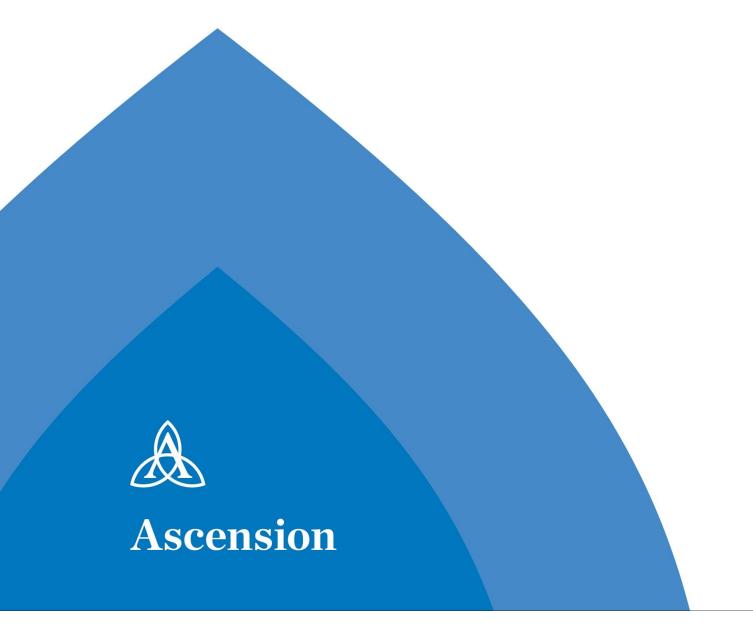
# Ascension Saint Mary -Chicago

FY23 Annual Hospital Community Benefits Plan Report



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Ascension Saints Mary & Elizabeth

The purpose of this report is to describe how the hospital meets the requirements outlined in the State of Illinois Community Benefits Act and Hospital Uninsured Patient Discount Act. This annual report of community benefits is public information, filed with the Attorney General and available to the public on request from the Attorney General.

## **Ascension Saints Mary & Elizabeth**

2233 W Division St, Chicago, IL 60622 healthcare.ascension.org 312-770-2000 Hospital EIN/Tax ID: 36-2235165



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# Introduction

As one of the leading non-profit and Catholic health systems in the United States, Ascension is committed to delivering compassionate, personalized care to all, with special attention to persons living in poverty and those most vulnerable.

## **Ascension Saints Mary & Elizabeth**

As a Ministry of the Catholic Church, Ascension Saints Mary & Elizabeth is a non-profit hospital that provides medical care to Chicago and the surrounding communities. Ascension Saints Mary & Elizabeth is part of Ascension Illinois which operates 15 hospital campuses and 230 sites of care. The organization includes more than 600 providers as part of Ascension Medical Group, as well as 17,000 associates.

Serving Illinois since 1894, Ascension Saints Mary & Elizabeth is continuing the long and valued tradition of addressing the health of the people in our community, following in the footsteps of the legacy of the Sisters of the Holy Family of Nazareth and was the first Polish hospital in Chicago and continues to serve the diverse communities on Chicago's west side and north side.

For more information about Ascension Saints Mary & Elizabeth, visit healthcare.ascension.org.

## **Ascension Mission Statement**

Rooted in the loving ministry of Jesus as healer, we commit ourselves to serving all persons with special attention to those who are poor and vulnerable. Our Catholic health ministry is dedicated to spiritually centered, holistic care which sustains and improves the health of individuals and communities. We are advocates for a compassionate and just society through our actions and our words.

This statement was adopted on April 1, 2022.



# **Community Benefits Report**

## **Community Benefits Provided**

Below are the financial community benefits provided by the hospital during the fiscal year of July 1, 2022 through June 30, 2023.

Total Community Benefits for Ascension Saints Mary & Elizabeth	\$46,967,782
All other Community Benefits including: Government Sponsored Care, Language Assistance Services, Cash & In-Kind Donations, Health Professions Education, Research, Subsidized Health Services, Total Volunteer Services (employee & non-employee), other Government-Sponsored Program Services, Bad Debts, Other Community Benefits not detailed in the Annual Non-Profit Hospital Community Benefits Plan Report instructions.	\$40,143,153
Emergency Department Financial Assistance (at cost)	\$1,513,916
Total Financial Assistance (Emergency & Non-Emergency Care at cost)	\$6,824,629

In addition to hospital community benefits, Ascension Illinois non-hospital entities provided \$321,475 in community benefits in the fiscal year.

## **Other Benefits:**

Listed above are "Other Community Benefits." These are benefits not detailed in the Annual Non-Profit Hospital Community Benefits Plan Report instructions.

Other Community Benefits categories include Community Building Activities and Community Benefit Operations. The IRS 990 Schedule H instructions and the Catholic Health Association (CHA) publication, A Guide for Planning & Reporting Community Benefit, both identify these categories in their materials.

Listed below is the detail associated with these categories.

## **Community-Building Activities**

Community-building activities improve the community's health and safety by addressing the root causes of health problems, such as poverty, homelessness and environmental hazards. These



## Ascension Saints Mary & Elizabeth

activities strengthen the community's capacity to promote the health and well-being of its residents by offering the expertise and resources of the health care organization. Costs for these activities include cash and in-kind donations and expenses for the development of a variety of programs and partnerships. This category includes activities such as:

- Physical improvements and housing
- Economic development
- Community support
- Environmental improvements
- Community leadership development & training
- Coalition building
- Advocacy for community health improvement & safety
- Workforce development

Community-building is documented on Part II of the IRS 990 Schedule H.

## **Community Benefit Operations**

Community benefit operations include costs associated with assigned staff and community health needs and/or assets assessments, as well as other costs associated with community benefit strategy and operations. This category includes items such as:

- Assigned staff
- Community health needs/health assets assessments
- Other resources

Community benefit operations are documents on Part 1 7a of the IRS 990 Schedule H.



## **Financial Assistance**

As part of our faith-based mission, Ascension Illinois is dedicated to helping the most vulnerable and treating everyone with compassion, dignity and respect. Financial assistance reflects our commitment to and reverence for individual human dignity and the common good, our special concern for and solidarity with persons living in poverty and other vulnerable persons, and our commitment to distributive justice and stewardship.

A copy of our Financial Assistance Policy can be found here:

https://healthcare.ascension.org/-/media/healthcare/financial-assistance/illinois/fap/runningfile\_ilchi\_ english\_financial-assistance-policy.pdf

During the fiscal year, Ascension Saints Mary & Elizabeth collected the following data on financial assistance applications:

	Approval and Denial Rates	
Facility Name	(Data for FY23)	Number of Applications
Ascension Saint Mary - Chicago	Total submitted (complete & incomplete)	282
	Approved	228
	Denied	54
	Financial Assistance Denial Reason	
Facility Name	(Data for time period of 7-1-22 thru 6-30-23)	Total
Ascension Saint Mary - Chicago	Missing Supporting Documents	47
	Over Income	4
	Over Assets	1
	Incomplete Application	2

Facility Name	Gender	Total
Ascension Saint Mary - Chicago	Female	141
	Not available	51
	Male	66
	Not Provided	21
	Transgender man/trans man/female-to-male(FTM)	2
	Genderqueer/gender noncomforming neither	
	exclusively male nor female	1

Facility Name	Preferred Language	COUNTA of Last Name



Ascension Saint Mary - Chicago	SPANISH	112
	NOT PROVIDED	97
	NOT AVAILABLE	53
	ENGLISH	15
	UKRAINIAN	1
	ARABIC	1
	CHINESE	1
	HEBREW	1
	VIETNAMESE	1
	POLISH	0
	KIOWA	0

Facility Name	Race	Total
Ascension Saint Mary - Chicago	Not Provided	172
	Not Available	52
	White	46
	Black or African American	7
	American Indian or Alaska Native	0
	Other Asian	1
	Chinese	2
	Other Pacific Islander	2

Facility Name	Ethnicity	Total
Ascension Saint Mary - Chicago	Not Available	52
	Hispanic-Latino/a-or Spanish origin	96
	Not Provided	68
	Mexican-Mexican American-Chicano/a	44
	Puerto Rican	12
	Another Hispanic-Latino/a or Spanish Origin	10



## **Community Health Needs Assessments (CHNA)**

Federal law requires tax-exempt hospitals to conduct periodic Community Health Needs Assessments (CHNAs) and adopt plans to meet assessed needs. In order to comply with federal tax-exemption requirements in the Affordable Care Act, a tax-exempt hospital facility must: 1) conduct a community health needs assessment every three years, 2) adopt an implementation strategy, and 3) report how identified needs not being addressed by the hospital are still being targeted by other community organizations.

Each Ascension Health hospital ministry follows the following guidelines for Community Health Needs Assessments (CHNAs):

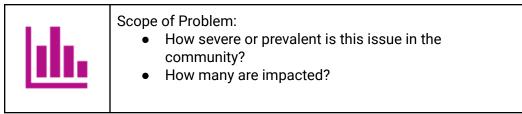
- Each ministry will conduct a CHNA every three years by involving community partners and members representing diverse sectors within the community.
- There will be an annual review and update of the ministry's CHNA Implementation Strategy highlighting the outcomes of community benefit programs that target prioritized needs.
- Monthly reporting of community benefit is required to local and system leadership.

Complete Community Health Needs Assessment reports for each hospital are made publicly available at: <u>https://healthcare.ascension.org/chna</u> and paper versions can be requested at Ascension Saints Mary & Elizabeth Community Service Programming department at 312-770-2391.

## **Prioritized Community Needs**

Included in Code Section 501(r)(3) is the requirement that hospitals must provide a description of the process and criteria used to determine the most significant health needs of the community identified through the CHNA, along with a description of the process and criteria used to determine the prioritized needs to be addressed by the hospital. Accordingly, Ascension Saints Mary & Elizabeth used a phased prioritization approach to identify the needs with the hospital community. The first step was to determine the broader set of identified needs. Through the CHNA assessment, identified needs were then narrowed to a set of significant needs which were determined most crucial for community stakeholders to address.

Following the completion of the CHNA assessment, significant needs were further narrowed down to a set of prioritized needs that the hospital will address within the implementation strategy. To arrive at the prioritized needs, Ascension Saints Mary & Elizabeth used the following process and criteria:





ΣŢ	<ul> <li>Disparities &amp; Equity:</li> <li>Are there health disparities that exist?</li> <li>Can we address those in an impactful way?</li> </ul>
00	<ul> <li>Feasibility:</li> <li>What is our capacity to make progress (staffing resources, financial resources, other support, etc.)?</li> <li>Are there known interventions that exist?</li> </ul>
~~~	Momentum: • Is there community readiness and/or political will to address this issue?
<b>8</b> 8-8	<ul> <li>Alignment:</li> <li>Do we have community partners that we can align with on this issue?</li> <li>Do we need to build new relationships?</li> </ul>

Preliminary community need prioritizations recommendations were presented to a group of internal and external stakeholders for their review. Recommendations were discussed and voted upon to determine the prioritized needs for the hospital community.

Following the completion of the current CHNA, Ascension Saints Mary & Elizabeth has selected the prioritized needs outlined below for its Implementation Strategy. Ascension has defined "prioritized needs" as the significant needs which have been prioritized by the hospital to address through the three-year CHNA cycle:

- Social and Structural Determinants of Health -
  - Food Access and Food Security (SDoH Food Security): This need was selected because access to healthy food was identified within the top six most important needed improvements on the community survey. In focus groups, the communities highlighted access to healthy foods. Low food access (availability & affordability of food retailers) and food insecurity (limited or uncertain access to adequate food) continues to be a key Social Determinant of Health (SDoH). The top five most common searches in the Community Resource Directory included food pantries and food assistance.
  - Transportation (SDoH Housing & Transit): This need was selected because lack of





transportation creates additional barriers to access health care especially for the elderly, low-income, and disabled persons.

- Economic Vitality and Workforce Development (SDoH Education): This need was selected as education is an important determinant of health because poverty, unemployment, and underemployment are highest among those with lower levels of educational attainment. Higher levels of poverty are primarily concentrated in the far Northwest, West, and South sides of the city and county. Additionally, workforce needs and challenges, specifically for healthcare, were listed as high priority in the CHNA stakeholder listening sessions.
- Access to Care and Community Resources -
  - Resources, Referrals, Coordination, and Connection to Community -Based Services (Access to Care): This need was selected because in the CHNAs focus groups, access to needed healthcare and community resources are named as critical components to achieving the best health outcomes. This need was voted the number one need in this category in the Ascension Saints Mary & Elizabeth prioritization process.
  - Timely Linkage to Quality Care, including Behavioral Health and Social Services (Access to Care): This need was selected because Health insurance is the primary way that individuals access the healthcare system in the United States with 56% of Cook County residents receiving coverage through employer-based plans. Eleven percent of the population under age 65 are without health insurance in Cook County compared to 9% in Illinois. Eighteen percent (18%) of respondents to the community survey reported a loss of employment because of the pandemic, 6% reported a loss or reduction in insurance coverage, and 7% reported a lack of access to basic medical care. This need was voted the number two need in this category in the Ascension Saints Mary & Elizabeth prioritization process.
- Prevention and Treatment of Priority Health Conditions: Maternal and Child Health, Mental Health and Substance Use Disorders -
  - Maternal and Child Health (Maternal, Infant, Child Health): This need was selected because maternal mortality rates in the United States have been increasing even though the global trend has been the opposite. In addition, vast maternal health inequities exist between racial and ethnic groups. Racial and ethnic disparities exist for preterm births, postpartum depression, violence, obesity and preventable complications. Nine percent (9%) of babies born in Cook County have a low birth rate compared to 8% for Illinois. There are 20 teen births per 1,000 female population ages 15-19 in Cook County compared to 18 for Illinois.
  - Mental Health (Mental & Behavioral Health): This need was selected because 36% of community survey respondents identified mental health as one of the most important health needs in their communities. In the Community Focus Groups, mental health and substance use (behavioral health) were two of the most discussed topics within focus groups. Forty-four percent (44%) of community survey respondents identified access to



mental health services as being needed to support improvements in community health. The self-reported adult depression rates in Cook County are higher (17.3%) than national averages (10%). Similarly, youth depression has been on the rise. This need was voted in the top two of this category for the Ascension Saint Marys & Elizabeth prioritization process.

 Substance Use Disorders (Mental & Behavioral Health): This need was selected because mental health and substance use (behavioral health) were two of the most discussed topics within the CHNAs focus groups and community input surveys. There were 4,467 drug induced overdose deaths in Cook County between 2018-2020.

Ascension Saints Mary & Elizabeth understands the importance of all the health needs of the community and is committed to playing an active role in improving the health of the people in the communities it serves. For the purposes of this implementation strategy, Ascension Saints Mary & Elizabeth has chosen to focus its efforts on the priorities listed above.

## Acute Community Concern Acknowledgement

A CHNA and Implementation Strategies (IS) offer a construct for identifying and addressing needs within the community(s) it serves. However, unforeseen events or situations, which may be severe and sudden, may affect a community. At Ascension, this is referred to as an acute community concern. This could describe anything from a health crisis (e.g., COVID-19), water poisoning, environmental events (e.g., hurricane, flood) or other event that suddenly impacts a community. In which case, if adjustments to an IS are necessary, the hospital will develop documentation, in the form of a SBAR (Situation-Background-Assessment-Response) evaluation summary, to notify key internal and external stakeholders of those possible adjustments.

## Written Comments

This annual report has been made available to the public and is open for public comment. Questions or comments about this implementation strategy can be submitted via the email: ilarl.communitybenefit@ascension.org



## **Community Implementation Strategies**

These strategies and action plans represent where the hospital will focus its community efforts over the next three years, July 1, 2022 to June 30, 2025. While these remain a priority, the hospital will continue to offer additional programs and services to meet the needs of the community, with special attention to those who are poor and vulnerable.

## STRATEGY #1: Food Access Assistance

Hospital(s) Name(s)		
Ascension Saints Mary & Elizabeth (ASME)		
Prioritized Health Need		
Social and Structural Determinants of Health (SDoH -Food Security)		
Strategy		
Increase food access assistance for food insecure individuals for ASME community residents.		
Strategy Source		
Local Food Pantry Support and Partnerships		
Objective		
By June 30, 2025, the number of food pantry support and partnerships will increase.		
Target Population		
• Target Population: ASME community residents, including ASME associates and patients		
<ul> <li>Medically Underserved Population: Individuals experiencing food insecurity in ASME</li> </ul>		
community		
Collaborators		
<ul> <li>Other Ascension hospitals: Ascension Mercy, Ascension Resurrection, Ascension Saint</li> </ul>		
Joseph-Elgin, Ascension Saint Joseph-Joliet		
Joint Venture: "N/A"		
<ul> <li>Collaborators: Population Health; Local food pantry; Greater Chicago Food Depository; West</li> </ul>		
Side United; Ascension Illinois Food Access & Nutrition Workgroup		
Consultants: "N/A"		
Other non-profit hospital: "N/A"		
Resources		
Resources the collaborators plan to commit:		
<ul> <li>Other Ascension hospital(s): staff time donated, funding/cash donations, education collateral,</li> </ul>		
marketing resources, and others		
Joint Venture: "N/A"		
<ul> <li>Collaborators: Local food pantry; West Side United: staff/volunteer time donated</li> </ul>		
Consultants: "N/A"		
Other non-profit hospital: "N/A"		
ACTION STEPS: Local Food Pantry Support and ROLE/OWNER		
Partnerships		



Appoint an Associate Lead for this strategy	Ascension Saints Mary & Elizabeth Community Health
Participate in Ascension Illinois Food Access & Nutrition	Ascension Saints Mary & Elizabeth
Workgroup	Community Health and Greater Chicago
	Food Depository
Identify potential food pantry partnerships to support	Ascension Saints Mary & Elizabeth
	Community Health; West Side United
Provide funding support for local community food access	Ascension Saints Mary & Elizabeth
programs and initiatives	Community Support Review Committee;
	Ascension Illinois Community Benefit
Monitor work, evaluate progress, and report outcomes	Ascension Saints Mary & Elizabeth
	Implementation Strategy Workgroup and
	Community Health

- **Baseline:** FY22 data
- **Target:** Increase from baseline the following:
  - Total number of meals/persons served
  - Total pounds of food provided
  - Total Food Access Community Partner Cash Donations Provided
- Data Source; Data Owner: Feeding America; Greater Chicago Food Depository; West Side United

## ANTICIPATED IMPACT

The anticipated impact of these actions is increased access to healthy food and reduced food insecurity.

## **STRATEGY #2: Transportation Assistance**

#### **Hospital Name**

Ascension Saints Mary & Elizabeth (ASME)

## **Prioritized Health Need**

Social and Structural Determinants of Health (SDoH- Housing & Transit)

#### Strategy

Provide transportation services for patients and community residents.

## Strategy Source

Lyft Concierge Services

Security Transportation

## Objective

By June 30, 2025, increase the percentage of individuals that have been screened and connected to transportation assistance services.

## **Target Population**

• Target Population: ASME patients and community residents. .



Medically Underserved Population: Individuals experiencing transportation barriers in the		
ASME community.		
Collaborators		
Other Ascension Hospitals: Ascension Mercy, Ascension Resurrection, Ascension Saint		
Joseph-Chicago, Ascension Saint Alexius, Ascension	Joseph-Elgin, Ascension Saint	
Joseph-Joliet, Ascension		
Joint Venture: N/A		
<ul> <li>Collaborator: Lyft, Security, Case Management - program</li> </ul>	ram collaborators	
Consultants: N/A		
<ul> <li>Other Non-Profit Hospitals: N/A</li> </ul>		
Resources		
Resources the collaborators plan to commit:		
<ul> <li>Ascension Saints Mary &amp; Elizabeth: staff time and do</li> </ul>	nations for program maintenance	
<ul> <li>Ascension Saints Mary &amp; Elizabeth: cash donations to</li> </ul>	o community organizations in need of	
transportation assistance services		
<ul> <li>Lyft Concierge Services: Program Coordinator</li> </ul>		
• Partners for Our Communities: Program Coordinator		
ACTION STEPS: Transportation Services	ROLE/OWNER	
Appoint an Associate Lead for this strategy	Ascension Saints Mary & Elizabeth	
	Case Management	
Identify patients (i.e. uninsured, underinsured, VA, Medicaid,	Ascension Saints Mary & Elizabeth -	
Medicare, etc.) in need of transportation assistance	Case Management; Cancer Center;	
	Security	
Establish eligibility criteria for patients in need of	Ascension Saints Mary & Elizabeth-	
transportation assistance	Case Management; Cancer Center;	
	Security	
Pay Lyft Concierge Services (LCS) monthly/annual service	Ascension Saints Mary & Elizabeth	
fees, if applicable		
Provide funding support for local community based	Ascension Saints Mary & Elizabeth	
organizations (CBO) in need of transportation assistance	Community Support Review Committee	
Monitor work, evaluate progress, report outcomes	Ascension Saints Mary & Elizabeth	
	Implementation Strategy Workgroup	
	and Community Service	
$O_{i}$ the set $(a)$ and $(a)$ $O_{i}$ the set $(a)$		

- Baseline: FY22 data
- Target:
  - o Increase total of persons screened with transportation needs from baseline
  - Increase total Number of rides provided from baseline
- Data Source; Data Owner: Security; Lyft Concierge Services

## ANTICIPATED IMPACT

The anticipated impact of these actions is increased access to healthcare services by eliminating transportation barriers.



STRATEGY #3: Workforce Development	
Hospital(s) Name(s)	
Ascension Saints Mary & Elizabeth (ASME)	
Prioritized Health Need	
SDoH: Economic Vitality and Workforce Development	
(SDoH - Education)	
Strategy	
Provide opportunities for students to engage with health care professionals.	
Strategy Source	
High School Student Practicums/Internships	
College Student Workforce Pipelines	
Objective	
By June 30, 2025, increase the number of students who participate in workforce development	
programs through ASME.	
Target Population	
<ul> <li>Target Population: ASME community residents, teen and college age students</li> </ul>	
Collaborators	
<ul> <li>Other Ascension hospitals: Ascension Resurrection, Ascension Saint Francis, Ascension Saint Joseph-Chicago, Ascension Saint Mary-Chicago</li> <li>Joint Venture: "N/A"</li> </ul>	

- Joint Venture: "N/A"
- **Collaborators:** Local area high schools, Chicago Public Schools (CPS), colleges, and universities.
- Consultants: "N/A"
- Other non-profit hospital: "N/A"

Identify community partners for workforce development       Nursing, Community volunteer Service         Identify community partners for workforce development       Ascension Saints         Nursing, Community       Nursing, Community         Volunteer Service       Nursing, Community         Mentor high school students interested in healthcare       Ascension Saints         Careers       Community Educt	
Identify community partners for workforce development       Volunteer Service         Identify community partners for workforce development       Ascension Saints         Nursing, Community       Volunteer Service         Mentor high school students interested in healthcare       Ascension Saints         careers       Community Educt	Mary & Elizabeth
Identify community partners for workforce development       Ascension Saints         Nursing, Community       Nursing, Community         Wentor high school students interested in healthcare       Ascension Saints         careers       Community Educt	-
Volunteer ServiceMentor high school students interested in healthcare careersAscension Saints Community Educ	Mary & Elizabeth
Mentor high school students interested in healthcare careersAscension Saints Community Educ	
careers Community Educ	es
	Mary & Elizabeth;
	ation; Nursing
Support student clinicals who are entering healthcare Ascension Saints	Mary & Elizabeth;
careers Community Educ	ation; Nursing,
Radiology; Thera	pies
Partner with a local college or university to offer a career Ascension Saints	Mary & Elizabeth;
accelerated program Nursing	
Monitor work, evaluate progress, report outcomes Ascension Saints	Mary & Elizabeth
Implementation S	Strategy Workgroup
and Community S	Service



- **Baseline:** FY22 data
- **Target:** Increase number of students participating in workforce development programs or partnerships from baseline.
- Data Source; Data Owner: Local area high schools, colleges, and universities

## **ANTICIPATED IMPACT**

The anticipated impact of these actions is increased workforce opportunities for youth in the hospital community.

## **STRATEGY #4: Access to Community Resources**

#### **Hospital Name**

Ascension Saints Mary & Elizabeth (ASME)

#### Prioritized Health Need

Access to Care and Community Resources (Access to Care)

#### Strategy

Increase access to community resources and community based services for ASME community residents.

#### Strategy Source

Neighborhood Resource Directory; Findhelp

#### Objective

By June 30, 2025, the number of searches in the directory will increase.

#### **Target Population**

- Target Population: ASME community residents, including ASME patients.
- **Medically Underserved Population:** ASME community residents who are underinsured/uninsured.

#### Collaborators

- Other Ascension hospital: Ascension Holy Family, Ascension Mercy, Ascension Resurrection, Ascension Alexian Brothers, Ascension Saint Alexius, Ascension Saint Francis, Ascension Saint Joseph-Chicago, Ascension Saint Joseph-Elgin, Ascension Saint Joseph-Joliet, Ascension Saints Mary-Kankakee
- Joint Venture: "N/A"
- Collaborators: Community-based organizations, Faith-based Institutions, Food Pantries
- Consultants: Neighborhood Resources; Findhelp.org; United Way 2-1-1
- Other non-profit hospital: N/A

#### Resources

Resources the collaborators plan to commit:

- Other Ascension hospital(s): Strategy sources and funding
- Joint Venture: "N/A"
- Collaborators: Community-based organizations, Faith-based Institutions, Food Pantries program collaborator
- **Consultants:** Neighborhood Resources; Findhelp.org; United Way 2-1-1 directory source



Other non-profit hospital: "N/A"	
ACTION STEPS: Resource Directory	ROLE/OWNER
Appoint an Associate Lead for this strategy	Ascension Saints Mary & Elizabeth
	Community Health
Promote awareness of the Community Resource Directory	Ascension Saints Mary & Elizabeth;
via flyers, social media, Ascension Community Benefit and	Community Benefit, Community Health
Community Partner newsletters	
Identify internal staff that need Community Resource	Ascension Illinois: Population Health,
Directory training	Community Benefit, Community Health
Identify external partners that need Community Resource	Ascension Illinois Community Benefit,
Directory	Community Health
Establish calendar of Community Resource Directory	Ascension Illinois: Population Health
trainings for virtual and/or hybrid offerings	
Promote availability of training within target audiences	Ascension Illinois: Community Benefit,
	Community Health, Population Health,
	Marketing/Communications
Host Community Resource Directory training for internal and	Ascension Illinois: Population Health,
external partners	Community Benefit, Community Health
Monitor work, evaluate progress, and report outcomes	Ascension Saints Mary & Elizabeth
	Implementation Strategy Workgroup

- Baseline: FY22 Data
- Target:
  - Increase the number of searches within the directory from baseline.
  - Increase the number of persons trained on directory from baseline.
- Data Source; Data Owner: Neighborhood Resource; Findhelp.org

## ANTICIPATED IMPACT

The anticipated impact of these actions is increased access to community resources, services and referrals for individuals in need.

## STRATEGY #5: Medication Assistance

## Hospital(s) Name(s)

Ascension Saints Mary & Elizabeth (ASME)

## **Prioritized Health Need**

Access to Care and Community Resources (Access to Care)

## Strategy

Provide free or low-cost prescriptions for qualifying underinsured and uninsured individuals through various medication assistance programs such as the Dispensary of Hope (DoH) program.

## Strategy Source

Save the Day; Dispensary of Hope; Pharmacotherapy Clinic



Objective		
By June 30, 2025, there will be an increase of medication assistance from FY22 baseline.		
<ul> <li>Target Population</li> <li>Target Population: ASME community residents, includ</li> <li>Medically Underserved Population: ASME community uninsured individuals.</li> </ul>	•	
Collaborators		
<ul> <li>Other Ascension hospital: Ascension Mercy, Ascensic Ascension Saint Joseph-Elgin</li> <li>Joint Venture: "N/A"</li> </ul>	on Resurrection, Ascension Saint Francis,	
<ul> <li>Collaborators: Ascension ministry pharmacies; Case Management; Ascension Foundation; Community-based organizations; Faith-based Institutions</li> <li>Consultants: Dispensary of Hope; Save the Day; Pharmacotherapy Clinic</li> <li>Other non-profit hospital: "N/A"</li> </ul>		
<ul> <li>Resources the collaborators plan to commit: <ul> <li>Other Ascension hospital(s): Strategy sources and funding</li> <li>Joint Venture: "N/A"</li> <li>Collaborators: Ascension ministry pharmacies; Case Management; Community-based organizations, Faith-based Institutions - program collaborator</li> <li>Consultants: Dispensary of Hope; Save the Day</li> <li>Other non-profit hospital: "N/A"</li> </ul> </li> </ul>		
ACTION STEPS: Medication Assistance	ROLE/OWNER	
Appoint an Associate Lead for this strategy	Ascension Saint Mary & Elizabeth Case Management and Pharmacy	
Conduct initial application interview with the patient to determine eligibility	Ascension Saint Mary & Elizabeth Pharmacy	
Coordinate applications for manufacturers' Patient Assistance Programs	Ascension Saint Mary & Elizabeth Pharmacy	
Provide free or discounted medications and testing supplies to all uninsured and underinsured individuals who qualify	Ascension Saint Mary & Elizabeth Pharmacy	
Promote awareness of DoH in the community the Ascension Resurrection serves.	Ascension Illinois: Community Benefit, Community Health, Population Health, Marketing/Communications	
	inanteting, commaneatione	
Monitor work, evaluate progress, and report outcomes	Ascension Saint Mary & Elizabeth Implementation Strategy Workgroup	

- Baseline: FY22 Data
- **Target:** Increase total number of individuals served; Increase number of prescriptions filled and received
- Data Source; Data Owner: Ascension ministry pharmacies; Case Management

ANTICIPATED IMPACT



The anticipated impact of these actions is increased access to maintenance and preventive medication to people who otherwise may not be able to afford their medication.

STRATEGY #6: Public Health Insurance Coverage	e Enrollment Services (PHICES)

Hospital(s) Name(s)

Ascension Saints Mary & Elizabeth (ASME)

Prioritized Health Need

Access to Care and Community Resources (Access to Care)

Strategy

Provide public Health Insurance Coverage Enrollment Services (PHICES)

**Strategy Source** 

Advocatia

Objective

By June 30, 2025, there will be an increase of enrollment services from FY22 baseline

#### **Target Population**

- Target Population: Adults, children, and immigrants
- Medically Underserved Population: Uninsured and underinsured individuals

#### Collaborators

- **Other Ascension hospital:** Ascension Holy Family, Ascension Mercy, Ascension Resurrection, Ascension Alexian Brothers, Ascension Saint Alexius, Ascension Saint Joseph-Chicago, Ascension Saint Joseph-Elgin, Ascension Saint Joseph-Joliet, Ascension Saints Mary-Kankakee
- Joint Venture: "N/A"
- Collaborators: Community-based organizations, Faith-based Institutions, Food Pantries
- Consultants: Advocatia
- Other non-profit hospital: "N/A"

## Resources

Resources the collaborators plan to commit:

- **Other Ascension hospital(s):** staff time donated, funding/cash donations to community organizations, education collateral, marketing resources, and others
- Joint Venture: "NA"
- Collaborators: Community-based organizations, Faith-based Institutions, Food Pantries program collaborators
- **Consultants**: program collaborator
- Other non-profit hospital: "N/A"

ACTION STEPS	ROLE/OWNER
Appoint an Associate Lead for this strategy	Ascension Saints Mary & Elizabeth
	Community Health
Promote awareness of public health insurance coverage	Ascension Saints Mary & Elizabeth;
enrollment services (PHICES) via flyers, social media,	Community Benefit; Community Health
Ascension and Community partner newsletters	



Identify external partners that need public health insurance	Ascension Illinois Community Benefit;
coverage enrollment services (PHICES) information	Community Health
Establish calendar of potential PHICES events in the	Ascension Illinois Community Benefit;
community	Community Health
Promote availability of PHICES services within target	Ascension Illinois Community Benefit;
audiences	Community Health; Marketing/
	Communications
Monitor work, evaluate progress, report outcomes	Ascension Saints Mary & Elizabeth
	Implementation Strategy Workgroup
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- Baseline: FY22 Data
- Target:
  - Increase persons enrolled in health care coverage from baseline
  - Increase persons educated on enrollment coverage from baseline
- Data Source; Data Owner: ADVOCATIA

## ANTICIPATED IMPACT

The anticipated impact of these actions is to increase access to healthcare services for individuals who are underinsured or uninsured.

## STRATEGY 7: Maternal and Child Health

Hospital(s) Name(s)

Ascension Saints Mary & Elizabeth (ASME)

## Prioritized Health Need #3

Priority Health Conditions: Maternal and Child Health (Maternal, Infant, Child Health)

## Strategy

Connect pregnant women to prenatal and postpartum care resources especially the uninsured and/or underinsured.

## Strategy Source

Illinois Department of Public Health (IDPH)

Illinois Perinatal Quality Collaborative

Ascension Illinois Prenatal Workgroup

Social Determinants of Health (SDoH) Screening

PREM Tool

## Objective

By June 30, 2025, there will be a reduction in primary cesarean section (c-section) rates and an increase in birth equity education.

## Target Population

- Target Population: Pregnant women of color in ASME community
- Medically Underserved Population: un-and /or under-insured pregnant women

## Collaborators



## Ascension Saints Mary & Elizabeth

- Other Ascension hospital: Ascension Resurrection
- Joint Venture: "N/A"
- **Collaborators:** Ascension Illinois Medical Group; Obstetrical Healthcare Providers, FQHCs, Ascension Illinois Women's Health Service Line; Population Health
- Consultants: "N/A"
- Other non-profit hospital: "N/A"

#### Resources

List organization(s) and the resources that each organization will be committing to:

- **Other Ascension hospital:** Ascension Resurrection financial and staff support
- Joint Venture: "N/A"
- **Collaborators:** Ascension Illinois Medical Group; Obstetrical Healthcare Providers, FQHCs, Ascension Illinois Women's Health Service Line
- Consultants: "N/A"
- Other non-profit hospital:"N/A"

#### **ACTION STEPS ROLE/OWNER** Appoint Associate Lead for this strategy Ascension Saints Mary & Elizabeth Women's Health Participate in the Ascension Illinois Women's Health Ascension Illinois Women's Health committee committee Participate in the Ascension prenatal workgroup Ascension Prenatal Workgroup Identify internal resources for supporting prenatal and Ascension Prenatal Workgroup postpartum care coordination Identify community partners and healthcare providers to Ascension Prenatal Workgroup engage in prenatal and postpartum service coordination Train internal staff on the workflow and service coordination Ascension Prenatal Workgroup process Monitor work, evaluate progress, and report outcomes Ascension Saints Mary & Elizabeth Implementation Strategy Workgroup

## Output(s) and/or Outcome(s)

- Baseline: FY22 Data; TBD based on the preliminary PREM results
- Target:
  - From baseline, reduce primary c-section rates.
  - From baseline, increase Birth Equity Education opportunities.
  - Decrease disparity by race and/or ethnicity in maternal health outcomes from baseline.
- Data Source; Data Owner: Ascension Illinois, Ascension Saints Mary & Elizabeth; Women's Health Service Line

## ANTICIPATED IMPACT

The anticipated impact of these actions is improved health outcomes for mothers and babies.

## **STRATEGY #8: Mental Health Education and Awareness**

Hospital(s) Name(s)

Ascension Saints Mary & Elizabeth (ASME)



Ascension Illinois, Community Benefit,

**Community Service** 

Prioritized Health Need		
Prevention and Treatment of Priority Health Conditions: Mental Health (Mental & Behavioral Health)		
Strategy		
Mental Health Education and Awareness		
Strategy Source		
Mental Health First Aid (MHFA) Trainings		
Objective		
By June 30, 2025, there will be an increase in the MHFA traini	ng participants.	
<ul> <li>Target Population</li> <li>Target Population: ASME community residents, include students in junior high and high school.</li> <li>Medically Underserved Population: Teen and Adult in issues.</li> </ul>		
Collaborators		
<ul> <li>Other Ascension hospital: Ascension Holy Family, Asc Ascension Alexian Brothers, Ascension Saint Alexius, Joseph-Chicago, Ascension Saint Joseph-Elgin, Ascen Saints Mary-Kankakee</li> <li>Joint Venture: "N/A"</li> <li>Collaborators: Community-based organizations, Faith Pantries</li> <li>Consultants: Americorps</li> <li>Other non-profit hospital: "N/A"</li> <li>Resources</li> <li>Resources the collaborators plan to commit:</li> <li>Other Ascension hospital(s): Trainings and mental he</li> <li>Joint Venture: "N/A"</li> <li>Collaborators: Community-based organizations, Faith Pantries</li> <li>Other Ascension hospital(s): Trainings and mental he</li> <li>Joint Venture: "N/A"</li> <li>Collaborators: Community-based organizations, Faith Pantries - program collaborators</li> <li>Consultants: Americorps - staff to provide the training</li> <li>Other non-profit hospital: "N/A"</li> </ul>	Ascension Saint Francis, Ascension Saint hsion Saint Joseph-Joliet, Ascension -based Institutions, Schools, Food alth education; funding for consultants -based Institutions, Schools, Food	
ACTION STEPS	ROLE/OWNER	
Appoint an Associate Lead for this strategy	Ascension Saints Mary & Elizabeth, Ascension Illinois, Community Benefit, Community Health	
Promote awareness of the MHFA trainings via flyers, social	Ascension Saints Mary & Elizabeth,	
media, Ascension Community Benefits and Community	Ascension Illinois, Community Benefit,	
Partner newsletters	Community Health	
Identify internal staff that need MHFAtraining         Ascension Illinois, Community Benef           Community Service         Community Service		
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Identify external partners that need MHFA training



Establish calendar of MHFA trainings for virtual and/or	Ascension Illinois, Community Benefit,
hybrid offerings including dates, times, and locations	Community Health
Promote availability of MHFA training within target	Ascension Illinois, Community Benefit,
audiences	Community Health, Marketing/
	Communications
Host MHFA training for internal and external partners	Ascension Illinois, Community Benefit,
	Community Health
Monitor work, evaluate progress, and report outcomes	Ascension Saints Mary & Elizabeth
	Implementation Strategy Workgroup
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- Baseline: FY22 Data
- **Target:** Increase the total number of individuals that received MHFA training from baseline.
- Data Source; Data Owner: Mental Health First Aid; Americorps

## ANTICIPATED IMPACT

The anticipated impact of these actions is increased access to Mental Health education and resources.

## **STRATEGY #9: Access to Substance Use Disorder Resources and Services**

## Hospital(s) Name(s)

Ascension Saints Mary & Elizabeth (ASME)

## **Prioritized Health Need**

Prevention and Treatment of Priority Health Conditions: Substance Use Disorders (*Mental & Behavioral Health*)

## Strategy

Provide a warm hand-off program for patients in need of access to SUD treatment.

## Strategy Source

- Warm Hand-off Program
- SBIRT Model (Screening, Brief Intervention, Refer to Treatment)

## Objective

By June 30, 2025, provide warm hand-off services for SUD patients that present in the ED and medical floors.

## **Target Population**

- **Target Population:** Patients that present to emergency department or medical floors with a substance use disorder in need of substance use disorder services and resources.
- Medically Underserved Population: Individuals experiencing mental health issues.

## Collaborators

- Other Ascension hospital: Ascension Holy Family, Ascension Mercy, Ascension Resurrection, Ascension Alexian Brothers, Ascension Saint Alexius, Ascension Saint Francis, Ascension Saint Joseph-Chicago, Ascension Saint Joseph-Elgin, Ascension Saint Joseph-Joliet, Ascension Saints Mary-Kankakee
- Joint Venture: "N/A"



Collaborators: Vituity, Healthful Care or Care Continuit	у
Consultants: "N/A"     Otherware are 5t hereited: "N/A"	
Other non-profit hospital: "N/A" Resources	
Resources the collaborators plan to commit:	
• Other Ascension hospital(s): Trainings and mental he	alth education; funding for consultants
• Joint Venture: "N/A"	-
Collaborators: Vituity, Healthful Care or Care Continuit	y - program collaborators
Consultants: "N/A"	
Other non-profit hospital: "N/A"	
ACTION STEPS: Warm Hand-Off Program	ROLE/OWNER
Appoint an Associate Lead for this strategy	Ascension Saint Mary & Elizabeth,
	Emergency Department, and Nursing
Participate in Ascension Illinois Warm-Handoff workgroup	Ascension Illinois, Ascension Saint
	Mary & Elizabeth, Emergency
	Department, Nursing, Ascension Illinois
	Behavioral Health Service Line
Identify internal resources for supporting substance use	Ascension Saint Mary & Elizabeth,
disorder services and care coordination	Ascension Illinois Behavioral Health
	Service Line
Identify community partners and health care providers to	Ascension Saint Mary & Elizabeth,
engage in substance use disorder care coordination	Ascension Illinois Behavioral Health
	Service Line
Review implementation workflows that allow for	Ascension Saint Mary & Elizabeth,
warm-handoffs	Emergency Department, Ascension
	Illinois Behavioral Health Service Line
Train internal team members on warm-handoff program and	Ascension Saint Mary & Elizabeth,
workflow	Emergency Department, Ascension
	Illinois Behavioral Health Service Line
Educate patients, families, and the community of warm	Ascension Saint Mary & Elizabeth,
handoffs	Emergency Department, Community
	Health, Ascension Illinois Behavioral
	Health Service Line
Monitor work, evaluate progress, and report outcomes	Ascension Saint Mary & Elizabeth
	Implementation Strategy Workgroup
Output(s) and/or Outcome(s)	
• Baseline: TBD (FY22 Baseline)	

- **Target:** Increase from baseline:
  - # of patients screened for Substance Use Disorders
  - # of Naloxone kits distributed/prescribed
- **Data Source; Data Owner:** Ascension Saint Mary & Elizabeth Emergency Department; Behavioral Health

## **ANTICIPATED IMPACT**



The anticipated impact of these actions is increased access to substance use disorder services and community resources for individuals in need.

Complete Implementation Strategy reports for each hospital are made publicly available at: <u>https://healthcare.ascension.org/chna</u> and paper versions can be requested at Ascension Saints Mary & Elizabeth Community Service Programming department at 312-770-2391.



## **Community Implementation Strategy & Health Equity Progress**

During the fiscal year, the following was progress achieved on its implementation strategies or other activities the hospital is undertaking to address health equity, reduce health disparities and improve community health. Please note this list is not intended to be comprehensive of all activities the hospital is undertaking, but to highlight initiatives of interest.

Community Need:	Strategy & Progress
Social & Structural Determinants of Health	Strategy: Provide cash donations to food access community partners Progress: During the tax year, the hospital also sought to increase donations to food bank and pantry community partners, which resulted in \$9,000 in donations for the tax year towards food access.
	Social and Structural Determinants of Health (Transportation) Strategy: Provide access to transportation assistance services for patients and community residents that have been screened for transportation barriers and connect them to services. Progress: During the tax year, 441 persons were screened for transportation assistance resulting in 441 rides.
	Social and Structural Determinants of Health (Workforce Development) Strategy: Provide opportunities for students to engage with health care professionals. Progress: During the tax year, 486 college students and 97 high school students were provided opportunities to engage with hospital professionals such as nursing or other allied professionals.
Access to Care and Community Resources	Strategy: Increase access to community resources and community-based services for the community. Progress: Saints Mary and Elizabeth associates utilized the social determinant of health software, Findhelp, to connect and refer patients to local resources such as food pantry, health clinics, utilities support and more. During the tax year, 2,073 searches were performed to assist with health related social needs. Additionally, 30 additional associates were trained on the platform.
	Strategy: Provide free or low-cost prescriptions for qualifying



	underinsured and uninsured individuals through various medication assistance programs. Progress: During the tax year, 1,463 patients were assisted with prescription assistance through the pharmacotherapy program. Strategy: Provide public health insurance coverage enrollment services. Progress: During the tax year in partnership with Advocatia, 601 persons were educated on health insurance and other benefit options. Twenty-seven persons enrolled in Medicaid and/or SNAP benefits.
Prevention and Treatment of Priority Health Conditions	Strategy: Connect pregnant women to prenatal and postpartum care resources especially the uninsured and/or underinsured to promote NTSV goals. Progress: During the tax year, the c-section annual rate of 48.9% which is over the Illinois Perinatal Quality Collaborative goal of 23.6%. Reduction rates of postpartum readmission increased during the tax year to 1.64% from 0.39% for total patients and remained the same for black/african-american patients (0.00%). Strategy: Provide Mental Health education and awareness. Progress: During the tax year, 3 mental health first aid trainings were held for 31 community partners. Strategy: Provide a warm hand-off program for patients in need of access to SUD treatment. Progress: During the tax year, the warm hand-off program resulted in 5,951 screenings for treatment with 205 persons receiving Narcan and 1,435 receiving other SUD prescriptions.
Community Support (Investing)	Strategy: Standardization of Community Investment Alignment Progress: Guidelines for community investment criteria to guide outgoing contributions to the community were established across Ascension hospitals late in the fiscal year that became effective July 1, 2023. A system-wide goal of 90% of all community investments must align with at least two of six criteria points including: Strategic Priority, Community Health Needs Assessments, Social Determinants of Health, Identified health disparities within the community, health equity improvement and Laudato Si' environmental improvements.
Diversity, Equity & Inclusion (DEI)	Strategy: ABIDE Framework Progress: At Ascension, the ABIDE (Appreciation -



	Belongingness - Inclusivity - Diversity - Equity) framework is
	used to help uncover what we need to review, dismantle, or rebuild in our policies, practices and ways of working so that we can eliminate what contributes to or perpetuates disparities, and inequities, including systemic racism. This work is ongoing and begins with leadership commitment through words and actions.
	The Ascension Illinois ABIDE Engagement Committee was formed, including representatives from each hospital and major operational function. This Committee met monthly throughout FY23 and engaged in group activities and training to support members' work as ambassadors for ABIDE in their respective roles.
	During FY23, established ABIDE ministry councils at the hospital level ensured integration and alignment with the Ascension Illinois ABIDE Engagement Committee and with Ascension national strategic direction, our Mission and Values and our Essential Behaviors within our organizations.
	Each hospital ABIDE council focuses on cultural/workforce related initiatives, patient/consumer related initiatives, supplier/partner diversity related initiatives and community related initiatives.
	Strategy: Cultural Trainings Progress: In FY23, Ascension developed and implemented the training module: ABIDE in Action Exploring Equitable Interactions in Healthcare. Over 400 leaders at Ascension have taken this training. Additionally, there is a training module on implicit bias and ABIDE that is required for new hire and annual training for all Ascension associates.
Diverse & Local Purchasing	Strategy: Diverse Procurement Spend Progress: Ascension has set guidelines toward measurable success of supplier diversity. Specific numeric goals are currently being evaluated for FY24.
	<ul> <li>Ascension guidelines are still being adopted, but include:</li> <li>1. Maintaining a portfolio of contract categories/areas for diverse-owned suppliers consideration Engaging the Senior Manager, Diversity and Sustainability as soon as a business need for contracting in said portfolio is</li> </ul>



<ul> <li>identified to provide sufficient time to identify potential opportunities for diverse-owned suppliers to participate in the process.</li> <li>Identifying suppliers to include in the sourcing process and to evaluate diverse-owned suppliers where possible.</li> <li>Ensuring diverse-owned supplier classifications (i.e., minority, women, veteran or small) are flagged appropriately in the contract management system.</li> <li>Consistent monitoring of metrics and analytics to evaluate and assess the effectiveness of the program and compliance with this policy.</li> <li>Include diverse-owned suppliers who can meet The Resource Group requirements in procurement opportunities.</li> <li>Participate in outreach events for diverse-owned suppliers to inform them of contracting opportunities available for them to participate in the procurement of products and accuracy for them to participate in the procurement of products and exprises by The Deceuree Crawn</li> </ul>
products and services by The Resource Group. Ascension Illinois has worked with the local community organization, West Side United, to increase opportunities for diverse suppliers in the community. West Side United connects diverse suppliers on the west-side of Chicago with healthcare organizations for service procurement.



Strategy: SOAR (Strengths, Opportunities, Aspirations and
Recommendations) Ascension Illinois' Associate Engagement Survey surrounds the ABIDE hallmarks. Our SOAR action planning focuses on efforts for improvement in each of the ABIDE hallmarks. The Associate Engagement Survey and the SOAR process is conducted and performed annually with evaluation and modified throughout the year. This process is guided by Executive and Senior Leadership with implementation and evaluation by Department Leaders. Strategy: Workforce Development A new sub-department within Human Resources was created in FY23 to improve workforce development in the communities we serve through partnerships, pipeline creation and other methodologies. Additionally, organization-wide the VOCARE program was introduced as an internal mobility and career development program for entry level associates.



Ascension Saints Mary & Elizabeth

# Appendix

## **Hospital Net Patient Revenue Report**

Ascension Illinois	
Net Revenue	
For the Twelve Months Ended June 30, 2023	
	SME
Net Patient Service Revenue	\$364,568,218
Add Back Charity	\$32,546,719
AG Reported Net Patient Service Revenue	\$397,114,937