresno St. Fresno, CA 93720	7,959 8,542	5,872 6,433	158 163	1,714 1,697	0 WND	169	Tracy Bertagnole, MHA, FACHE, interim senior VP/area manager 1986
8 (8)	**Sierra View Medical Center** 465 West Putnam Avenue Porterville, CA 93257	5,355 5,199	3,963 3,781	120 119	1,174 1,232	WND WND	167	Donna Hefner, President/CEO 1958
9 (9)	**Fresno Heart & Surgical Hospital** 15 East Audubon Dr. Fresno, CA 93720	3,131 3,650	3,030 3,516	WND WND	WND WND	WND WND	57	Craig A. Wagoner, president/CEO 2003
10 (10)	**Community Behavioral Health Center** 7171 N. Cedar Ave. Fresno, CA 93720	2,689 2,546	WND WND	WND WND	WND WND	WND WND	73	Craig A. Wagoner, president/CEO WND
11 (11)	**Adventist Health Tulare** 869 N. Cherry St. Tulare, CA 93274	1,853 1,877	1,703 1,531	111 132	39 214	0 WND	108	Jason Wells, president Adventist Health Central California Network 2018
12 (12)	**Adventist Health Reedley** 372 W. Cypress Ave. Reedley, CA 93654	1,639 1,694	493 487	WND WND	1,146 1,207	WND WND	49	Jason Wells, president of Adventist Health in the Central Valley 2011
13 (13)	**San Joaquin Valley Rehabilitation Hospital** 7173 N. Sharon Ave Fresno, CA 93720	1,614 1,509	WND WND	WND WND	WND WND	WND WND	62	Eric Mueller, CEO 1991
14 (NR)	**River Vista Behavioral Health** 40886 Goodwin Way Madera, CA 93636	1,472 WND	WND WND	WND WND	WND WND	WND WND	128	Qiana Hines-Taylor, CEO WND
15 (14)	**Adventist Health Selma** 1141 Rose Ave. Selma, CA 93662	1,310 1,355	1,265 1,305	45 50	0 WND	WND WND	62	Jason Wells, president of Adventist Health in the Central Valley 2005
16 (NR)	**Madera Community Hospital** 1250 E. Almond Ave. Madera, CA 93637	757 WND	WND WND	WND WND	WND WND	WND WND	106	Sony Sidhu, CEO 1971
17 (17)	**Central Star – Psychiatric Health Facility** 4411 Kings Canyon Rd #319 Fresno, CA 93702	512 457	WND WND	WND WND	WND WND	WND WND	16	Chris Esqueda, CEO WND
18 (16)	**Coalinga Regional Medical Center** 1191 Phelps Ave. Coalinga, CA 93210	398 510	348 452	0 0	0 0	0 0	123	Amardeep Brar, CEO, John Esteban, quality director, Allen Ackley, director of nursing 1938
19 (20)	**Coalinga State Hospital** 24511 W. Jayne Ave. Coalinga, CA 93210	173 132	0 WND	0 WND	0 WND	0 WND	1,500	Brandon Price, executive director 2005
20 (19)	**Porterville Developmental Center** 26501 Ave. 140 Porterville, CA 93258	102 147	6 WND	WND WND	WND WND	WND WND	607	Gabriela Maleszewski, executive director 1953

WND-Would Not Disclose. NR-Not Ranked. All data has been provided by representatives of the hospitals listed, The Business Journal Research and the Office of Statewide Health Planning and Development.

Research: Alex Light
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Email: alex@thebusinessjournal.com

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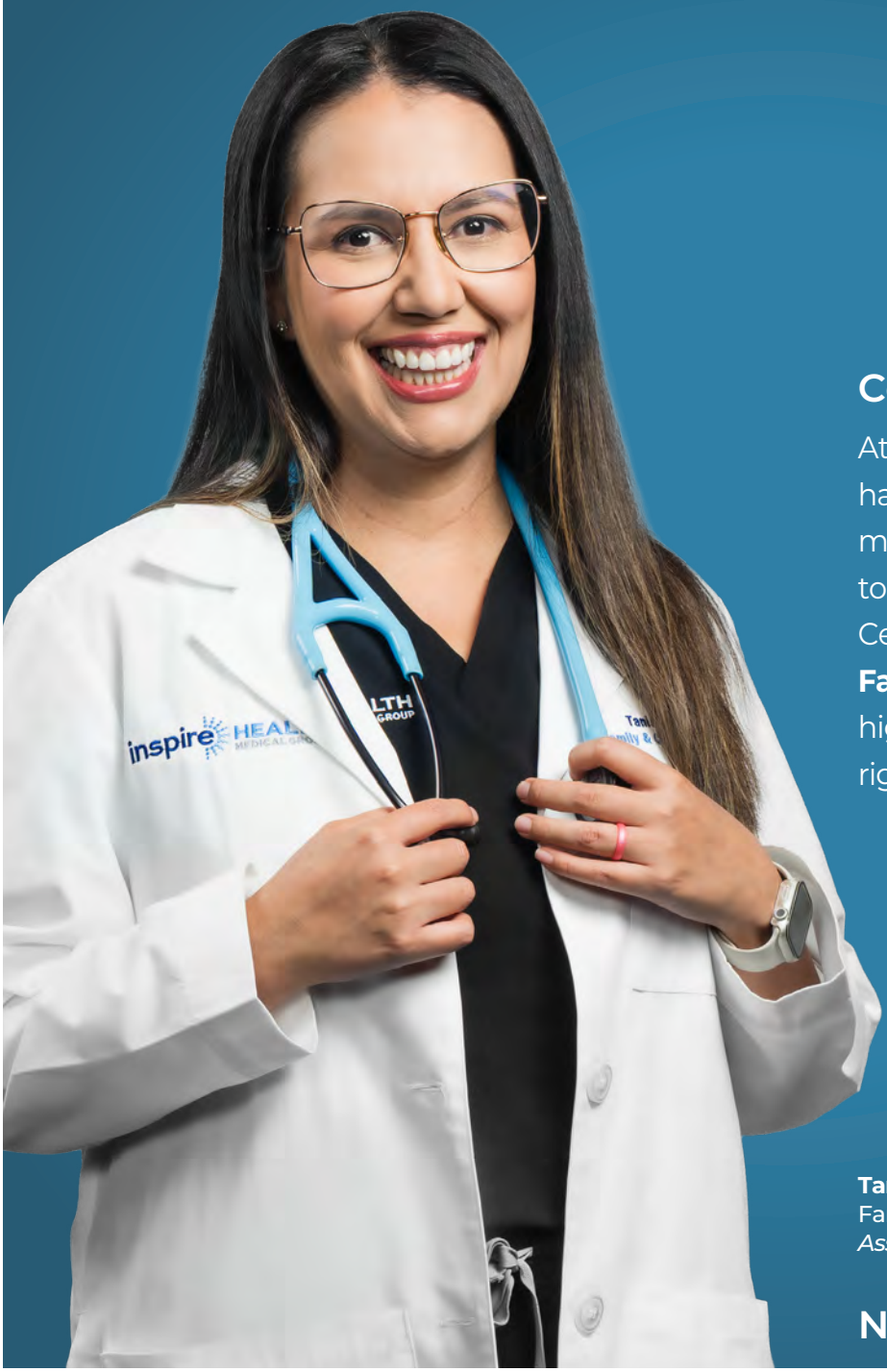

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1 in 4

Missed medical appointments in America are caused by transportation barriers.

5.8M

Americans go without needed medical care every year because they cannot get there.

47

Doctors per 100,000 residents in the Central Valley — less than half the recommended ratio.

Healthcare does not fail only inside the exam room. It fails in the gap between appointment and arrival.

A care plan can be approved. A provider can be ready. A facility can have the capacity.

But if the patient does not get there, the system loses time, trust, and money. In the Central Valley, where access is already stretched, transportation is not a convenience issue. It is healthcare infrastructure. You know the legacy broker pattern: long hold times, no-show drivers, dispatchers in another time zone, and staff doing the broker's job while patients pay the price.

Axis Path was built to compete on the standard that actually matters: the patient is on time.

"The patient is on time. *Every time.* Or we are not doing our job."

Non-emergency medical transportation, rebuilt in Fresno for health plans, hospitals, dialysis centers, treatment clinics, adult day care, skilled nursing, rehab, and care teams across the Central Valley.

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Six reasons Central Valley healthcare facilities are switching to Axis Path.

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Every ride is dispatched, routed, and re-optimized in real time by a platform built for healthcare — not retrofitted for it.

Transparency AI replaces the black box.

Facilities, patients, and families get a real-time view of every ride: driver, route, ETA, status, and updates as they happen.

Dedicated support from people who know your facility.

When you call Axis Path, you reach a real person who knows your account, standing orders, patients, and urgency.

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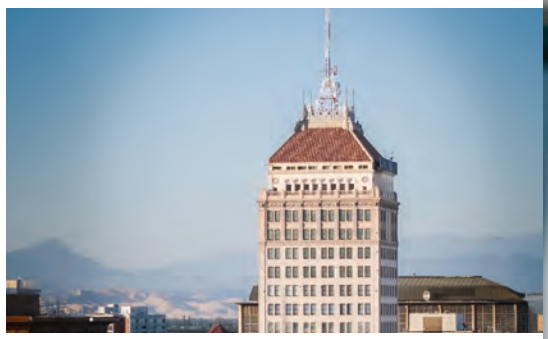

INVESTING IN KIDS, POWERING LOCAL GROWTH

A new independent report shows Valley Children's Healthcare plays a major role in Central California's economy, generating more than $1 billion in annual economic activity.

The Bay Area Council Economic Institute analyzed operations across 12 counties, finding the network is both a regional pediatric care leader and a major economic engine.

Valley Children's Economic Impact Across the Region

6,170 jobs
(full-time equivalent) supported within the Central Valley

$1.02 billion
in annual average economic impact over 2023 and 2024 in the 12 counties related to operations

>$600 million
in annual spending on wages, operating expenses and capital expenditures in the Central Valley

$41 million
in local and state taxes annually, via property and sales taxes

Every $1 spent by Valley Children's Healthcare results in $1.69 of total economic activity created across the Central Valley

"This report matters because a stronger community creates better conditions for children and their families," said Todd Suntrapak, President and CEO of Valley Children's Healthcare. "By creating more than 6,100 jobs, Valley Children's is helping families provide stability, and when communities are stronger, kids have better access to healthcare and a greater opportunity to grow and thrive."

The impact is especially strong in Fresno County, where the organization supports 2,477 jobs and wages support an additional 1,300 jobs, resulting in a total estimated economic impact of $663 million. The median wage for Valley Children's employees is nearly 50% higher than the average annual wage within the Fresno Metropolitan Statistical Area.

"Having 75% of all Valley Children's employees living in Fresno County is significant for us, because those are doctors, nurses and professional staff who are making a good living at a good-paying job – and they are investing that into our community," said Fresno Mayor Jerry Dyer.

In Madera County, where Valley Children's Hospital is located, the organization is the largest private employer. The report found it supports 1,130 jobs and spends $143 million annually, generating about $230 million in economic activity.

"Having Valley Children's in Madera County is a source of pride and a great honor," said Madera County Supervisor Robert Poythress. "It's a true game changer, not only for the care it provides to kids, but for the jobs and long-term careers it brings to our community."

Valley Children's serves more than 1.3 million children across Central California. The report notes that keeping care local helps retain healthcare spending, expertise and jobs in the region.

"Having an economic footprint that stretches from the Sierra to the Pacific reflects the size and reach of our healthcare network and the role Valley Children's plays in the region's economy," Suntrapak said. "While that strength matters, the most important factor continues to be our commitment to the care and health of children."



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Adobe Stock image | The Tracy warehouse fire highlighted the fragility of the medical supply chain while also demonstrating local providers' ability to adapt and maintain operations despite the disruption.

Tracy warehouse fire reveals health care's next challenge

By Ben Hensley

A warehouse fire that disrupted medical supply deliveries across Northern California in June 2026 served as a reminder that years after COVID-19 exposed weaknesses in the nation's health care supply chain, hospitals throughout the Central Valley continue to face challenges securing the products they need.

The fire at Medline Industries' distribution center in Tracy tested contingency plans at hospitals and health care providers across the region, prompting organizations to evaluate inventory levels, activate alternative supply channels and closely monitor incoming shipments.

While some providers experienced limited disruptions and others reported little impact, the response illustrated the growing importance of supply-chain resilience and reflected how health care systems have evolved since the pandemic exposed gaps in supply networks nationwide.

Supply impact reaches the Valley

Community Health System said approximately 335 supply items were affected by shipment delays tied to the fire, including surgical masks, gloves and other everyday medical supplies. Hospital officials shifted to alternate distribution sources while monitoring inventory levels, a response that has become increasingly familiar for health care providers navigating supply-chain disruptions in recent years.

Community Health System's division president, Danny Davis, said the system canceled a small number of cases as a precaution but that patient care continued safely and without disruption.

Saint Agnes Medical Center reported fewer impacts. Its operations remained normal, and inventory levels were not significantly affected by the disruption.

"Saint Agnes has not been impacted from the Medline fire as other organizations have locally," a spokesperson said. "Our supplies are all in good standing and operations are normal."

Hospital officials said the facility's connection to its parent organization, Trinity Health, helped insulate it from localized supply-chain issues because much of the network extends beyond California.

Medline also took a proactive approach following the fire, contacting clients including Fresno Surgical Hospital, which said its contingency plans rerouted products through Southern California facilities. The response reflects a broader pattern facing health care providers nationwide: a disruption hundreds of miles away can rapidly affect hospitals, clinics and surgical centers serving patients throughout the Valley.

Medline activated a 24-hour command center following the fire, reassigning products previously distributed through Tracy to secondary and tertiary facilities in its network.

"Medical products previously distributed through the Tracy facility have already been reassigned, and the vast majority of order lines have been rerouted to other Medline distribution centers within our regional network to support our customers'

Medline Fire | Page 28



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LEGACY



Legacy Construction CEO Bill Cummings and team members at the groundbreaking ceremony for the WellSpace Health Mental Health Rehabilitation Center in Sacramento.

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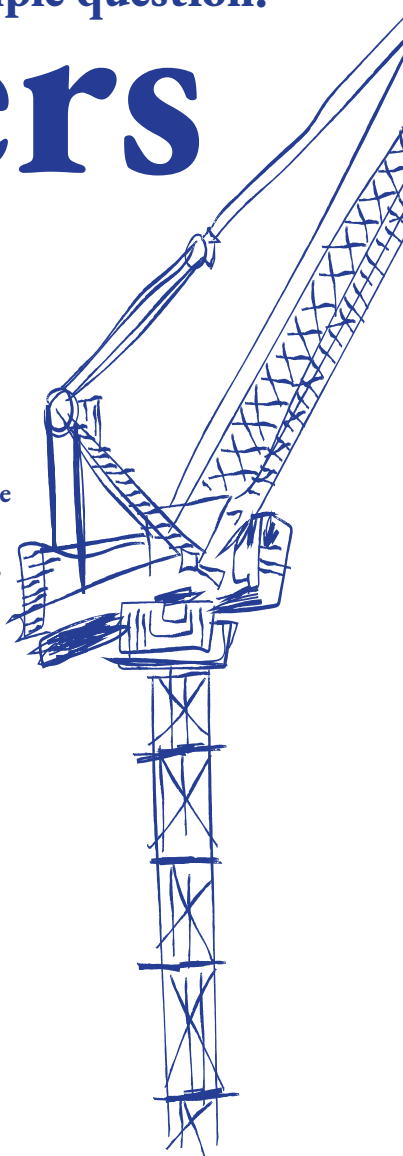
United Health Centers of the San Joaquin Valley facility in Fresno, completed by Legacy Construction in 2025.

Healthcare Construction Has Become One of the Most Important Healthcare Access Strategies in the Central Valley

In California's Central Valley, healthcare facilities are more than buildings. They are access points to care, workforce solutions, economic drivers, and investments in healthier communities.

As population growth increases demand and provider shortages persist, healthcare organizations are under pressure to expand access, modernize facilities, and prepare for the future. Healthcare access begins long before a patient walks through a clinic door—it begins with having a door to walk through.

For many communities throughout the Valley, that challenge has made healthcare infrastructure one of the most important investments healthcare leaders can make.



The Forces Redefining Healthcare Access

1 The Workforce Challenge Isn't Going Away

Healthcare providers across California face persistent workforce shortages, a challenge that is especially acute in the Central Valley's rural and underserved communities.

In response, healthcare organizations are investing in workforce development alongside facility expansion. United Health Centers recently launched an ACGME-accredited Internal Medicine Residency Program to help address the region's physician shortage. Supported by a $2 million state grant, residents train in Fresno and Parlier while caring for underserved patient populations.

As healthcare organizations build sustainable workforce pipelines, healthcare facilities must support physician training, workforce development, and long-term growth in addition to patient care.

2 The Demographic Shift Reshaping the Healthcare Industry

The Central Valley continues to grow, and its healthcare needs are growing with it. As the region's senior population expands, demand is increasing for primary care, specialty services, chronic disease management, and outpatient treatment.

Healthcare organizations are responding with programs such as PACE (Program of All-Inclusive Care for the Elderly) and other community-based care models designed to meet the needs of an aging population.

The facilities being planned and built today are not simply responding to today's patients. They are adapting to how healthcare will be delivered tomorrow.

3 Healthcare Is Moving Closer to Local Communities

For decades, healthcare was largely centered around hospitals and major medical campuses. Today, healthcare systems are investing in outpatient facilities, neighborhood clinics, behavioral health centers, and community-based care models that bring services closer to patients. This shift is especially important in the Central Valley, where transportation challenges, geographic distance, and provider shortages continue to create barriers to care.

By expanding access to primary care, outpatient services, and community-based treatment, healthcare organizations can strengthen community health, reduce capacity pressures on hospitals, and help ensure patients receive care in the most appropriate setting.

4 Health Equity Is Becoming an Infrastructure Conversation

Historically, conversations around health equity focused on insurance coverage, affordability, and clinical services. Today, healthcare leaders increasingly recognize that access itself is an infrastructure issue.

The location of healthcare resources can influence everything from preventive care utilization to continuity of care and long-term health outcomes. When facilities are located closer to underserved populations, barriers to care are reduced and access improves.

In that way, healthcare infrastructure has become a critical component of health equity.



Altura Centers for Health facility in Tulare, completed by Legacy Construction in 2024.

Building Access

Since 2019, Legacy Construction has partnered with healthcare organizations throughout the Central Valley to deliver 45 healthcare facilities, more than 325,000 square feet of healthcare space, and nearly $137 million in healthcare infrastructure investment.

Today, providers operating within those facilities collectively deliver care to more than 324,000 patients annually, more than 92% of whom are low-income, while approximately 1.35 million Central Valley residents live within reach of a Legacy-built healthcare facility.

At Legacy, every project begins with a simple question: **What matters to you?**

Because when healthcare organizations succeed, communities benefit. That is why building matters to us.



Adobe Stock image | Following the pandemic, many providers altered their medical supply strategies, building more resilient supply chains and making extensive efforts to avoid future supply shortages.

Medline Fire | From 24

needs," the company said in a statement.

The company also increased staffing, inventory and transportation capacity, adding trucking resources and third-party carriers to maintain deliveries. While the immediate impact appeared limited, the incident underscored the importance of preparation.

The pandemic playbook

The differing experiences among Valley health care providers reflect changes that occurred throughout the industry in the wake of the COVID-19 pandemic.

According to the American Hospital Association, the pandemic exposed significant vulnerabilities within supply chains, demonstrating how quickly shortages of critical products can affect patient care. Hospitals nationwide struggled to obtain personal protective equipment, medications, testing supplies and other essential products, in many cases competing for limited inventory while global manufacturing and transportation systems faced unprecedented strain.

The AHA wrote in a 2021 supply-chain discussion that hospitals need to forge new relationships with onshore and near-shore suppliers, or invest in dependable companies that can fill their needs during peak surges.

Before COVID-19, many providers emphasized efficiency and cost control, often relying on streamlined supply chains designed to minimize excess inventory. Those systems frequently reduced costs – something Valley and rural providers often find essential – but also left organizations vulnerable to disruptions.

The Central Valley serves a large and growing population spread across urban, suburban and rural communities. With many residents already facing barriers to health care access, service disruptions can be particularly consequential, prompting local health systems to focus increasingly on ensuring critical supplies remain available even when unexpected events occur.

The cost of resilience

Preparing for disruptions is not always simple. Maintaining larger inventories, developing relationships with multiple supply vendors and creating redundant distribution networks often requires additional financial resources.

Research from the National Academy of Medicine notes that shortages can disrupt patient care while increasing costs and burdening health care organizations. Too little inventory can leave providers vulnerable during emergencies; too much can tie up resources and create storage challenges. Resilience is often described in the industry as a balancing act between the two.

The issue extends beyond warehouse fires. In 2024, hospitals across the country faced a shortage of IV fluids after Hurricane Helene disrupted production at a major manufacturing plant in North Carolina. Some providers delayed non-emergency procedures and implemented conservation measures while working to preserve supplies, illustrating how a single disruption can ripple throughout the industry.

While the Medline fire affected distribution rather than manufacturing, the underlying concern is the same: when a critical link in the health care supply network becomes unavailable, providers must adapt quickly to avoid disruptions. For hospitals, resilience increasingly means planning for events that may never happen, while remaining prepared if they do.

Supply disruptions also create administrative burdens of their own. Teams may be required to monitor inventory levels more closely, coordinate with suppliers and identify alternative products when shortages occur, while clinical staff adjust workflows to accommodate changing supply availability.

The Medline fire may ultimately have limited long-term consequences for the Valley. Patient care continued, and alternate supply channels were activated to keep products flowing. But the incident served as another reminder that preparedness remains essential to the region's health care system.

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- UNITED HEALTH CENTERS OF THE SAN JOAQUIN VALLEY

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Adobe stock image | Hospital emergency rooms saw a jump in encounters with homeless patients over the past five years.

Homeless hospital encounters climb across the Central Valley

By Gabriel Dillard

Hospital emergency departments and inpatient units across Fresno, Kings, Madera and Tulare counties saw a rise in encounters with homeless patients over the past five years, according to data from the California Department of Health Care Access and Information, formerly known as the Office of Statewide Health Planning and Development.

ED visits rise after a dip

HCAI releases this data in two-year reporting periods. Across the four-county region, emergency department visits involving homeless patients totaled 25,445 in the 2019-2020 reporting period, dipped slightly to 24,394 in 2021-2022, then rose to 29,563 in 2023-2024 — a 21% increase over the prior period and a 16% increase from five years earlier.

Inpatient stays climb steadily

Inpatient hospitalizations followed a steadier upward path. Homeless inpatient stays totaled 7,479 in the 2019-2020 reporting period, climbed to 8,095 in 2021-2022, then jumped to 10,322 in 2023-2024, a 38% increase over five years.

Saint Agnes leads regional growth

The increases were not evenly distributed. Saint Agnes Medical Center in Fresno recorded the sharpest growth in the region, with homeless ED visits more than doubling from 3,168 in the 2021-2022 reporting period to 6,585 in 2023-2024, and homeless inpatient stays more than doubling over the same span, from 774 to 1,637.

A mixed picture elsewhere

Other facilities told a more mixed story. Kaweah Health Medical Center in Visalia saw homeless ED visits climb from 2,244 to 3,543 between the two most recent reporting periods, even as homeless inpatient admissions there held roughly flat. Adventist Health Hanford in Kings County moved in the opposite direction, with homeless ED visits falling from 1,194 in the 2019-2020 reporting period to 564 in 2023-2024. Madera Community Hospital does not appear in the most recent reporting period, reflecting the facility's closure during that span.

A separate count points the same direction

A different measure of regional homelessness also moved upward over roughly the same span. The Fresno Madera Continuum of Care's 2025 Point in Time Count, a one-night census of sheltered and unsheltered homeless individuals released this month after delays at the federal level, found a 9.2% increase in homelessness across Fresno and Madera counties compared with 2023. FMCoC officials cautioned against reading too much into that figure, noting the data arrived more than a year late and that the organization has since overhauled its counting methodology for 2026, making direct comparisons to prior years difficult.

A methodology caveat of its own

The hospital data carries a similar caution. HCAI changed how it identifies homeless patients starting with the 2023-2024 reporting period, adding a separate homelessness indicator field to the diagnosis-code method used in prior periods. That change means at least part of the increase between the 2021-2022 and 2023-2024 reporting periods may reflect more complete identification of homeless patients in hospital records, rather than a one-to-one increase in homelessness itself.

Even accounting for that change, the five-year hospital trend and the latest PIT Count point in the same direction: sustained pressure on the region's housing and health systems from a growing homeless population.

The hospital data is drawn from HCAI's "Hospital Encounters for Homeless Patients" data set, available through the California Health and Human Services Open Data Portal.

Emergency Department Homeless Encounters

In the Central San Joaquin Valley - ranked by number of homeless emergency department visits for 2023 - 2024

	Name of hospital Address	# Homeless Visits: Age 0-18	# Homeless Visits: Age 19-39	# Homeless Visits: Age 40-59	# Homeless Visits: Age 60+	# Homeless ED Encounters	Administrator Title Year founded locally
1	**Community Regional Medical Center** 2823 Fresno St. Fresno, CA 93721	142	6,107	6,537	1,515	14,301	Craig A. Wagoner, president/CEO 1897
2	**Saint Agnes Medical Center** 1303 E. Herndon Ave. Fresno, CA 93720	21	2,495	3,062	1,007	6,585	Gurvinder Kaur, president and market leader 1929
3	**Kaweah Health** 400 W. Mineral King Ave. Visalia, CA 93291	10	1,223	1,644	666	3,543	Marc Gregory Mertz, CEO 1961
4	**Clovis Community Medical Center** 2755 Herndon Ave. Clovis, CA 93611	25	912	991	287	2,215	Craig A. Wagoner, president/CEO 1965
5	**Sierra View Medical Center** 465 West Putnam Avenue Porterville, CA 93257	16	218	444	126	804	Donna Hefner, President/CEO 1958
6	**Kaiser Permanente Fresno** 7300 N. Fresno St. Fresno, CA 93720	0	245	405	107	757	Tracy Bertagnole, MHA, FACHE, interim senior VP/area manager 1986
7	**Adventist Health Hanford** 115 Mall Drive Hanford, CA 93230	4	155	281	123	563	Timothy Haydock, operations executive, Jason Wells, president of Adventist Health Central California Network 2010
8	**Adventist Health Tulare** 869 N. Cherry St. Tulare, CA 93274	5	183	253	115	556	Jason Wells, president Adventist Health Central California Network 2018
9	**Valley Children's Hospital** 9300 Valley Children's Place Madera, CA 93636-8761	101	12	1	1	115	Todd Suntrapak, president/CEO 1952
10	**Adventist Health Reedley** 372 W. Cypress Ave. Reedley, CA 93654	0	23	31	30	84	Jason Wells, president of Adventist Health in the Central Valley 2011

All data has been provided by the Office of Statewide Health Planning and Development and The Business Journal research.

Research: Alex Light
Publication Date: March 13, 2026
Email: alex@thebusinessjournal.com



The City of Kerman congratulates United Health Centers on their acquisition of the new property at 456 S Madera Ave. in Kerman.

Kerman is proud to host **United Health Centers** main clinic at 517 S Madera Ave. and their newest Urgent Care Clinic at **14271 W Whitesbridge Road.**

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Planning for the People Everyone Depends On

Financial Planning Considerations for Healthcare Professionals

Maria Hernandez had just finished another long shift when she opened her benefits enrollment email. She had been putting off reviewing it for weeks and finally decided to look into it. What started as a simple question about her available benefits quickly became something bigger.

If she increased her retirement contributions, would that leave enough room for student loan payments and emergency savings? Was she making the best use of her health savings account? If her income was one of her household's most important assets, did her employer's disability coverage actually protect enough of it? And with tax season approaching, were all these decisions working together or just happening one at a time?

Maria is not a real client, but her situation is familiar. Many healthcare professionals spend their days caring for others while quietly pushing their own financial lives to the back burner. Physicians, nurses, dentists, pharmacists, therapists, administrators, and other healthcare workers often have demanding schedules, specialized benefits, high responsibility, and very little extra time to sort through financial decisions.

The good news is that financial planning does not have to feel like another language. A few practical steps can help bring more clarity, confidence, and control.

Start with Your Benefits, not Just Your Paycheck

For many healthcare professionals, some of the best financial tools are already available through work. Retirement plans, employer matches, health savings accounts, flex spending accounts, group disability coverage, and life insurance benefits can all play an important role.

The challenge is that benefits enrollment often happens quickly, sometimes between busy workdays, family obligations, and a half-finished cup of coffee. It is easy to click through the options and promise yourself you will review them "later."

A practical first step is to gather your benefits summary and ask a few simple questions: Am I contributing enough to receive any available employer match? Am I using an HSA or FSA if it makes sense for my situation? Do I understand what disability coverage I have and how much of my income it would replace? Are my beneficiary designations up to date?

You do not need to become a benefits expert. You just need to make sure the tools available to you are working in the right direction.

Protect Your Income

Healthcare work often requires years of training, certifications, and experience. Your ability to earn an income may be one of your most important financial assets, especially if other people depend on that income.

That makes disability insurance worth a closer look. Many professionals say, "I have disability coverage through work," but may not know how much of their income it would actually replace. When they check the details, they sometimes find that the basic employer coverage only replaces a fraction of their monthly pay. It is also important to understand the waiting period, how long benefits could last, whether the benefits would be taxable, and whether the coverage follows you if you change jobs.

It is also common to confuse being insured with being fully protected. Life insurance can be important, especially if others depend on your income, but it generally only helps if you pass away. If an illness or injury keeps you from working, life insurance typically will not replace your paycheck. That is where disability coverage matters.

This is not the most exciting part of financial planning. Most people are not rushing home to review disability insurance after a long shift. But protecting your income can be one of the most important steps in protecting your household, your options, and the future you are working so hard to build.

Designate a Job for Your Cash Flow

A strong income does not automatically create financial security. Busy professionals can still feel stretched if money is moving in too many directions without a clear plan.

One helpful approach is to "pay yourself first." Before the month gets busy, automate the dollars that are meant for your future: retirement contributions, emergency savings, debt payments, and savings for specific goals. Once those priorities are handled, the money left over becomes easier to spend with confidence.

This is where budgeting can become simpler. You do not have to track every last cent, judge every coffee, or feel guilty about takeout after a long shift. The goal is to build a system that helps you live beneath your means without relying on willpower every day. If your savings, investing, and debt strategy are already happening in the background, your day-to-day spending has guardrails.

A good starting point is to build an emergency fund, automate savings where possible, and create a clear debt strategy. High-interest debt usually deserves faster attention, while lower-interest debt may need to be balanced against investing and other goals.

Our aim isn't for perfection, but for moving in the right direction.

Invest for the Long Term, Not for the Headline

Healthcare professionals are highly educated, but many received little formal education in personal finance or investing. That can make it tempting to rely on tips from colleagues, social media, or whatever investment idea is being discussed between appointments.

A better foundation is usually simpler: diversify, keep costs reasonable, invest according to your time horizon, and avoid making emotional decisions based on headlines. If your retirement is decades away, short-term market swings should not control your long-term strategy. If retirement is approaching, your investment mix may need to balance growth with stability and income planning.

In other words, the best investment plan is not always the most exciting one. Sometimes the "boring" plan is doing exactly what it is supposed to do.

Plan Ahead for Taxes

Taxes can be a major planning issue for healthcare professionals, especially those with higher incomes, bonuses, side income, partnership income, or practice ownership interests.

Tax filing looks backward. Tax planning looks forward.

Forward-looking tax planning may include retirement contributions, HSA strategy, charitable giving, tax-efficient investing, timing of income, or coordination with a CPA. For practice owners or self-employed professionals, retirement plan design and business structure may also deserve attention.

The key is coordination. Your financial advisor and tax professional should not be working from two different maps.

You Don't Have to Make Every Decision Alone

Healthcare is a team sport. So is financial planning. Healthcare professionals understand better than most that self-diagnosis has limits. A quick online search can be helpful for basic education, but "Dr. Google" rarely understands the full patient history, the nuance of the

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symptoms, or how one decision may affect everything else. The same is often true in financial life.

A retirement calculator, online article, or social media tip may answer one question in isolation, but real planning connects the pieces. Your taxes affect your investments. Your benefits affect your cash flow. Your insurance affects your family's security. Your estate plan affects the people you love.

Just as patients benefit when providers, specialists, and support staff communicate well, your financial life benefits when your advisor, CPA, attorney, and insurance professionals are aligned. The right team can help you sort through decisions, avoid blind spots, and keep your plan moving forward even when life gets busy.

At Portfolio Advisors, Inc., we believe the people who take care of people deserve thoughtful care as well. Financial planning should be approachable, personal, and built around real life.

A Simple Checklist for Healthcare Professionals

Before your next benefits enrollment period, tax deadline, or major career change, consider asking yourself:

- Am I making full use of my employer retirement plan and any available match?
- Do I understand my disability insurance and how my income would be protected?
- Do I have enough emergency savings to handle an unexpected expense or job transition?
- Is my debt repayment strategy coordinated with my savings and investing goals?
- Does my investment strategy match my time horizon and comfort with risk?
- Are my tax planning, retirement planning, and estate planning connected?
- Are my beneficiaries up to date on retirement accounts and insurance policies?

If you are unsure where to start, that is normal. The first step does not have to be dramatic. Sometimes it is simply getting organized, asking better questions, and having a thoughtful conversation.

A Team to Lean On

At Portfolio Advisors, we work with professionals and their families to bring structure, clarity, and confidence to financial decisions. Whether you are early in your career, managing a growing household, approaching retirement, or balancing the demands of leadership, our team can help you build a plan that fits your life.

We do not just help you think about money. We help you think about what your money is meant to do.

Ready to take the next step? Reach out to Tina or AJ at Portfolio Advisors to start a conversation.

Advisor Profiles

Tina Mistry, CFP® is the President and CEO of Portfolio Advisors, Inc. in Fresno, CA, where she leads with a deep passion for empowering individuals and families through financial planning. Tina has been serving clients since 2006 and received her CFP® certification in 2012. Her 19+ years in the financial services industry equip her with the experience and perspective to help healthcare professionals navigate complex financial decisions with confidence. To contact her, visit www.portadvisors.com, call (559) 432-8400 ext. 3, or meet at 7571 N. Remington Ave., Suite 105, Fresno, CA 93711.

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Community Health Workers Help Bridge the Gap to Care

READING and BEYOND

Healthcare leaders across the Central Valley spend a great deal of time focused on what happens inside hospitals and clinics, but Sandra Flores believes some of the most important work happens long before a patient walks through those doors.

As CEO of Reading and Beyond, Flores leads an organization dedicated to providing life-changing learning pathways for children, youth and adults to become self-reliant and engaged community members. Through that work, she has become increasingly convinced that community health workers are one of the most effective ways to connect residents with care before health concerns become emergencies.

Large portions of the Valley's population face barriers that can make preventive care difficult to access, whether because of transportation challenges, economic pressures, language barriers or a lack of trust in institutions. When care is delayed, health conditions often become more complicated and more expensive to treat.

"We have a shared interest and a shared future in serving this region," Flores said.

Why Community Health Workers Matter

That shared interest is what prompted Flores to think differently about how community organizations and healthcare systems might work together.

Through Reading and Beyond's health and wellness programs, community health workers help residents navigate healthcare systems, connect with providers and access resources that support healthier lives. Sometimes that means helping someone find a doctor or arrange transportation to an appointment. In other cases, it involves working with families over time to establish goals related to diabetes management, asthma or other chronic health concerns.

The approach is built on trust and long-standing relationships in the community, Flores said. During the COVID-19 pandemic, public agencies and healthcare organizations relied heavily on trusted community voices to reach populations that were hesitant to engage with traditional systems.

"Community health workers already had the rapport and already had the trust," Flores said.

That trust is at the center of Wellness Wednesday, a free community program held throughout the year at the Mosqueda Center. The Central Valley Health Policy Institute developed the education modules and pre- and post-evaluations and trained community health workers to lead the 12 workshops, which are offered in both English and Spanish. Participants also receive healthy snacks and $25 gift cards as incentives.

Building Health Through Education and Support

Today, that trust matters even more as families face uncertainty and more immediate pressures that can make healthcare easier to delay. Flores said that when families put off preventive care, the effects often show up in other parts of their lives, including school, work and their ability to manage chronic health conditions.

Those challenges have helped shape Reading and Beyond's approach to health and wellness. Through Wellness Wednesdays, community health workers provide education on topics ranging from diabetes and high blood pressure to nutrition, mental health and navigating the healthcare system.

Flores pointed to a recent evaluation by the Central Valley Health Policy Institute that found participants increased their health knowledge after taking part in the Reading and Beyond's Wellness Wednesday workshops, particularly in areas such as diabetes, high blood pressure and heat-related illness. The program reached residents in several Fresno neighborhoods.

For Flores, the findings reinforce the value of meeting people where they are and delivering information through trusted community health workers who understand the neighborhoods and families they serve.

A Shared Opportunity for the Central Valley

Flores also sees an opportunity for healthcare providers and community organizations to work more strategically together.

Hospitals already possess extensive information about the conditions affecting their patients and the communities they serve. Community organizations often have deep relationships in those same neighborhoods and a firsthand understanding of the challenges residents face in accessing care.

Rather than operating separately, she believes those strengths can complement one another.

"I want an opportunity to reimagine how we as community leaders can collectively support and improve better health outcomes for our children, youth, and families." Flores said. "We can help."

For more information about Wellness Wednesday, including upcoming workshops and registration details, visit https://readingandbeyond.org or call 559 342 8600. You can also learn more about the program's impact by viewing the Wellness Wednesday evaluation at https://readingandbeyond.org/health-wellness/.



Community Health Clinics

In the Central San Joaquin Valley, ranked by number of federally-qualified facilities, if tied by number of patients treated

	Name of health clinic Zip	Phone	# Facilities	Services provided	Service areas	Person in charge
1 (3)	**United Health Centers of the San Joaquin Valley** 3875 W. Beechwood Ave. Fresno, 93711	559-646-6618	52	Family medicine, pediatrics, internal medicine, women's health, dental, behavioral health, substance abuse, optometry, tele-dermatology, tele-psychiatry, in-house pharmacy, laboratory, x-ray, urgent care, Covid -19 testing and vaccinations, specialty care including cardiology, pulmonary, nephrology and gastroenterology services, free patient transportation and more	Fresno, Kings and Tulare counties	Justin Preas, president/CEO
2 (2)	**Family HealthCare Network** 305 E. Center Ave. Visalia, 93291	559.741.4352	39	Family medicine, internal medicine, obstetrics & gynecology, pediatrics, adult and children's dentistry, behavioral health, chiropractic care, optometry, pharmacy, podiatry, allergy, cardiology, ears, nose, & throat, endocrinology, gastroenterology, general surgery, hematology, infectious disease, neurology, ophthalmology, orthopedic surgery, rheumatology, urology, vascular surgery, community health & outreach, enrollment & eligibility assistance, Program of All-Inclusive Care for the Elderly (PACE)	Fresno, Kings, Kern, and Tulare counties	Kerry Hydash, president/CEO
3 (4)	**Aria Community Health Center** 555 E St Lemoore, 93245-2617	559-386-4500	30	Dental, chiropractic and medical care. Health education, interpreter services, pharmacy and other specialty services	Fresno, Kings and Tulare counties	John Blaine, CEO
4 (5)	**Camarena Health** 730 N. I Street, Suite 202 Madera, 93637	559-664-4000	26	Medical, dental, behavioral health, pediatric services, women's health and OB/GYN services, optometry, chiropractic care, health education & nutrition services, lab, pharmacy, and insurance enrollment, mobile health services, and specialty care services	Madera, Oakhurst, Coarsegold, Chowchilla, Mariposa and Fresno	Paulo Soares, CEO
5 (6)	**Valley Health Team, Inc.** 21890 W. Colorado Ave. San Joaquin, 93660	559-693-2462	20	We offer comprehensive care in one convenient location, including primary medical care, dermatology, podiatry, chiropractic, dental, optometry, behavioral health, in-house X-ray and lab testing.	Fresno, Kings, Tulare, and Inyo counties	Soyla A. Reyna-Griffin, CEO
6 (7)	**Omni Family Health** 4900 California Avenue, Suite 400-B Bakersfield, 93309	661-459-1900	13	General medicine, pediatrics, internal medicine, women's health, family medicine, dental care and specialty programs such as the Breast & Cervical Cancer Early Detection Program	Fresno, Tulare and Kern counties	Francisco L. Castillon, MPA, CEO
7 (7)	**Clinica Sierra Vista** 1945 N. Fine Ave., Ste. 116 Fresno, 93727	559-457-5800	12	Medical, behavioral health, dental, family support services	Fresno, Kern counties	Dr. Olga Meave, CEO
8 (9)	**Altura Centers for Health** 1134 E Cartmill Avenue Tulare, 93274	559-686-9097	9	Family medicine, pediatrics, obstetrics, dental, chiropractic care, behavioral health and breastfeeding support services	Tulare County	Graciela Soto, CEO
9 (14)	**Community Health Centers of America** 5320 State Highway 49 N # 1-3 Mariposa, 95338	209-497-5006/ 209-966-2344	3	Family & primary practice, psychiatry, pain management, dental clinic, podiatry, neurology, SNF services, 24/7 provider center, gastroenterology, endocrinology, cardiology, chiropactic	Madera, Sacramento, Merced, Mariposa, Kern, and Fresno counties	Naresh Channaveerappa, CEO
9 (11)	**Complete Care Community Health Center** 3000 S Robertson Blvd, Ste 280 Los Angeles, 90034-3144	559-594-3144	3	Rheumatology	Tulare County	Yury Akopyan, CEO

WND-Would Not Disclose. ND-Not Disclosed. NR-Not Ranked. All data has been provided by representatives of the businesses listed, the Health Resources & Services Administration and The Business Journal research.

Research: Alex Light
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Email: alex@thebusinessjournal.com

READINGandBEYOND



Our Mission

Reading and Beyond provides life-changing learning pathways for children, youth, and adults to become self-reliant and engaged community members.

Stronger families. Healthier communities.

Through Reading and Beyond's Health and Wellness Pathway.

Reading and Beyond has worked with partners like the Fresno County Department of Public Health to diminish health disparities and promote health equity through community outreach, education, care coordination, and culturally responsive support services. Through partnerships like this, Reading and Beyond helps organizations extend their impact and connect more families to meaningful support.

Scan QR to Learn More **readingandbeyond.org** **(559) 342-8600**

Senior Living

In the Central San Joaquin Valley, ranked by number of total beds. If tied, by number of licensed beds.

	Name of facility	Total Beds # Beds, Licensed	Services Amenities	Payment types accepted	Community classification	Employees Physicians, RNs, LPNs	Locations Year founded	Top local executive Phone
1 (2)	**Palm Village Retirement Community** 703 W. Herbert Ave. Reedley,93654	270 270	Independent living, assisted living, assisted living/memory care, skilled nursing & rehabilitation, Alzheimer's/dementia care	Private, Medicare, Medi-Cal, Manage Care, VA benefits	Residential Care Facility for the Elderly	241 WND	WND 1942	Jim Higbee, president & CEO 559-638-6933
2 (3)	**Fairwinds-Woodward Park** 9525 N. Fort Washington Road Fresno,93730	250	Resort style community featuring 250 affordably priced apartments under one roof. Offers independent and assisted living services that accommodate aging in place.	Private, VA benefits, long term care insurance	Senior Retirement Community (60+)	WND WND	WND 2001	Sabrina Samora, Sales Manager, Desiree Valero, General Manager 559-434-6444
3 (6)	**The Grove** [1] 7444 N. Cedar Ave. Fresno,93720	98 76	Meals, laundry, housekeeping, transportation, activities, memory care, hospice and more	Private, long-term care insurance, VA benefits, companion living rate options	Residential Care Facility for the Elderly	72 WND	WND 1981	Norshell Brewer, executive director 559-325-8170
4 (5)	**Central California Nikkei Foundation dba Vintage Gardens** 540 S. Peach Ave. Fresno,93727	80	Three meals a day, snacks, daily assistance, housekeeping and laundry, transportation, health and medical services, wireless call, WiFi systems, exercise and more	Private, VA benefits, long term care insurance	Residential Care Facility for the Elderly	WND WND	WND 2005	Louis Michael Gebbia, executive director 559-252-4036
4 (1)	**The Vineyards California Armenian Home** 6694 E. Cesar Chavez Blvd. Fresno,93727	80	Offers a full continuum of care for seniors. Independent and assisted living, dedicated memory support and skilled nursing	Private pay, month-to-month rentals, VA aid, attendance, long term care insurance options	Continuing care retirement community, Residential Care Facility for the Elderly	WND WND	WND 1952	Dennis Bacopulos, CEO 559-835-0801
6 (8)	**Cedarbrook Memory Care Community** 1425 E. Nees Ave. Fresno,93720	68	Alzheimer's Memory Care with 24/7 licensed nurses, respite and hourly care with 2 week minimum stay required, family-owned and operated	Private pay and long-term care insurance	Memory care	WND WND	WND 1958	Emily Venegas, executive director 559-412-2299
7 (7)	**Evergreen Residence Assisted Living** 3030 W. Caldwell Ave. Visalia,93277	40 [2] 40 [2]	Assisted living, Alzheimer's care	Private	Residential Care for the Elderly	WND WND	WND 2000	Melanie Tantingco, President 559-732-3265
8 (NR)	**Everlight Care** 548 W Cromwell Suite 104 Fresno,93711	6 6	WND	WND	WND	WND WND	WND 2017	Gina Kendall, CEO/owner 559-353-2847
8 (NR)	**Royal Gardens Senior Care** 4238 E. Alamos Ave Fresno,93726	6 6	Assisted 24/7 care, respite, hospice, dementia and Alzheimer's care, daily activities, private and semi-private rooms, hair dresser, podiatrist and doctors' home visits	Private, monthly starts at $3500 - $4000 as it depends on level of care.	Residential care facility for the elderly	WND WND	WND 1997	WND 240-0728
10 (4)	**Quail Park on Cypress** 4520 W. Cypress Ave. Visalia,93277	WND 174	Housekeeping, activities, transportation, all-day dining, emergency call system, library, theater, on-site gym, beauty salon, utilities, housekeeping and more	Private, long-term care insurance	Residential Care Facility for the Elderly	WND WND	WND 2001	Trevin Willis, Executive Director 559-624-3500

WND-Would Not Disclose. NR-Not Ranked. All data has been provided by representatives of the businesses listed and The Business Journal Research. Not all sources surveyed responded to inquiries. Total beds includes licensed and non-licensed beds.

Research: Alex Light
Original Publication Date: Aug. 1, 2025
Email: alex@thebusinessjournal.com

[1] Previously did business as Sunrise Assisted Living of Fresno

[2] Based on 2024 data

Large networks, up-and-comers prove growth in community health clinics

By TBJ Staff

Community health clinics play an increasingly more important role in the Central Valley's healthcare system, with the region's largest providers expanding facilities and services to meet rising demand for primary care, dental treatment, behavioral health and even specialty services.

Analysis of community health clinic data shows a remarkable shift in the size and reach of federally qualified health centers over the past several years.

Family HealthCare Network and United Health Centers of the San Joaquin Valley now each operate 50 facilities across multiple counties, making them the region's largest community health providers by footprint. Family HealthCare Network serves Fresno, Kings, Kern and Tulare counties, while United Health Centers operates throughout Fresno, Kings and Tulare counties.

The growth is especially notable when compared with prior years. In 2023, Family HealthCare Network operated 48 facilities and United Health Centers had 31. By late 2024, Family HealthCare Network had grown to 50 facilities while United Health Centers expanded to 33. Today, United Health Centers has reached 50 locations, matching Family HealthCare Network's footprint and illustrating the aggressive expansion occurring among community-based providers.

Other organizations have steadily expanded as well.

Camarena Health increased from 21 facilities in 2023 to 25 in 2026, while Valley Health Team grew from 20 to 21 locations.

Clinica Sierra Vista expanded from eight facilities in 2023 to 12 in 2026, and Altura Centers for Health increased from six locations to nine during the same period.

Beyond physical growth,

Community Health | Page 37

Largest Community Health Clinics (2026)

Organization	Facilities
Family HealthCare Network	50
United Health Centers	50
Aria Community Health Center	30
Camarena Health	25
Valley Health Team	21
Omni Family Health	13
Clinica Sierra Vista	12
Altura Centers for Health	9

Source: The Business Journal Research, April 2026.



Photo by Ben Hensley | United Health Centers operates over 40 different clinics with a focus on improving health care access in the Central Valley.

Community Health | From 36

the services offered by community clinics have become more comprehensive. Most major providers now offer integrated medical, dental and behavioral health care, along with specialty services ranging from cardiology and endocrinology to telepsychiatry and substance abuse treatment. Transportation assistance, pharmacy services and insurance enrollment programs have become increasingly common as providers seek to address barriers to care.

The expansion comes as the Valley continues to face physician shortages, high rates of chronic disease and large rural populations that often struggle to access healthcare. Community clinics increasingly serve as the front door to the healthcare system for hundreds of thousands of residents, particularly Medi-Cal patients, uninsured families and agricultural workers. The growing number of facilities suggests providers are responding to persistent demand for accessible, affordable healthcare across the region.

Facility Growth Since 2023

Organization	2023	2026	Change
United Health Centers	31	50	+19
Family HealthCare Network	48	50	+2
Camarena Health	21	25	+4
Valley Health Team	20	21	+1
Clinica Sierra Vista	8	12	+4
Altura Centers for Health	6	9	+3
Omni Family Health	11	13	+2

Source: The Business Journal Research.

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Photo by Ben Hensley | Valley Children's Healthcare in Madera County. The region's pediatric trauma center recorded 88,818 emergency department visits in 2024, a rebound after a slight dip the previous year.

ED visits rise across the Central Valley as Community Regional stays busiest

By TBJ Staff

Emergency departments across the Central San Joaquin Valley continued to shoulder heavy patient demand in 2024 (the most recent data collected by The Business Journal), with several hospitals reporting year-over-year growth in visits and Community Regional Medical Center remaining the region's busiest emergency provider.

Community is busiest

Community Regional reported 118,065 emergency department visits in 2024, up from 116,091 in 2023 and 111,801 in 2022. As the region's only Level I trauma center and home to the Leon S. Peters Burn Center, the Downtown Fresno hospital continues to serve as the Valley's highest-acuity emergency destination.

Kaweah Health ranked second with 95,317 ED visits in 2024, continuing a steady climb from 86,213 visits in 2022. Its Level III trauma designation makes it a critical emergency care hub for Tulare County and the broader South Valley.

Valley Children's rebound

Valley Children's Healthcare also saw volumes rebound, rising to 88,818 visits in 2024 after dipping slightly in 2023. As the region's pediatric trauma center, Valley Children's remains a specialized emergency destination for infants, children and young adults.

Clovis Community Medical Center reported 85,649 visits in 2024. Clovis has shown strong growth since 2022, when it reported 64,453 visits.

Adventist Health Hanford posted one of the sharper rebounds, increasing from 57,017 visits in 2023 to 61,097 in 2024 after a large drop from 2022. Adventist Health Tulare also grew, rising from 31,285 visits in 2023 to 34,671 in 2024.

Some losses

Not every hospital saw increases. Sierra View Medical Center declined from 40,437 visits in 2023 to 37,452 in 2024, while Adventist Health Selma and Reedley were essentially flat to slightly down.

Overall, the data shows emergency departments remain a frontline pressure point for Valley hospitals. Population growth, limited primary care access and rising demand for specialty services continue to push patients into ERs, especially at major trauma and pediatric centers.

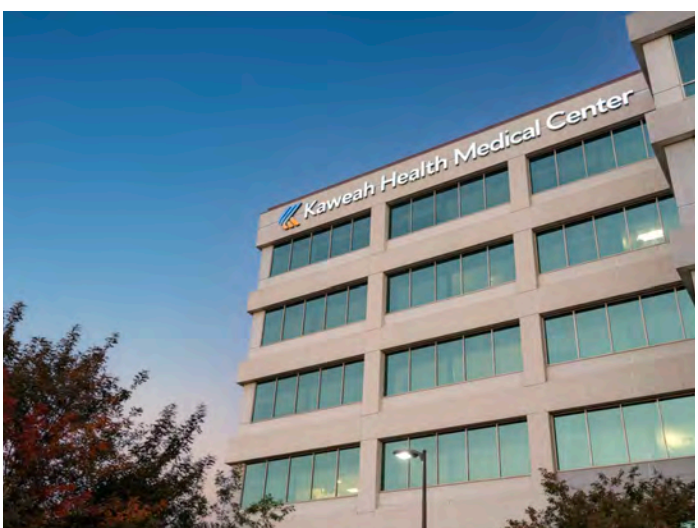

Photo via Kaweah Health | Kaweah Health Medical Center in Visalia reported 95,317 emergency department visits in 2024, the second-highest total in the Central San Joaquin Valley.

BY THE NUMBERS

118,065 – Emergency department visits at Community Regional Medical Center in 2024, the most in the Central San Joaquin Valley

95,317 – ED visits at Kaweah Health in 2024, up from 86,213 in 2022

88,818 – ED visits at Valley Children's Healthcare in 2024, the region's busiest pediatric emergency provider

85,649 – ED visits at Clovis Community Medical Center in 2024, up from 64,453 in 2022

61,097 – ED visits at Adventist Health Hanford in 2024, rebounding from 57,017 in 2023

37,452 – ED visits at Sierra View Medical Center in 2024, down from 40,437 in 2023



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Saint Agnes
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Letter from President & Market Leader



Gurvinder Kaur MD, MHA
President & Market Leader

For nearly a century, Saint Agnes has been a pillar of exceptional healthcare in the Central Valley. Founded in 1929 by the Sisters of the Holy Cross, Saint Agnes was built with a mission to provide compassionate, faith-based care to a growing Valley community. From the beginning, we have remained committed to serving others with dignity, reverence and clinical excellence.

As the healthcare landscape continues to evolve, it is more important than ever to ensure our community and the members we serve have access to the most advanced, highest quality care here at home.

Saint Agnes is investing in the health of the Valley. Through the growth of our primary care network and Graduate Medical Education program, we are not only expanding access to preventative care across the region, we are training the next generation of physicians. We are also enhancing specialty services, adopting the latest robotic surgical tools and cardiovascular treatments, and advancing plans for the construction of a new, expanded Emergency Department.

Delivering extraordinary care is more than diagnosing and treating symptoms—it's a higher calling. When patients and their families feel physically, emotionally and spiritually supported at every step of their journey, they can focus on what matters most: healing.



Gurvinder Kaur, MD, MHA
President & Market Leader
Saint Agnes



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Valley Children's HEALTHCARE



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