

Ascension Saint Mary - Kankakee

FY23 Annual Hospital Community Benefits Plan Report



Ascension



**Ascension Saint Mary
Kankakee**

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 Saint Mary

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healthcare.ascension.org

815-937-2400

Hospital EIN/Tax ID: 36-4195126

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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 Saint Mary

As a Ministry of the Catholic Church, Ascension Saint Mary is a non-profit hospital that provides medical care to Kankakee and the surrounding communities. Ascension Saint Mary 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.

Ascension Saint Mary Kankakee has been meeting the health needs of the Kankakee County area for over 120 years. Founded by the Servants of the Holy Heart of Mary, Saint Mary's continues to carry out its mission of providing compassionate, holistic care with a spirit of healing and hope in the communities we serve. Located in Kankakee County, the 182-bed hospital provides many advanced health care services including advanced cardiac care, orthopedic care, level II trauma center, obstetrical and women's care, rehabilitation services, behavioral health and wound care services.

For more information about Ascension Saint Mary, 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 Financial Assistance (Emergency & Non-Emergency Care at cost) | \$2,776,040 |
| Emergency Department Financial Assistance (at cost) | \$591,598 |
| 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. | \$17,220,982 |
| Total Community Benefits for Ascension Saint Mary | \$19,997,021 |
| <i>In addition to hospital community benefits, Ascension Illinois non-hospital entities provided \$321,475 in community benefits in the fiscal year.</i> | |

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 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 Saint Mary collected the following data on financial assistance applications:

| <i>Facility Name</i> | <i>Approval and Denial Rates (Data for FY23)</i> | Number of Applications |
|---------------------------------|--|-------------------------------|
| Ascension Saint Mary - Kankakee | Total submitted (complete & incomplete) | 138 |
| | Approved | 105 |
| | Denied | 33 |

| <i>Facility Name</i> | <i>Financial Assistance Denial Reason (Data for time period of 7-1-22 thru 6-30-23)</i> | Total |
|---------------------------------|---|--------------|
| Ascension Saint Mary - Kankakee | Over Income | 5 |
| | Missing Supporting Documents | 26 |
| | Incomplete Application | 1 |
| | Non-compliant with Medicaid | 1 |

| <i>Facility Name</i> | <i>Gender</i> | Total |
|---------------------------------|---------------|--------------|
| Ascension Saint Mary - Kankakee | Female | 55 |
| | Not available | 25 |
| | Male | 39 |
| | Not Provided | 19 |

| <i>Facility Name</i> | <i>Preferred Language</i> | COUNTA of Last Name |
|---------------------------------|---------------------------|----------------------------|
| Ascension Saint Mary - Kankakee | NOT PROVIDED | 81 |
| | NOT AVAILABLE | 26 |
| | SPANISH | 15 |

| | | |
|--|---------|----|
| | ENGLISH | 15 |
| | POLISH | 1 |

| <i>Facility Name</i> | <i>Race</i> | <i>Total</i> |
|---------------------------------|----------------------------------|--------------|
| Ascension Saint Mary - Kankakee | White | 55 |
| | Not Available | 27 |
| | Not Provided | 40 |
| | Black or African American | 14 |
| | American Indian or Alaska Native | 2 |

| <i>Facility Name</i> | <i>Ethnicity</i> | <i>Total</i> |
|---------------------------------|---|--------------|
| Ascension Saint Mary - Kankakee | Not Provided | 94 |
| | Not Available | 26 |
| | Hispanic-Latino/a-or Spanish origin | 7 |
| | Mexican-Mexican American-Chicano/a | 8 |
| | Another Hispanic-Latino/a or Spanish Origin | 3 |

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: <https://healthcare.ascension.org/chna> and paper versions can be requested at Ascension Saint Mary’s Administration Office.

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 Saint Mary 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 Saint Mary used the following process and criteria:

| | |
|---|--|
|  | <p>Scope of Problem:</p> <ul style="list-style-type: none"> • How severe or prevalent is this issue in the community? • How many are impacted? |
|---|--|

| | |
|--|--|
|  | Disparities & Equity: <ul style="list-style-type: none"> • Are there health disparities that exist? • Can we address those in an impactful way? |
|  | Feasibility: <ul style="list-style-type: none"> • What is our capacity to make progress (staffing resources, financial resources, other support, etc.)? • Are there known interventions that exist? |
|  | Momentum: <ul style="list-style-type: none"> • Is there community readiness and/or political will to address this issue? |
|  | Alignment: <ul style="list-style-type: none"> • Do we have community partners that we can align with on this issue? • Do we need to build new relationships? |

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 Saint Mary 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:

- **Health & Wellness (Access to Care) -**
 - This strategic issue encompasses both access to care, taking into consideration the impact of social determinants of health, as well as chronic disease prevention. Access to comprehensive, quality healthcare services is important for promoting and maintaining health, preventing, and managing disease, reducing unnecessary disability and premature death, and achieving health equity. Chronic diseases are the most common, costly, and preventable of all health problems. Lack of access to routine health services creates health disparities in many health indicators based on race, ethnicity, income, and geography in Kankakee County. Heart disease is the second cause of hospitalizations

and leading cause of death in Kankakee County. Heart disease, stroke, and diabetes account for over 50% of deaths in Kankakee County. Four of these health risk behaviors – lack of physical activity, poor nutrition, tobacco use, and excess alcohol consumption – cause much of the illness, suffering, and early death related to chronic diseases and conditions.

- **Behavioral Health & Substance Use (*Mental & Behavioral Health*) -**
 - Behavioral health as a strategic issue is to include both mental health, substance use disorders as well as violence, safety, and trauma among Kankakee County residents. Depression is on the rise among both youth and older adults while the number of suicides per year in Kankakee County is unstable. Behavioral health was the top health issue named in the community input survey. Behavioral health issues impact population groups across income levels as well as racial and ethnic groups with effects of the COVID-19 pandemic adding additional strain on the local public health system. Findings from the assessments detail issues with access to local behavioral health services and resources.
- **Education & Employment (*SDoH- Education*) -**
 - Education is an important social determinant of health because the rate of poverty is higher among those without a high school diploma or high school equivalency exam (GED). Individuals without a high school education are at a higher risk of developing certain chronic illnesses, such as diabetes, as well as have less employment opportunities at higher wage rates. The median family income has increased in Kankakee County, but disparities exist among race and ethnicity. Poverty is a social determinant of health that can create barriers to accessing health services, healthy food, and other necessities needed for good health status. It can also affect housing status, educational opportunities, an individual's physical environment, and health behaviors. Unemployment can create financial instability, and, as a result, can create barriers to accessing healthcare services, insurance, healthy foods, and other basic needs. The effects of COVID-19 pandemic on unemployment and loss of insurance are on the horizon. The unemployment rate for Kankakee County (5.4) has declined since 2010 but is still higher than the rates for Illinois (4.3) and the U.S. (3.9). Respondents to the community survey identified lack of higher-wage jobs as a significant issue that impacts the quality of life in Kankakee County.

Ascension Saint Mary 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 Saint Mary 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, 2021 to June 30, 2024. 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.

Health & Wellness Strategy:

1. Increase food access in Kankakee County through community partnerships, program development and food insecurity screenings.
2. Increase access and education for individuals who are at high risk of diabetes or who have been medically diagnosed with diabetes to manage and prevent the disease to decrease health emergencies.

Ascension Saint Mary's Role:

Food Insecurity Programs

To address food insecurity in Kankakee County, Saint Mary's will continue our partnership with Northern Illinois Food bank in offering a monthly mobile food pantry and Screen and Intervene program. We will also continue to partner with community partners on developing a social determinants of health screening tool to be used at multiple locations, creating a referral process for clients to actively engage in addressing food insecurity. Saint Mary's will also continue the Micro Food Pantry program on our campus.

Diabetes Outpatient Program

In response to the increase in diabetes in Kankakee County, lack of access to specialists and lack of access to disease management programs, Saint Mary's is committed to develop a multispecialty Diabetic Outpatient Program to assist patients with disease prevention, disease management, nutrition counseling and weight management programs.

Key Collaborators Or Resources:

American Diabetes Association, Touchpoint Food Services and Registered Dieticians, Northern Illinois Food Bank, hospital case managers, social workers, primary care providers, Aunt Martha's, Hippocrates Clinic, Partnership for a Healthy Community, Kankakee County Health Department

Anticipated Impact:

• Increased access to healthy foods • Reduced food insecurity • Increased knowledge and access to diabetes and pre-diabetes education • Reduction in rates of diabetes and pre-diabetes in the community

Measured Impact:

• Total Number of Assessments/Screenings Conducted • Total Number of Individuals Served • Total Number of Meals Provided • Report REaL (Race, Ethnicity and Language) data • Total Number of Patient Appointments • Total Number of Referrals

Next Steps:

- Continued partnership with Northern Illinois Food Bank to provide RX Mobile program transferring to a walk up model to better engage communities to address health access.
- Engage Saint Mary's Kankakee case managers and social workers in food insecurity screenings with patients who present in our emergency room or who have an in-patient stay.
- Develop a Screen and Intervene referral form and process
- Engage primary care providers at Ascension Medical Group to screen patients and refer when a food insecurity is identified.
- Expand the micro food pantry program and provide healthy food options and community resources.
- Hire registered dietician with Certified Diabetes Care and Education Specialist credential by Fall 2021
- Market and communicate programs to community, community partners and primary care providers in the market.
- Create a patient referral process within EMRs for primary care providers (IP/OP).
- Expand Fit-N-Healthy programs to include virtual and pre-recorded options with tracking features.

Behavioral Health & Substance Use Strategy:

1. Increase number of community members trained in Mental Health First Aid (MFHA) to reduce stigma associated with mental health issues.
2. Increase access and education regarding deployment of Naloxone (Narcan) to individuals who are at risk of an opioid overdose.

**Ascension Mercy's Role:
Mental Health First Aid**

In response to a demonstrated system and state-wide need of addressing barriers to accessing and utilizing mental health services, Saint Mary and its community partners will continue to implement an evidence-based program, Mental Health First Aid (MHFA), to reduce the stigma associated with mental illness and improve the coordination of mental health care. MHFA trains community residents and first responders to recognize, respond, and seek assistance for signs of mental illness and substance abuse.

Kankakee County Opioid Task Force

In partnership with Kankakee County Health Department, the opioid task force consists of multispecialty organizations focused on distribution, education and training of Naloxone usage.

Key Collaborators Or Resources:

Kankakee County Health Department, Kankakee County Sheriff's Department, Kankakee County Coroner's Office, AMITA St. Mary's Kankakee Emergency Department, Mental Health First Aid (AmeriCorps) trainer, Helen Wheeler Center of Kankakee, local school districts, community organizations and first responders.

Anticipated Impact:

- Increased access to substance use disorder services
- Increased mental health education for professionals and community members
- Increased knowledge of substance use disorder services and mental health education

Measured Impact:

Total Number of Participants Completing MHFA Training • Increased Knowledge for > 80% of Participants • Total Number of MHFA Workshops • Report REaL (Race, Ethnicity and Language) data • Total Number of Assessments Conducted • Total Number of Individuals Served • Total Payor Mix Percentage • Report REaL (Race, Ethnicity and Language) data

Next Steps:

Identify target audiences for training including virtual and hybrid offerings with the hospital primary service area such as school districts, first responders and law enforcement. • Plan annual calendar of training to be offered by Saint Mary using MHFA AmeriCorps trainer. • Promote availability of training with target audiences. • Collect standardized feedback on training. • Continued partnership with Kankakee County Health Department and the Opioid Task Force, to develop a county-wide strategic plan to reduce opioid overdoses. • Promote availability of training and Narcan Kits to community partners, first responders and Ascension Medical Group personnel.

Education & Employment Strategy:

1. Partner with local school districts to support efforts to assist at-risk teens and provide workforce development programs.

Ascension Mercy's Role:

Youth Workforce Development Programs

Saint Mary's Kankakee is committed to participating with community partners to assist young people of great promise succeed both in school and on the job, leading to productive and rewarding careers.

Key Collaborators Or Resources:

• Kankakee School District 111 • Bradley-Bourbonnais School District 307

Anticipated Impact:

• Increased knowledge of health careers • Improved interpersonal skills • Improved job readiness • Decrease unemployment rate

Measured Impact:

• Total number of Youth Served • Total number of Tours • Total number of Job Shadowing and/or Internships

Next Steps:

Increase youth workforce development program opportunities that increase job readiness and interpersonal skill development. • Participate in JAG Illinois with Kankakee District 111. • Attend local job fairs to support community efforts to decrease county unemployment rate.



**Ascension Saint Mary
Kankakee**

Complete Implementation Strategy reports for each hospital are made publicly available at: <https://healthcare.ascension.org/chna> and paper versions can be requested at Ascension Saint Mary's Administration Office.

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 |
|-----------------------------------|--|
| Health & Wellness | <p>Strategy: Food Security Programs & Diabetes Programs Progress: During the tax year, Saint Marys continued to partner with Northern Illinois Food Bank to offer the mobile food pantry, Rx Mobile. Participants are screened at each mobile and follow up calls are made by the hospital's community outreach nurse. In FY23, twelve Rx mobile pantries were provided to the community that assisted 2,079 persons with healthy food. Additionally, the hospital continued to offer the 24/7 emergency micro pantry to the community. The pantry served 1,092 persons in FY23. In FY23, diabetes education was moved to another department which yielded 5 diabetes support group meetings and services to 50 outpatients.</p> |
| Behavioral health & Substance Use | <p>Strategy: Mental Health First Aid Trainings & Opioid Task Force Progress: During the tax year, Saint Mary's partnered with the Helen Wheeler Center for Mental Health to coordinate Mental Health First Aid Trainings. Saint Mary's began offering virtual training in FY23 through an AmeriCorps member assigned to Ascension Illinois. Saint Mary's actively participates in the Kankakee County Opioid Task Force including sharing data to reduce overdoses. Saint Mary's participated in the Narcan Kit disbursement program in which 42 kits were provided to patients in the Emergency Department in FY23. Marketing of narcan training was offered to provider offices, but no training was scheduled during the tax year.</p> |
| Education & Employment | <p>Strategy: Workforce Development Progress: Due to the pandemic, many initiatives/partnerships with local high school districts, colleges and universities were put on hold due to the visitor policy requirements. During the tax year, restrictions were lifted to resume planning for the 2022-23 school year. Saint Mary's participated in a total of 3 community job fairs in FY23 as well as finalized a Health Sciences Scholarship program with Kankakee Community College. Additionally, six students each quarter participated in a</p> |

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|-------------------------------------|--|
| | mentoring internship program at the hospital. |
| Community Support (Investing) | <p>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.</p> |
| Diversity, Equity & Inclusion (DEI) | <p>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.</p> <p>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.</p> <p>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.</p> <p>Each hospital ABIDE council focuses on cultural/workforce related initiatives, patient/consumer related initiatives, supplier/partner diversity related initiatives and community related initiatives.</p> <p>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</p> |

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| | <p>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.</p> |
| <p>Diverse & Local Purchasing</p> | <p>Strategy: Diverse Procurement Spend Progress: Ascension has set guidelines toward measurable success of supplier diversity. Specific numeric goals are currently being evaluated for FY24.</p> <p>Ascension guidelines are still being adopted, but include:</p> <ol style="list-style-type: none"> 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 identified to provide sufficient time to identify potential opportunities for diverse-owned suppliers to participate in the process. 2. Identifying suppliers to include in the sourcing process and to evaluate diverse-owned suppliers where possible. 3. Ensuring diverse-owned supplier classifications (i.e., minority, women, veteran or small) are flagged appropriately in the contract management system. 4. Consistent monitoring of metrics and analytics to evaluate and assess the effectiveness of the program and compliance with this policy. 5. Include diverse-owned suppliers who can meet The Resource Group requirements in procurement opportunities. 6. 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 services by The Resource Group. <p>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.</p> |
| <p>Diverse & Local Hiring</p> | <p>Strategy: SOAR (Strengths, Opportunities, Aspirations and Recommendations) Ascension Illinois' Associate Engagement Survey surrounds the ABIDE hallmarks. Our SOAR action planning focuses on efforts</p> |

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| | <p>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.</p> <p>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.</p> |
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Appendix

Hospital Net Patient Revenue Report

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| Ascension Illinois | |
| Net Revenue | |
| For the Twelve Months Ended June 30, 2023 | |
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| | SM-K |
| Net Patient Service Revenue | \$146,150,349 |
| Add Back Charity | \$19,691,078 |
| AG Reported Net Patient Service Revenue | \$165,841,427 |