

Ascension Resurrection

FY22 Annual Hospital Community Benefits Plan Report



Ascension



**Ascension
Resurrection**

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.

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Table of Contents

Table of Contents	3
Introduction	4
Ascension Resurrection	4
Ascension Mission Statement	4
Community Benefits Report	5
Community Benefits Provided	5
Financial Assistance	7
Community Health Needs Assessments (CHNA)	9
Prioritized Community Needs	9
Community Implementation Strategies	13
Community Implementation Strategy & Health Equity Progress	27
Appendix	31
Hospital Net Patient Revenue Report	31

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 Resurrection

As a Ministry of the Catholic Church, Ascension Resurrection is a non-profit hospital that provides medical care to Chicago and the surrounding communities. Ascension Resurrection 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 1953, Ascension Resurrection 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 Resurrection. Resurrection is a 337-bed academic hospital located on the northwest side of Chicago and serves Chicago community areas as well as in Suburban Cook County areas.

For more information about Ascension Resurrection, 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, 2021 through June 30, 2022.

Total Financial Assistance (Emergency & Non-Emergency Care at cost)	\$4,112,968
Emergency Department Financial Assistance (at cost)	\$2,980,797
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.	\$50,060,181
Total Community Benefits for Ascension Resurrection	\$54,173,149
<i>In addition to hospital community benefits, Ascension Illinois non-hospital entities provided \$514,609 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/project/ascension/healthcare/amita-locations/illinois/ilchi/financial-assistance-policy/amita-health-financial-assistance-policy-english.pdf>

During the fiscal year, Ascension Resurrection collected the following data on financial assistance applications:

<i>Facility Name</i>	<i>Approval and Denial Rates (Data for FY22)</i>	Number of Applications
Ascension Resurrection	Total submitted (complete & incomplete)	430
	Approved	348
	Denied	82

<i>Facility Name</i>	<i>Financial Assistance Denial Reason (Data for time period of 1-1-22 thru 6-30-22)</i>	Total
Ascension Resurrection	Missing Supporting Documents	19
	Over Income	17

Beginning on January 1, 2022 the hospital's Financial Assistance Application (FAA) was updated with the inclusion of optional demographic information including race, ethnicity, preferred language and gender identity.

Below is data collected for the six month period of January 1, 2022 through June 30, 2022.

<i>Facility Name</i>	<i>Gender</i>	Total
Ascension Resurrection	Not available	109
	Male	55
	Female	49
	Not Provided	7

<i>Facility Name</i>	<i>Preferred Language</i>	COUNTA of Last Name
Ascension Resurrection	NOT AVAILABLE	109
	NOT PROVIDED	46
	POLISH	31
	SPANISH	11
	ENGLISH	6
	SERBIAN	3
	UKRAINIAN	2
	TAGALOG	2
	ARMENIAN	2
	ARABIC	2
	URDU	1
	SZECH	1
	POLISH/CZECH/SLOVAK/ENGLISH	1
	MALAYALAU/HINDI	1
	GREEK	1
FILIPINO	1	

<i>Facility Name</i>	<i>Race</i>	Total
Ascension Resurrection	Not Available	109
	White	65
	Not Provided	35
	Filipino	3
	Black or African American	3
	Other Asian	2
	Asian Indian	2
	American Indian or Alaska Native	1

<i>Facility Name</i>	<i>Ethnicity</i>	Total
Ascension Resurrection	Not Available	109
	Not Provided	97
	Hispanic-Latino/a-or Spanish origin	8
	Mexican-Mexican American-Chicano/a	5
	Puerto Rican	1

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 Resurrection's Community Service Programming department by calling 773-990-5022.

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 Resurrection 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 Resurrection 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?
	<p>Disparities & Equity:</p> <ul style="list-style-type: none"> • Are there health disparities that exist? • Can we address those in an impactful way?
	<p>Feasibility:</p> <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?
	<p>Momentum:</p> <ul style="list-style-type: none"> • Is there community readiness and/or political will to address this issue?
	<p>Alignment:</p> <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 Resurrection 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. From the Community Input Survey, 20% identified access to healthy food as a need to improve health. This need was voted the top need in this category in the prioritization process. The top five most common searches in the Community Resource Directory included food pantries, food assistance, and food delivery.
- **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. From the Community Input Survey, 16% identified access to transportation as a need to improve health. The top three most common searches in the Community Resource Directory included transportation for healthcare and transportation in general.
 - **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 two need in this category in the Ascension Resurrection 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. From the Community Input Survey, the most important needed improvements identified: access to mental health services (44%), access to health care (42%), and access to community services (42%). This need was voted the number one need in this category in the Ascension Resurrection prioritization process.
 - **Prevention and Treatment of Priority Health Conditions: Maternal and Child Health and Mental Health -**
 - **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 Resurrection prioritization process.

Ascension Resurrection 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 Resurrection 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 Resurrection (AR)
Prioritized Health Need Social and Structural Determinants of Health (<i>SDoH: Food Security</i>)
Strategy Increase food access assistance for food insecure individuals for AR community residents.
Strategy Source <ul style="list-style-type: none"> ● Micro Pantry ● Community Garden ● Local Food Pantry Support and Partnerships
Objective By June 30, 2025, increase the number of individuals served annually by 10% from the Micro Pantry. By June 30, 2025, increase the pounds of produce grown in the Community Garden and donated annually by 5%
Target Population <ul style="list-style-type: none"> ● Target Population: AR community residents, including AR associates and patients ● Medically Underserved Population: Individuals experiencing food insecurity in AR community
Collaborators <ul style="list-style-type: none"> ● Other Ascension hospitals: Ascension Mercy, Ascension Saint Joseph-Elgin, Ascension Saint Joseph-Joliet ● Joint Venture: "N/A" ● Collaborators: Ascension Illinois Food Access & Nutrition Workgroup; Greater Chicago Food Depository; New Hope Community Food Pantry; Boy Scouts of America; Faith Community Nursing; Norwood Park Senior Center; Resurrection College Prep ● Consultants: Touchpoint ● Other non-profit hospital - "N/A"
Resources Resources the collaborators plan to commit: <ul style="list-style-type: none"> ● Other Ascension hospital(s): staff time donated, funding/cash donations, materials to build and/or maintain community garden, education collateral, marketing resources, and others ● Joint Venture: "N/A" ● Collaborators: New Hope Community Food Pantry; Norwood Park Senior Center; Boy Scouts of America; Resurrection College Prep: staff/volunteer time donated ● Consultants: "N/A"

<ul style="list-style-type: none"> • Other non-profit hospital: "N/A" 	
ACTION STEPS: Micropantry	ROLE/OWNER
Appoint an Associate Lead for this strategy	Ascension Resurrection Community Health & Faith Community Nursing
Participate in Ascension Illinois Food Access & Nutrition Workgroup	Ascension Resurrection Community Health and Greater Chicago Food Depository
Identify internal resources for supporting food donations, food distribution, and food access program delivery	Ascension Resurrection
Establish food drive event dates	Ascension Resurrection
Identify potential community partners to support MicroPantry	Ascension Resurrection - Community Health
Provide funding support for local community food access programs and initiatives	Ascension Resurrection Community Support Review Committee; Ascension Illinois Community Benefit
Monitor work, evaluate progress, and report outcomes	Ascension Resurrection Implementation Strategy Workgroup and Community Health
ACTION STEPS: Community Garden	ROLE/OWNER
Appoint an Associate Lead for this strategy	Ascension Resurrection Community Health & Faith Community Nursing
Participate in Ascension Illinois Food Access & Nutrition Workgroup	Ascension Resurrection Community Health and Greater Chicago Food Depository
Maintain a community garden at Ascension Resurrection	Ascension Resurrection
Partner with the local food pantry, schools, and senior centers for assistance with annual planting, maintenance and watering	Ascension Resurrection - Community Health
Identify potential community partners to support the community garden	Ascension Resurrection - Community Health
Provide funding support for local community food access programs and initiatives	Ascension Resurrection Community Support Review Committee; Ascension Illinois Community Benefit
ACTION STEPS: Local Food Pantry Support and Partnerships	ROLE/OWNER
Appoint an Associate Lead for this strategy	Ascension Resurrection Community Health Director
Participate in Ascension Illinois Food Access and Nutrition Workgroup	Ascension Resurrection Community Health and Greater Chicago Food Depository
Identify local food pantries in need of financial support	Ascension Illinois Community Health Director

Provide funding support for local community food access programs and initiatives	Ascension Illinois Community Health Director
Monitor work, evaluate progress, report outcomes	Ascension Resurrection Implementation Strategy Workgroup and Community Health
Output(s) and/or Outcome(s) <ul style="list-style-type: none"> ● Baseline: FY22 data ● Target: Increase from baseline the following: Total number of meals/persons served; Total pounds of food provided; Total Cash Donations provided for Food Access to Community Partners ● Data Source; Data Owner: Feeding America; Greater Chicago Food Depository 	
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 Resurrection (AR)
Prioritized Health Need Social and Structural Determinants of Health (<i>SDoH- Housing & Transit</i>)
Strategy Provide transportation services for patients and community residents.
Strategy Source <ul style="list-style-type: none"> ● Lyft Concierge Services ● Medi-Ride
Objective By June 30, 2025, increase the percentage of individuals that have been screened and connected to transportation assistance services.
Target Population <ul style="list-style-type: none"> ● Target Population: AR patients and community residents ● Medically Underserved Population: Individuals experiencing transportation barriers in the AR community especially the elderly, low-income, and disabled
Collaborators <ul style="list-style-type: none"> ● Other Ascension Hospitals: Ascension Mercy, Ascension Saint Alexius, Ascension Joseph-Elgin, Ascension Saint Joseph-Joliet, Ascension ● Joint Venture: N/A ● Collaborator: Lyft, Medi-Ride; Case Management - program collaborators ● Consultants: N/A ● Other Non-Profit Hospitals: N/A
Resources Resources the collaborators plan to commit:

<ul style="list-style-type: none"> Ascension Resurrection: staff time donated for program maintenance Ascension Resurrection: cash donations to community organizations in need of transportation assistance services Lyft Concierge Services, Medi-ride: Program Coordinator 	
ACTION STEPS: Transportation Services; Medi-Ride	ROLE/OWNER
Appoint an Associate Lead for this strategy	Ascension Resurrection Case Management, Cancer Center, Therapies
Identify patients (i.e. uninsured, underinsured, VA, Medicaid, Medicare, etc.) in need of transportation assistance	Ascension Resurrection Case Management, Cancer Center, Therapies
Establish eligibility criteria for patients in need of transportation assistance	Ascension Resurrection Case Management, Cancer Center, Therapies
Pay Medi-Ride; Lyft Concierge Services (LCS) monthly/annual service fees, if applicable	Ascension Resurrection
Provide funding support for local community based organizations (CBO) in need of transportation assistance	Ascension Resurrection Community Support Review Committee
Monitor work, evaluate progress, report outcomes	Ascension Resurrection Implementation Strategy Workgroup and Community Health
Output(s) and/or Outcome(s) <ul style="list-style-type: none"> Baseline: FY22 data Target: <ul style="list-style-type: none"> Increase total of persons screened with transportation needs from baseline Increase total Number of rides provided from baseline Data Source; Data Owner: Medi-Ride; 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 Resurrection (AR)
Prioritized Health Need Social and Structural Determinants of Health (<i>SDoH- Education</i>)
Strategy Provide opportunities for students to engage with health care professionals.
Strategy Source <ul style="list-style-type: none"> 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 AR.

Target Population	
<ul style="list-style-type: none"> ● Target Population: AR community residents, teen and college age students 	
Collaborators	
<ul style="list-style-type: none"> ● Other Ascension hospitals: Ascension Saint Francis, Ascension Saint Joseph-Chicago, Ascension Saint Mary-Chicago ● Joint Venture: "N/A" ● Collaborators: Loyola University, Oak Point University, Resurrection College Prep, other area high schools, colleges, and universities. ● Consultants: "N/A" ● Other non-profit hospital: "N/A" 	
	ROLE/OWNER
Appoint an Associate Lead for this strategy	Ascension Resurrection Nursing; Community Health; Faith Community Nursing
Identify community partners for workforce development	Ascension Resurrection
Mentor high school students interested in healthcare careers	Ascension Resurrection - Community Health; Faith Community Nursing; Nursing; Radiology; Therapies
Support student clinicals who are entering healthcare careers	Ascension Resurrection - Community Health; Faith Community Nursing;; Nursing; Radiology Therapies
Partner with a local college or university to offer a career accelerated program	Ascension Resurrection - Nursing
Monitor work, evaluate progress, report outcomes	Ascension Resurrection Implementation Strategy Workgroup; Community Health
Output(s) and/or Outcome(s)	
<ul style="list-style-type: none"> ● Baseline: FY22 data ● Target: <ul style="list-style-type: none"> ○ 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 Resurrection (AR)
Prioritized Health Need Access to Care and Community Resources (<i>Access to Care</i>)
Strategy

Increase access to community resources and community-based services for the AR community.	
Strategy Source	
<ul style="list-style-type: none"> • Neighborhood Resource Directory; Findhelp • Local Community Based Organization (CBO) Support and Partnerships 	
Objective	
By June 30, 2025, the number of searches in the directory will increase.	
Target Population	
<ul style="list-style-type: none"> • Target Population: AR community residents and patients. • Medically Underserved Population: AR community residents who are underinsured/uninsured. 	
Collaborators	
<ul style="list-style-type: none"> • Other Ascension hospital: Ascension Holy Family, Ascension Mercy, 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, and Ascension Saints Mary and Elizabeth-Chicago • 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:	
<ul style="list-style-type: none"> • Other Ascension hospital(s): Strategy sources and funding • Joint Venture: "N/A" • Collaborators: Community-based organizations, Faith-based Institutions, Food Pantries • 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 Associate Lead for this strategy	Ascension Resurrection Community Health; Faith Community Nursing
Promote awareness of the Community Resource Directory via flyers, social media, Ascension, Community Benefit & Community Partner newsletters	Ascension Resurrection Community Health; Faith Community Nursing
Identify internal staff that need Community Resource Directory training	Ascension Illinois: Population Health, Community Benefit, Community Health; Faith Community Nursing
Identify external partners for Community Resource Directory	Ascension Illinois Community Benefit, Community Health; Faith Community Nursing
Establish calendar of Community Resource Directory trainings for virtual and/or hybrid offerings	Ascension Illinois: Population Health; Community Health
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 external partners	Ascension Illinois: Population Health and Community Benefit, Community Health
Monitor work, evaluate progress, and report outcomes	Ascension Resurrection Implementation Strategy Workgroup
Output(s) and/or Outcome(s) <ul style="list-style-type: none"> ● Baseline: FY22 Data ● Target: <ul style="list-style-type: none"> ○ 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 Resurrection (AR)
Prioritized Health Need Access to Care and Community Resources (<i>Access to Care</i>)
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
Objective By June 30, 2025, there will be an increase of medication assistance from FY22 baseline.
Target Population <ul style="list-style-type: none"> ● Target Population: AR community residents and AR patients ● Medically Underserved Population: Uninsured and underinsured individuals
Collaborators <ul style="list-style-type: none"> ● Other Ascension hospital: Ascension Mercy, Ascension Saint Francis, Ascension Saint Joseph-Elgin ● Joint Venture: "N/A" ● Collaborators: Ascension ministry pharmacies; Ascension Foundation; Community-based organizations; Faith-based Institutions; Case Management ● Consultants: Dispensary of Hope; Save the Day ● Other non-profit hospital: "N/A"
Resources Resources the collaborators plan to commit: <ul style="list-style-type: none"> ● Other Ascension hospital(s): Strategy sources and funding

<ul style="list-style-type: none"> ● Joint Venture: "N/A" ● Collaborators: Ascension ministry pharmacies; Community-based organizations, Faith-based Institutions; Case Management - program collaborator ● Consultants: Dispensary of Hope; Save the Day ● Other non-profit hospital: "N/A" 	
ACTION STEPS: Medication Assistance	ROLE/OWNER
Appoint Associate Lead for this strategy	Ascension Resurrection Retail Pharmacy; Case Management
Pay annual DoH membership fee for participating pharmacy if applicable	Ascension Resurrection
Conduct initial application interview with the patient to determine eligibility	Ascension Resurrection Pharmacy; Case Management
Coordinate applications for manufacturers' Patient Assistance Programs	Ascension Resurrection Pharmacy; Case Management
Provide free or discounted medications and testing supplies to all uninsured and underinsured individuals who qualify	Ascension Resurrection Pharmacy; Case Management
Promote awareness of medication assistance programs in the AR communities	Ascension Illinois; Community Benefit; Community Health; Population Health; Marketing/Communications
Monitor work, evaluate progress, and report outcomes	Ascension Resurrection Implementation Strategy Workgroup
Output(s) and/or Outcome(s) <ul style="list-style-type: none"> ● Baseline: FY22 Data ● Target: Increase total number of individuals served; Increase number of prescriptions filled and received ● Data Source; Data Owner: Ascension ministry pharmacies; Dispensary of Hope; 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 Enrollment Services (PHICES)
Hospital(s) Name(s) Ascension Resurrection (AR)
Prioritized Health Need Access to Care and Community Resources (<i>Access to Care</i>)
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 <ul style="list-style-type: none"> ● Target Population: Adults, children, and immigrants ● Medically Underserved Population: Uninsured and underinsured individuals 	
Collaborators <ul style="list-style-type: none"> ● Other Ascension hospital: Ascension Holy Family, Ascension Mercy, 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, and Ascension Saints Mary and Elizabeth-Chicago, ● Joint Venture: "N/A" ● Collaborators: Ascension Medical Group, Community-based organizations, Faith-based Institutions, Food Pantries ● Consultants: Advocatia ● Other non-profit hospital - "N/A" 	
Resources Resources the collaborators plan to commit: <ul style="list-style-type: none"> ● Other Ascension hospital(s): staff time donated, funding/cash donations to community organizations, education collateral, marketing resources, and others ● Joint Venture: "N/A" ● Collaborators: Ascension Medical Group, Community-based organizations, Faith-based Institutions, Food Pantries, program collaborators ● Consultants: ADVOCATIA - program consultant ● Other non-profit hospital: "N/A" 	
ACTION STEPS: PHICES	ROLE/OWNER
Appoint Associate Lead for this strategy	Ascension Resurrection Community Benefit; Community Health; Faith Community Nursing
Promote awareness of PHICES via flyers, social media, Ascension and Community partner newsletters	Ascension Resurrection Community Benefit; Community Health; Faith Community Nursing
Identify external partners that need public health PHICES information	Ascension Illinois Community Benefit; Community Health; Faith Community Nursing
Establish calendar of potential PHICES events in the community	Ascension Illinois Community Benefit; Community Health
Promote availability of PHICES services within target audiences	Ascension Illinois Community Benefit and Community Health; Marketing/Communications
Monitor work, evaluate progress, report outcomes	Ascension Resurrection Implementation Strategy Workgroup
Output(s) and/or Outcome(s) <ul style="list-style-type: none"> ● Baseline: FY22 Data ● Target: 	

<ul style="list-style-type: none"> ○ 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: Patient Navigator in the Emergency Department (ED)	
Hospital(s) Name(s) Ascension Resurrection (AR)	
Prioritized Health Need Access to Care and Community Resources (<i>Access to Care</i>)	
Strategy Provide free navigation services for patients in need of follow up care, a medical provider, or other health related social needs	
Strategy Source Healthful Care; Care Continuity; Vituity	
Objective By June 30, 2025, there will be an increase of health services navigation from FY22 baseline.	
Target Population <ul style="list-style-type: none"> ● Target Population: AR patients ● Medically Underserved Population: Uninsured and underinsured individuals 	
Collaborators <ul style="list-style-type: none"> ● Other Ascension hospital: Ascension Holy Family, Ascension Mercy, 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, and Ascension Saints Mary and Elizabeth-Chicago ● Joint Venture: "N/A" ● Collaborators: "N/A" ● Consultants: Healthful Care; Care Continuity; Vituity ● Other non-profit hospital: "N/A" 	
Resources Resources the collaborators plan to commit: <ul style="list-style-type: none"> ● Other Ascension hospital(s): staff time donated ● Joint Venture: "N/A" ● Collaborators: "N/A" ● Consultants: Healthful Care; Care Continuity; Vituity ● Other non-profit hospital: "N/A" 	
ACTION STEPS: Patient Navigator in the ED	ROLE/OWNER

Appoint an Associate Lead for this strategy	Ascension Resurrection Emergency Department
Promote awareness of free navigation services available	Ascension Resurrection; Emergency Department
Train internal staff on the workflow and service coordination process	Ascension Resurrection; Emergency Department
Provide navigation services for patients in need of follow up care, a medical provider, or other health related social needs	Ascension Resurrection; Emergency Department
Monitor work, evaluate progress, report outcomes	Ascension Resurrection Implementation Strategy Workgroup
Output(s) and/or Outcome(s) <ul style="list-style-type: none"> ● Baseline: FY22 Data ● Target: <ul style="list-style-type: none"> ○ Increase from baseline the # of Medicaid & Self Pay/Uninsured patients offered assistance ○ Increase from baseline the # or % Medicaid & Self Pay/Uninsured patients accepted assistance ● Data Source; Data Owner: Healthful Care; Care Continuity; Vituity 	
ANTICIPATED IMPACT	
The anticipated impact of these actions will provide access to health services to people who otherwise might not be delaying or stopping care due to lack of an appropriate provider.	

STRATEGY 8 : Maternal and Child Health Resources and Services
Hospital(s) Name(s) Ascension Resurrection (AR)
Prioritized Health Need Priority Health Conditions: Maternal and Child Health (<i>Maternal, Infant, Child Health</i>)
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 New Beginnings PREM Tool Social Determinants of Health (SDoH) Screening
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 <ul style="list-style-type: none"> ● Target Population: Pregnant women in AR communities ● Medically Underserved Population: Un- &/or under-insured pregnant women; women of color

Collaborators <ul style="list-style-type: none"> ● Other Ascension hospital: Ascension Holy Family, Ascension Saint Mary-Chicago ● Joint Venture: "N/A" ● Collaborators: IL Perinatal Quality Collaborative, Ascension Illinois Medical Group; Obstetrical Healthcare Providers, FQHCs, New Beginnings, Ascension Women’s Health Service Line ● Consultants: "N/A" ● Other non-profit hospital: "N/A"
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Resources List organization(s) and the resources that each organization will be committing to the (e.g., people, process, funding), delete if not applicable. <ul style="list-style-type: none"> ● Other Ascension hospital: Ascension Saint Mary-Chicago - financial and staff support ● Joint Venture: "N/A" ● Collaborators: IL Perinatal Quality Collaborative, Ascension Illinois Medical Group; Community-Based Organization Obstetrical Healthcare Providers, FQHCs, New Beginnings, Ascension Women’s Health Service Line ● Consultants: IL Perinatal Quality Collaborative, IL Department of Public Health, Perinatal Advisory Committee ● Other non-profit hospital: "N/A"
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ACTION STEPS: Maternal and Child Health	ROLE/OWNER
Appoint Associate Lead for this strategy	AR Mother Baby Unit
Participate in the Ascension Illinois Women’s Health committee and the IL Perinatal Quality Collaborative	Ascension Illinois Women’s Health committee
Participate in the Ascension Resurrection prenatal workgroup	AR Prenatal Workgroup
Identify internal resources for supporting prenatal and postpartum care coordination	AR Prenatal Workgroup
Identify and educate community partners and healthcare providers to engage in prenatal and postpartum service coordination	AR Prenatal Workgroup
Train internal staff on the workflow and service coordination process of SDoH Screening and PREM Tool	AR Prenatal Workgroup
Monitor work, evaluate progress, and report outcomes	AR Prenatal Workgroup

Output(s) and/or Outcome(s) <ul style="list-style-type: none"> ● Baseline: FY22 Data; TBD based on the preliminary PREM results ● Target: <ul style="list-style-type: none"> ○ 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.

<ul style="list-style-type: none"> ● Data Source; Data Owner: Ascension Illinois, IL Perinatal Quality Collaborative, Ascension Resurrection Mother Baby Unit
ANTICIPATED IMPACT
The anticipated impact of these actions is improved health outcomes for mothers and babies.

STRATEGY #9: Access to Mental Health Education and Awareness	
Hospital(s) Name(s) Ascension Resurrection (AR)	
Prioritized Health Need Prevention and Treatment of Priority Health Conditions: Mental Health (<i>Mental & Behavioral Health</i>)	
Strategy Provide 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 training participants.	
Target Population <ul style="list-style-type: none"> ● Target Population: AR community residents, AR associates and patients, teen students in junior high and high school. ● Medically Underserved Population: Teen and Adult individuals experiencing mental health issues. 	
Collaborators <ul style="list-style-type: none"> ● Other Ascension hospital: Ascension Holy Family, Ascension Mercy, 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, and Ascension Saints Mary and Elizabeth-Chicago ● Joint Venture: "N/A" ● Collaborators: Community-based organizations, Faith-based Institutions, Schools, Food Pantries ● Consultants: Americorps ● Other non-profit hospital - "N/A" 	
Resources Resources the collaborators plan to commit: <ul style="list-style-type: none"> ● Other Ascension hospital(s): Trainings and mental health education; funding for the consultants ● Joint Venture: "N/A" ● Collaborators: Community-based organizations, Faith-based Institutions, Schools, Food Pantries - program collaborators ● Consultants: Americorps - staff to provide the trainings ● Other non-profit hospital: "N/A" 	
ACTION STEPS: Mental Health First Aid Trainings	ROLE/OWNER

Appoint an Associate Lead for this strategy	Ascension Illinois Community Benefit; Community Health; Faith Community Nursing
Promote awareness of the Mental Health First Aid (MHFA) trainings via flyers, social media, Ascension and Community Partner newsletters	Ascension Resurrection Community Health; Faith Community Nursing
Identify internal staff that need MHFA training	Ascension Illinois: Community Benefit; Community Health
Identify external partners that need MHFA training	Ascension Illinois: Community Benefit; Community Health
Establish calendar of MHFA trainings for virtual and/or hybrid offerings including dates, times, and locations	Ascension Illinois: Community Benefit; Community Health
Promote availability of MHFA training within target audiences	Ascension Illinois: Community Benefit; Community Health, Marketing/ Communications
Host MHFA training for internal and external partners	Ascension Illinois: Community Benefit; Community Health; Faith Community Nursing
Monitor work, evaluate progress, and report outcomes	Ascension Resurrection Implementation Strategy Workgroup
Output(s) and/or Outcome(s) <ul style="list-style-type: none"> ● Baseline: FY22 Data ● Target: <ul style="list-style-type: none"> ○ Increase the total number of individuals that received MHFA training from baseline. ● Data Source; Data Owner: Mental Health First Aid; Americorp 	
ANTICIPATED IMPACT	
The anticipated impact of these actions is increased access to Mental Health education and resources.	

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 Resurrection’s Community Service Programming department by calling 773-990-5022.

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	<p>Strategy: Community Garden Progress: Each year, 100% of the produce from the community garden will be donated to the underserved clients of the local food pantry: New Hope Community Food Pantry. Nearly 523 pounds of produce was provided to the pantry in the tax year that assisted 437 low-income community members. In FY22, the Community Garden had 4 additional beds added to expand efforts.</p> <p>Strategy: Kids Summer Meals Program & Weekend Backpack Program Progress: In FY22, The Kids Summer Meal Program collaborated with Greater Chicago Food Depository, New Hope Community Food Pantry, and Union Ridge School District 86 to support 342 children who received 1,691 meals from over 4 different schools and 3 zip codes. Race/Ethnicity: White/Causacian: 42%; Hispanic: 23%; African American 16%; Asian 7%; Middle Eastern 6%. Due to the COVID-19 pandemic, the Weekend Backpack Food Rescue Program transformed to a referral delivery service with the New Hope Community Food Pantry and a Micropantry was created at Resurrection.</p>
Access to Care, Community Resources & Systems Improvement	<p>Strategy: Community Resource Resource Directory (Aunt Bertha/Findhelp.org) Progress: Resurrection associates utilized the social determinant of health software, Findhelp.org, to connect and refer patients to local resources such as food pantry, health clinics, utilities support and more. Additionally, an external website is hosted for the community as a community benefit to search for their own resources. In FY22, additional community partners were added to the resource portal and training held for Community Based Organizations and internal associates. There are on average 4,583 resources available in the directory for the hospital community. Thirty referrals were made for the community members & a pilot program was launched for the</p>

	<p>hospital’s Faith Community Nurses to use the tool in the community.</p>
Mental Health & Substance Use Disorder	<p>Strategy: Mental Health First Aid Trainings Progress: In FY22, Resurrection Medical Center continued reaching out to external partners to host training. One Adult Mental Health First Aid virtual training was completed with 26 community participants during the tax year.</p>
Chronic Condition Prevention & Management	<p>Strategy: Diabetes Prevention Program Progress: In FY22, for the Diabetes Prevention Program (DPP), there were 2 in-person cohort groups with 100% completion rate.. Due to the COVID-19 continued pandemic, participants were hesitant to register for the sessions. Additionally, two virtual sessions were offered.</p> <p>Strategy: Flu/Fecal Occult Blood Test (FOBT) Screenings Progress: In FY22, the Flu/FOBT Screening program provided 1,168 standard and high-dose influenza vaccinations in 23 clinics. The Colorectal Cancer Screenings were conducted in 4 clinics with these results: 81 total screened; 28 eligible to receive the FOBT kit; one returned kit with a negative result. One eligible/refused the FOBT; 12 were older than 85 years old not eligible, and 40 were not eligible to have the procedure.</p>
Community Support (Investing)	<p>Strategy: Allocation of Giving to Prioritized Community Needs Progress: Through the adoption of a market-wide policy in early 2022, goals were established for FY22 to ensure outgoing restricted cash donations were being invested with community organizations addressing the hospital community’s top prioritized needs from the most recent Community Health Needs Assessments. The market-level goal for all of Ascension Illinois was 60% of outgoing community support would be assisting with prioritized needs and providing a community benefit. In FY22, forty-three percent of Reurrection’s outgoing community support were community benefit.</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</p>

	<p>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 FY22 and engaged in group activities and training to support members’ work as ambassadors for ABIDE in their respective roles.</p> <p>During FY22, ABIDE ministry councils were implemented at the hospital level to ensure 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 Training Progress: In FY22, Ascension developed a training module on Psychological Safety in support of our rollout of ABIDE. Psychological safety is a necessary component of fostering meaningful diversity and inclusion. Over 300 leaders at Ascension IL have taken this training. Additionally, there is a training module on implicit bias and ABIDE in Ascension Illinois’ required for new hire and annual training. In addition, the Director of Equity, Inclusion, and Language Services provided multiple ad hoc, small group trainings on topics including fostering workplace inclusivity, cultural humility, health equity, and birth equity upon request. In total, over 400 associates attended these training sessions in person or virtually.</p>
Diverse & Local Purchasing	<p>Strategy: Diverse Procurement Spend Progress: In FY22 Ascension Illinois established a goal to increase its procurement spend with diverse vendors. Diverse spend FY22 baseline was \$15,753,949. Ascension Illinois collaborates with West Side United and the Illinois Hospital Association Supplier Diversity Task Force to identify diverse vendors providing products or services that we purchase. We work with our procurement partner, The Resource Group, and Ascension subsidiary companies that manage</p>

	<p>construction, environmental services and food services to identify opportunities to redirect any existing spend to diverse vendors. Several major capital projects were launched in FY21 and FY22 which presented opportunities to direct new construction spending to diverse firms. Several non-construction opportunities were also identified that are being pursued.</p>
<p>Diverse & Local Hiring</p>	<p>Strategy: Associate Perceptions Survey & Organizational Assessment Progress: Ascension Illinois participated in an associate experience survey conducted to Ascension specifically designed to assess associate perceptions of the five ABIDE hallmarks within our organization. Responses were analyzed by various demographic categories, including race, ethnicity, gender, geography and job type. Areas of strength and opportunities for improvement were identified and action plans were being developed.</p> <p>Ascension Illinois conducted an organizational assessment and analysis to look at associate promotion and turnover rates by race and ethnicity. Based on this analysis, Ascension Illinois reviewed and changed policies related to associate tardiness during the first 90 days.</p> <p>Ascension Illinois is committed to a diverse workforce that reflects the communities that we serve. In FY22 we initiated multiple talent acquisition strategies, including posting Nursing positions on diverse websites to recruit African American, Hispanic and Asian nurses.</p>

Appendix

Hospital Net Patient Revenue Report

Ascension Illinois	
Net Revenue	
For the Twelve Months Ended June 30, 2022	
	Resurrection
Net Patient Service Revenue	313,737,753
Add Back Charity	24,354,817
AG Reported Net Patient Service Revenue	338,092,570