Annual Non Profit Hospital Community Benefits Plan Report

Name of Hospital Reporting: Carle BroMenn Medical Center			
	N		
Mailing Address: 1304 Franklin Avenue (Street Address/P.O. Box)	Normal, Illinois 61761 (City, State, Zip)		
Physical Address (if different than mailing address):			
Tayseas . Louises (in americae man maning address).			
(Street Address/P.O. Box)	(City, State, Zip)		
Reporting Period: 01 / 01 / 2024 through 12 / 31 / 2024 Taxpayer Number	•		
Month Day Year Month Day Year	00 0002505		
If part of a health system, list the other Illinois hospitals included in the health system (No Hospital Name Address	ote: A separate report must be filed for each Hosp). FEIN #		
ATTACH Mission Statement: The reporting entity must provide an organizational mission statement that identi health care needs of the community and the date it was adopted.	Attachment 1 ifies the hospital's commitment to serving the		
2. ATTACH Community Benefits Plan: The reporting entity must provide it's most recent Community Benefits Plan and specify the date it was adopted. The plan should be an operational plan for serving health care needs of the community. The plan must: 1. Set out goals and objectives for providing community benefits including charity care and government-sponsored indigent health care. 2. Identify the populations and communities served by the hospital. 3. Disclose health care needs that were considered in developing the plan.			
3. REPORT Charity Care: Charity care is care for which the provider does not expect to receive payment fro care does not include bad debt. In reporting charity care, the reporting entity must based on the total cost to charge ratio derived from the hospital's Medicare cost Inpatient Ratios), not the charges for the services. Charity Care. ATTACH Charity Care Policy: Reporting entity must attach a copy of its current charity care policy and specify	ast report the actual cost of services provided, report (CMS 2552-96 Worksheet C, Part 1, PPS		
	ano auto it vius adopted.		

4. REPORT Community Benefits actually provided other than char	•		Attachm
See instructions for completing Section 4 of Form AG-CBP-1 (Comm	unity Benefits Plan Annual Report Form For	Not For Profit	Hospital
Community Benefit Type			
Language Assistant Services	Onlars not paid by hospital, see Attachment 4	\$_ -	-
Financial Assistance		\$2,654,622	_
Government Sponsored		\$ <u>36,359,569</u>	=
Donations		<u>\$353,092</u>	-
Volunteer Services a) Employee Volunteer Services\$	0		
b) Non-Employee Volunteer Services \$	134,308		
c) Total (add lines a and b)		\$ <u>434,</u> 308	_
Education		<u>\$1,254,569</u>	_
Government-sponsored program services		\$_0	_
Research		<u>\$0</u>	_
Subsidized health services		\$ <u>15,468,</u> 454	_
Bad debts		\$3,897,968_	
Other Community Benefits		\$213,241	_
Attach a schedule for any additional community benefits not	detailed above.		
ATTACII Andidad Financial Statements for the constitution			Attachn
ATTACH Audited Financial Statements for the reporting	period.		
Under penalty of perjury, I the undersigned declare and certify the Community Benefits Plan Report and the documents attached the Annual Non Profit Hospital Community Benefits Plan Report and Dennis Hesch/ Chief Finance and and Strategy Officer	reto. I further declare and certify that	the Plan and	i the
Name/Title (Please Print)	Phone: Area Code/ Telephone No	.	
	•		
Color (forms)	_		
Signature Signature	Date.		
John Walsh	217/902-5392		
<u>c</u>	400	No.	
John Walsh	217/902-5392	No.	_

CY 2024 Carle BroMenn Medical Center Report – Attachment 1 For period from 1/1/2024 through 12/31/2024

Attachment 1: Mission Statement

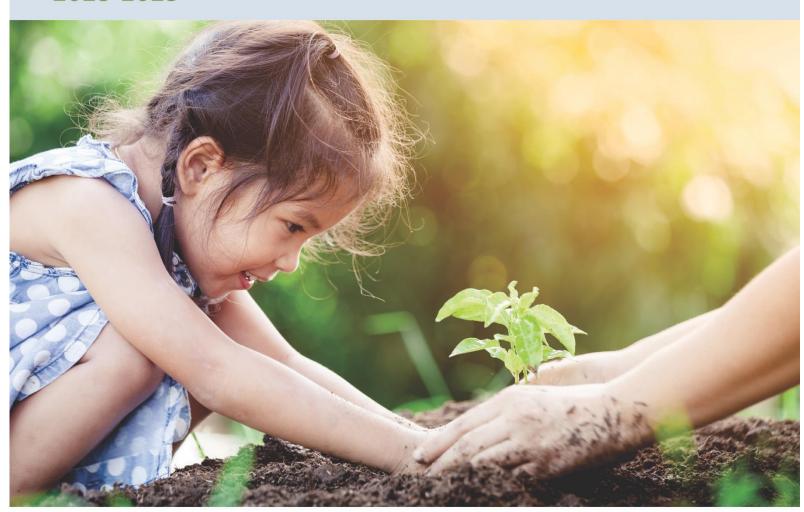
The Carle Health shared Mission Statement was adopted by Carle's Board of Trustees on March 12, 2021.

To be your trusted partner in all healthcare decisions.

Our mission statement defines who we are, what we stand for, and the importance of our relationship with our patients, staff and community. As a locally-based private, not-for-profit organization, we take seriously our obligation to treat and provide high quality care to everyone, regardless of their ability to pay. As the region's trusted healthcare provider, we are also called to be the region's trusted community partner – providing assistance, programs and resources when and where our communities need them

COMMUNITY HEALTH IMPROVEMENT PLAN

MCLEAN COUNTY/ILLINOIS 2023-2025











McLean County IL Community Health Improvement Plan 2023 – 2025

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I. Introduction from the McLean County Community Health Council's Executive Steering Committee

a) Philosophy and Development of Collaborative

The formation of the McLean County Community Health Council in April 2015 marked an important milestone for community health in McLean County. Prior to the development of the first joint 2016 McLean County Community Health Needs Assessment (CHNA) and the 2017-2019 McLean County Community Health Improvement Plan (CHIP), the two hospitals in McLean County (Carle BroMenn Medical Center and OSF St. Joseph Medical Center) and the McLean County Health Department each conducted their own needs assessment which resulted in three community health plans for McLean County. For the second cycle of the joint CHNA (2019) and joint CHIP (2020-2022), Chestnut Family Health Center of Chestnut Health Systems, the local Federally Qualified Health Center (FQHC), joined this collaborative effort since it too is required to complete a needs assessment every three years as part of its FQHC compliance requirements. All four organizations are dedicated to working with partners to improve the health of the community and strongly believe in the philosophy of collaboration.

The Executive Steering Committee of the McLean County Community Health Council, consisting of at least one member from each of the four organizations required to complete periodic community health needs assessments (Carle BroMenn Medical Center, McLean County Health Department, OSF St. Joseph Medical Center, and Chestnut Health Systems), was identified to lead this collaborative process and worked together to produce the 2022 McLean County Community Health Needs Assessment. The 2022 CHNA was posted on each organization's website for public access on August 1, 2022. The McLean County Community Health Council met three times in 2022 to oversee the needs assessment and plan development as well as to monitor progress made through the three priority action teams formed for each of the three significant health needs identified through the needs assessment and subsequent McLean County Community Health Council meetings: Behavioral Health, Access to Care, and Healthy Eating/Active Living.

The result of the third round of this collaborative process was the production of a joint community health needs assessment in 2022 followed by a joint community health improvement plan for McLean County for 2023 - 2025.

b) Community Health Improvement Plan Report Approval

Carle BroMenn Medical Center and OSF St. Joseph Medical Center are utilizing this joint Community Health Improvement Plan to meet their 2022 Community Health Needs Assessment and 2023 – 2025 Community Health Improvement/Implementation Plan requirements under 501(r) added to the Internal Revenue Code as part of the Patient Protection and Affordable Care Act. The McLean County Health Department will utilize the joint 2022 Community Health Needs Assessment and 2023 – 2025

Community Health Improvement Plan to meet Illinois Project for Local Assessment of Need requirements for local health department certification in 2022 by the Illinois Department of Public Health. Chestnut Health System will use these documents to meet their federal compliance requirement through the Health Resources Services Administration Bureau of Primary Care. Beyond meeting requirements, this collaborative approach will help many local organizations better serve the health needs of McLean County.

The 2023 – 2025 McLean County Community Health Improvement Plan is a joint implementation plan developed in partnership with representatives from over 43 organizations. The McLean County Community Health Council is comprised of 64 individuals representing 12 sectors (county and city government; public health; social services; transportation; housing; healthcare; education; business/economic development; faith community; law enforcement; youth and senior services and civic organizations/service clubs). The four entities represented in the Executive Steering Committee (Carle BroMenn Medical Center, the McLean County Health Department, OSF St. Joseph Medical Center and Chestnut Health Systems) are responsible for ensuring that the plan is implemented, and all are implied resources and partners for the plans addressing each significant health need.

The 2023 – 2025 McLean County Community Health Improvement Plan was approved by the McLean County Community Health Council on December 13 2022; Chestnut Health System's Board of Directors on January 25, 2023; the McLean County Board of Health on January 11 2023; OSF Healthcare System's Board of Directors on January 30, 2023; and, the Governing Council of Carle BroMenn Medical Center and Carle Eureka Hospital on January 18, 2023.

The McLean County Community Health Council Executive Steering Committee reserves the right to amend this 2023-2025 Community Health Improvement Plan as needed to reflect each organization's role and responsibilities in executing the plan as well as the resources each organization is committing. In addition, certain significant health needs may become even more significant and require amendments to the strategies developed to address the health need. Other entities or organizations in the community may develop programs to address the same health needs or joint programs may be adopted. Finally, in compliance with Internal Revenue Code Section 501(r) requirements for hospitals, Carle BroMenn Medical Center or OSF St. Joseph Medical Center may refocus the limited resources the organization committed to the plan to best serve the community.

Carle BroMenn Medical Center, the McLean County Health Department, OSF St. Joseph Medical Center and Chestnut Health Systems are the primary organizations responsible for guiding the 2023 – 2025 McLean County Community Health Improvement Plan that will be developed based upon the McLean County 2022 Community Health Needs Assessment. Like the 2020 - 2022 McLean County Community Health Improvement Plan, the 2023 – 2025 McLean County Community Health Improvement Plan was developed in partnership with other community social service agencies and organizations.

II. Acknowledgements

a) McLean County Community Health Council Executive Steering Committee

Representatives from the four organizations listed below comprise the McLean County Community Health Council's Executive Steering Committee:

Carle BroMenn Medical Center: Sally Gambacorta, MS, MA, Community Health Director

Carle BroMenn Medical Center, a 200-bed hospital in Normal, Illinois, serves four central Illinois counties with a total population of more than 227,000. Among the nearly 2,000 team members are more than 100 doctors and advanced providers practicing within one of the top-five largest regional employers. Carle BroMenn Medical Center holds Magnet* designation for nursing excellence and is designated as a Primary Stroke Center. Carle BroMenn Medical Center is a part of Carle Health, an integrated system of healthcare services based in Urbana, Illinois, which includes five hospitals with 806 beds, multi-specialty physician group practices with more than 1,000 doctors and advanced practice providers, and health plans including FirstCarolinaCare and Health Alliance. Carle Health combines clinical care, health insurance, research and academics in a way that solves real-world problems today with an eye toward the future. Supported by a deep philanthropic spirit, Carle is dedicated to doing what it takes to make life better for as many as possible.

Sally Gambacorta is the Community Health Director at Carle BroMenn Medical Center and Carle Eureka Hospital. Both hospitals are in central Illinois. She has worked for Carle BroMenn Medical Center for 28 years in Wellness and Community Health. Sally holds a Bachelor of Science degree in Business Administration from Augustana College, a Master of Science degree in Industrial/Organizational Science from Illinois State University and a Master of Arts degree in Leisure Studies with a concentration in Corporate Fitness and Health Promotion from the University of Iowa. In her community health role, Ms. Gambacorta is responsible for the community health needs assessment and community benefits at both hospitals. She has extensive experience in collaborating with community partners to improve the health of the community. Ms. Gambacorta is a member of the McLean County Community Health Council Executive Steering Committee and facilitates the McLean County Behavioral Health Priority Action Team. She is also a member of the McLean County Mental Health First Aid Collaborative and is the Vice President/Chair for the Partnership for a Healthy Community Board for Woodford, Tazewell and Peoria Counties.

Chestnut Health Systems: Dietra Kulicke, Vice President of Integrated Care, BS, CHCEF

Chestnut Health Systems™ offers prevention education, substance use disorder treatment for adults and adolescents, mental health counseling, primary care, services for military veterans and their families,

and housing. Chestnut's Lighthouse Institute is a leader in substance use-related research. Chestnut was established in a house on West Chestnut Street in Bloomington, Illinois, in 1973. It started with two employees and offered a single healthcare service – addiction treatment for adults. In the years since, Chestnut has added four service lines, eight locations in central and southern Illinois and in Missouri, and 700 employees. Chestnut believes that people who are underinsured and uninsured deserve the same high-quality care as those with greater access to resources. To that end, Chestnut Family Health Center, a Federally Qualified Health Center (FQHC), provides integrated primary and behavioral health care to persons living at or below 200 percent of Federal Poverty Guidelines. Chestnut has earned The Joint Commission's (TJC) Gold Seal of Approval®, which reflects the organization's commitment to providing safe and effective care. TJC has continuously accredited Chestnut since 1973.

Dietra Kulicke has over 30 years of experience in the healthcare industry. Ms. Kulicke has worked for Chestnut Health Systems since 1991 and has held a variety of clinical and non-clinical positions during her tenure. Ms. Kulicke was the Director of Chestnut Family Health Center from 2011 to 2019 before her transition into the vice president position. She is responsible for leadership and directing the provision of integrated medical, behavioral and dental services at Chestnut Health Systems' locations in Bloomington, Normal, Peoria and Joliet. Ms. Kulicke received her Bachelor of Science degree in Business Education from Bowling Green State University in Bowling Green, Ohio, in 1991. She completed the 11-month Community Health Center Executive Management Fellowship program through the University of Kansas Medical Center Department of Health Policy and Management in November 2012.

McLean County Health Department: Jessica McKnight and Tyanna Powell

Since 1946, the McLean County Health Department has worked to protect and promote the health and wellness of McLean County citizens. The department serves the largest geographic county in Illinois, with more than 172,052 residents. Many people may never walk through the doors of the health department, but they all benefit from the various services offered as well as from the enforcement of local and state regulations that protect individuals and communities through the control of infectious diseases, sewage management, assurance of drinkable water and provision of accurate health information. The mission of the McLean County Health Department is to protect and promote health. This is accomplished through the provision of public health leadership, convening and collaborating with community partners and assuring strong business practices to create healthy people and healthy places.

Jessica McKnight has been the Administrator of the McLean County Health Department since January 2020. Ms. McKnight received her Bachelor of Science degree from Southern Illinois University Carbondale with a major in Speech Communication-Public Relations and minors in Marketing and Journalism and her Master of Public Administration degree from Southern Illinois University Edwardsville. Ms. McKnight has been in public health for over ten years having previously been employed at Southern Illinois Healthcare Foundation, a Federally Qualified Health Center, in Bethalto Illinois and as the Assistant Director and then Director of the St. Francois County Health Center in Park Hills Missouri.

Tyanna Powell has been a Health Promotion Specialist for McLean County Health Department since April 2022. Ms. Powell obtained her Bachelor of Health Science degree from Illinois State University with a major in Community Health Promotion. Ms. Powell has had experience in public health for approximately three years through internships and volunteer experiences. As a health promotion

specialist, specializing in Diabetes prevention, she continues to focus on activities aimed at keeping people healthy, reducing their chances of developing chronic disease, and implementing programs that contribute to the wellness of the community.

OSF St. Joseph Medical Center: Erin Kennedy, BS, MS, Manager of Community Health

OSF St. Joseph Medical Center is a 149-bed acute care facility. The medical center has been serving Bloomington - Normal and the surrounding communities since 1880. OSF HealthCare is a Catholic, 15-hospital health system serving Illinois and the Upper Peninsula of Michigan, driven by the mission to serve with the greatest care and love. OSF St. Joseph Medical Center is fully accredited by The Joint Commission, an independent organization established to set the standards for measuring healthcare quality. OSF St. Joseph Medical Center is a designated Magnet® hospital. OSF St. Joseph Medical Center is part of OSF HealthCare System, an integrated health system owned and operated by The Sisters of the Third Order of St. Francis. In the spirit of Christ and the example of Francis of Assisi, the mission of OSF HealthCare is to serve persons with the greatest care and love in a community that celebrates the gift of life.

Erin Kennedy is the Manager of Community Health at OSF St. Joseph Medical Center. With over 23 years of experience in the healthcare field, Ms. Kennedy's focus has been on improving the health and wellbeing of the community through education, prevention, and chronic disease management. Ms. Kennedy's primary responsibilities include program development, community health needs assessment and improvement planning, and community benefit reporting for OSF St. Joseph Medical Center. Her favorite part of the job is her involvement with forming interagency collaborations to make a positive impact on the overall health of the community. Ms. Kennedy facilitates the Worksite Wellbeing Committee, Healthy Eating/Active Living Committees, and is active with the BN (Bloomington – Normal) Parents Coalition, Women Empowered, the Boys and Girls Club of the Bloomington-Normal Board of Directors, Leadership McLean County Steering Committee, McLean County Community Health Council, and Illinois State University Kinesiology and Recreation Advisory Board. Ms. Kennedy received her Bachelor and Master degrees in Exercise Science and Exercise Physiology from Illinois State University.

Additional Assistance to the Executive Steering Committee

In addition to the previously listed individuals serving on the Executive Steering Committee, Dr. Laurence G. Weinzimmer was contracted by OSF HealthCare for assistance during the community health needs assessment to conduct the 2021 McLean County Community Health Survey of adults, a primary data source for the needs assessment. Larry has a Ph.D. and is the Caterpillar Inc. Professor of Strategic Management in the Foster College of Business at Bradley University in Peoria, Illinois. An internationally recognized thought-leader in organizational strategy and leadership, he is a sought-after consultant to numerous Fortune 100 companies and not-for-profit organizations. Dr. Weinzimmer has authored over 100 academic papers and four books, including two national best sellers. His work appears in 15 languages, and he has been widely honored for his research accomplishments by many prestigious organizations, including the Academy of Management. Dr. Weinzimmer has served as principle investigator for numerous community assessments, including the United Way, Economic Development Council and numerous hospitals. His approach to Community Health Needs Assessments was identified by the Healthcare Financial Management Association (HFMA) as a Best-in-Practice methodology.

a) 2022 McLean County Community Health Council Members

The Executive Steering Committee would like to acknowledge and thank the following individuals and organizations that contributed their time as members of the McLean County Community Health Council to complete the joint 2022 McLean County Community Health Needs Assessment and the joint 2023 – 2025 McLean County Community Health Improvement Plan.

Organization	Name	Stakeholder Role
Black Business Association	Tony Jones	Civic organization/service club
Bloomington Housing Authority	Jeremy Hayes	Housing
Bloomington Normal Boys & Girls	Jonny Hall	Social service/youth
Club	Jenny Hall	Social Service/ youth
Bloomington Normal Economic	Patrick Hoban	Pusiness development
Development Council	Patrick Hobari	Business development
Bloomington Normal Faith in Action	Doretta Herr	Social service/seniors
Bloomington Township	Deborah Skillrud	City government
Carle BroMenn Medical Center	Logan Frederick	Healthcare
Carle BroMenn Medical Center	Sally Gambacorta	Healthcare
Carle BroMenn Medical Center	Christine McNeal	Healthcare/faith
Carle BroMenn Medical Center	Theresa Prosser	Healthcare
Carle Cancer Institute Normal	Joseph Prosser	Healthcare/cancer
Chestnut Health Systems	Dietra Kulicke	Healthcare
Children's Home + Aid	Jeannie Higdon	Social service/youth
City of Bloomington	Eric West	Fire department
City of Bloomington	Kimberly Smith	City government
Connect Transit	David Braun	Transportation
District 87	Diane Wolf	Education/schools
District 87	Leslie Blockman	Education/schools
East Central Illinois Area Agency on	Mike O'Donnell	Social sorvice/soniers
Aging	Wilke O Domineii	Social service/seniors
East Central Illinois Area Agency on	Susan Real	Social service/seniors
Aging	Susaii Neai	Social service/seriiors
EasterSeals of Central Illinois	Amber Gruenloh	Social services/youth
ForeFront	Holly Ambuehl	Government/policy
Heartland Community College	Jennifer O'Connor	Education/schools
Home Sweet Home Ministries	Matt Burgess	Social service/homeless
Illinois Farm Bureau	Devon Flamming	Business
Illinois Farm Bureau	Betsy Bradford	Business
Illinois State University	Jackie Lanier	Education/schools
Illinois State University	Susan Lynch	Education/schools

Organization	Name	Stakeholder Role	
Illinois State University Mennonite	ludy Noubrandor	Education/schools	
College of Nursing	Judy Neubrander	Education/schools	
Illinois State University School of	Karen Stipp	Education/schools	
Social Work	και επ στιρρ	Education/schools	
Illinois Wesleyan University	Deborah Halperin	Education/schools	
Integrity Counseling	Donald Mahannah	Social service	
Marcfirst	Coleen Moore	Social Service	
Marcfirst SPICE	Christy Kosharek	Social service	
McLean County Center for Human Services	Joan Hartman	Social service/behavioral health	
McLean County Government	Taylore Davis	County government, behavioral health	
McLean County Government	Vanessa Granger-Belcher	County government/behavioral health	
McLean County Health Department	Kim Anderson	Public health; maternal/child health	
McLean County Health Department	Cathy Coverston Anderson	Public health	
McLean County Health Department	Luisa Gomez	Public health	
McLean County Health Department	Jessica McKnight	Public health	
McLean County Health Department	Maureen Sollars	Public health	
McLean County Regional Planning Commission	Raymond Lai	County government/planning	
McLean County Regional Planning Commission	Teresa Anderson	County government/planning	
McLean County Sheriff	Jon Sandage	Law enforcement	
Mid Central Community Action	Tami Foley	Social services	
NAACP of Bloomington Normal	Willie Holton-Halbert	Civic organization	
OSF HealthCare System	Dawn Tuley	Healthcare	
OSF St. Joseph Medical Center	Alexandra Schwartz	Healthcare	
OSF St. Joseph Medical Center	Erin Kennedy	Healthcare	
Project Oz	Joanne Glancy	Social service/youth	
Regional Office of Education	Mark Jontry	Education/schools	
Regional Office of Education	Trisha Malott	Education/schools	
Town of Normal	Doug Damery	Parks & Recreation	
Town of Normal	Mick Humer	Fire department	
Town of Normal	Rick Bleichner	Law enforcement	
The Baby Fold	Dianne Schultz	Social service	

Organization	Name	Stakeholder Role	
The Black Nurses Association of	Elaine Hardy	Civis organization	
Central Illinois	Elaille Haruy	Civic organization	
The Links Incorporated	Elaine Hardy	Civic organization	
Unit 5	Dayna Brown	Education/schools	
Unit 5	Michelle Lamboley	Education/schools	
United Way of McLean County	Kathleen Lorenz	Social services	
University of Illinois	Len Meyer	Education/school	
West Bloomington Revitalization	Deborah Halperin	Social services/civic	
Project	Deboran naiperin	organization	
Western Avenue Community Center	Mary Tackett	Social service	
YMCA	Patrick Mainieri	Social service	
Youth Build	Tracey Polson	Education/schools	
YWCA	Anne Taylor	Social service	

III. Executive Summary - McLean County Joint Community Health Improvement Plan (2023 - 2025)

a) Statement of Purpose

The purpose of the 2023 – 2025 McLean County Community Health Improvement Plan is to improve the health of McLean County residents by developing and maintaining partnerships to implement community health improvement plan interventions, working together to encourage health and healthcare access awareness and to foster systemic approaches that will improve the health and well-being of county residents and the community.

With substantial support from the community, this third cycle of a joint Community Health Needs Assessment (2022) and Community Health Improvement Plan (2023 – 2025) process builds upon the considerable progress made during the first cycle of the joint process, facilitated by representatives from Carle BroMenn Medical Center, Chestnut Health Systems, McLean County Health Department, and OSF St. Joseph Medical Center, which make up the Executive Steering Committee of the McLean County Community Health Council. The process receives input/oversight from the 64 members of the McLean County Community Health Council, with representation from over 43 organizations from 12 sectors (civic organizations/service clubs; county and city government; business/economic development; education; faith community; healthcare; housing; law enforcement; public health; social service; youth and senior services and transportation). The development and implementation of this 2023 – 2025 McLean County Community Health Improvement Plan is due in large part to the three priority action teams, with one team assigned to each of the three health priorities: behavioral health, access to care,

and healthy eating/active living. Each priority action team has approximately 33 to 56 members, with each a stakeholder in the significant health need area and eager to continue their mission and journey to improve the health and well-being of McLean County residents.

b) Development Process for the Community Health Improvement Plan

The completion and approval of the joint 2022 McLean County Community Health Needs Assessment in the summer of 2022 included a summary of 2020 – 2022 Community Health Improvement Plan key accomplishments for the first two years of the plan (found here on pages 16 through 26) and the identification of three health priorities. It provided the groundwork for the development of the 2023 – 2025 McLean County Community Health Improvement Plan from September through December of 2022. Approvals of the document were attained by the McLean County Community Health Council on December 13, 2022, and all four governing bodies represented in the Executive Steering Committee by the end of January 2023.

For the development of the 2022 McLean County Community Health Needs Assessment, at least one member from each of the four organizations made up the Executive Steering Committee of the McLean County Community Health Council. The Executive Steering Committee analyzed an extensive quantity of both primary and secondary data from July 2021 to February 2022. The committee met every other week to analyze the primary and secondary data presented in the 2022 McLean County Community Health Needs Assessment. The Executive Steering Committee was able to analyze some additional hospital data at a more detailed level and through it was able to identify health disparities for gender, age, race/ethnicity and ZIP code for a variety of health outcomes.

In January and February 2022, the Executive Steering Committee presented seven health issues to the McLean County Community Health Council during a series of three two-hour meetings. The McLean County Community Health Council consists of 64 individuals from 43 organizations in McLean County representing public entities, faith-based and private organizations, education, social service organizations, healthcare facilities, youth and senior services and city and regional planning. Although a standard prioritization methodology was not utilized at this stage in the process, the following factors were taken into consideration in the decision-making process when analyzing the data:

- Size of the issue
- Rates worse than Illinois counties or state rate
- Disparities by race/ethnicity, age and gender
- Disparities by ZIP code
- Percent of indicators trending unfavorably in a statistically significant direction
- Does not meet Healthy People (HP) 2020 or HP 2030 target
- Does working on the issue impact other issues for collective impact?

The seven significant health needs that rose to the top for McLean County are listed below in alphabetical order and were presented to the McLean County Community Health Council for eventual prioritization at three meetings held on January 27, February 10, and February 24, 2022:

- Access to Care
- Behavioral Health (mental health and substance use)
- Healthy Eating and Active Living (exercise, nutrition, obesity and food access/insecurity)

- Diabetes
- Heart Disease
- Oral Health
- Respiratory Disease.

The Executive Steering Committee facilitated the following three meetings of the McLean County Community Health Council to prioritize the seven significant health needs derived from the data analysis.

January 27, 2022

The purpose of the first meeting was to explain the collaborative nature of the joint 2022 Community Health Needs Assessment with Carle BroMenn Medical Center, the McLean County Health Department, OSF St. Joseph Medical Center and Chestnut Health Systems and the end goal of producing a joint community health improvement plan for McLean County. Annual report highlights from 2020 and 2021 for the 2020 - 2022 McLean County Community Health Improvement Plan were reviewed with the council.

February 10, 2022

During the second meeting, the Executive Steering Committee presented data on the significant health needs identified for prioritization. Age, gender, race/ethnicity and ZIP code disparities were shared when available. Data for the social determinants of health was also reviewed with the council. Questions from council members were addressed throughout the data presentation. At the conclusion of the meeting, data summaries for the top seven health needs were emailed to the council members, in addition to the presentation given by the Executive Steering Committee during the meeting.

February 24, 2022

During the final prioritization meeting, a prioritization method was used for the McLean County Community Health Council to the select the three significant health needs for the 2022 McLean County Community Health Needs Assessment and around which the 2023 - 2025 McLean County Community Health Improvement Plan was developed.

Through the prioritization process and discussion of the results, the three significant health needs/health priorities for the McLean County 2022 Community Health Needs Assessment were determined to be:

- Access to Care
- Behavioral Health (mental health and substance use)
- Healthy Eating/Active Living (exercise, nutrition, obesity and food access/insecurity)

Exhibit 1 below illustrates the Hanlon Method prioritization results.

Exhibit 1: Hanlon Method Prioritization Results, 2022

	Α	В	С	D	E
Health Concern	Size	Seriousness	Effectiveness of Interventions	Priority Score (A+2B)*C	Rank
Access to Care	6.7	9.0	7.0	172.9	1
Behavioral Health	3.2	9.0	7.5	159.0	2
Healthy Eating and Active Living	6.5	8.0	7.0	157.5	3
Oral Health	4.0	6.0	7.0	112	4
Heart Disease	4.0	6.0	6.0	96.0	5
Respiratory Disease	3.0	6.0	6.0	90.0	6
Diabetes	1.9	5.0	6.0	71.4	7

Source: McLean County Community Health Council Meeting February 24, 2022.

c) The Health Needs Not Selected

As illustrated in Exhibit 1 above, there was a clear divide in the scores between the top three health concerns and the bottom four health concerns. Documentation below reflects further discussion held by the McLean County Community Health Council on February 24, 2022, regarding the choice to not select diabetes, heart disease, oral health or respiratory disease for inclusion in the top three health priorities.

Diabetes

Diabetes will not be addressed because it was ranked seventh with a priority score of 71.4 and the McLean County Community Health Council did not feel that there was a compelling reason to eliminate

one of the top three ranked health issues. Council members also felt that diabetes improvements could be made with a focus on access to care and healthy eating/active living.

Heart Disease

Heart disease will not be addressed because it was ranked fifth according to its priority score of 96.0 and the McLean County Community Health Council did not feel that there was a compelling reason to eliminate one of the health issues that ranked in the top three. The council did discuss that improving access to care may also improve health outcomes for heart disease, particularly in areas of high socioeconomic needs.

Oral Health

Although oral health is deemed as an extremely important issue in McLean County, the McLean County Community Health Council agreed to address the three needs that received the highest priority scores. Oral health was ranked fourth with a score of 112. The council did discuss that oral health is an access issue and can be addressed under access to care. The opening of a new dental clinic at the Community Health Care Clinic in early 2019 for individuals without health insurance is improving oral health care access.

Respiratory Disease

Respiratory disease was not selected as a health need to be addressed as it ranked sixth according to its priority score of 90.0 and the McLean County Community Health Council did not feel that there was a compelling reason to eliminate one of the health concerns that ranked in the top three. The council did discuss that improving access to care may also improve health outcomes for respiratory disease, particularly in areas of high socioeconomic needs.

d) The Three Health Priorities Selected for McLean County

As previously illustrated in Exhibit 1, behavioral health, access to care and healthy eating/active living received the top three priority scores according to the Hanlon method calculations with scores of 172.9 159.0 and 157.5 respectively. There was a clear divide in the scores between the top three issues and the bottom four: diabetes, heart disease, oral health and respiratory disease. Following a group discussion, the McLean County Community Health Council agreed to select the top three health needs as the ones with the highest priority scores.

After identification of the top three health priorities, the next step in the process included pulling key stakeholders together to set high-level goals for each health priority. Separate meetings were held in April 2022 with each priority action team (one for each health priority) to set a high-level goal. Meeting dates included: the Access to Care Priority Action Team (4/14/22), the Behavioral Health Priority Action Team (4/19/22) and the Healthy Eating/Active Living Priority Action Team (4/7/22). At each meeting, between 14 and 35 individuals participated in the goal setting process. The 2022 CHNA health priorities are listed below along with the high-level goal selected for each:

Health Priority #1: Access to Care

Access to care was selected as a significant health need to be addressed by the McLean County Community Health Council not only because of its high priority score (172.9), but for several other reasons. Access to care is an important issue that affects many health outcomes. Improving access in certain areas and for certain populations can have a widespread impact on a variety of health outcomes. Data presented to the council also indicated that there are significant geographic and racial/ethnic disparities in McLean County that may be related to access to care. Access to healthcare was also rated by the 2021 McLean County Community Health Survey respondents as the number one issue affecting quality of life. Council members suggested that there are a variety of factors that can improve access to care ranging from health equity to transportation. Access to care was also selected as a health priority for the 2016 and 2019 McLean County Community Health Needs Assessments.

High-level Goal: Advance and advocate for equitable and affirming access to care and other resources, which address social determinants of health, to improve the health and wellbeing of our diverse community by 2026.

Health Priority #2: Behavioral Health (Mental Health and Substance Abuse)

Behavioral health was selected as a significant health need to be addressed by the McLean County Community Health Council for several reasons. Behavioral health received the second highest priority score (159.0), indicating the need for further improvements in this area in McLean County. There are numerous geographic and racial/ethnic disparities for behavioral health related indicators. In addition, mental health was rated as the top health issue by 2021 McLean County Community Health Survey respondents. There has been a great deal of public support and momentum behind behavioral health in McLean County for the last several years. McLean County is well situated to continue to collaborate on mental health care due to the ongoing efforts of numerous organizations and the support of the McLean County Government. Mental health was also previously selected as a key health priority for the 2016 and 2019 McLean County Community Health Needs Assessments.

High-level Goal: Further equitable, inclusive, and integrated systemic community approaches to behavioral health and well-being for our diverse community by 2026.

Health Priority #3: Healthy Eating/Active Living

Healthy eating/active living was selected as a significant health need to be addressed by the McLean County Community Health Council because it ranked as number three according to its priority score of 157.5. Additionally, the council felt that by focusing on healthy eating/active living, many other health outcomes such as heart disease, cancer and diabetes may also be positively impacted. This issue was also selected because obesity was the second top perceived health issue, according to the 2021 McLean County Community Health Survey respondents, and poor eating habits was the second most important perceived issue impacting health. Food insecurity and food access are also areas needing improvement in McLean County. Healthy eating/active living was selected as a health priority for the 2019 McLean County Community Health Needs Assessment. Obesity was selected as a health priority for the 2016 McLean County Community Health Needs Assessment.

High-level Goal: Promote equitable opportunities for healthy eating and active living to strengthen the health and well-being of our diverse community by 2026.

After the three priority action teams met in September and November 2022, the joint 2023-2025 McLean County Community Health Improvement plan for the top three priorities was developed. The priority action teams identified strategies and specific interventions to address the priorities and work towards achieving the goals listed above. In addition, potential resources and partners, as well as related efforts in the community, were identified. The results of the meetings for each the three health priorities are documented later in this document in the "McLean County Community Health Improvement Plan Summary".

For the three-year period of 2023 – 2025, McLean County community partners will be working together to implement the 2023 – 2025 McLean County Community Health Improvement Plan in order to positively impact the three health priorities.

The following pages of this document provide additional information on the 2023 – 2025 McLean County Community Health Improvement Plan by taking each of the three health priorities and providing:

- Description of the Health Priority
- Chart of Health Problem Risk Factors and Direct/Indirect Contributing Factors
- Rationale for Choice as a Health Priority
- McLean County Community Health Improvement Plan Summary: this document includes the following components for each health priority:
 - Overall goal
 - Outcome objective (with baseline and State of Illinois Health Improvement Plan [SHIP] alignment)
 - Impact objectives (with baseline and Healthy People 2020 or 2023 alignment)
 - Strategies
 - Interventions (with emphasis on evidenced-based interventions whenever possible)
 - Evaluation plan (with process and outcome indicators)
 - List of potential resources and potential community partners
- Funding for Implementing Interventions
- Barriers to Achieving Health Improvements
- Evaluation and Monitoring Plan

e) Community Involvement

Community involvement was essential for the development of both the 2022 McLean County Community Health Needs Assessment and the 2023 – 2025 McLean County Community Health Improvement Plan.

The 2022 McLean County Community Health Needs Assessment began with the collection of primary data through a survey of McLean County adults in August and September 2021. The 2021 McLean County Community Health Survey (Appendix 4 of the 2022 McLean County Community Health Needs Assessment found here), conducted by a Bradley University researcher under contract with OSF Healthcare, consisted of demographic and health-related questions that were administered from August through September of 2021 to adults age 18 and over, yielding a total usable sample of 763 respondents from McLean County residents. Of these, 113 respondents were persons with low incomes. The survey provided valuable information about healthcare utilization and obstacles to access, rationales for health choices, perceptions of health and health problems, and the health behaviors of county residents. Analysis of the survey responses, along with the assessment of the available secondary data, fueled the significant health needs prioritization process as well as the identification of interventions for the three priority health concerns identified in the 2023 – 2025 McLean County Community Health Improvement Plan. The 64 members of the McLean County Community Health Council, with substantial community representation from over 43 organizations from 12 sectors (civic organizations/service clubs; county and city government; business/economic development; education; faith community; healthcare; housing; law enforcement; public health; social service; youth and senior services and transportation) lead the prioritization process in January – February 2022 for the 2022 McLean County Community Health Needs Assessment.

In April 2022, 33-56 individuals were invited to participate in one of three priority action team meetings. These teams developed the high-level goals for the 2023 – 2025 McLean County Community Health Improvement Plan.

Additional priority action team meetings were convened in September – November 2022 to develop objectives and identify interventions for the plan. The priority action team participants had direct input into the 2023 – 2025 McLean County Community Health Improvement Plan, resulting in a strong plan with actionable interventions for McLean County. Their input is vital to the success of the plan and their knowledge of community resources and current efforts to improve health were invaluable. Their participation expanded community involvement in the plan, cultivated investment in it and improved the quality of it. These stakeholders are positioned for collaboration and ready to move forward with implementation in 2023 to help improve the health and well-being of McLean County residents.

IV. Health Priority #1: Access to Care

a) Description of the Health Priority

Access to care is of vital importance in order to maintain optimal health, increase life expectancy and improve quality of life. With access to ambulatory care and an established medical home, individuals are more likely to accept preventive care, promptly treat and control acute episodes of illness, and control chronic diseases to prevent further morbidity or even mortality from them.

Health Perceptions in McLean County

McLean County residents agree about the importance of healthcare access. In the 2021 McLean County Community Health Survey of adults as performed as a component of the 2022 Community Health Needs

Assessment process, 763 county residents were asked their perception regarding the three most important factors impacting their well-being in this community. Access to healthcare was rated first, at 20 percent. Comparison data is not available since 2018 respondents were allowed to select three choices rather than one choice in the 2022 survey. See Exhibit 2 below for an illustration of the 2021 survey results.

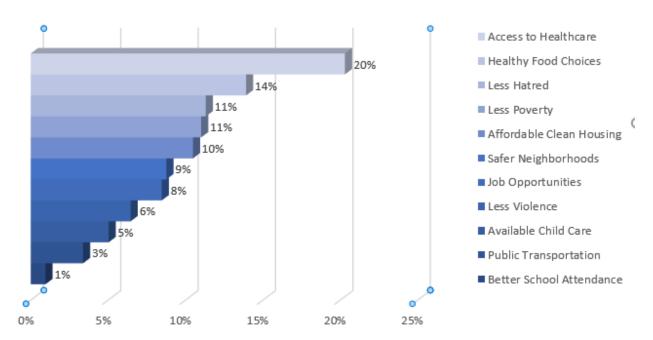


Exhibit 2: Issues Impacting Well-Being in McLean County, 2021

Source: McLean County Community Health Survey, 2021.

Statistics Supporting Access to Care as a Health Priority

With access to healthcare as the top factor impacting well-being in McLean County, it is important to examine the factors that assist with gaining access to healthcare as well as the barriers to access. A comparison of the results from the three McLean County Community Health Surveys of adults from 2015 – 2021 assists with this analysis. See Exhibit 3 below.

Exhibit 3: Comparison of Types of Insurance Coverage and Choice of Care (Responses to "When You Get Sick, Where do You Go?") for McLean County Adults Completing the McLean County Community Health Survey, 2015 - 2021

INDICATOR	2015 SURVEY	2018 SURVEY	2021 SURVEY
Have Private Insurance	66%	74%	61%
No Insurance	8%	10%	3%
Have Personal Physician	80%	89%	89%
Does Not Seek Care: General Population	8%	3%	5%
Does Not Seek Care: AT-RISK Population	10%	0%	7%
Use Clinic/Physician Office: General Population	69%	73%	72%
Use Clinic/Physician Office: At-RISK Population	64%	53%	57%
Use Urgent Care Center: General Population	18%	21%	19%
Use Urgent Care Center: AT-RISK Population	16%	27%	19%
Use the Emergency Department: General Population	4%	3%	4%
Use the Emergency Department: AT-RISK Population	10%	19%	16%

Sources: McLean County Community Health Survey of Adults, 2015, 2018 and 2021.

The above comparison of survey data from 2015 – 2021 suggests that some improvements in healthcare access have been seen in McLean County:

- A decrease in those individuals reporting no insurance, from 8 percent (2015) to three percent (2021).
- An increase in those that indicated they had a personal physician, from 80 percent (2015) to 89 percent (2018 and 2021).
- A decrease in the general and at-risk population that do not seek care from 2015 2021 (general population 8% in 2015 and 5% in 2021); (at-risk population 10% in 2015 to 7% in 2021).

Although some improvements in access have been documented in the surveys, comparing the McLean County Community Health Survey data from 2015 – 2021 (Exhibit 6 above), also reveals some areas of concern regarding access to care:

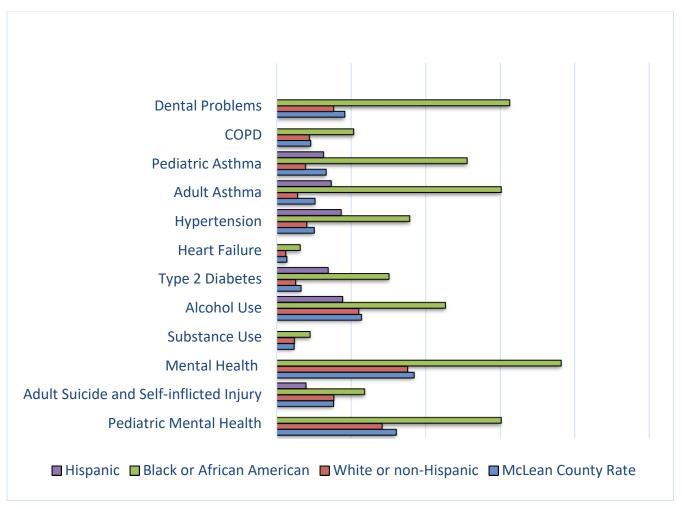
• Emergency department data indicates that although only four percent of the general population selected the emergency department as their choice of medical care in 2021, 16 percent of the

- at-risk population chose it. This is an increase from the 2015 survey result of six percent for the at-risk population but a decrease of three percent from the 2018 survey (19 percent).
- At-risk survey respondents' choice of medical care in 2021 was lower than that of the general population for the clinic or doctor's office, at 57 percent compared to 72 percent.

Disparities

When looking at the chronic conditions listed in Exhibit 4 below, Blacks or African Americans have higher rates of disparities than any other race in McLean County, based on emergency room visits. Similarly, Hispanics or Latinos have greater disparities in Type 2 Diabetes, alcohol use and hypertension when compared to the rate for McLean County.

Exhibit 4: Age-Adjusted Emergency Room Visits per 10,000 Population by Race and Ethnicity in McLean County, 2018 - 2020



Source: Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 - 2020.

Many of these chronic conditions could be addressed in a primary care setting; with regular monitoring by a healthcare provider, some emergency room visits may be avoided and healthcare costs reduced.

Identifying barriers to accessing a medical home could be an important step towards improving health and well-being.

In addition to the disparities illustrated above, McLean County has several communities that have a greater risk of experiencing health inequities or have a higher relative need compared to other communities in the county. The high Health Equity Needs ZIP codes for McLean County are illustrated below in Exhibit 5. McLean County has two ZIP codes with a ranking of 5 and eight ZIP codes with a ranking of 4, which represent the areas with the highest relative need in McLean County.

Exhibit 5: High Health Equity Needs ZIP Codes - McLean County, 2021

City/Town	ZIP Code	Health Equity Ranking	Population
- 11G	64704	_	400
Bellflower	61724	5	488
Bloomington	61701	5	33,884
Stanford	61774	4	896
Ellsworth	61737	4	471
Chenoa	61726	4	2,505
Colfax	61728	4	1,395
Arrowsmith	61722	4	506
Gridley	61744	4	1,924
McLean	61754	4	1,121
Saybrook	61770	4	1,044

During the analysis of secondary data for the 2022 Community Health Needs Assessment, some geographic disparities became clear, particularly when analyzing the emergency room data. Individuals living in specific geographic areas of McLean County experience worse health outcomes than individuals living in other geographic areas. The most significant geographic disparity is evident in Bloomington – 61701, compared to McLean County. Exhibit 6 below shows that emergency room visit rates due to many chronic conditions are higher for Bloomington – 61701 than the rates for McLean County overall. Hospitalization rates for many chronic conditions are also higher for Bloomington – 61701 than McLean County overall.

Community Acquired Pneumonia

Dental Problems

Alcohol Use

Pediatric Asthma

Adult Suicide and Self-Inflicted Injury

Adolescent Suidice and Self-Inflicted Injury

Uncontrolled Diabetes

100

■ McLean County

200

300

Exhibit 6: Age-Adjusted Emergency Room Visit Rates per 10,000 Population (various age categories) in McLean County vs. Bloomington ZIP Code 61701, 2018 - 2020

Source: Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 - 2020.

Diabetes

■ Bloomington-61701

In addition to the above disparities, the following table (Exhibit 7) illustrates the age-adjusted emergency room rates for additional ZIP codes with rates higher than the rate for McLean County.

Exhibit 7: High Health Equity Needs ZIP Codes with Age-Adjusted Emergency Room Rates Higher than the McLean County Rate, 2018 – 2020

Indicator rate due to:	Emergency room visits per 10,000 population 18+: McLean County	Emergency room visits per 10,000 population 18+: ZIP Code
Diabetes	23.1	Chenoa – 61726 (37.3) • 61%> county rate Gridley – 61744 (28.6) • 24%> county rate
Type 2 Diabetes	19.2	Chenoa – 61726 (25) • 30%> county rate Gridley – 61744 (28.6) • 49%> county rate
Uncontrolled Diabetes	18.5	Chenoa – 61726 (38.6) • 108%> county rate
Hypertension	25.5	Chenoa) 61726 (32.4) • 27%> county rate
Adult Mental Health	80.2	Saybrook – 61770 (89) • 11%> county rate Stanford – 61774 (93.5) • 17%> county rate
Pediatric Mental Health	86.3	Chenoa – 61726 (92) • 7%> county rate
Oral Health	32.6	Chenoa – 61726 (48.6) • 49%> county rate Gridley – 61744 (37.8)

		 16%> county
		rate
		McLean – 61754 (69.8)
		 114%> county
		rate
		Stanford – 61774 (45.6)
		 40%> county
		rate
Community	15.5	Chenoa – 61726 (17.4)
Acquired		 12%> county
Pneumonia		rate
COPD	21.5	McLean – 61754 (45.9)
		 113%> county
		rate

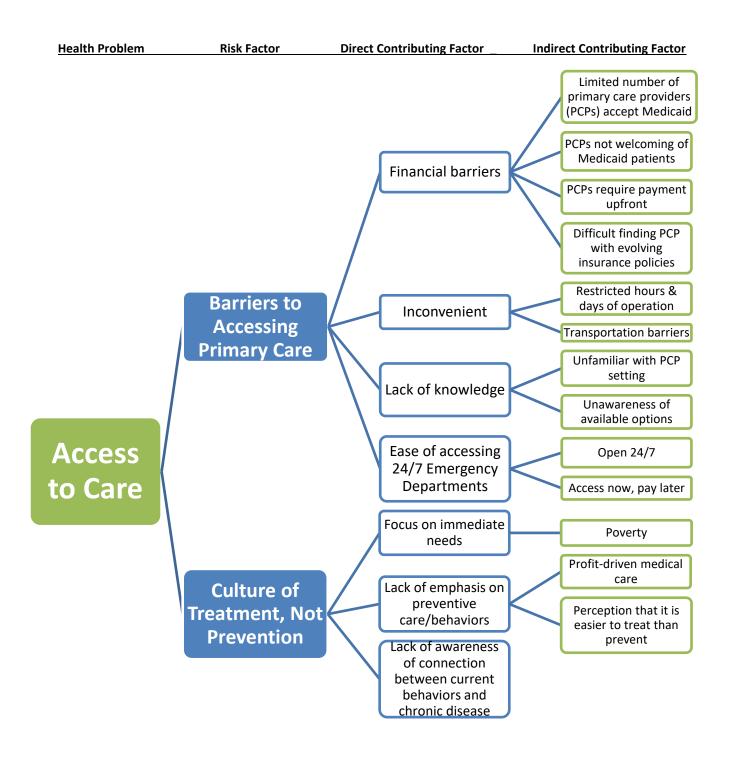
Source: Conduent Healthy Communities, Illinois Hospital Association, 2018 - 2020.

Additional barriers to accessing care were identified through responses to the 2021 McLean County Community Health Survey of adults who responded that they were unable to access various types of care in the past year when they needed it. The top three reasons for each type of care are listed below.

- The top three reasons for not being able to access medical care were: 1) Too long to wait (32 percent) 2) Could not afford co-pay (28 percent) and 3) No insurance (23 percent).
- The top three reasons for not being able to access prescription medication were: 1) Could not
 afford co-pay (33 percent), 2) No insurance (20 percent), and 3) Pharmacy refused insurance (9
 percent).
- The top three reasons for the inability to access dental care were: 1) No insurance (45 percent), 2) Could not afford co-pay (37 percent), and 3) Dentist refused insurance (29 percent).
- The top three reasons for the inability to access counseling were: 1) Wait too long (38 percent), 2) Could not find (34 percent), and 3) Could not afford co-pay (33 percent).

b) Chart of Health Priority Risk Factors and Direct/Indirect Contributing Factors

Refer to the chart on the following page for a list of risk factors as well as direct and indirect contributing factors for the development of access to health care issues.



c) Rationale for Choice as a Health Priority

Access to care was selected as a significant health need to be addressed by the McLean County Community Health Council not only because of its high priority score (172.9), but for several other reasons. Access to care is an important issue that affects many health outcomes. Improving access in certain areas and for certain populations can have a widespread impact on a variety of health outcomes. Data presented to the council also indicated that there are significant geographic and racial/ethnic disparities in McLean County that may be related to access to care. Access to healthcare was also rated by the 2021 McLean County Community Health Survey respondents as the number one issue affecting quality of life. Council members suggested that there are a variety of factors that can improve access to care ranging from health equity to transportation. Access to care was also selected as a health priority for the 2016 and 2019 McLean County Community Health Needs Assessments.

Access to care is an important issue that affects many health outcomes. Many factors contribute to improving healthcare access, including increased hours of operation for urgent care clinics and primary care offices, identifying transportation options, providing healthcare navigation services and expanding the opportunities for education of consumers on how to obtain and use health insurance, providing more mobile healthcare opportunities, and using community health workers and case managers in a variety of settings to encourage and link individuals to a medical home.

d) McLean County Community Health Improvement Plan Summary: Access to Care

The Access to Care high-level goal-setting meeting, held on April 14th, 2022, was comprised of 19 individuals from the Access to Care Priority Action Team. Each individual brought unique insights on healthcare access issues in McLean County.

The Access to Care Priority Action Team reconvened on October 11^{th} , 2022, and November 10^{th} , 2022, to identify strategies and interventions to formulate the 2023-2025 Access to Care Community Health Improvement Plan Summary, included on pages 29-38 to impact this health priority. The importance of addressing some of the barriers to access were discussed and led to the development of strategies and interventions with the potential to impact the social determinants of health as well as capacity and availability issues in our community.

The Access to Care Community Health Improvement Plan for 2023 – 2025 focuses on three key strategies:

- **Strategy 1:** Support assertive linkage navigation/engagement programs which link lower income community members with a medical home and insurance coverage.
- **Strategy 2:** Increase the capacity of organizations providing dental services to low-income residents of McLean County.
- Strategy 3: Increase service delivery models outside brick and mortar, face-to-face services to
 increase access and availability of community-based services for low income Mclean county
 residents.

An overview of the goal and objectives to address Access to Care are listed below:

High-Level Goal for Access to Care: Advance and advocate for equitable and affirming access to care and other resources, which address social determinants of health, to improve the health and well-being of our diverse community by 2026.

- Outcome Objective: By 2026, reduce the percentage of individuals utilizing McLean County hospital emergency rooms for non-emergent conditions.
 - o Impact Objective #1: By 2026, decrease the number of Mclean County residents identifying the emergency department as their choice of medical care.
 - o Impact Objective #2: By 2026, increase the number of McLean County residents indicating they have access to a dentist.
 - o Impact Objective #3: By 2026, decrease the number of McLean County residents indicating that they do not seek care.

The following ten pages (29 - 38) contain the 2023 - 2025 McLean County Community Health Improvement Plan Summary for Access to Care.

McLean County Community Health Improvement Plan Summary: Access to Care January 1, 2023- December 31, 2025

HEALTH PRIORITY: ACCESS TO CARE

GOAL: Advance and advocate for equitable and affirming access to care and other resources, which address social determinants of health, to improve the health and well-being of our diverse community by 2026.

Related Social Determinants of Health: Access to Care; Housing Instability/Quality of Housing; Transportation, Employment

OUTCOME OBJECTIVE: By 2026, reduce the percentage of individuals utilizing McLean County hospital emergency rooms for non-emergent conditions.

Baseline

• 16% of McLean County residents identified as "at risk" (Medicaid Population) reported the emergency department as their choice of medical care (McLean County Health Survey, 2021).

State Health Improvement Plan (SHIP) 2021 Alignment

- Build upon and improve local system integration.
- Improve the opportunity for people to be treated in the community rather than in institutions.
- Assure accessibility, availability, and quality of preventive and primary care for all women, adolescents, and children, including children with special health care needs, with a focus on integration, linkage, and continuity of services through patient-centered medical homes.
- Increase community-clinical linkages to reduce chronic disease

THREE YEAR MEASURES	STRATEGIES and INTERVENTIONS	ANNUAL EVALUATION MEASURES	POTENTIAL RESOURCES/PARTNERS	
IMPACT OBJECTIVE #1:	STRATEGY 1: SUPPORT ASSERTIVE LINKAGE			
	NAVIGATION/ENGAGEMENT PROGRAMS WHICH			
By 2026, decrease the number of	LINK LOWER INCOME COMMUNITY MEMBERS			
McLean County residents identifying	WITH A MEDICAL HOME AND INSURANCE			
the emergency department as choice of medical care.	COVERAGE.			

BASELINE DATA

- 16% of the at-risk population Identified the emergency room as their primary choice of medical care (McLean County Community Health Survey, 2021)
- 4% of the general population identified the emergency room as their primary choice of medical care (McLean County Community Health Survey, 2021)

Intervention 1.1: Coordinating Appropriate Access to Comprehensive Care (CAATCH) Program

The CAATCH program is an emergency room navigation program for navigators and/or care coordinators to engage those without a primary care home.

Evidence:

http://www.healthycommunityalliance.org/promisepractice/index/view?pid=30259

https://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/policies/medical-homes

Intervention 1.2: Medicaid Innovation Collaborative's (MIC) Medicaid Transformation Project.

This project introduces a community health worker training curriculum and funds community health workers who will focus on reducing health equity barriers in the community via proactive field engagement and providing connection to primary care medical homes, assistance with Medicaid or Marketplace enrollment and increased access to digital health interventions.

Intervention 1.1: Process Indicators

 # of patients served through the CHCC CAATCH Program (baseline: 248 patients in CY 2021)

Intervention 1.1: Outcome Indicators

- 30-day hospital readmission rate for CAATCH patients (baseline: zero for CY 2021)
- CAATCH patient emergency department use (baseline: 89% reduction in CY 2021)
- Yearly estimated cost savings from CAATCH (baseline: \$1,116,000 in CY 2021)

Intervention 1.1: Resources/Partners

- Carle BroMenn Medical Center
- Community Health Care Clinic (CHCC)
- Illinois State University School of Social Work
- OSF St. Joseph Medical Center

Intervention 1.2: Process Indicators

- # of patients connected with a medical home (baseline: to be established)
- # of community members receiving SDOH screening and intervention (baseline: to be established)

Intervention 1.2: Outcome Indicators

Not Available

Intervention 1.2: Resource/Partners

- Medicaid Innovation Collaborative (MIC)
- Chestnut Health
 Systems
- OSF St. Joseph Medical Center
- The Baby Fold
- The Salvation Army
- Home Sweet Home
 Ministries

	Intervention 1.3: Utilize trained professionals and community health workers to assist McLean County residents who have no insurance coverage in enrolling in either Medicaid, Medicare or a Marketplace product.	 Intervention 1.3: Process Indicators # of community members receiving assistance with Medicaid, Medicare or Marketplace enrollment (baseline: to be established) # of community members enrolled in Medicaid, Medicare or Marketplace (baseline: to be established) # of community members who have completed the CMS and State of IL Certified Application Counselor trainings and obtained certification. (baseline: to be established) Intervention 1.3: Outcome Indicators Not Available 	 Additional community health worker colocation sites TBD Intervention 1.3: Resource/Partners Chestnut Health Systems Community Health Care Clinic Carle Health Mobile Health Clinic Carle Community Health Initiatives McLean County Health Department Adult Recreation Center CCSI Case Coordination LLC
IMPACT OBJECTIVE #2: By 2026, increase the number of McLean county residents indicating they have access to a dentist.	STRATEGY 2: INCREASE THE CAPACITY OF ORGANIZATIONS PROVIDING DENTAL SERVICES TO LOW-INCOME RESIDENTS OF MCLEAN COUNTY.		
BASELINE DATA	Intervention 2.1: Increase the number of full- time equivalents (FTE) dentists and hygienists available to serve low-income McLean County	 Intervention 2.1: Process Indicators # of clinical full-time equivalent (FTE) dentists and hygienists working with lower income McLean County residents 	Intervention 2.1: Resources/Partners Chestnut Family Health Center

- 45% of respondents reported "no insurance" as their reason for inability to access dental care (McLean County Community Health Survey, 2021)
- 37% of respondents reported "could not afford co-pay" as their reason for inability to access dental care (McLean County Community Health Survey, 2021)

residents. Note FTE includes volunteer dentists and hygienists.

Evidence:

https://www.countyhealthrankings.org/takeaction-to-improve-health/what-works-forhealth/policies/allied-dental-professional-scopeof-practice

- (baseline: 1.5 FTE dentist and 1.6 FTE hygienists established BY 2021)
- # of patients served and unique visits through the Community Health Care Clinic (baseline: 604 patients and 1,466 visits in CY 2021)
- # of patients served and # of unique visits through the McLean County Health Department (baseline: 2,397 visits in CY 2021)
- of patients served and unique visits through Chestnut Family Health Center (baseline: to be established)

- Community Health Care Clinic
- McLean County Health
 Department

Intervention 2.1: Outcome Indicators

• Not available

Intervention 2.2: Expand performance of Fluoride application in Pediatric and Primary Care Settings serving low-income pediatric McLean County residents

Evidence:

https://pediatrics.aappublications.org/content/1 15/1/e69

Intervention 2.2: Process Indicators

- # of primary care/ pediatric practices performing fluoride applications in the primary care/ pediatric settings (baseline: 3 practices - Carle West Pediatrics and Family Medicine and OSF Medical Group Pediatrics established in CY 2021).
- # of pediatric patients receiving fluoride applications in the primary care/pediatric settings (baseline: 776 patients – 501 Carle West Pediatrics and 275 OSF Pediatrics) established in CY 2021).

Intervention 2.2: Outcome Measures

Intervention 2.2: Resources/Partners

- Carle West Physician's Group; Pediatrics Bloomington
- Chestnut Family Health Center
- Carle BroMenn Family Health Clinic
- OSF Medical Group Primary Care and Pediatrics -Bloomington

		Not Available	
	Intervention 2.3: Expand performance of Caries Risk Assessments in Pediatric and Primary Care Settings serving low-income pediatric McLean County residents	 Intervention 2.2: Process Indicators # of pediatric patients receiving Caries Risk Assessment in the primary care setting at Chestnut Family Health Center (baseline: to be established) # of primary care/ pediatric practices performing Caries Risk Assessments on pediatric patients (baseline: to be established) # of pediatric patients receiving Caries Risk Assessment in the primary care/pediatric settings (baseline: to be established) Intervention 2.2: Outcome Measures TBD 	Intervention 2.3: Resources/Partners Chestnut Family Health Center OSF Medical Group Primary Care and Pediatrics - Bloomington
IMPACT OBJECTIVE #3: By 2026, Decrease the number of McLean County residents indicating that they do not seek care. • 3% of survey respondents indicated that they do not seek care when asked to choose the type of healthcare they use when they are sick	STRATEGY 3: INCREASE SERVICE DELIVERY MODELS OUTSIDE BRICK AND MORTAR, FACE- TO-FACE SERVICES, TO INCREASE ACCESS AND AVAILABILITY OF COMMUNITY-BASED SERVICES FOR LOW INCOME MCLEAN COUNTY RESIDENTS. Intervention 3.1: Continue providing patients with options for virtual visits to support community members in accessing care. Evidence:	 Intervention 3.1: Process Indicators # of organizations offering virtual health services (baseline: 4 established in CY 2021). # of unduplicated patients and # of unique virtual visits provided through 	Intervention 3.1: Partners/Resources Carle BroMenn Family Health Clinic Chestnut Health Systems
	http://www.healthycommunityalliance.org/promisepractice/index/viw?pid=3230	Chestnut Family Health Center for primary care services (baseline of 714 unduplicated patients received 1,036	OSF St. Joseph Medical Center

	virtual primary care services in CY 2021). # of unduplicated patients and unique virtual visits provided through The Community Health Care Clinic (baseline: 647 unduplicated patients received 1,627 virtual visits in CY 2021) # of visits for adults and pediatric patients provided through OSF Healthcare (baseline of 14,808 total virtual visits provided – 14.038 for adults and 770 for pediatric patients in CY 2021) # of unique virtual visits provided by Carle Physician Group (baseline of 75% of the 4,351 visits at Carle BroMenn Family Health Clinic were provided virtually in CY 2020. Baseline for Carle Physician Group is to be established. Intervention 3.1: Outcome Indicators Not available	Community Health Care Clinic
Intervention 3.2: Expand the use of mobile	Intervention 3.2: Process Indicators	Intervention 3.2:
health in McLean County.	# of organizations with mobile units	Partners/Resources
Evidence:	(baseline: to be established)# of sites hosting mobile clinics	 Chestnut Health Systems
	(baseline: to be established)	McLean County Health
The scope and impact of mobile health clinics in	# of mobile clinics days in operation	Department
the United States: a literature review - PMC	(baseline: to be established)	Carle Health Mobile
(nih.gov)		Health Clinic

Carle Foundation Hospital :: Promising Practices ::	# of patients connected with a medical	o Carle BroMenn
Care-A-Van Mobile Medical Clinic (thehcn.net)	home (baseline: to be established)	Medical Cente
		o Carle
	Intervention 3.2: Outcome Indicators	Community
	Not available	Health
		Initiatives
		 Laborers
		International
		Union of North
		America
		 United Way of
		McLean Count
		 Tinervin Family
		Foundation
		City of
		Bloomington
		o Town of
		Normal
		 McLean Count
		Government
		 Bloomington
		Housing
		Authority
		 OSF St. Joseph
		Medical Cente
		 McLean Count
		Health
		Department
		 Additional
		partners TBD
		Hosting Sites * (will
		update in annual
		progress reports)

Intervention 3.3: Chestnut Health Systems, through their work as a partner of the Medicaid Innovation Collaborative (MIC), will proactively connect Chestnut patients and community members covered under IL Medicaid to the OSF On-Call suite of services focused on introducing use of supportive technology devices and services to compliment and supplement traditional services.

Evidence: Pilot project

Intervention 3.3: Process Indicators

- # of Chestnut patients connected with an OSF On-Call product (baseline: establish).
- # of McLean County residents with IL Medicaid connected with an OSF On-Call product (baseline: establish).

Intervention 3.3: Outcome Indicators

TBD

Intervention 3.3: Partners/Resources

- Chestnut Health
 Systems
- OSF On-Call
- Medicaid Innovation Collaborative

RELATED IMPROVEMENT PLAN EFFORTS

The following organizations received grants in 2022 for implementation in 2022/2023 or FY23 (May 1, 2022 – April 30, 2023) from the John M. Scott Health Care Commission. Although the grants are tied to the health priorities selected for the 2019 McLean County Community Health Needs Assessment, the grant programs will also apply to the 2022 McLean County Community Health Needs Assessment and 2023 – 2025 McLean County Community Health Improvement Plan as the health priorities are the same.

- The Center for Human Services received a grant for integration of behavioral and primary health care services, with a housing component.
- The Community Health Care Clinic received a grant for integration of primary and oral health care services.
- The Children's Home & Aid Home received a grant for home & community-based services outside in rural areas, including perinatal, maternal, and child services.
- Faith in Action received a grant for senior well-being, including social connection & transportation
- Heartland Head Start received a grant for early childhood well-being, including services for the whole-child and family that support physical, mental and oral health and school readiness, and partnerships with other providers and local universities.
- McLean County Health Department received a grant for emergent needs: oral health care for children and adults.
- Marcfirst received a grant to support pediatric therapy and services that support healthy child development.
- Faith in Action of Bloomington-Normal received a grant to support senior well-being, including social connection and transportation.
- Heartland Head Start received a grant to support early childhood well-being, including services for the whole-child and family that support physical, mental health, oral health, school readiness, and partnerships with other providers and local universities.
- Project Oz received a grant to support adolescent well-being including housing and crisis stabilization.
- Children's Home and Aid received a grant to support home and community based perinatal, maternal, and child services.

- Central Illinois Friends received a grant to support sexual health and counseling services.
- Community Health Care Clinic to support oral health care services.

A leader from Carle BroMenn Medical Center and OSF St. Joseph Medical Center will continue to serve on the City of Bloomington's John M. Scott Health Care Commission Grants Committee.

Other:

- Carle BroMenn Medical Center and OSF HealthCare St. Joseph Medical Center will continue to provide support for the Community Health Care Clinic (CHCC) The CHCC is a free clinic which provides services to the medically underserved population of McLean County to ensure that all populations in the community have access to healthcare. All emergency room visits, diagnostic testing and hospital services are provided free of charge by Carle BroMenn Medical Center and OSF HealthCare St. Joseph Medical Center. Carle BroMenn Medical Center also owns the building where the clinic is located and provides maintenance for the clinic at no charge. OSF provides human resources support for the clinic.
- Carle BroMenn Medical Center will continue to lead The Carle BroMenn and Eureka LGBTQ+ Community Advisory Council. The council fosters increased access to care by giving voice to the LGTBQ+ community and allies in order to provide more sensitive and respectful care.
- Carle BroMenn Medical Center, Carle Cancer Institute Normal and the American Cancer Society (ACS) will continue partnering on ACS's Breast Health Advocate (BHA) pilot program that launched in October 2022. Breast Health Advocates are volunteers that work within their communities to help connect Black women to local screening resources and reduce later stage breast cancer diagnoses. ACS Cancer Support and Carle Health team members will provide content and clinical expertise with presentations delivered by volunteers. BHA's and community members will work collaboratively with Carle Cancer Institute Normal and the Illinois Breast and Cervical Cancer Program (IBCCP) to identify and assist with barriers to screenings and/or care.
- Carle BroMenn Medical Center, UnityPoint Health and Prairie Pride Coalition will continue to provide support to Central Illinois Friends to expand access to HIV and sexual health services at the Community Health Care Clinic.
- Carle Cancer Institute –Normal was awarded a grant from the Kay Yow Foundation for a position that will take effect in 2023. This position will primarily be responsible for coordinating, implementing, and evaluating outreach activities for breast cancer screenings in the underserved areas of our community. This individual will serve as the liaison with community service agencies and churches to provide and promote awareness associated with breast cancer screening.
- The United Way of McLean County Housing Assistance Coalition is currently advocating for the establishment of a Housing Stability Navigator program intended to stabilize housing for households at risk of eviction.
- Beginning in June, 2022 Home Sweet Home Ministries opened The Junction and will continue to actively develop partnerships with nonprofit and health care providers to engage underserved residents of the 61701 ZIP code.
- Home Sweet Home Ministries is expanding its services to include permanent, affordable housing. Initial steps into providing access to affordable housing has involved the acquisition and renovation of a duplex property in south Normal with occupancy beginning in early 2023.
- Home Sweet Home Ministries has begun exploring the viability of developing a "medical respite" model of emergency shelter for individuals with serious health care needs who are faced with homelessness.
- OSF Healthcare and Chestnut Health Systems will continue to bring community health workers to Bloomington-Normal to assist individuals with chronic health conditions to improve their overall health and wellness.

• OSF St. Joseph Medical Center will continue to provide monthly support group sessions offered to cancer survivors by an interdisciplinary team.

*The Four Organizations comprising the McLean County Executive Steering Committee—Carle BroMenn Medical Center, Chestnut Health Systems, the McLean County Health Department and OSF St. Joseph Medical Center—are all implied resources/partners for Access to Care.

e) Funding for Implementing Interventions

After approval of the 2023 – 2025 McLean County Community Health Improvement Plan, the Access to Care Priority Action Team will further address funding options, including grant opportunities as they become available, to address interventions impacting access to care. For several of the activities listed in the plan, initial funding has been secured, but ongoing funding may be tenuous and sustainability issues will need to be considered.

Many of these stakeholders have worked together throughout the needs assessment and health plan development process, making the community better-positioned for collaborative efforts, with or without grants or other funding. In addition, since many of the intervention strategies for this health priority fall within the mission of some of the priority action team agencies, underpinning efforts through collaborative programs, activities with other community partners and/or generating letters of support for grant proposal submissions will be encouraged.

As of 2019, a new source of local funding was announced by the John M. Scott Commission Trust, with the Trust providing grants from one to three years for health-related projects that demonstrate a connection to the health priorities identified in the current McLean County Community Health Needs Assessment. Subsequent grant proposals may also consider the concerns and interventions identified in the 2023 – 2025 McLean County Community Health Improvement Plan.

f) Barriers to Achieving Health Improvements

A list of barriers to achieving health improvements was created during the development of the previous Community Health Improvement Plan (2017 – 2019). In 2022, discussions during the Access to Care Priority Action Team meetings identified additional barriers that were added to the existing list. This list of potential barriers is included below in Exhibit 8.

Exhibit 8: Potential Barriers to Accessing Care in McLean County

	Barriers to Care		
Insurance &	Clients with insurance may not be able to cover the costs associated with		
Payment	deductibles, co-pays and out-of-pocket maximums.		
	No insurance or insurance that does not cover needed care or medications		
	Some providers do not welcome Medicaid or uninsured clients		
	Some providers do not accept Medicaid or limit the number of Medicaid		
	patients they will accept		
	Many independent specialty providers do not accept Medicaid or limit the		
	number of Medicaid patients they will accept		
	Require payment upfront: full payment or co-payment		
	Difficulty knowing who primary care provider is when insurance is restrictive or		
	constantly changing		
Convenience	Many providers not open on nights and weekends		
	Recent transit decisions have moved bus stops several blocks away from		
	healthcare facilities for the under-served		

	Public transportation to healthcare care facilities may be lacking, unreliable or
	inconvenient
	Limited access to WiFi or cell plans covering video services
	Limited transportation resources for those who live outside of
	Bloomington/Normal city limits
Staffing	Only two facilities have navigators available for clients
Knowledge &	Patients not always aware of options outside of primary care; urgent care
Awareness	Cultural differences or language gaps may limit understanding
	Not familiar with primary care provider or primary care setting
Health	Low-income population may have a greater focus on meeting immediate needs
Behaviors	rather than preventing health issues from occurring down the road; therefore,
	making and keeping healthcare-related appointments may be a lower priority
	Lack of emphasis on prevention (versus treatment) by patients, providers and
	the community overall
	Lack of awareness of the connection between current behaviors and chronic
	disease

According to the 2021 McLean County Community Health Survey of adults, 11 percent of McLean County residents do not have health insurance, and five percent report not seeking medical care. Adults responding to the 2021 survey also indicated the causes of their inability to access medical care, prescriptions, dental care and counseling: too long of wait (32 percent), could not afford the co-pay (28percent), no insurance (23percent), no trust (8 percent), no way to get to the provider (8 percent and discrimination (7 percent).

Systems barriers are also present. As healthcare organizations and other entities seek to control costs and gain efficiencies, the ability to add programs or staff or to adjust service lines, is problematic and creates challenges that are difficult to overcome despite a willingness to change.

g) Evaluation and Monitoring Plan

Within the McLean County Community Health Improvement Plan Summary: Access to Care, there is an "Annual Evaluation Measures" column that contains both process indicators and outcome indicators. With the assistance of the Access to Care Priority Action Team, these indicators will be tracked each year throughout the three-year cycle ending in 2025. The Executive Steering Committee will be responsible for assuring that the indicator data is being tracked and that it is shared on at least an annual basis with the McLean County Community Health Council and the priority action team for each health priority. Early in 2026, data received from the next McLean County Community Health Survey, conducted in preparation for the 2025 McLean County Community Health Needs Assessment, will be compared to the outcome objectives and impact objectives listed in the 2023 – 2025 Community Health Improvement Plan Summary: Access to Care, in order to evaluate and measure progress toward meeting objectives. Through evaluation, accountability will be increased, modifications to the plan considered, and a stronger commitment to improving the health of McLean County citizens will be communicated to its residents.

The McLean County Community Health Executive Steering Committee reserves the right to amend this 2023 – 2025 McLean County Community Health Improvement Plan as needed to reflect each organization's particular role and responsibilities in executing the plan as well as the resources each organization is committing. In addition, certain significant health needs may become a community priority during this three-year plan period and require amendments to the strategies developed to address the emerging significant health need. Other entities or organizations in the community may develop programs to address the same health needs or joint programs may be adopted. Finally, in compliance with Internal Revenue Code Section 501(r) requirements for hospitals, Carle BroMenn Medical Center or OSF St. Joseph Medical Center may refocus the limited resources the organization committed to the Plan to best serve the community.

Health Priority #2: Behavioral Health (Mental Health and Substance Use)

a) Description of the Health Priority

Mental illnesses are one of the leading causes of disability in the United States. In any given year, approximately 13 million American adults have a seriously debilitating mental illness. Unstable mental health can lead to suicide, which accounts for the death of approximately 30,000 Americans every year (Conduent Healthy Communities Institute, 2022). Additionally, one in five Americans will experience a mental illness in a given year, one in five children, either currently or at some point during their life, have had a seriously debilitating mental illness and one in 25 Americans lives with a serious mental illness, such as schizophrenia, bipolar disorder, or major depression (Centers for Disease Control and Prevention, Mental Health. October 24, 2022).

Individuals with mental health disorders are more likely than people without mental health disorders to experience an alcohol or substance use disorder. When an individual is impacted by both, these are referred to as co-occurring disorders, and treatment is complicated since both disorders can have psychological, social and biological components.

Substance use is a major public health issue that has a strong impact on individuals, families and communities. The use of illicit drugs, abuse of alcohol and addiction to pharmaceuticals is linked to health conditions such as heart disease, cancer and liver diseases. Substance use also contributes to a wide range of social, mental and physical problems such as domestic violence, child abuse, crime and suicide (Conduent Healthy Communities Institute, 2022).

The 2020 National Survey on Drug Use and Health by the Substance Abuse and Mental Health Services Administration reports that, among adults aged 18 or older in 2020, 29.3 percent (or 73.8 million people) had either any mental illness (AMI) or a substance use disorder (SUD) in the past year and 6.7 percent (or 17.0 million people) had both AMI and an SUD.

Among adults aged 18 or older in 2020, 18.4 percent (or 46.5 million people) had either serious mental illness (SMI) or an SUD in the past year.

In addition, adults with SMI or AMI were more likely than adults with no mental illness in the past year to be past month binge alcohol users (30.9 and 28.5 percent vs. 22.8 percent). Adults with SMI or AMI were more likely to use tobacco products or vape nicotine in the past month than adults with no mental illness in the past year (37.4 and 30.9 percent vs. 19.6 percent) (Substance Abuse and Mental Health Services Administration. (2021). Key substance use and mental health indicators in the United States: Results from the 2020 National Survey on Drug Use and Health (HHS Publication No. PEP21-07-01-003, NSDUH Series H-56). Rockville, MD: Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration. Retrieved from https://www.samhsa.gov/data/)

Because these disorders often occur together, the McLean County Community Health Council chose to include both in one health priority category: Behavioral Health.

Health Perceptions in McLean County

The 2021 McLean County Community Health Survey asked 763 adult respondents to rate the three most important health issues in the community. The health issue that rated highest was mental health. It was identified by 26 percent of respondents. Comparison data is not available since 2018 respondents were allowed to select three choices rather than one choice in the 2021 survey. See Exhibit 9 below.

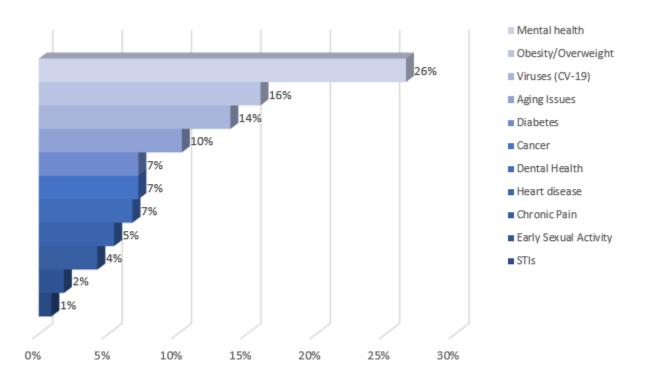


Exhibit 9: Perception of Health Issues in McLean County, 2021

Source: McLean County Community Health Survey, 2021.

Like the 2018 survey, the 2021 McLean County Community Health survey indicated that 17 percent of respondents reported that they do not have access to counseling services when needed. The top three reasons for the inability to access counseling are: 1) Wait too long (38 percent), 2) Could not find (34 percent), and 3) Could not afford co-pay (33 percent).

Statistics Supporting Behavioral Health as a Health Priority

Like many illnesses, early detection and access to outpatient care as well as consistent ongoing treatment for those with mental health and substance use disorders can improve health outcomes as well as an individual's quality of life. Care received in the emergency room may indicate inadequacies in or the absence of the healthcare received outside of it. In McLean County, emergency room and hospitalization data from the two local hospitals (Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 -2020) provides a snapshot of the consequences of delayed access to care, inadequate care or insufficient treatment for mental health and substance use disorders.

General:

 Psychiatric visits were the second most common reason for patient visits to Carle BroMenn Medical Center's emergency room for 2012-2020 (Carle BroMenn Medical Center, ICD-9 and ICD-10 Diagnosis. 2012 - 2020). Psychiatric visits were the fifth most common reason for patient visits to OSF St. Joseph Medical Center's emergency room (OSF St. Joseph Medical Center, ICD-10 Diagnosis, 2021).

Adolescents/Pediatrics:

- The rate for age-adjusted emergency room visits due to adolescent suicide and intentional self-inflicted injury in McLean County is 151.5 emergency room visits per 10,000 population 10 17 years of age (Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 2020). This is in the worst 25th percentile range (red indicator) compared to other counties in Illinois and is higher than the Illinois value of 78 emergency room visits per 10,000 population 10 17 years of age. It is not statistically different from the prior value (2017 2019) of 142.9 emergency room visits per 10,000 population 10 17 years of age. The rate for Bloomington ZIP code 61701 is 257.5 emergency room visits per 10,000 population 10 17 years of age. Like the county rate, this is also in the worst 25th percentile range (red indicator) compared to other ZIP codes in Illinois.
- The rate for age-adjusted emergency room visits due to pediatric mental health (less than 18 years) for McLean County is 86.3 emergency room visits per 10,000 population (Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 2020). This is in the worst 50th to 75th percentile range (yellow indicator) compared to other counties in Illinois. The McLean County value is higher than the Illinois value of 64.7 emergency room visits per 10,000 population less than 18 years of age and is not statistically different from the prior value (2017 2019) of 95.0 emergency room visits per 10,000 population less than 18 years of age. The rate for Bloomington ZIP code 61701 (156.2 emergency room visits per 10,000 population <18 years) is in the worst 25th percentile range (red indicator) compared to ZIP codes in Illinois.

Adults:

- The age-adjusted emergency room rate due to mental health is 80.2 emergency room visits per 10,000 population ages 18 years and older for McLean County. The rate is in the best 0 50th percentile range (green indicator) compared to other counties in Illinois (Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 2020). The rate is lower than the Illinois value of 92. 9 emergency room visits per 10,000 population and is not statistically different from the 2017 2019 rate of 84 emergency room visits per 10,000 population. The rate for Bloomington ZIP code 61701 (144.7 emergency room visits per 10,000 population 18+ years), however, is in the worst 25th percentile range (red indicator) compared to other ZIP codes in Illinois.
- The rate for age-adjusted emergency room visits for adults due to suicide and intentional self-inflicted injury in McLean County is 47.7 emergency room visits per 10,000 population ages 18 years and older (Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 2020). This is in the worst 50th 75th percentile range (yellow indicator) compared to other counties in Illinois. It is also higher than the Illinois value (40.5 emergency room visits per 10,000 population 18 + years) and is not statistically different from the prior value in 2017 2019 (43.7 emergency room visits

- per 10,000 population 18 years and older). The rates for Bloomington ZIP code 61701 (97.6 emergency room visits per 10,000 population 18 years and older) and McLean ZIP code 61754 (55.5 emergency room visits per 10,000 population 18 years and older) are in the worst 25th percentile range (red indicator) compared to other ZIP codes in Illinois.
- The age-adjusted hospitalization rate due to mental health is 35.1 hospitalizations per 10,000 population ages 18 years and older for McLean County. The rate is in the worst 50th 75th percentile range (yellow indicator) compared to other counties in Illinois (Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 2020). The rate is lower than the Illinois value of 53.1 hospitalizations per 10,000 population and is not statistically different from the 2017 2019 rate of 31.4 hospitalizations per 10,000 population. The rates for Bloomington ZIP code 61701 (70.6 hospitalizations per 10,000 population 18+ years) and Gridley ZIP code 61744 (63 hospitalizations per 10,000 population 18+ years), however, are in the worst 25th percentile range (red indicator) compared to other ZIP codes in Illinois.
- o The age-adjusted hospitalization rate for adults due to suicide and intentional self-inflicted injury in McLean County is 38.0 hospitalizations per 10,000 population ages 18 years and older (Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 2020). This is in the worst 50th 75th percentile range (yellow indicator) compared to other counties in Illinois. It is lower than the Illinois value (42.7 hospitalizations per 10,000 population 18 + years) and is not statistically different from the prior value in 2017 2019 (35.5 hospitalizations per 10,000 population 18+ years). Two high Health Equity Needs ZIP codes are in the worst 25th percentile range (red indicator) compared to other ZIP codes in Illinois; Bloomington ZIP code 61701 (79.2 hospitalizations per 10,000 population 18+ years) and Gridley ZIP code 61744 (51.7 hospitalizations per 10,000 population 18+ years).
- The age-adjusted death rate due to suicide in McLean County is 12.9 deaths per 100,000 population (Conduent Healthy Communities Institute, Centers for Disease Control and Prevention, 2018 2020). This is in the best 0 50th percentile range (green indicator) compared to other counties in the United States, but it is higher than the Illinois value (10.9 deaths per 100,000 population). The rate is not statistically different from the prior value (2017 2019) for McLean County (12.0 deaths per 100,000 population) is trending unfavorably in a statistically significant direction and does not meet the Healthy People 2030 target (12.8 deaths per 100,000 population).

There were 28 suicides in McLean County in 2021. As shown below in Exhibit 10, this has increased from 16 deaths in 2018 (McLean County Coroner, 2018 – 2021).

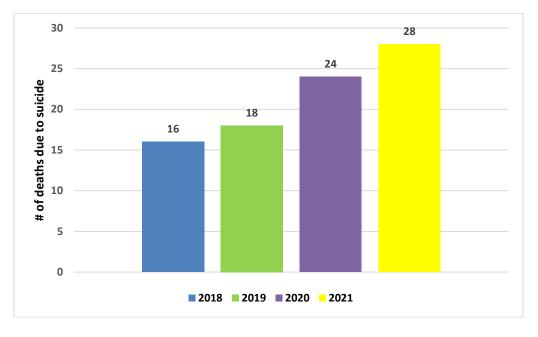


Exhibit 10: Number of Deaths Due to Suicide in McLean County, 2018 - 2021

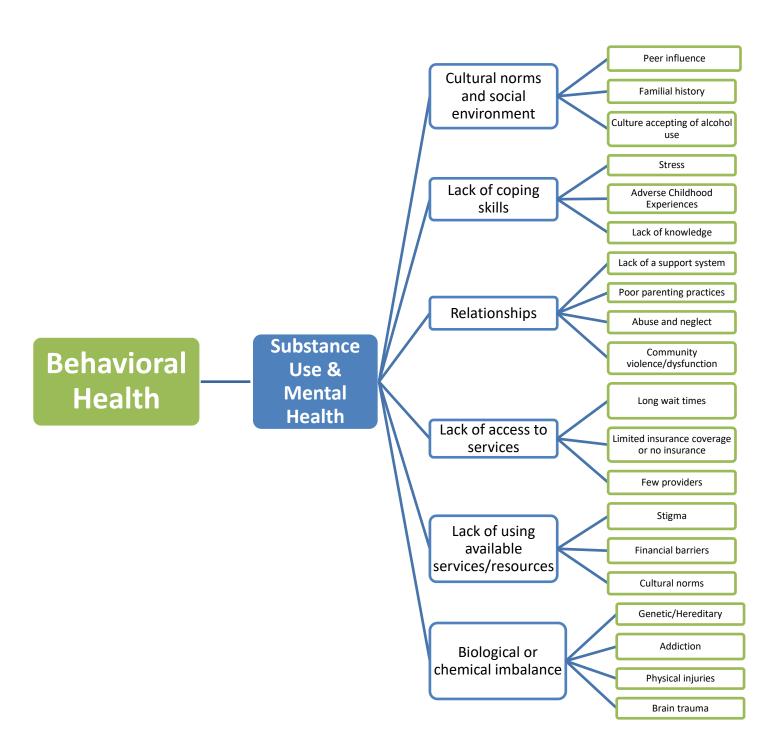
Source: McLean County Coroner, 2018 - 2021.

Since Carle BroMenn Medical Center has the only hospital-based in-patient mental health unit in McLean County, the need to promote and encourage early access to the available mental health and substance abuse care and treatment services outside of the hospital is essential and could improve quality of life. Providing more resources and evidenced-based programs to reduce behavioral health stigma and improve coping skills may assist McLean County residents to access care and treatment earlier and decrease substance abuse, which may reduce self-inflicted injuries as well as deaths due to suicide.

b) Chart of Health Priority Risk Factors and Direct/Indirect Contributing Factors

Both the Center for Disease Control and Prevention and the Substance Abuse and Mental Health Services Administration acknowledge that mental health and substance use disorders can have social, psychological and biological components. Intervention strategies could target the modifiable factors. Refer to the chart on the following page for a list of risk factors as well as direct and indirect contributing factors for the development of behavioral health concerns.

Health Problem Risk Factor



c) Rationale for Choice as a Health Priority

Behavioral health was selected as a significant health need to be addressed by the McLean County Community Health Council for several reasons. Behavioral health received the second highest priority score (159.0), indicating the need for further improvements in this area in McLean County. There are numerous geographic and racial/ethnic disparities for behavioral health related indicators. In addition, mental health was rated as the top health issue by 2021 McLean County Community Health Survey respondents. There has been a great deal of public support and momentum behind behavioral health in McLean County for the last several years. McLean County is well situated to continue to collaborate on mental health care due to the ongoing efforts of numerous organizations and the support of the McLean County Government. Mental health was also previously selected as a key health priority for the 2016 and 2019 McLean County Community Health Needs Assessments.

The county is well-situated to collaborate on mental health and substance use due to the on-going efforts of numerous organizations, committees, the Behavioral Health Priority Action Team, the Mental Health Advisory Board and the Behavioral Health Coordinating Council, which together reflect the community's commitment at the local, non-profit level as well as the government level. With various plans in place across individual organizations, programs and county government, it is important that information is shared at meetings so that a systemic approach to addressing mental health and substance use needs is pursued and that the 2023 – 2025 McLean County Community Health Improvement Plan works alongside and supports these plans, including the McLean County Government Comprehensive 2022 Mental Health Action Plan Update.

d) McLean County Community Health Improvement Plan Summary: Behavioral Health

Behavioral Health has been identified as a priority health issue in community health plans in McLean County since at least 2012. In addition, in 2015 a Comprehensive Mental Health Action Plan was developed along with the formation of the Behavioral Health Coordinating Council by the McLean County Government. From 2012 to 2022, many new programs and services were implemented to address needs, but much remains to be done.

Significant needs have been noted in both the prevention and treatment areas. The McLean County Community Health Plan and Needs Assessment (2012 – 2017), as well as the joint plans from 2017 – 2019 and 2020 – 2022, took a preventive approach to addressing mental health and substance use, rather than treatment, and endeavored to unite local efforts through the use of coalitions and committees in order to strengthen the impact of interventions. The newest plan continues to support movement toward a systemic community approach to addressing behavioral health needs.

The Behavioral Health Priority Action Team, consisting of approximately 56 individuals representing 30 entities, held a goal-setting meeting on April 19, 2022, in preparation for the development of the 2023 – 2025 Community Health Implementation Plan. This was followed by two additional meetings on September 27 and November 15, 2022 to formulate the 2023 – 2025 Behavioral Health Community Health Improvement Plan Summary, included below.

The Behavioral Health Community Health Improvement Plan for 2023 – 2025 focuses on three key strategies:

- **Strategy 1:** Support educational programs and media campaigns aimed at reducing behavioral health stigma, increasing mental health awareness and/or improving mental health status.
 - Efforts may include the use of evidence-based programs (e.g., Ending the Silence), evidence-informed programs (e.g., Mental Health First Aid), community education and discussions (e.g., annual Behavioral Health Forum; social media campaigns), and a community-wide commitment towards becoming trauma-informed.
- **Strategy 2:** Support drug and alcohol educational programs and collaborative coalitions to increase knowledge and decrease substance use.
 - o Efforts may include the use of evidence-based programs (e.g., Too Good for Drugs)
- Strategy 3: Increase access to behavioral health services at various sites within the community.
 - Efforts may include a) supporting tele-psychiatry, embedded behavioral health in schools, onsite or integrated behavioral health at primary care offices, Frequent Users System
 Engagement (FUSE), Central Illinois Bridge Academy and Behavioral Health Urgent Care and b) providing evidence-based programming to address later-life depression (e.g., PEARLS).

An overview of the goals and objectives to address Behavioral Health are listed below.

High-Level Goal for Behavioral Health: Further equitable, inclusive, and integrated systemic community approaches to behavioral health and well-being for our diverse community by 2026.

- Outcome Objective #1: By 2026, reduce the number of deaths due to suicide and emergency room visits due to suicide and intentional self-inflicted injury.
- Outcome Objective #2: By 2026, reduce the death rate due to drug poisoning and emergency room visits due to alcohol use.
 - o Impact Objective #1: By 2026, increase the percent of McLean County residents reporting good mental health and feeling less sad, depressed, stressed or anxious.
 - o Impact Objective #2: By 2026, decrease the percent of McLean County residents reporting heavy or binge drinking and the use of any type of substance.
 - Impact Objective #3: By 2026, increase access to behavioral health services in McLean County.

The following 16 pages (50-65) contain the 2023-2025 McLean County Community Health Improvement Plan Summary for Behavioral Health.

McLean County

Community Health Improvement Plan Summary: Behavioral Health January 1, 2023 - December 31, 2025

HEALTH PRIORITY: BEHAVIORAL HEALTH

GOAL: Further equitable, inclusive, and integrated systemic community approaches to behavioral health and well-being for our diverse community by 2026.

Related Social Determinants of Health: Access to Care; Housing Instability/Quality of Housing

OUTCOME OBJECTIVES: By 2026, reduce the number of deaths due to suicide and emergency room visits due to suicide and intentional self-inflicted injury.

By 2026, reduce the death rate due to drug poisoning and emergency room visits due to alcohol use.

Baseline

- 28 deaths due to suicide, McLean County Coroner's Office, 2021.
- 47.7 emergency room visits per 10,000 population ages 18 years and older due to suicide and intentional self-inflicted injury (Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 2020).
- 151.5 emergency room visits per 10,000 population 10 17 years of age due to adolescent suicide and self-inflicted injury (Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 2020).
- 18.6 deaths/100,000 population due to drug poisoning, Conduent Healthy Communities Institute, County Health Rankings, 2017 2019
- 47.8 emergency room visits per 10,000 population 18 years and older due to alcohol use (Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 2020).

State Health Improvement Plan (SHIP) 2021 Alignment

- Build upon and improve local system integration.
- Improve the opportunity for people to be treated in the community rather than in institutions.
- Increase behavioral health literacy and decrease stigma.
- Reduce deaths due to behavioral health crises.

THREE YEAR MEASURES	STRATEGIES and INTERVENTIONS	ANNUAL EVALUATION MEASURES	POTENTIAL RESOURCES/PARTNERS*
IMPACT OBJECTIVE #1: By 2026, increase the percent of McLean County residents reporting	STRATEGY 1: SUPPORT EDUCATIONAL PROGRAMS AND MEDIA CAMPAIGNS AIMED AT REDUCING BEHAVIORAL HEALTH		
good mental health and feeling less sad, depressed, stressed or anxious.	STIGMA, INCREASING MENTAL HEALTH AWARENESS AND/OR IMPROVING MENTAL HEALTH STATUS.		
BASELINE DATA	Internantian 4.4. Offer Manual Haulth First	Internation 4.4. Decree Indicators	Intermedian 4.4
 Residents reported that their mental health was not good 4.0 days in the past 30 days (County Health Rankings, 2018) 	Intervention 1.1: Offer Mental Health First Aid (MHFA) Courses to the Community (evidence- based program) Evidence:	 Intervention 1.1: Process Indicators # of MHFA for Older Adults courses offered (baseline: 1 course, 2021) # of MHFA courses sponsored by Carle BroMenn Medical Center (baseline: 3 courses –McLean County MHFA 	Intervention 1.1: Resources/Partners McLean County Mental Health First Aid Collaborative: Carle BroMenn
24% of survey respondents reported their overall mental health as good (McLean County Community Health Survey, 2021)	https://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/policies/mental-health-first-aid	 Collaborative, 2021) # of MHFA courses sponsored by OSF St. Joseph Medical Center (baseline: 3 courses— McLean County MHFA Collaborative, 2021) 	Medical Center Central Illinois Area Health Education Center at
23% of survey respondents reported feeling depressed for 3 or more days in the 30 days prior to the survey (McLean County Community Health Survey, 2021)		 # of McLean County community members trained in MHFA per year (baseline: 323 community members, McLean County MHFA Collaborative, 2021) # of instructors trained to teach MHFA 	Illinois State University McLean County Center for Human Services
 19% of survey respondents reported feeling stressed or anxious for 3 or more days in the 30 days prior to the survey 		 (baseline: 16 instructors – McLean County MHFA Collaborative, 2021) Intervention 1.1: Outcome Indicators % of MHFA course participants that "Agree" or "Strongly Agree" that they are 	 McLean County Health Department OSF St. Joseph Medical Center Unit 5

(McLean County Community Health Survey, 2021)

40% of 8th, 10th and 12th grader students reported feeling so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities (Illinois Youth Survey, 2020) More Confident About Being Aware of Their Own Views & Feelings About Mental Health Problems & Disorders (baseline: 94% of survey respondents-McLean County MHFA Collaborative, 2021)

- % of MHFA follow-up survey participants that still feel prepared to assist a person who may be dealing with a mental health problem or crisis to seek professional help (baseline: 70.7%, McLean County MHFA Collaborative, 2022) * The survey went to individuals who took a MHFA course within the last 6 years.
- % of MHFA follow-up survey participants that feel prepared to ask a person whether s/he is considering killing her/himself (baseline: 90.9%, McLean County MHFA Collaborative, 2022)

- District 87
- ChestnutHealth Systems

Partners:

- Regional Office of Education #17
- Illinois StateUniversity
- IllinoisWesleyanUniversity
- McLean County employers
- McLean County faith community
- McLean County schools
- McLean County Sherriff's Office
- o Faith in Action

Intervention 1.2: Offer National Alliance on Mental Health (NAMI) *Ending the Silence* in McLean County Public Schools (evidence-based program)

Evidence:

https://www.countyhealthrankings.org/takeaction-to-improve-health/what-works-forhealth/policies/universal-school-basedsuicide-awareness-education-programs

Intervention 1.2: Process Indicators

- # of public schools in McLean County where Ending the Silence is implemented (baseline: 20 public schools, Project Oz, 2021)
- # of students in McLean County public schools participating in Ending the Silence (baseline: 3,317 students, Project Oz, 2021)

Intervention 1.2: Potential Resources/Partners

Initial Ending the Silence Partners/Resources

- Carle BroMenn Medical Center
- Illinois Prairie
 Community Foundation

	 Intervention 1.2: Outcome Indicators % of Ending the Silence student participants agreeing with the following statement, "As a result of this presentation, I know how to help myself or a friend if I notice any of the warning signs" (baseline: 89% of students, Project Oz, 2021) % of Ending the Silence student participants agreeing with the following statement, "I know the early warning signs of mental illness" (baseline: 90% of students, Project Oz, 2021) % of students reaching out for help as a direct result of Ending the Silence presentations (baseline: 12.2% of 2,476 students who completed an evaluation, Project Oz, 2021) 	 National Alliance on Mental Illness (NAMI) NAMI Mid Central Illinois Project Oz Regional Office of Education #17 Current Ending the Silence Partners/Resources International Interior Design Association McLean County Center for Human Services Illinois State University (staff and athletes) McLean County Health Department McLean County Public School districts National Alliance on Mental Illness (NAMI) NAMI Mid Central Illinois Project Oz
Intervention 1.3: Convene an annual	Intervention 1.3: Process Indicators	Intervention 1.3:
Behavioral Health Forum for the Community	# of community members attending the	Presenting Partners
	forum (baseline: 142 community members	City of Bloomington
	for 7 virtual sessions, McLean County	McLean County
	Government, Fall, 2021)	Government Town of Normal
	Intervention 1.3: Outcome Indicators	Town of Normal
	Not available	

resilience-oriented county through helping individuals and communities build resilience and organizations become trauma-informed. Evidence: Trauma-informed approaches to community building County Health Rankings & Inspires and Spread team (baseline: 17 McLean County Go Establish a baseline trainings conducte awareness Initiate a trauma are campaign and online	Partners/Resources ads to Everyone) core 17 organizations, 2022, Government) In efor the # of community ted to increase trauma awareness social media alline presence and the for engagements atilization Partners/Resources ABC Counseling Behavioral Health Coordinating Council Bloomington Public Library Carle BroMenn Medical Center Center for Youth and Family Solutions Chestnut Health Systems
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			McLean County .
			Employers
			McLean County
			Government
			 McLean County Health
			Department
			 McLean County Law
			and Justice Center
			 McLean County public
			and private schools
			 McLean County ROSC
			Mid Central Community
			Action
			OSF St. Joseph Medical
			Center
			PATH, Inc.
			Prevent Child Abuse IL
			Project Oz
			Regional Office of
			Education #
			The Baby Fold
			• Unit 5
			• YWCA
	Intervention 1.5: Conduct a Behavioral	Intervention 1.5: Process Indicators	Intervention 1.5:
	Health Social Media Campaign	# of individuals reached on Facebook	Resources/Partners
	p. 6	(baseline: 2,689 individuals, Chestnut	Carle BroMenn Medical
	Bi-monthly social media messages will be	Health Systems, January and October –	Center
	posted with collaborating agencies being	December, 2021)	Behavioral Health
	tagged to share the same message.	 # of Facebook engagements (baseline: 	Coordinating Council
		1,000 engagements, Chestnut Health	Center for Youth and
		Systems, January and October – December,	Family Solutions
		2021)	Chestnut Health
I		,	Systems (lead)
	<u> </u>		2,3000 (.00.0)

IMPACT OBJECTIVE #2: By 2026, decrease the percent of McLean County residents reporting heavy or binge drinking and the use of any type of substance.	STRATEGY 2: SUPPORT DRUG AND ALCOHOL EDUCATIONAL PROGRAMS and COLLABORATIVE COALITIONS TO INCREASE KNOWLEDGE AND DECREASE SUBSTANCE USE.	 # of individuals reached on Twitter (baseline: 2,533 individuals, Chestnut Health Systems, January and October – December, 2021) # of Twitter engagements (58 engagements, Chestnut Health Systems, January and October – December, 2021) # of individuals reached on LinkedIn (baseline: 1,057 individuals, Chestnut Health Systems, October – December, 2021) # of LinkedIn engagements (59 engagements, Chestnut Health Systems, October – December, 2021) Intervention 1.5: Outcome Indicators Not available 	 Children's Home and Aid District 87 Heartland Head Start MarcFirst McLean County Center for Human Services McLean County Health Department Mid Central Community Action OSF St. Joseph Medical Center Project Oz Regional Office of Education The Baby Fold Town of Normal Police Unit 5 West Bloomington Revitalization Project
BASELINE DATA	Intervention 2.1: Offer Too Good for Drugs in McLean County Public Schools (evidence-based program)	 # of public-school districts in McLean County where Too Good for Drugs is implemented 	Intervention 2.1: Resources/Partners Illinois Department of
21.4% of adults reported heavy or binge drinking (County Health Rankings, 2018)	Evidence:	(baseline: 7 public school districts, Project Oz, 2021)	Human Services McLean County Board of Health

- **7%** of survey respondents reported using marijuana one or more times/day (McLean County Community Health Survey, 2021)
- 21% of survey respondents reported having an alcoholic drink one or more times/day (McLean County Community Health Survey, 2021)
- 1% of survey respondents reported the use of illegal substances one or more times/day (McLean County Community Health Survey, 2021)
- **7%** of survey respondents reported the improper us of prescription medication one or more times/day (McLean County Community Health Survey, 2021)
- 53% of 12th grade students reported that they have used any type of substance in the past year (Illinois Youth Survey, 2020)
- **26%** of 12th grade students reported that they drank alcohol during the 30 days prior to the

http://www.toogoodprograms.org/toogood/evidence-base/

• # of students in McLean County public schools participating in Too Good for Drugs (baseline: 2,473 Project Oz, 2021)

Intervention 2.1: Outcome Indicator(s)

Average improvement in student pre and post-test scores for Too Good for Drugs (baseline: +2.67, Project Oz, 2021)

- McLean County Health Department
- McLean County public school districts
- Project Oz

Intervention 2.2: Coordinate Recovery Oriented Systems of Care (ROSC) community-based recovery services in McLean County for the following behavioral health areas: Behavioral Health & Wellness, **Sober Living, Spirituality, Recovery** Recreation, Diversity in Recovery and various activities organized by the McLean **County ROSC.**

Evidence:

Strategic Prevention Framework | SAMHSA

William White Papers | Chestnut Health **Systems**

Intervention 2.2: Process Indicators

- # of community sectors participating in ROSC council meetings. (baseline: establish)
- # of recovery recreational activities offered (baseline: establish)
- # of unduplicated participants attending recovery recreational activities (baseline: establish)

Intervention 2.2: Outcome Indicator(s)

Not available

Intervention 2.2: **Resources/Partners**

- **Bloomington-Normal** Libraries
- **Bloomington Police** Department
- Bridgeway
- Carle BroMenn Medical Center
- Chestnut Health Systems
- Children's Home + Aid
- City of Bloomington -Township
- Community Health Care Clinic
- **Gateway Foundation**
- ISU
- **Heartland Community** College
- Illinois Department of Mental Health
- Illinois Department of Substance Use

	1		
survey (Illinois Youth Survey,			Prevention and
2020)			Recovery
			 Integrity Counseling
 16% of 12th grade students 			 Joy Care Center/Jobs
reported using marijuana 1 or			Partnership
more times in the past 30 days			Labyrinth House
(Illinois Youth Survey, 2020)			LifeCil
			McLean Center for
• 18.6 deaths/100,000 population			Human Services
are due to drug poisoning			McLean County Health
(Conduent Healthy Communities			Department
Institute, County Health			• NAMI
Rankings, 2017 – 2019)			NAACP
			OMNI Youth Services
			Oxford House
			• PATH
			Prairie Pride Coalition
			Prairie State Legal
			Services
			• TASC
			• YWCA
IMPACT OBJECTIVE #3	STRATEGY 3: INCREASE ACCESS TO		
	BEHAVIORAL HEALTH SERVICES AT VARIOUS		
By 2026, increase access to	SITES WITHIN THE COMMUNITY.		
behavioral health services in			
McLean County.	Intervention 3.1: Support on-site or	Intervention 3.1: Process Indicators	Intervention 3.1:
	integrated behavioral health at primary care	# of organizations that have integrated or	Resources/Partners
BASELINE DATA	offices	co-located behavioral health services at	Chestnut Family Health
		primary care locations (baseline: 2	Center
• 17% of McLean County residents	Evidence:	organizations; Chestnut Family Health	OSF Medical Group
reported that they needed		Center and OSF Medical Group Primary	Primary Care Offices
counseling and were not able to		Care Offices, 2022)	,

get it (McLean County Community Health Survey, 2021)	https://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/policies/behavioral-health-primary-care-integration	Intervention 3.1: Outcome Indicators Not available	Community Health Care Clinic
	Intervention 3.2: Support Telepsychiatry Evidence: https://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/policies/telemental-health-services	 Intervention 3.2: Process Indicators # of sites where telepsychiatry is available (baseline: 6 sites, 2021) # of individuals receiving services via telepsychiatry (baseline: 1,979 individuals, 2021) Intervention 3.2: Outcome Indicator(s) Not available 	Intervention 3.2: Resources/Partners Carle BroMenn Medical Center Center for Youth and Family Solutions Chestnut Health Systems McLean County Government McLean County Jail OSF St. Joseph Medical Center
	Intervention 3.3: Support Frequent Users System Engagement (FUSE) FUSE is a program designed to break the cycle of homelessness and crisis among individuals with complex medical and behavioral health challenges who are intersecting the justice, homeless or emergency systems of care frequently. Evidence: https://www.csh.org/fuse/	 Intervention 3.3: Process Indicators # of FUSE participants (baseline: average of 10 participants, McLean County Government, 2021) Intervention 3.3: Outcome Indicators Decrease in mental health emergency room visits pre-FUSE (18 months prior to joining FUSE) versus post-FUSE (baseline: 60 mental health emergency room visits pre-FUSE versus 13 visits post-FUSE, McLean County Government, 2021) Reduction in # of justice contacts (baseline: 46 justice contacts preFUSE (18 months prior to joining FUSE versus 8 justice 	Intervention 3.3: Resources/Partners Bloomington Housing Authority Carle BroMenn Medical Center Bridgeway Chestnut Health Systems JOLT McLean County Center for Human Services McLean County Government McLean County Jail

Intervention 3.5: Offer PEARLS to McLean County Older Adults in the home	 Intervention 3.5: Process Indicators # of persons served (baseline: 54 older adults, CCSI Case Coordination LLC, FY2021) 	Intervention 3.5: Resources/Partners
Intervention 3.4: Support Behavioral Health Urgent Care (formerly the Triage Center) Behavioral Health Urgent Care is a walk-in option for individuals experiencing a behavioral health crisis. Evidence: https://www.nlc.org/resource/triage-centers-as-alternatives-to-jail-for-people-in-behavioral-health-crises/ https://www.gjcpp.org/pdfs/2013-007-final-20130930.pdf	 Intervention 3.4: Process Indicators # of clients served (baseline: 296 clients, McLean County Government, 2021) Total # of client services Average number of services per client (baseline to be established) Intervention 3.4: Outcome Indicator(s) % of clients sent to the emergency room (baseline: .7%, McLean County Government, 2021) % of client interactions that do not result in a psychiatric hospitalization (baseline: 99.3%, McLean County Government, 2021) % of client interactions that do not result in law enforcement involvement post initial hand-off (98.9%, McLean County Government, 2021) 	Intervention 3.4: Resources/Partners McLean County Center for Human Services McLean County Government McLean County Law Enforcement
	contacts post-FUSE, McLean County Government, 2021) Decrease in shelter bed days (baseline: 2,502 shelter bed days pre-FUSE (18 months prior to joining FUSE) versus 62 shelter bed days post-FUSE, McLean County Government, 2021)	 Mid Central Community Action OSF St. Joseph Medical Center PATH Recycling Furniture for Families Thrive

The Program to Encourage Active, Rewarding Lives (PEARLS) is a national evidence-based program for late-life depression. PEARLS brings high quality mental health care into community-based settings that reach vulnerable older adults. Evidence: https://depts.washington.edu/hprc/evidence -based-programs/pearls-program/pearls- evidence/	 # of units/hours for individuals in PEARLS (657 units/hours, CCSI Case Coordination LLC, FY2021) Intervention 3.5: Outcome Indicator(s) Average PHQ-9 score pre PEARLS versus six months post PEARLS (baseline to be established) 	 CCSI Case Coordination LLC East Central Illinois Area Agency on Aging
Intervention 3.6: Support Embedded Behavioral Health in Schools Defined as a community agency providing services through a school setting in McLean County. Community agency can bill Medicaid or Medicare.	 Intervention 3.6: Process Indicators Number of school districts with embedded behavioral health in schools (baseline: 5 school districts, Center for Human Services and Chestnut Health Systems, 2021) Number of students receiving counseling services in school setting through Embedded Behavioral Health in Schools (baseline: 928 students, Center for Human Services and Chestnut Health Systems, 2021) Intervention 3.6 Outcome Indicators Not available 	Intervention 3.6: Resources/Partners Bloomington District 87 Chestnut Health Systems McLean County Center for Human Services McLean County Health Department McLean County Unit District #5 Olympia CUSD #16 Regional Office of Education #17 (Regional Alternative School) Ridgeview CUSD #19 Tri-Valley CUSD #3
Intervention 3.7: Support Central Illinois Bridge Academy	 Intervention 3.7: Process Indicators The number of students served by Bridge Academy (baseline to be established) 	Intervention 3.7: Resources/Partners

Central Illinois Bridge Academy is a specialized alternative educational program under ROE #17 to serve adolescents in 7th through 12th grade with internalizing mental health concerns at risk for hospitalization, returning from hospitalization, or utilizing significant resources that exceed their school's ability. Students attend for full days, meet state standards for their academics through project based learning, with full access to case managers, therapist and sensory room on-site, as well as community connections for ongoing resources.

Evidence:

https://safesupportivelearning.ed.gov/sites/default/files/13-ImpSchMnHlthSprtBtPrt-508 0.pdf

https://store.samhsa.gov/sites/default/files/d7/priv/pep19-school-guide.pdf

https://oschool.org/

<u>Intervention 3.8</u>: Improve collaboration and close service gaps for residents 18+ with significant mental health related service needs.

Chestnut Health Systems and the Center for Human Services will use SAMHSA Certified Community Behavioral Health Clinic (CCBHC) The number of school districts and/or schools served within ROE (baseline to be established)

Intervention 3.7 Outcome Indicators

- The average percentage of full-day attendance pre-Bridge Academy enrollment versus post Bridge Academy enrollment (baseline to be established)
- GAD-7 scores and PHQ data upon enrollment at Bridge Academy versus one year post-Bridge Academy enrollment (or upon transition back to the referring school, whichever one comes sooner) (baseline to be established)
- Training resources for staff; The Baby Fold, Mental Health First Aid Collaborative and Marcfirst
- All districts within ROE #17 counties (DeWitt, Livingston, Logan and McLean)
- Marcfirst
- Community social service agencies
- Funding partners (first two years; County of McLean (through an Intergovernmental Agreement in partnership with Town of Normal and City of Bloomington), United Way of McLean County, and ISBE Community Partnerships Grant

Intervention 3.8: Process Indicators

of unduplicated patients served through the collaboration (baseline: establish)

Intervention 3.8: Outcome Indicators

 Within six months of funding, establish Consumer/Family Committee

Intervention 3.8 Resources/Partners

- Center for Human Services
- Chestnut HealthSystems

funding to improve collaboration between the two organizations and close service gaps for 305 unduplicated adults over the next four years.

Evidence:

https://www.samhsa.gov/section-223/quality-measures

https://www.thenationalcouncil.org/program/ccb hc-success-center/ comprised of clients from both organizations to meaningfully involve consumers in service development and provision.

 Creation and implementation of shared care team and clinical model to support patient-centered and coordinated provision of core CCBHC services.

RELATED IMPROVEMENT PLAN EFFORTS

The following organizations received grants in 2022 for implementation in 2022/2023 or FY23 (May 1, 2022 – April 30, 2023) from the John M. Scott Health Care Commission. Although the grants are tied to the health priorities selected for the 2019 McLean County Community Health Needs Assessment, the grant programs will also apply to the 2022 McLean County Community Health Needs Assessment and 2023 – 2025 McLean County Community Health Improvement Plan as the health priorities are the same.

- Youthbuild of McLean County received a grant for to support adolescent well-being through mental health wrap-around services, including on-site care.
- The Baby Fold received a grant to support childhood well-being through evidenced-based, trauma-informed, and family-centered education and related services to reduce the risk of abuse or neglect.
- The Boys and Girls Club of Bloomington-Normal received a grant to support mental health services to children.
- The Center for Youth and Family Solutions received a grant to support family behavioral health services, including tele-psychiatry.
- Integrity Counseling received a grant to support mental health services to the uninsured and underinsured.

A leader from Carle BroMenn Medical Center and OSF St. Joseph Medical Center will continue to serve on the City of Bloomington's John M. Scott Health Care Commission Grants Committee.

Other:

• McLean County Government plans on forming a workgroup to identify barriers to accessing behavioral health in rural communities in McLean County.

- Project Oz plans to continue having Restorative School Counselors in local public schools during the 2023 2025 McLean County Community Health
 Improvement Plan. Restorative School Counselors offer individual counseling/mentoring, family outreach, and training and leadership through Restorative
 Practices. The program helps students succeed in school, resolve conflicts, overcome challenges and build positive community connections. Currently there
 are counselors in the following schools: Normal Community High School, Normal West High School, Bloomington High School, Bloomington Junior High
 School, Sheridan Elementary School and Irving Elementary School.
- Carle Behavioral Health Bloomington and United Way of McLean County plan on continuing their partnership entitled *ThriveMind* to increase rural access to behavioral health services for kindergarten through twelfth grade students, who do not readily have access to these services, in Olympia, Ridgeview and Lexington schools. As a part of the collaboration, students are able to receive counseling services at no charge and without a limit on the number of services received.
- Heartland Community College offers a Certified Recovery Support Specialist (CRSS) program. The CRSS program prepares students for entry-level positions as behavioral health workers, specifically in the areas of substance abuse and mental health disorders recovery. Recovery Support
- East Central Illinois Area Agency on Aging awarded grants to support social isolation programming for older adults in East Central Illinois for 2023 and 2024, including McLean County. Grant programming partners include CCSI Case Coordination, LLC for an English as a Second Language (ESL) Outreach Project and The Activity and Recreation Center (ARC) Sunshine Project to connect with ARC members in Bloomington and Normal who are social isolated.
- Easterseals Central Illinois provides the Ability Awareness Program (AAP) to schools in the McLean area. This program offers five 20- 30 minute lessons. Aimed for elementary aged youth. Additionally, we awareness assemblies for high school aged youth.
- BN Parents, a prevention coalition consisting of community sectors whose mission is to work to improve parent/teen communication to reduce risks during the teen years, will continue to provide and support multiple educational prevention campaigns to several target populations. Campaigns include: Parents Make a Difference (Parents of BN students, goal to educate, inform and empower parents to assist their students in making the best decisions around alcohol, marijuana, and other substances); Always Unstoppable (targeted toward high school students in Bloomington, Normal Schools- encouraging students to recognize their strengths and help to make healthy decisions regarding substance use); Becoming Unstoppable (campaign focused to junior high students in Bloomington Normal, supporting students positive decision making). Chestnut Health Systems is the fiscal for these projects, through the Partnership for Success Federal Project, efforts have been expanded to supporting the local College communities and local elementary schools in the Bloomington- Normal community.
- Chestnut Health Systems will continue to serve as the manager of the Statewide Recovery Oriented Systems of Care Leadership Center project. The Statewide ROSC provides training and technical assistance to IL Department of Human Services Division of Substance Use Prevention and Recovery-funded community-based ROSC projects across the state of Illinois.
 - An addiction and recovery leader from Carle BroMenn Medical Center will continue to serve on McLean County's Recovery Oriented Systems of Care Council.

•	OSF HealthCare will implement a new evidence based program called COPE (Creating Opportunities for Personal Empowerment) to help teens utilize cognitive
	behavior skills to improve stressful situations.

^{*}The Four Organizations comprising the McLean County Executive Steering Committee—Carle BroMenn Medical Center, Chestnut Health Systems, the McLean County Health Department and OSF St. Joseph Medical Center—are all implied resources/partners for Behavioral Health.

e) Funding for Implementing Interventions

After approval of the 2023 – 2025 McLean County Community Health Improvement Plan, the Behavioral Health Priority Action Team will further address funding options, including grant opportunities as they become available, to address behavioral health interventions. For several activities listed in the plan, initial funding has been secured, but ongoing funding may be tenuous and sustainability issues will need to be considered.

Many of these stakeholders have worked together throughout the needs assessment and health plan development process, making the community better-positioned for collaborative efforts, with or without grants or other funding. In addition, since many of the intervention strategies for this health priority fall within the mission of some of the priority action team agencies, underpinning efforts through collaborative programs, activities with other community partners, and/or generating letters of support for grant proposal submissions, will be encouraged.

As of 2019, a new source of local funding was announced by the John M. Scott Commission Trust, with the Trust providing grants from one to three years for health-related projects that demonstrate a connection to the health priorities identified in the current McLean County Community Health Needs Assessment. Subsequent grant proposals may also consider the concerns and interventions identified in the 2023 – 2025 McLean County Community Health Improvement Plan.

f) Barriers to Achieving Health Improvements

Multiple barriers exist for individuals and families seeking behavioral health services. Although mental health and substance abuse services are available in McLean County, the largest geographic county in Illinois, they are located primarily in the twin cities of Bloomington and Normal; few services exist in rural areas, transportation options to get to services anywhere are limited, and throughout the county, service capacity is limited. Additional barriers were identified in the responses to the 2021 McLean County Community Health Survey of adult county residents. The survey identified that 17 percent of respondents did not have access to needed counseling services within the past year. Exhibit 11 below illustrates the reasons for being unable to access counseling.

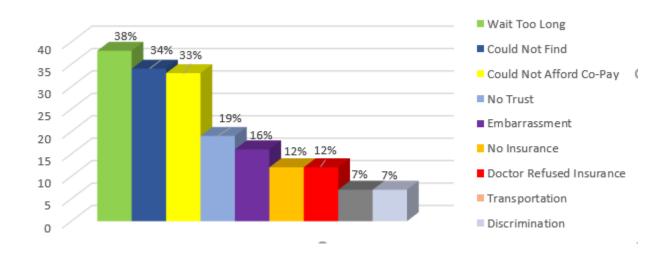


Exhibit 11: Causes of Inability to Access Counseling for McLean County Survey Respondents, 2021

Source: McLean County Community Health Survey, 2021.

In addition to the above barriers, the number of behavioral health providers, particularly psychiatrists, in the community is limited and often there are eligibility requirements for services, which at times restricts the ability of the provider to offer services in a timely manner. Stigma/embarrassment continues to influence care-seeking behaviors; even if reduced so that behavioral health care is sought out early, county residents may still not be able to access local services quickly due to the lack of providers, transportation issues and financial barriers.

g) Evaluation and Monitoring Plan

Within the 2023 – 2025 McLean County Community Health Improvement Plan Summary: Behavioral Health, there is an "Annual Evaluation Measures" column that contains both process indicators and outcome indicators. Each year, with the assistance of the Behavioral Health Priority Action Team, these indicators will be tracked throughout the three-year cycle ending in 2025. The Executive Steering Committee will be responsible for assuring that the indicator data is being tracked and that it is shared on an annual basis with the McLean County Community Health Council and the priority action team for each health priority. Early in 2026, data received from County Health Rankings, the Illinois Youth Survey or the next McLean County Community Health Survey, conducted in preparation for the 2025 McLean County Community Health Needs Assessment, will be compared to the outcome objectives and impact objectives listed in the 2023 – 2025 McLean County Community Health Improvement Plan Summary: Behavioral Health, in order to evaluate and measure progress toward meeting objectives. Through evaluation, accountability will be increased, modifications to the plan considered and a stronger commitment to improving the health of McLean County citizens will be communicated to its residents.

The McLean County Community Health Executive Steering Committee reserves the right to amend this 2023 – 2025 McLean County Community Health Improvement Plan as needed to reflect each

organization's role and responsibilities in executing the plan, as well as the resources each organization is committing. In addition, certain significant health needs may become a community priority during this three-year plan period and require amendments to the strategies developed to address the emerging significant health need. Other entities or organizations in the community may develop programs to address the same health needs or joint programs may be adopted. Finally, in compliance with Internal Revenue Code Section 501(r) requirements for hospitals, Carle BroMenn Medical Center or OSF St. Joseph Medical Center may refocus the limited resources the organization committed to the plan to best serve the community.

VI. Health Priority #3: Healthy Eating/Active Living (HEAL)

a) Description of the Health Priority

By focusing on improving healthy eating and active living in McLean County, many other health outcomes may also be positively impacted. In addition, it will address an issue of concern to McLean County residents, that of obesity.

Health Perceptions in McLean County

The 2021 McLean County Community Health Survey of 763 adults asked respondents to rate the three most important health issues in the community out. See Exhibit 12 below. The health issue that rated the second highest was obesity at 16 percent. Comparison data is not available since 2021 respondents were allowed to select three choices rather than one choice in the 2021 survey.

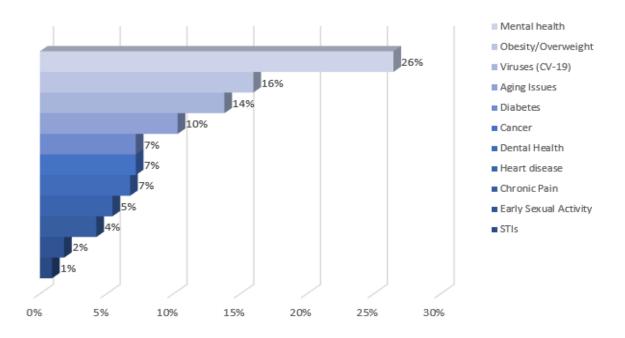


Exhibit 12: Perception of Health Issues in McLean County, 2021

Source: McLean County Community Health Survey, 2021.

In the same survey, 15 percent of adults responding to the survey chose "Poor Eating Habits" as the second out of ten choices for "Unhealthy Behaviors that Impact Health Perception in McLean County, 2021." Healthy food choices was also identified as the second most popular answer, by survey respondents, when asked about issues impacting the quality of life for McLean County residents.

Statistics Supporting Healthy Eating/Active Living as a Priority

Obesity

The Centers for Disease Control and Prevention reports that the obesity prevalence rate among adults (2017 – March 2020) in the United States was 41.9 percent (CDC, May 17, 2022). Obesity continues to be one of the most challenging health issues in the United States, Illinois and McLean County. The Center for Disease Control and Prevention notes that obesity is associated with many of the leading causes of death in the United States, such as Type 2 diabetes, stroke, heart disease and some cancers. The annual cost of obesity, in terms of medical care in the United States, was estimated to be \$173 billion (in 2019), with the medical costs per year at \$1,861 higher for people with obesity compared to those at a healthy weight (www.cdc.gov/obesity, May 17, 2022).

Approximately 34 percent of McLean County adults are classified as obese. This is higher than the Illinois rate of 32 percent (County Health Rankings, 2022). Three of the high Health Equity Needs ZIP Codes in McLean County have percentages that are greater than one percent higher than the percentage for McLean County; Bloomington ZIP code 61701: 35.7 percent, Colfax ZIP code 61728: 36 percent and

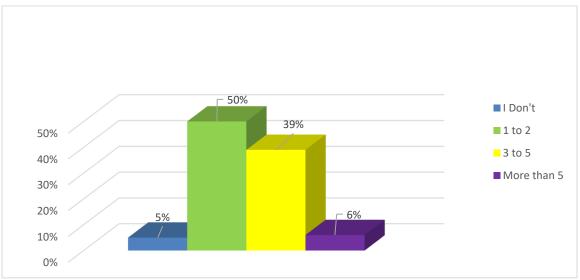
Ellsworth ZIP code 61737: 36 percent (Conduent Healthy Communities Institute, CDC – Places, 2019). All three ZIP codes are in the worst 50th – 75th percentile range (yellow indicator) compared to other ZIP codes in Illinois.

According to the 2020 Illinois Youth Survey, an average of ten percent of eigth, tenth and twelth grade students are obese in McLean County. This is higher than the 2018 percent (9.6 percent).

Healthy Eating

The 2021 McLean County Community Health Survey data show that 55 percent of McLean County residents report no consumption or low consumption (one to two servings per day or less) of fruits and vegetables (see Exhibit 13).

Exhibit 13: Responses for "On a typical day, how many servings of fruits and/or vegetables do you eat?" for McLean County Survey Respondents, 2021



Source: McLean County Community Health Survey, 2021

For the 2021 McLean County Community Health Survey respondents who indicated not eating fruits or vegetables, transportation issues and not liking them were the two most frequently cited reasons for failing to consume fruits and vegetables. Frequency of eating fruits and vegetables tends to be higher for Whites and individuals with a higher education and income.

An average of 30 percent of eighth, tenth and twelfth graders ate fruit two times per day in the last seven days and an average of 12 percent ate three or more vegetables per day in the last seven days (Illinois Youth Survey, 2020).

Access to healthy food as well as food insecurity also play roles in how many fruits and vegetables McLean County residents are consuming. The following data points were areas of concern:

- Food Environment Index: The food environment index combines two measures of food access: the percentage of the population that is low-income and has low access to a grocery store, and the percentage of the population that did not have access to a reliable source of food during the past year (food insecurity). The index ranges from 0 (worst) to 10 (best) and equally weights the two measures. The food environment index for McLean County is 8.1 which is in the best 0 50th percentile range (green indicator) compared to other counties in Illinois. It is worse, however, than the Illinois index of 8.7 but better than the prior value for McLean County in 2018 of 7.7. The index for McLean County is trending favorably but is not statistically significant. (Conduent Healthy Communities Institute, County Health Rankings, 2021).
- **Food Insecurity**: The U.S. Department of Agriculture defines food insecurity as limited or uncertain availability of nutritionally adequate foods or uncertain ability to acquire these foods in socially acceptable ways. The percentage of the population that experienced food insecurity in McLean County at some point during 2019 is 9.5 percent (Conduent Healthy Communities Institute, Feeding America, 2019). This rate is in the best 0 50th percentile range (green indicator) compared to other counties in Illinois and lower than the Illinois rate of 9.5 percent. It is, however, higher than the prior value for McLean County (2018) and is trending favorably albeit not statistically significant.
- Food insecure children: Although the percentage of children (under 18 years of age) living in households that experienced food insecurity at some point during 2019 is 9.5 percent (Conduent Healthy Communities Institute, Feeding America, 2019), which is in the best 0 50th percentile range compared to other counties in Illinois, the percent of food insecure children in households with incomes above 185 percent of the federal poverty level—who are likely not income-eligible for federal nutrition assistance in McLean County—is 31 percent. This is in the worst 25th percentile range in comparison to other counties in Illinois and higher than the 2018 value of 23 percent (Conduent Healthy Communities Institute, Feeding America, 2019).

Access to grocery stores:

- The percentage of low-income adults who do not have adequate access to a grocery store or supermarket in McLean County is 9.8 percent. McLean County is in the worst 25th percentile range for this measure when compared to other counties in Illinois (Conduent Healthy Communities Institute, U.S. Department of Agriculture Food Environment Atlas, 2015).
- The percentage of the general population living more than one mile from a supermarket or large grocery store if in an urban area, or more than 10 miles from a supermarket or large grocery store if in a rural area in McLean County is 27.4 percent. This is in the

- worst 25th percentile range compared to other counties in Illinois (Conduent Healthy Communities, U.S. Department of Agriculture Food Environment Atlas, 2015).
- The area located west of Main Street in Bloomington (ZIP code 61701) was designated by the U.S. Department of Agriculture as a food desert (City of Bloomington Existing Conditions Report, 2015).

Active Living

Physical activity as well as healthy eating are actions that can reduce obesity, help manage chronic diseases and assist with maintaining a healthy weight. Some of the recommendations in the *Physical Activity Guidelines for Americans: 2nd Edition* (U.S. Department of Health and Human Services, 2018) include:

- For adults: at least 150 minutes to 300 minutes of moderate to vigorous activity or 75 minutes to 150 minutes of vigorous activity, or a combination of both, plus two days or more of musclestrengthening activity per week; and
- For children (ages six through 17): 60 minutes or more of moderate to vigorous activity daily.

The 2021 McLean County Community Health Survey revealed that 24 percent of McLean County adults do not exercise and 35 percent reported exercising one to two times per week. See Exhibit 14.

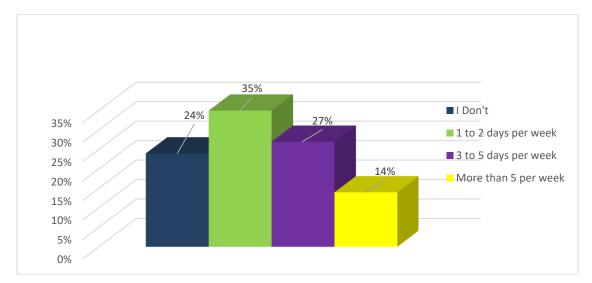


Exhibit 14: Exercise Frequency for McLean County Residents, 2021

Source: McLean County Community Health Survey, 2021.

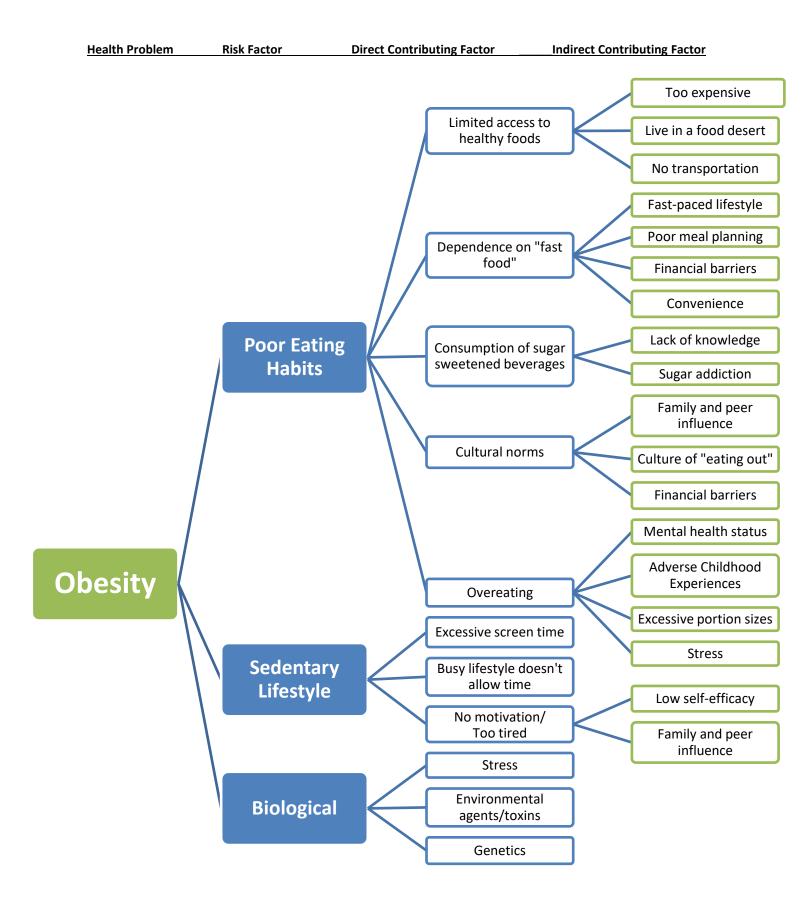
In comparison to the 2018 McLean County Community Health Survey, the percentage of adults not participating in any physical activity remains the same at 20 percent from 2018 to 2021. Also, the

reasons remain the same from survey to survey year: too tired, not liking to exercise, and not enough time.

Identifying the barriers to achieving greater levels of physical activity and to eating a healthier diet, and identifying strategies to overcome these barriers, will be key tasks in the 2023 – 2025 McLean County Community Health Improvement Plan. Stakeholders in the plan will seek to create policy, system and environmental changes that make it easier for residents to participate in physical activity and eat a healthier diet.

b) Chart of Health Priority Risk Factors and Direct/Indirect Contributing Factors

The Center for Disease Control and Prevention notes that obesity, often a result of experiencing barriers to healthy eating and active living, can be the result of multiple causes and contributing factors, including behaviors, medications (e.g., steroids, some antidepressants), certain diseases (e.g., Cushing's Disease; polycystic ovary syndrome), and genetics. Behaviors, such as those governing a person's physical activity level and dietary patterns, can impact weight and are modifiable. Refer to the chart on the next page for a list of risk factors as well as direct contributing factors and indirect contributing factors for the development of obesity, which can be impacted positively through healthy eating and active living.



c) Rationale for Choice as a Health Priority

Healthy eating/active living was selected as a significant health need to be addressed by the McLean County Community Health Council because it ranked as number three according to its priority score of 157.5. Additionally, the council felt that by focusing on healthy eating/active living, many other health outcomes such as heart disease, cancer and diabetes may also be positively impacted. This issue was also selected because obesity was the second top perceived health issue, according to the 2021 McLean County Community Health Survey respondents, and poor eating habits was the second most important perceived issue impacting health. Food insecurity and food access are also areas needing improvement in McLean County. Healthy Eating/Active Living was selected as a health priority for the 2019 McLean County Community Health Needs Assessment. Obesity was selected as a health priority for the 2016 McLean County Community Health Needs Assessment.

d) McLean County Community Health Improvement Plan Summary: Healthy Eating and Active Living (HEAL)

The Healthy Eating/Active Living Priority Action Team, consisting of approximately 45 individuals, held a goal-setting meeting in preparation for the development of the 2023 – 2025 McLean County Community Health Improvement Plan on April 7th, 2022. This was followed by two additional meetings on October 4th, 2022, and November 3rd, 2022, to formulate the Healthy Eating/Active Living Community Health Improvement Plan Summary, included on pages 77-89.

The Healthy Eating/Active Living Community Health Improvement Plan for 2023 – 2025 focuses on four key strategies.

- **Strategy 1:** Support, promote and educate the community about the availability of fruits and vegetables in McLean County.
- Strategy 2: Promote active living in the workplace and community.
- Strategy 3: Promote wellness-related chronic disease prevention programs to the community.

An overview of the goal and objectives to address Healthy Eating/Active Living are listed below:

High-Level Goal for Healthy Eating/Active Living: Promote equitable opportunities to access healthy eating and active living to strengthen the health and wellbeing of our diverse community by 2026.

- Outcome Objective: By 2023, maintain or increase the percentage of people living at a healthy body weight in McLean County.
 - o Impact Objective #1: By 2026, increase opportunities for healthy eating.
 - o Impact Objective #2: By 2026, increase opportunities for active living.
 - Impact Objective #3: Promote opportunities for chronic conditions prevention and wellness programs in the community.

The following thirteen pages (77-89) contain the 2023 – 2052 McLean County Community Health Improvement Plan Summary for Healthy Eating/Active Living.

McLean County

Community Health Improvement Plan Summary: Healthy Eating/Active Living January 1, 2023 - December 31, 2025

HEALTH PRIORITY: HEALTHY EATING/ACTIVE LIVING (HEAL)

GOAL: Promote equitable opportunities to access healthy eating and active living to strengthen the health and wellbeing of our diverse community by 2026.

Social Determinants of Health Areas of Focus: Food Insecurity, Social Isolation

Related Social Determinants of Health: Food Insecurity, Transportation

OUTCOME OBJECTIVE: By 2026, maintain or increase the percentage of people living at a healthy body weight in McLean County. Baseline

- Adults: 32% of McLean County adults are classified as obese (County Health Rankings, 2022)
- Adolescents: 11% of 8th graders, 9% of 10th graders, 6% of 12th graders in McLean County are obese (Illinois Youth Survey, 2020)

State Health Improvement Plan (SHIP)

- Increase opportunities for healthy eating.
- Increase opportunities for active living.
- Increase opportunities for chronic conditions prevention and wellness.

THREE YEAR MEASURES	STRATEGIES and INTERVENTIONS	ANNUAL EVALUATION MEASURES	POTENTIAL RESOURCES/ PARTNERS*
IMPACT OBJECTIVE #1: By	STRATEGY #1: SUPPORT, PROMOTE, AND		
2026, increase opportunities	EDUCATE THE COMMUNITY ABOUT THE		
for healthy eating.	AVAILABILITY AND ACCESSIBILITY OF FRUITS		
	AND VEGETABLES IN MCLEAN COUNTY.		
BASELINE DATA			

•	32% of adults (18+) are
	obese; 34.6% of adults
	(18+) are obese in the 10
	High Health Equity Needs
	ZIP codes with a 4-5
	ranking (Conduent Healthy
	Communities Institute,
	County Health Rankings,
	2022 and CDC – Places,
	2019)

- 94% of McLean County residents do not consume 5+ servings of fruit and vegetables per day; citing transportation issues or "don't like". (McLean County Community Health Survey, 2021)
- 9.5% of people in McLean County experience food insecurity (Conduent Healthy Communities Institute, Feeding America, 2019)
- An average of 30 percent of 8th, 10th and 12th graders ate fruit two times per day

Intervention 1.1: Develop and share educational tools and programs to assist in educating the community about healthier food choices

Intervention 1.1: Process Indicators

- # of free programs that help identify how healthy foods are prepared (baseline: 83 free programs, 2021)
- # of participants who attend free programs on preparing healthy foods (baseline: 967 participants, 2021)
- # of paid programs that help identify how healthy foods are prepared (baseline: 3 paid programs, 2021)
- # of participants who attend programs (with a fee) preparing healthy foods (Baseline: 166 participants, 2021)

Intervention 1.1: Outcome Indicators

Not available

Intervention 1.2: Promote awareness of local resources for healthy eating and access to healthy foods

Intervention 1.2: Process Indicators

 # of promotional activities taking place to encourage healthy eating (QR code, newsletters, websites, chat boxes, social media, etc)
 (baseline: 6 activities, 2021)

Intervention 1.2: Outcome Indicators

Not available

Intervention 1.1: Resources/Partners

- Chestnut Health
 Systems
- Illinois Extension
 Office
- OSF St. Joseph
 Medical Center

Intervention 1.2: Resources and Partners:

- Carle Health and Fitness Center
- Chestnut HealthSystems
- Illinois Extension
 Office
- McLean County Health Department
- OSF St. Joseph Medical Center

in the last seven days and an average of 12 percent ate three or more vegetables per day in the last seven days (Illinois Youth Survey, 2020)

<u>Intervention 1.3</u>: Promote healthy food accessibility

Evidence:

https://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/policies/community-gardens

https://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/policies/healthy-food-initiatives-infood-banks

Intervention 1.3: Process Indicators

Veggie Oasis:

of pounds of produce donated to the community

(baseline: 5,200 pounds, 2021)

OSF SmartMeals:

 # of meals given (baseline: 1,637 meals, 2021)

Midwest Food Bank:

- # of cases of healthier foods donated (baseline: 200,784 cases, 2021)
- # of organizations reached (baseline: 74 organizations, 2021)

Food Farmacy

- # of members in program (baseline: 0 members, 2021)
- # of visits (baseline: 0 visits, 2021)

Soup Kitchen:

- # of participants who consume a salad (baseline: 7.986 participants, 2021)
- % of healthier foods offered (baseline: 75% healthier foods offered, 2021)
- # of meals given:
 - Lunch
 - Dinner
 - Sack Lunches

Intervention 1.3: Resources and Partners:

- Carle BroMenn
 Medical Center
- Chestnut Health
 Systems
- City of Bloomington
- Community
 Health Care Clinic
- District 87Schools
- Food Pantry
 Network
- Home Sweet
 Home Ministries
- Illinois Extension Office
- Midwest Food Bank
- Mount Pisgah
 Church
- OSF St. Joseph Medical Center
- Saint Vincent DePaul
- Tinnervan
 Foundation
- Unit 5 Schools
- United Way

(baselines to be established)	•	Unity Community Center
Bread for Life Co-op:	•	West
# of visits		Bloomington
 # of shopping carts 		Revitalization
(baselines to be established)		Project
	•	Western Ave
Community Gardens:	ľ	Community
# of pounds of produce donated		Center
(baseline: 2,722 pounds, 2021)		Center
Establish a baseline for the locations of and		
number of community gardens		
, 5		
Community Food Drives		
# of healthy food drives		
(baseline: 2 food drives, 2021)		
# of partnerships		
(baseline: no < 10 partnerships, 2021)		
(1111)		
Farmer's Market		
# of Double Snap participants		
(baseline: 282 unique participants, 2021)		
Prepared Food Boxes:		
# of boxes donated		
(baseline: 3700 boxes, 2021)		
"Screen and Connect" tool in OSF Medical		
Group Offices		
# of patients identified who are food		
insecure and referred to local entity		
(baseline to be established)		

IMPACT OBJECTIVE #2: By 2023, increase opportunities for active living.	STRATEGY #2: PROMOTE ACTIVE LIVING IN THE WORKPLACE AND COMMUNITY.	 # of meals served (baseline: 112,846 meals, 2021) Intervention 1.3: Outcome Indicators (Peace Meal only) % of clients who can stay home because meals are being delivered (baseline: 89.6%, 2021) % of clients who are eating healthier due to the meals served (baseline: 88.9%, 2021) Intervention 1.4: Process Indicators # of free meals provided to students (baseline: 572,933 meals) # of reduced priced meals provided to students (baseline to be established) Intervention 1.4: Outcome Indicators Not available 	Intervention 1.4: Resources and Partners: District 87 Schools Unit 5 Schools
BASELINE DATA:	Intervention 2.1: Promote access to	Intervention 2.1: Process Indicators	Intervention 2.1:
 Access to exercise 	wellbeing programs in the workplace	# of employers offering at least 3 worksite	Resources and
opportunities Adults:	Evidence:	wellbeing opportunities in the workplace	Partners:
83.9% have access	1 11 15 16 18	per year (EAP, Employee Surveys, education programs)	Boys and Girls Club of BN
(Conduent Healthy	https://www.thecommunityguide.org/finding	(baseline to be established)	Club of BN
Communities Institute,	s/obesity-worksite-programs	(5555e to be established)	Carle BroMenn Medical Center
		Intervention 2.1: Outcome Indicators	ivieuical Center

	1		
County Health Rankings,	https://www.countyhealthrankings.org/take-	Not available	 Chestnut Health
2020)	action-to-improve-health/what-works-for-		Systems
	health/policies/community-fitness-programs		 Heartland Head
• Physical Activity: Adults:			Start
19.9% did not participate			 Illinois State
in any leisure-time physical			University
activities in the past month			McLean County
(Conduent Healthy			Health
Communities Institute,			Department
County Health Rankings,			OSF St. Joseph
2019)			Medical Center
			Project Oz
 86% of McLean County 			The Baby Fold
residents are not meeting			Town of Normal
exercise guidelines (150			Western Avenue
minutes per week); 28%			Community
report being too tired to			Center
exercise, 23% report they	Intervention 2.2: Promote access to	Intervention 2.2: Process Indicators	Intervention 2.2:
don't like to exercise	wellbeing programs in the community	# of free programs/events promoting	Resources and
(McLean County	are the same are the same are	physical activity in the community	Partners:
Community Health Survey,		(baseline: 45 programs, 2021)	Adult Recreation
2021)		 # of community members participating in 	Center
		free programs/events promoting physical	Carle Health and
• An average of 22% of 8 th ,		activity	Fitness Center
10 th and 12 th graders were		(baseline: 427 community members, 2021)	Chestnut Health
physically active for at least		 # of visits at a local fitness center 	Systems
60-minutes for 5 days,		(baseline to be established)	 Heartland
during the past 7 days		# of participants who utilize the	Community
(Illinois Youth Survey,		Constitution Trail	College
2020)		(baseline to be established)	Illinois Extension
			Office
		Intervention 2.2: Outcome Indicators	

	<u></u>	<u></u>	1
 An average of 27% of 8th, 		Not available	Normal Parks and
10th and 12th graders			Recreation
reported being physically			 OSF St. Joseph
active for a total of 60			Medical Center
minutes per day for 7 days			• YMCA
a week (Illinois Youth	Intervention 2.3: Offer A Matter of Balance	Intervention 2.3: Process Indicators	Intervention 2.3:
Survey, 2020)	to older adult	# of people participating in the A Matter of	Resources and
		Balance course.	Partners:
• 140.6		(baseline: 58 participants, 2021)	Adult Recreation
hospitalizations/10,000	Evidence:	# of Matter of Balance courses offered	Center
population 18+ years due		(baseline: 1 course)	
to unintentional falls	https://ijbnpa.biomedcentral.com/articles/10		
(Conduent Healthy	.1186/s12966-017-0509-8	Outcome Indicators 2.3:	
Communities Institute,		% of participants reported "feeling a	
Illinois Hospital		reduction in a fear of falling"	
Association, 2018-2020)		(baseline: 94%, 2021)	
A330clation, 2010 2020)		% of participants reported "feeling	
		improved strength"	
		(baseline: 55%, 2021)	
	Intervention 2.4: Offer Partnership in Health	Intervention 2.4: Process Indicators	Intervention 2.4:
	to individuals with developmental and	# of people participating in the Partnership	Resources and
	intellectual disabilities and to their support	in Health program	Partners:
	workers	(baseline: 33 participants, Carle Health &	Carle BroMenn
		Fitness Center, 2021)	Medical Center
	Evidence:		Carle Health and
	https://ijbnpa.biomedcentral.com/articles/10	Outcomes Indicators 2.4:	Fitness Center
	.1186/1479-5868-10-18	% of participants who decreased their	McLean County
		blood pressure	Board for the
		(baseline: 50%, Carle Health & Fitness	Care and
		Center, 2021)	treatment of
		% of participants who improved or	Persons with a
		maintained their waist circumference	r CISOIIS WILLI d

Intervention 2.5: Promote the 5-2-1-0 Campaign amongst school-aged kids Evidence: https://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/policies/community-wide-physical-activity-campaigns https://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/policies/screen-time-interventions-for-children	 (baseline: 47%, Carle Health & Fitness Center, 2021) % of participants who improved their BMI (baseline: 59%, Carle Health & Fitness Center, 2021) Intervention 2.5: Process Indicators Track # of facilities who promote the 5-2-1-0 campaign (baseline: 5 facilities, 2020) Track # of children educated on the 5-2-1-0 Campaign amongst school-aged kids (baseline: 995 children, 2020) Intervention 2.5: Outcome Indicators Not available 	Developmental Disability McLean County Health Department MarcFirst Intervention 2.5 Resources and Partners: Boys and Girls Club of BN Heartland Head Start Illinois Extension Office McLean County Health Department OSF St. Joseph Medical Center YMCA YWCA
Intervention 2.6: Increase physical activity access in the pediatric population through Healthy Kids University	 Intervention 2.6: Process Indicators # of participants (baseline: 24 kids, 2021) 	Intervention 2.6 Resources and Partners: OSF St. Joseph
Evidence: https://www.countyhealthrankings.org/take- action-to-improve-health/what-works-for- health/policies/multi-component-obesity- prevention-interventions	 Outcome Indicators 2.6: % of individuals who report feel healthier (baseline to be established) % of individuals that adopted healthier behaviors 	Medical Center • YMCA

		(baseline to be established)	
	Intervention 2.7: Promote and implement	Intervention 2.7: Process Indicators	Intervention 2.7
	Girls on the Run program in McLean County	# of participants (baseline: 20 girls)	Resources and Partners:
	Evidence:	# of programs offered in McLean County (baseline: 2 sites)	District 87OSF St. Joseph
	Our Impact Girls Empowerment Program Girls on the Run	Intervention 2.7: Outcome Indicators	Medical Center
		% of participants who increased physical activity (baseline to be established)	
		% of participants who improved confidence and connection.	
		(baseline to be established)	
IMPACT OBJECTIVE #3: By	STRATEGY #3: PROMOTE WELLNESS		
2026, promote opportunities	RELATED CHRONIC DISEASE PREVENTION		
for chronic conditions	PROGRAMS IN THE COMMUNITY.		
prevention and wellness	Intervention 3.1: Offer community	Intervention 3.1: Process Indicators	Intervention 3.1 –
programs in the community.	programs and/or screenings related to heart	# of blood pressure screening participants	3.8: Resources and
	disease to community members	(baseline to be established)	Partners:
BASELINE DATA:	,	# of heart disease educational classes offered	Adult Recreation Center
 71.8% of adults have taken medication for high blood 		(baseline to be established)# of participants in heart disease	Boys and Girls Club
pressure (Conduent Healthy Communities		educational classes (baseline to be established)	Carle BroMenn Medical Center
Institute, CDC – Places, 2019)		 # of cholesterol screening participants (baseline to be established) 	Carle Cancer Institute - Normal
			Carle Health and
		Intervention 3.1: Outcome Indicators Not available	Fitness Center

84.5% of adults have a cholesterol test history (Conduent Healthy Communities Institute, CDC – Places, 2019)	Intervention 3.2: Offer programs related to stress reduction to the community Intervention 3.3: Offer COPE program to teens in the community. COPE is Creating Opportunities for Personal Empowerment. It's a seven week program for teens to focus on cognitive behavioral therapy Evidence: Intervention Studies Supporting Evidence-based COPE for Helping Depression, Stress and Anxiety — Coping Skills Programs for Children, Teens, Young Adults, Adults Schools, Universities, Healthcare, Parents/Teens (cope2thrive.com)	Intervention 3.2: Process Indicators # of participants in stress reduction classes (baseline to be established) # of stress reduction classes offered (baseline to be established) Intervention 3.2: Outcome Indicators Not available Intervention 3.3: Process Indicator # of participants (baseline to be established) # of classes offered (baseline to be established) Intervention 3.3: Outcome Indicators % of participants who improved resiliency (baeline to be established)	 CCSI Case Coordination LLC Chestnut Health Systems Community Health Care Clinic District 87 Illinois Extension Office McLean County Health Department OSF St. Joseph Medical Center Town of Normal Unity Community Center Western Avenue
	Intervention 3.4: Offer Diabetes Prevention Program and other classes related to	 Intervention 3.4: Process Indicators # of Diabetes Prevention Program participants (baseline to be established) 	

diabetes risk reduction to community	# of Diabetes Prevention Program classes
members	(baseline to be established)
	(2000 to be established)
Evidence:	Intervention 3.4: Outcome Indicators
https://coveragetoolkit.org/about-	# of persons who decreased their body
	weight
national-dpp/evidence/	(baseline to be established)
	# of people who increased physical activity
	(baseline to be established)
Intervention 3.5: Offer programs related to	·
cancer prevention/diagnosis to community	Cancer Support Group
members	o # of participants
members	(baseline to be established)
	# of programs offered
	(baseline to be established)
	Cancer Group Fitness Classes
	• # of participants
	(baseline to be established)
	# of classes offered
	(baseline to be established)
	Cancer Education Classes
	o # of participants
	(baseline to be established)
	# of classes offered
	(baseline to be established)
	(buseline to be established)
	Intervention 3.5: Outcome Indicators
	Not available
Intervention 3.6: Offer programs related to	
achieving a healthy body weight	Healthy weight education classes
8 a,,,	o # of participants

	(baseline to be established)
	# of classes offered
	(baseline to be established)
	Intervention 3.6: Outcome Indicators
	Not available
Intervention 3.7: Offer programs related to	Intervention 3.7: Process Indicators
smoking cessation	Freedom From Smoking Program
	# of participants
	(baseline to be established)
Evidence:	 # of classes offered
	(baseline to be established)
Best Practices for Comprehensive Tobacco	Vaping for Teens Program
Control Programs - Healthy People 2030	o # of participants
<u>health.gov</u>	(baseline to be established)
	o # of classes offered
	(baseline to be established)
	Intervention 3.7: Outcome Indicators
	# of participants who quit smoking
	(baseline to be established)
<u>Intervention 3.8</u> : Offer programs related to	Intervention 3.8: Process Indicators
chronic disease management	Chronic Disease Management Course
	# of participants
	(baseline to be established)
	# of classes offered
	(baseline to be established)
	Intervention 3.8: Outcome Indicators
	Not available

RELATED IMPROVEMENT PLAN EFFORTS

The following organizations received grants in 2022 for implementation in 2022/2023 or FY23 (May 1, 2022– April 30, 2023) from the John M. Scott Health Care Commission. Although the grants are tied to the health priorities selected for the 2019 McLean County Community Health Needs Assessment, the grant programs will also apply to the 2022 McLean County Community Health Needs Assessment and 2023 – 2025 McLean County Community Health Improvement Plan as the health priorities are the same.

• West Bloomington Revitalization Project received a grant to support programs in West Bloomington that support healthy eating and active living, shirk the surrounding food desert and improve the built environment to promote exercise.

A leader from Carle BroMenn Medical Center and OSF St. Joseph Medical Center will continue to serve on the City of Bloomington's John M. Scott Health Care Commission Grants Committee.

Other:

- Carle Health and Fitness Center will continue to offer *Free Friend Friday* on the first Friday of each month. Members are allowed to bring a non-member friend to utilize the center on this day to encourage physical activity.
- Carle BroMenn Medical Center will continue to partner with the Tinnervin Foundation and OSF St. Joseph Medical Center to offer food boxes and Smart Meals at mobile health clinics.
- Chestnut Health Systems will collaborate with McLean County organizations to provide space to community agencies at the 702 West Chestnut Street Community Health and Wellness rooms which includes a teaching kitchen.
- OSF HealthCare will continue to sponsor the Peace Meal Senior Nutrition Program to seniors living in McLean County.
- OSF HealthCare will continue to sponsor Girls on the Run for local programming to improve the wellbeing of grade school girls.
- OSF Healthcare will continue to sponsor Student Health 101 emails to all student homes attending Normal Community West and Normal Community High Schools. These weekly emails promoted overall health and wellbeing education and resources to parents and students.

^{*}The Four Organizations comprising the McLean County Executive Steering Committee—Carle BroMenn Medical Center, Chestnut Health Systems, the McLean County Health Department—are all implied resources/partners for Behavioral Health.

e) Funding for Implementing Interventions

After approval of the 2023 – 2025 McLean County Community Health Improvement Plan, the Healthy Eating/Active Living Priority Action Team will further address funding options, including grant opportunities as they become available, to address healthy eating/active living interventions. Initial funding has been secured for several activities listed in the plan, but ongoing funding may be tenuous and sustainability issues will need to be considered.

Many of these stakeholders have worked together throughout the community health needs assessment and health plan development process, making the community better-positioned for collaborative efforts either with or without grants or other funding. In addition, since many of the intervention strategies for this health priority fall within the mission of some of the priority action team agencies, underpinning efforts through collaborative programs, activities with other community partners and/or generating letters of support for grant proposal submissions will be encouraged.

As of 2019, a new source of local funding was announced by the John M. Scott Commission Trust, with the Trust providing grants from one to three years for health-related projects that demonstrate a connection to the health priorities identified in the current McLean County Community Health Needs Assessment. Subsequent grant proposals may also consider the concerns and interventions identified in the 2023 – 2025 McLean County Community Health Improvement Plan.

The partners involved in the Executive Steering Committee, along with the Community Development Division of the City of Bloomington, Illinois, applied for and received an Invest Health Grant in 2016 funded by the Robert Wood Johnson Foundation and the Reinvestment Fund for 50 mid-sized cities in the United States. Through this small, 18-month planning grant the Invest Health team has brought together disparate sectors of the community to identify and consider built environment changes in Bloomington to potentially increase access to healthcare, housing and healthy foods. Although the grant period has ended, this collaboration has served to widen avenues of participation beyond Bloomington and supported the incorporation of health and healthy lifestyles concepts in municipal planning efforts, which has continued to provide additional funding opportunities for the community.

f) Barriers to Achieving Health Improvements

The 2021 McLean County Community Health Survey of 763 McLean County adults provided insight into many of the barriers that may reduce the likelihood of increasing the percentage of people living at a healthy body weight. In the survey, respondents who indicated that they do not exercise (24 percent) were asked to cite their reasons for not exercising. The most common reasons were being too tired, not liking to exercise, and not enough time to exercise.

Opportunities for promoting active living may need to focus on incorporating increased levels of activity at locations where adults already spend time working or socializing.

Healthy eating and reduced consumption of sugar-sweetened beverages are actions that can reduce weight or maintain a healthy weight. Responses to the 2021 McLean County Community Health Survey

indicated that only six percent of adults had more than five servings of fruits and/or vegetables per day; 39 percent had three to five; 50 percent have one to two; and five percent do not eat them. Of the respondents who indicated not eating fruits or vegetables, not liking them, and transportation issues were the two most frequently cited reasons for failing to consume fruits and vegetables.

Improving access to healthy foods, as well as increasing knowledge about how to prepare a healthy meal, may assist with increasing the number of fruits and vegetables consumed per day.

Other barriers to healthy eating and active living must also be evaluated in order to identify ways to remove or minimize them. These barriers include:

- the built environment: no sidewalks or poorly maintained sidewalks remain in many areas; additional bike lanes are needed; a food desert remains in the 61701 ZIP code area;
- limited access to healthy options in some areas to include healthy food, parks and play areas;
- finances: healthy food often costs more than less nutritious food;
- school-based weekend backpack programs focus on easily prepared foods that are often high calorie, high in carbohydrates and less nutritious;
- fast-paced lifestyle;
- adults working more than one job have additional time constraints;
- lack of motivation or time to exercise or to prepare a healthy meal or snack;
- lack of support system for making healthy changes; and
- lack of knowledge of the health impacts of obesity and how to maintain a healthy weight.

g) Evaluation and Monitoring Plan

Within the 2023 – 2025 McLean County Community Health Improvement Plan Summary: Healthy Eating/Active Living, there is an "Annual Evaluation Measures" column that contains both process indicators and outcome indicators. Each year, with the assistance of the Healthy Eating/Active Living Priority Action Team, these indicators will be tracked throughout the three-year cycle ending in 2025. The Executive Steering Committee will be responsible for assuring that the indicator data is being tracked and that it is shared on at least an annual basis with the McLean County Community Health Council and the priority action team for each health priority. Early in 2026, data received from the Illinois Youth Survey or the next McLean County Community Health Survey conducted in preparation for the 2025 Community Health Needs Assessment, will be compared to the outcome objectives and impact objectives listed in the 2023 – 2025 McLean County Community Health Improvement Plan Summary for Healthy Eating/Active Living, in order to evaluate and measure progress toward meeting objectives. Through evaluation, accountability will be increased, plan modifications will be communicated to its residents.

The McLean County Community Health Executive Steering Committee reserves the right to amend this 2023 – 2025 McLean County Community Health Improvement Plan as needed to reflect each organization's particular role and responsibilities in executing the Plan as well as the resources each organization is committing. In addition, certain significant health needs may become a community

priority during this three-year plan period and require amendments to the strategies developed to address the emerging significant health need. Other entities or organizations in the community may develop programs to address the same health needs or joint programs may be adopted. Finally, in compliance with Internal Revenue Code Section 501(r) requirements for hospitals, Carle BroMenn Medical Center or OSF St. Joseph Medical Center may refocus the limited resources the organization committed to the Plan to best serve the community.

VII. Vehicle for Community Feedback

We welcome your feedback regarding the 2023 – 2025 McLean County Community Health Improvement Plan (CHIP). If you would like to comment on this report, please send an email to one of the two links below. We will respond to your questions/comments within thirty days. Your comments will also be considered during our next community health needs assessment and community health improvement plan cycle. You can also provide feedback by clicking on the link to the McLean County Health Department's website below and completing the CHNA feedback form.

Email contacts:

publicrelations@carle.com

CHNAFeedback@osfhealthcare.org

A paper copy of this report may be requested by contacting the public relations departments within Carle BroMenn Medical Center, Chestnut Health Systems' Chestnut Family Health Center, OSF St. Joseph Medical Center or the McLean County Health Department. In addition, an electronic copy of this CHIP Report is available on each organization's website.

Carle BroMenn Medical Center: https://carle.org/about-us/community-report-card

Chestnut Health Systems: https://www.chestnut.org/chestnut-family-health-center/data-reports/

McLean County Health Department: https://health.mcleancountyil.gov/112/Community-Health-Needs-Assessment-Health

OSF St. Joseph Medical Center Community Health | OSF HealthCare

VIII. Appendices

Appendix 1: 2023 – 2025 McLean County Community Health Improvement Plan Data Sources

Appendix 1 - 2023 – 2025 McLean County Community Health Improvement Plan Data Sources

Carle BroMenn Medical Center, ICD-9 and ICD-10 Diagnosis. 2012 – 2020.

Centers for Disease Control and Prevention, Mental Health. October 24, 2022. <u>About Mental Health (cdc.gov)</u>.

Centers for Disease Control and Prevention, May 17, 2022. www.cdc.gov/obesity

City of Bloomington Existing Conditions Report, 2015. 636229414190370000 (bloomingtonil.gov).

County Health Rankings, 2022. Reports | County Health Rankings & Roadmaps

Conduent Healthy Communities Institute. 2022 The following data sources were accessed through Conduent Healthy Communities Institute: https://carle.org/about-us/community-report-card.

County Health Rankings, 2021.

Illinois Hospital Association, 2018 – 2020.

Feeding America, 2019.

U.S. Department of Agriculture – Food Environment Atlas, 2015 - 2018.

Illinois Youth Survey. 2020. https://iys.cprd.illinois.edu/results/county.

OSF St. Joseph Medical Center, ICD-10 Diagnosis, 2021.

McLean County Coroner, Deaths Due to Suicide, 2018 – 2021.

McLean County Community Health Survey of Adults, 2015, 2018 and 2021; Conducted by Laurence G. Weinzimmer, PhD, Bradley University, Peoria, IL; under contract with OSF HealthCare.

McLean County Mental Health Action Plan 2022 Update, <u>Mental-Health-Action-Plan-2022-Update</u> (<u>mcleancountyil.gov</u>)

Substance Abuse and Mental Health Services Administration. (2021). Key substance use and mental health indicators in the United States: Results from the 2020 National Survey on Drug Use and Health (HHS Publication No. PEP21-07-01-003, NSDUH Series H-56). Rockville, MD: Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration. Retrieved from https://www.samhsa.gov/data/

United States Department of Health and Human Services. Physical Activity Guidelines for Americans: 2nd Edition. Washington DC., 2018.

https://health.gov/paguidelines/second-edition/pdf/Physical Activity Guidelines 2nd edition.pdf. https://www.hhs.gov/fitness/be-active/physical-activity-guidelines-for-americans/index.html.

Carle BroMenn Community Health Needs Assessment Summary, Additional Narrative

Carle BroMenn Medical Center conducted its 2022 community health needs assessment (CHNA) with considerable input from the community. Carle BroMenn Medical Center, Chestnut Health Systems (a Federally Qualified Health Center), the McLean County Health Department and OSF St. Joseph Medical Center collaborated with 64 members of the McLean County Community Health Council to conduct a joint 2022 McLean County Community Health Needs Assessment and adopt a joint 2023 - 2025 McLean County Community Health Improvement Plan (CHIP).

The sections below outline interventions and accomplishments specific to Carle BroMenn Medical Center in 2024 as a part of the 2023 - 2025 McLean County Community Health Improvement Plan. The final plan can be found at https://carle.org/chna.

Highlights for steps taken in 2024 as a part of the 2023-2025 McLean County CHIP to address access to care are as follows:

- In 2024, the Carle McLean County Mobile Health Clinic hosted 67 clinics at various sites in McLean County and provided services to 486 patients. In November 2024, Colfax was added as a clinic site expanding access to care in the rural community.
- In 2024, Carle Health launched YoMingo. YoMingo is a new app offered as an educational resource for new and expecting mothers. It has important information and answers to everyday questions as well as the following:.
 - Information on topics like prenatal care, pregnancy, labor and childbirth, breastfeeding, newborn care, and parenting.
 - Interactive maternity tools such as contraction timer, personal journal, feeding log and immunization log.
 - Classes, videos and animations on multiple topics.
 - Personalized content available in English, Spanish and 12 other languages.
- On October 18, 2024, Carle BroMenn Medical Center, in collaboration with the Illinois Breast and Cervical Cancer Program and Prairie State Women's Health, offered free, walk-in mammograms to uninsured and underinsured community members. Nineteen women participated.
- On November 13, 2024, Queer Coalition, Illinois State University's sponsored LGBTQIA+ faculty, staff and graduate student affinity group, and the Women's Gender and Sexuality Studies
 Program hosted a lunch and interactive workshop led by a Carle BroMenn Medical Center senior staff chaplain. The purpose of the event was to empower LGBTQIA+ people of all ages to take control of their healthcare decisions. Twenty-five people participated in the event.
- Carle BroMenn Medical Center and OSF HealthCare St. Joseph Medical Center continued to provide support for the Community Health Care Clinic (CHCC) in 2024. The CHCC is a free clinic which provides services to the medically underserved population of McLean County to ensure that all populations in the community have access to healthcare. All emergency room visits, diagnostic testing and hospital services are provided free of charge by Carle BroMenn and OSF St. Joseph. In 2024, the Community Health Care Clinic served 386 patients and dispensed 6,903 prescription medications at no charge to uninsured individuals. The clinic also provided 928 dental services for 188 unique patients. The clinic is in a building owned by Carle BroMenn Medical Center for which the hospital paid \$84,028 for upkeep and maintenance of the facility in 2024. OSF provides human resources support for the clinic.

- In 2024, Carle BroMenn Medical Center continued to lead the LGBTQ+ Community Advisory Council for Carle Health. The council fosters increased access to care by giving voice to the LGBTQ+ community and allies in order to provide more sensitive and respectful care.
- On April 19, 2024, team members from Carle BroMenn Medical Center and Carle Behavioral Health Bloomington staffed a table at the 2024 Transgender Resource Fair.
- In 2024, 647 pediatric patients received fluoride applications at Carle Pediatrics Bloomington and Carle Family Medicine Normal.
- In 2024, Carle West Physician Group provided 1,687 virtual visits for 1,216 unique patients.
- In 2024, the Community Health Director for Carle BroMenn Medical Center and Carle Eureka Hospital served on the Access to Care Priority Action Team for the 2023 2025 McLean County Community Health Improvement Plan.

Highlights for steps taken in 2024, as a part of the 2023 - 2025 McLean County CHIP to address behavioral health are as follows:

- Carle BroMenn Medical Center continues to have the only inpatient mental health unit and the
 only hospital-based substance use program in McLean County, which addresses both the
 behavioral health and access to care significant health needs. The inpatient mental health unit
 and the addiction and recovery unit provide critical services to those adults needing inpatient
 psychiatric or addiction and recovery services. The inpatient mental health unit operated at a
 loss of \$2,835,459 from January 1 December 31, 2024.
- In 2024, Carle Behavioral Health Bloomington accomplished the following:
 - Increased adult psychiatrist and psychiatric nurse practitioners from three to seven practitioners.
 - Added an additional mental health counselor.
 - o Added intake RN for outpatient services to support referral process.
 - Successfully launched patient portal scheduling for psychiatric providers.
 - O Hosted an informative conversation about mental health for community members. Carle Behavioral Health psychiatrists discussed what mental health and psychiatric care can mean to the individual and to the community. The panel of experts included Rachel Immen, MD, psychiatrist, Burgundy Johnson, DO, child/adolescent psychiatrist and Alyssa Wood, DO, child/adolescent psychiatrist. Approximately 30 individuals were in attendance.
- In 2024, Carle Behavioral Health Bloomington had the following community collaborations:
 - Contracted with McLean County Government for psychiatric services with McLean County Jail.
 - Contracted with McLean County Government for psychiatric services with FUSE Program.
 - Received a State of Illinois SAMHSA Assisted Outpatient Treatment Grant (adult psychiatry/care management). This pilot program (in partnership with Cook County and the State of Illinois) will expand the successful use of court ordered outpatient behavioral health treatment. Court ordered outpatient treatment is an underutilized resource in the State of Illinois; this program will create models that can be expanded and replicated in other Illinois counties.
 - Carle Behavioral Health Bloomington and United Way of McLean County continued their partnership entitled *ThriveMind* to increase rural access to behavioral health services for kindergarten through twelfth grade students who do not readily have access to these services, at Olympia, Ridgeview , LeRoy and Lexington schools. As a part of the

- collaboration, 27 students received counseling services in 2024 at no charge and without a limit on the number of services received.
- A leader from Carle BroMenn Medical Center, participated in McLean County's newly
 established Family Treatment Court (FTC). Carle BroMenn Medical Center is also a part
 of the FTC team that is designed to work with parents and children who have become
 involved with the Department of Children and Family Services because of child abuse or
 neglect that is directly related to a parent's substance abuse.
- In 2024, Carle BroMenn Medical Center increased inpatient psychiatric bed capacity from 13 beds to 16 beds by adding another inpatient psychiatrist.
- In 2024, Carle BroMenn Medical Center hosted four Mental Health First Aid (MHFA) classes held at the Carle Health and Fitness Center for 54 community members.
- In 2024, Carle BroMenn Medical Center provided 30.7 hours of telepsychiatry. Carle Behavioral Health Bloomington provided 6,268 telepsychiatry visits for 1, 526 unique individuals.
- On February 22, 2024, four Carle BroMenn Medical Center and Carle Behavioral Health
 Bloomington leaders attended the McLean Sequential Intercept Mapping Event. The Sequential
 Intercept Model (SIM) helps communities identify resources and gaps in services at each
 intercept and develop local strategic action plans. The SIM mapping process brings together
 leaders and different agencies and systems to work together to identify strategies to divert
 people with mental and substance use disorders away from the justice system into treatment.
 Local Law enforcement, hospitals, social service providers, jail, probation, shelters, local
 government, legal professionals, first responders, and universities and colleges are some of the
 sectors that participatied in the event.
- The Manager of Behavioral Health, Carle BroMenn Medical Center Chemical Dependency, continued to serve on the McLean County Recovery Oriented System of Care Council in 2024.
- The Assistant Clinical Manager of Mental Health Services for Carle BroMenn Medical Center served on the McLean County Community Health Improvement Plan Behavioral Health Priority Action Team in 2024.
- In 2024, the Community Health Director for Carle BroMenn Medical Center and Carle Eureka Hospital facilitated the McLean County Community Health Improvement Plan Behavioral Health Priority Action Team meetings.
- The Community Health Director for Carle BroMenn Medical Center and Carle Eureka Hopsital served on the McLean County Trauma and Resilience Collaborative (RISE). RISE is led by the McLean County Government.

Highlights for steps taken in 2024, as a part of the 2023-2025 McLean County CHIP, to address healthy eating/active living are as follows:

- In 2024, Carle BroMenn Medical Center accomplished the following:
 - Carle Cancer Institute Normal, held *Trail Tuesdays* from June to October to boost physical
 activity for current and previous cancer patients. A total of approximately 60 people
 participated in the weekly walks on the Constitution Trail.
 - The Nurse Practice Council at Carle BroMenn Medical Center donated over 700 jars of peanut butter and 550 boxes of crackers to benefit children in need at Glenn, Fairview and Oakland Elementary Schools.
 - The Mission and Spiritual Care department at Carle BroMenn Medical Center, in cooperation with the Carle Faith Community Partners, launched the Compassion Cupboard in May 2023 as a pilot program. The Compassion Cupboard provided bags of basic food items such as canned fruits, vegetables, proteins and grains to 70 individuals experiencing

- food insecurity that were discharged from the hospital or sought services at an outpatient clinic in 2024. The intent of the food bags is to aid with food insecurity in the short term. Information about local food pantries and support programs was included in each bag.
- Cardiopulmonary Rehab and Nutrition Services at Carle BroMenn Medical Center hosted a low-sodium food drive. Approximately 124 donated items were given to Home Sweet Home Ministries and Center for Hope Outreach Program.
- A food waste composting pilot began at Carle BroMenn Medical Center in August 2024 that diverted an average of 800 pounds of food waste from a landfill each month.
- In 2024, the Carle Health & Fitness Center accomplished the following:
 - Conducted a free blood pressure screening for 40 Illinois Wesleyan University nursing students.
 - Conducted a free fall prevention workshop to 23 participants in partnership with Carle McLean County Orthopedics.
 - Held a free bone density bone density presentation to 50 participants in partnership with Carle McLean County Orthopedics.
 - Held a free nutrition presentation to five seniors and a free presentation on olive oil to eight people.
 - Ten staff members volunteered at the Midwest Food Bank and the center held drive for essentials for The Salvation Army.
 - The Partnership for Health Pilot Program began in April 2017 and continued in 2024. The
 program is a private-public partnership to improve the health and fitness of people with
 developmental and intellectual disabilities, and their support workers. Partners include Carle
 Health & Fitness Center, Lifelong Access, Carle Center for Philanthropy, the McLean County
 Health Department and the McLean County Board for the Care and Treatment of Persons with a
 Developmental Disability (377 Board).
 - o In 2024, the program served an average of 21 individuals. 2024 outcomes are as follows:
 - 45% of participants decreased their systolic pressure
 - 50% of participants decreased their diastolic pressure
 - 60% of participants improved or maintained their waist circumference
 - 60% of participants improved their body mass index (BMI)
 - In 2024, the Community Health Director for Carle BroMenn Medical Center and Carle Eureka Hospital served on the Healthy Eating/Active Living Priority Action Team for the 2023 2025 McLean County Community Health Improvement Plan.

Efforts Undertaken in 2024 to Address Health Equity, Reduce Health Disparities, and Improve Community Health:

- In 2024, Carle Health had several system wide Diversity, Equity, and Inclusion (DEI) related accomplishments:
 - Hosted 12 Health Equity Grand Round sessions, with a total of 1,904 participants. Sessions were available to community members for continuing education credits.
 - Delivered 15 weeks of anti-racism education to nurse leaders. The education was supported by a \$20,000 grant from the American Nurses Association.
 - Delivered 65 live DEI education sessions to Carle Health teams on topics like cultural humility, LGBTQ+ inclusive education, racism in healthcare and bias time out.
 - Over 2,800 nurses completed education on caring for diverse hair types and textures.

- Carle BroMenn Medical Center was designated as a "high performer" on the 2024
 Healthcare Equality Index, which is a nationwide designation of hospitals and healthcare facilities for LGBTQ+-inclusive healthcare practices.
- Carle Health leadership participated in over 4,000 hours of education through inclusive leadership forums; 102 leaders were Carle BroMenn Medical Center and Carle Eureka Hospital leaders accumulating 460 hours of education.
- Carle Health employees participated in 12 multicultural DEI forums for a total of 430 learning hours.



Title	FIN - Carle Financial Assistance Program					
Region		Carle Health Central - BroMenn, Carle Health Central - Eureka, Carle Health East, Carle Health South, Carle Health West - Methodist, Carle Health West - Pekin, Carle Health West - Proctor				
Scope	All Entities					
Document type	Policy & Proced	Policy & Procedure				
Owner	Jodi Eeten (Mgr	Jodi Eeten (Mgr - Fin Svc Self Pay Rec)				
Reviewer(s)	Christi Kosheba (Dir - Finance Carle West), Katherine Gaffney (Spvr - Self-Pay Recs Mgmt - Fin Asst - CFH)					
Approver(s)	APM Administrators, Dennis Hesch (Exec VP & Chief Finance and Strategy Officer)					
Effective Date	04/01/2010	Next Review Date:	12/21/2024	Approval Date	12/21/2021	

ATTACHMENTS

A - FIN - CFAP Area Homeless Shelters

PURPOSE/SCOPE

- A. To identify and assist those patients who are uninsured or underinsured and who are financially eligible to receive discounts for specified medical expenses through the Carle Financial Assistance Program. Carle will consider each patient's ability to contribute to the cost of his or her care received and the financial ability of Carle to provide discounts for the care provided.
- B. All care rendered by an eligible Carle entity, except for services noted in policy FIN CFAP Area Homeless Shelters, may be considered through the Carle Financial Assistance Program. Eligible entities are identified above.

DEFINITIONS

- A. Family/Household Size includes those dependents listed on tax returns, divorce decree, or child support order. Defined by the IRS for tax filing purposes under section 36B (d) (1), "a taxpayer's family consists of the individuals for whom the taxpayer claims a personal exemption deduction under section 151 for the taxable year. Taxpayers may claim a personal exemption deduction for themselves, a spouse, and each of their dependents. Section 152 provides that a taxpayer's dependent may be a qualifying child or qualifying relative, including an unrelated individual who lives with the taxpayer. Family size is equal to the number of individuals in the taxpayer's family."
- B. **Resident** a person who lives in the state of Illinois and who intends to remain living within Illinois indefinitely. Relocation for the sole purpose of receiving health care benefits does not satisfy the residency requirement.
- C. **Underinsured** a person without insurance benefits for services provided due to exclusions of coverage by the insurance provider. This does not apply to those circumventing insurance restriction or specification or out-of-network services.
- D. Generally accepted standards of medical practice:
 - 1. Standards that are based on credible scientific evidence published in peer-reviewed, medical literature generally recognized by the relevant medical community;
 - 2. Physician Specialty Society recommendations;
 - 3. The views of physicians practicing in the relevant clinical area; and
 - 4. Any other relevant factors.
- E. **Uninsured patient** a person who is a patient and is not covered under a policy of health insurance and is not a beneficiary under a public or private health insurance, health benefit, or other health coverage program, including high deductible health insurance plans, workers compensation, accident liability insurance or other third party liability.
- F. **Experian Information Solutions**, **Inc.** (**Experian**) is a third party vendor that uses proprietary data analytics to provide unique information related to patients for the purpose of financial assistance and recovery of patient debt.

STATEMENT OF POLICY

- A. Any patient or responsible party may apply for the Carle Financial Assistance Program, regardless of insurance coverage. Patients may apply for the Carle Financial Assistance Program at any time, including before care is received. If approved, the patient is eligible for 12 months from the date of approval.
- B. Certain identified patient populations are presumptively eligible for the Carle Financial Assistance Program. Further detailed information is contained within the FIN Presumptive Eligibility for Financial Assistance.
- C. Carle desires that:

- 1. All patients, regardless of their immigration status or residency, be aware of the Carle Financial Assistance Program and all other financial assistance available at Carle;
- 2. For those patients who are eligible to be identified as early in the care, treatment and billing process as possible; and
- 3. That the process is as simple as possible for the patient.
- D. An application for government assistance must be completed if the patient appears to meet the eligibility criteria for such assistance. When appropriate, Carle staff or designee will use a screening checklist to assist in determining if the patient would qualify for government assistance.
 - 1. Failure by a patient or responsible party to complete the government program application process and/or failure to cooperate during the application process will result in an automatic denial of financial assistance.
 - 2. If the patient applies for government assistance, documentation of the determination from the government program is required for reprocessing of the Carle Financial Assistance Program application.
 - 3. Patients who have a third party payment source that will reimburse more than the government program reimbursement will be excluded from the requirement of applying for government assistance.
- E. Patients who may be eligible for certain third party assistance programs must cooperate with program requirements to maintain eligibility within the Carle Financial Assistance Program.
- F. Patients covered by Medicare Part A or Part B must complete a Carle Financial Assistance application which includes a request that the patient provide a federal tax return and a defined list of assets. This asset list shall include the patient's bank account balances such as checking and savings, money market accounts and certificates of deposit.
- G. The Carle Financial Assistance Program discount amount is dependent on the applicant's household income and family size compared to the currently published Federal Poverty Level guidelines at the time of application.

*Exception: patients covered by Medicare Part A or Part B must also follow the process as outlined in section F above.

CFAP Program	Federal Poverty Level						
Guidelines	≤ 200%	201 - 300%	≤ 400%	≤ 600%			
Carle Financial Assistance Program	100% Discount	50% Discount	Yearly expenses capped at 40% of gross annual income.	N/A			
Illinois Uninsured Hospital Patient Discount Program	Limits patient's Carle medical expenses to 20% of the household's gross annual income. See policyFIN-IL Hospital Uninsured Patient Discount Program for additional information.						

- 1. Consideration for the Carle Financial Assistance Program may occur through the following methods:
 - a. Presumptively through Financial Assistance Screening:
 - Carle will use Experian to identify those patients who may be presumptively eligible for Carle Financial Assistance Program at the 100% discount level.
 - b. Completing a financial assistance application and returning with required documentation. If a patient has questions regarding the application process, they can visit Carle.org/FinancialAssistance or contact Carle at (888) 71-CARLE or (217) 902-5675.
 - Applications are to be fully completed, signed, and returned with required documentation to:

Carle Financial Assistance Program

PO Box 4024

Champaign, IL 61824-4012

- Resident Except for emergent situations outlined below, the Carle Financial Services Program is intended for Illinois residents only.
 - Residency verification documentation if needed:
 - * Any document within the income verification listing with a preprinted address
 - * Valid state-issued identification card
 - Recent (last 60 days) residential utility bill
 - Valid lease agreement
 - * Current vehicle registration card
 - * Voter registration card
 - * Mail addressed to patient at an IL address from a government office
 - Award letter from school
 - * Statement from a family member that the patient resides at the same address with one of the above residency verifications.

- Income eligibility will be based on the most current published Federal Poverty Guidelines.
 - Prior year's Federal Tax Return showing all household members and their adjusted gross income.
 - If the guarantor/patient did not file taxes, proof of prior year's income may consist of:
 - W2 from all jobs held
 - * Self-employment income and expenses
 - Unemployment compensation
 - * 1099 forms for the following types of income:
 - 1. Social Security
 - 2. Social Security Disability
 - 3. Veteran's pension
 - 4. Veteran's disability
 - 5. Private disability
 - 6. Worker's compensation
 - 7. Retirement Income
 - * Child support, alimony or other spousal support
 - * Other miscellaneous income sources.
 - If none of the above documents can be supplied, a written statement describing current household size and financial situation.
- 2. Patients who receive a determination of either an approval or denial under the Carle Financial Assistance Program may reapply after six (6) months from the date of original application signature in the event there are substantial or unforeseen material changes in their financial situation. In the case of extraordinary circumstances, an application may be submitted prior to the six (6) month limitation.
- 3. Applicants may appeal the application determination by sending a written appeal to the Manager Self Pay Receivables Management. Further appeals may be directed to the Director Patient Financial Services, may be escalated to either the Vice President of Revenue Cycle Operations, the SVP, Chief Revenue Cycle Officer or the Chief Financial Officer and ultimately to the Community Care Review Committee..
- 4. Translated copies of all Carle Financial Assistance Program materials are available in Spanish at Carle.org/FinancialAssistance or by request to Carle representatives at FinancialAssistance@Carle.com or by phone at (888) 71-CARLE.
- H. The Carle Financial Assistance Program discount will apply to the residual patient balances after all other payments from sources such as Medicare, insurance companies, third party legal settlements, and/or patient funds are received and posted.
 - 1. Patients who purposefully circumvent insurance requirements (i.e. waiting periods, preauthorization, etc.) may be held responsible for the billable services and not receive any discounts on services.
 - 2. Patients, who knowingly provide untrue information on the application for financial assistance, will be ineligible for financial assistance. Any financial assistance granted will be reversed, and the patient will be held responsible for the billable services.
 - 3. Non-emergent, out-of-network care including out-of-state Medicaid that would be paid by the patient's insurance company elsewhere will not be eligible for the Carle Financial Assistance Program because the patients have the opportunity to have their healthcare needs met at a participating provider.
 - 4. Emergent out-of-network care for those who qualify will be eligible under the Carle Financial Assistance Program policy quidelines after all other payment sources have been exhausted.
 - 5. Emergent out-of-state Medicaid patients are not required to complete the Carle Financial Assistance Program application process. They will be approved for a one time discount as eligible under the Carle Financial Assistance Program after proof of coverage is provided and all other payment sources have been exhausted.
- I. Discount will apply to any patient responsible balance retroactively, including those that have been referred to a collection agency if court costs have not yet been incurred. However, an application for government assistance may be requested as stated in C1.
 - 1. Carle will not file collection suit liens on a primary residence.
 - 2. Carle will not authorize body attachments for purposes of medical debt collection.
- J. Carle will utilize the Centers for Medicare and Medicaid Services coverage guidelines when determining services that qualify for the Carle Financial Assistance Program.
 - 1. Coverage will apply to health care services that a physician, exercising prudent clinical judgment, would provide to a patient for the purpose of evaluating, diagnosing or treating an illness, injury, disease or its symptoms;
 - 2. In accordance with the generally accepted standards of medical practice;
 - 3. Clinically appropriate, in terms of type, frequency, extent, site and duration, and considered effective for the patient's illness, injury or disease; and

- 4. Not primarily for the convenience of the patient, family or physician and not more costly than an alternative service or sequence of services at least as likely to produce equivalent therapeutic or diagnostic results as to the diagnosis or treatment of that patient's illness, injury or disease.
- K. Carle Financial Assistance Program will not cover cosmetic, elective or non-medical retail services.
- L. Amounts Generally Billed (AGB) to Carle Financial Assistance Program participants will be determined by Medicare fee-for-service together with all private health insurers, during a prior 12-month period.
 - AGB determined through calculations of sum of all payments plus the sum of all bad debt and charity care adjustments divided by the sum of all charges in the time frame.
 - 2. Time frame included in method is for October 1 through September 30 of the prior calendar year.
- M. Patients who have been approved for the Carle Financial Assistance Program may re-apply annually from the date of original application approval. Carle Foundation will attempt to notify patients by mail 90 days before the current termination date of eligibility in the Carle Financial Assistance Program.

PROCEDURE

- A. Patients with financial concerns should be identified by Carle personnel as soon as possible in the registration, care, treatment or billing process.
 - 1. A referral to Social Services, other pertinent staff or directly to a government program should be completed in order to obtain a determination of eligibility for Public Assistance.
 - a. Patients who fail to cooperate with the government program during the application process will automatically be denied for the Carle Financial Assistance Program.
 - b. If the patient does not meet the eligibility criteria for a government program or if they have a spend-down, they may be eligible for a Carle Financial Assistance Program discount.
 - 2. Patients are encouraged to apply for the Carle Financial Assistance Program within 90 days after discharge or provision of service. The application for the Carle Financial Assistance Program will be available on the Carle website Carle.org/FinancialAssistance, in all registration areas, the Patient Financial Services offices, Cashier areas and Social Services.
 - 3. Upon receipt of the Carle Financial Assistance Program application by Self Pay Receivables Management staff, EPIC Prelude and Resolute systems will be noted:
 - a. All collection activity will be held until the application processing is completed.
 - b. Application and supporting documentation will be scanned into OnBase and the paper copies destroyed.
 - c. Applicant will be notified of any missing documentation.
 - d. If the missing documentation is not returned within 30 days, a notification letter will be mailed to the applicant that indicates billing will commence.
 - The completed application should include:
 - a. A fully filled in application with verification of the number of family/household members;
 - b. Signature of the applicant; and
 - c. Prior year's tax return or other income verification for all wage earners in the family/household.
 - Parents' income will be used to determine financial eligibility for students who are over age 18 but still claimed as dependents for their parents' income tax purposes.
- B. When the application has been processed and the determination is made, a record of each application and associated documentation will be maintained by fiscal year.
 - 1. Applications received prior to April 23, 2013 are maintained in paper form and warehoused.
 - 2. Applications received on or after April 23, 2013 are maintained electronically within OnBase.
- C. All efforts will be made to send written determination to the applicant within 30 working days of receipt of the completed application. If the application is approved, the patient's account will be adjusted as soon as possible thereafter to reflect the discount.
- D. Patients who qualify for a partial discount of the balance will be required to pay the remainder due, as with other private pay accounts. Balances billed to a Carle Financial Assistance Program participant will not exceed amounts generally billed to other patients. See the FIN - Payment Policy and FIN - Self-Pay Billing and Collection Policy.
- E. When Carle Foundation receives an application for the Financial Assistance Program that indicates treatment at any applicable Carle Foundation facility, the application, verification and determination will be applied to all other applicable Carle businesses.
- Information related to the Carle Financial Assistance Program will be regularly reported to the Director Patient Financial Services and the Senior Vice President Revenue Cycle Operations including:
 - 1. Adjustments
 - Number of paper applications received
 - 3. Approvals
 - 4. Denials
 - 5. Backlogs
 - 6. Quality assurance measures

OTHER RELATED LINKS AS APPLICABLE TO SITE

FIN - Carle Regional Financial Assistance Program
Plain Language Summary - X0873
Non-Participating Provider List - X0271

REFERENCES

- 210 ILCS 88/27 Fair Patient Billing Act (Illinois Public Act 96-965)
- 210 ILCS 89 Hospital Uninsured Patient Discount Act
- 79 FR 78953 Federal Register, Department of the Treasury (IRS 501r Rules and Regulations)



Carle Financial Assistance Program Area Homeless Shelters/Transitional Housing

Courage Connection: Houses women and children (males up to age 17 with their mothers) fleeing domestic abuse and

sexual assault.

Mailing Address: 1304 E. Main

Urbana, IL 61802

Phone Number: (217) 384-4462, domestic violence business office

Fax Number: (217) 384-4383

Service Area: Champaign, Piatt, Ford and Douglas counties

City of Urbana-Transitional Housing Program for Homeless Families: Provides housing and support services to selected homeless families with dependent children who have been residents of Champaign County for at least three

months.

Mailing Address: 400 S. Vine St.

Urbana, IL 61801

Phone Number: (217) 328-8263 Fax Number: (217) 384-2367 Service Area: Champaign County

Danville Rescue Mission: Emergency and transitional shelter for single men.

Mailing Address: 834 N. Bowman Avenue

Danville, IL 61832

Phone Number: (217) 446-7223

Dayspring Women & Children's Shelter: Homeless Women & Children's Shelter- small shelter.

Mailing Address: 213 Bowmen Ave.

Danville, IL 61832

Phone Number: (217) 274-7424

Jesus is the Way Prison Ministries, Inc.: Provides follow-up assistance to just-released male inmates with employment,

housing, food and spiritual needs. Mailing Address: 602 S. Liberty Ave.

Rantoul, IL 61866

Phone Number: (217) 892-4044 Fax Number: (217) 892-5995

Mattoon Public Action to Deliver Shelter (PADS): Homeless shelter and food bank in Mattoon.

Mailing Address: 2017 Broadway Ave.

Mattoon, IL 61938

Phone Number: (217) 234-7237

Restoration Urban Ministries: Offers transitional housing, food pantry, clothing, substance abuse classes, and many

other programs to assist teens, men and women.

Physical Address: 1213 Parkland Court

Champaign, IL 61820

Mailing Address: PO Box 3277 Champaign, IL 61826-3277 Phone Number: (217) 355-2662

Safe Housing: Temporary shelter for victims of domestic violence and sexual assault- UIUC Students Only

Mailing Address: Safe Housing Family and Graduate Housing

1841 Orchard Place Urbana. IL 61801

Phone Number: (217) 33-1216 (UIUC PD) Intake

Salvation Army Stepping Stone Program: Provides temporary and transitional housing for homeless men (18 and older) on a nightly basis. Men, Women & Families who comment to working the program. Can only house 2

families/individuals at a time. Mailing Address: 2212 N. Market

Champaign, IL 61822

Phone Number: (217) 373-7830 Fax Number: (217) 373-8441

CU at Home: Phoenix Day Drop-In Center (Tuesday – Friday 12p-5pm); Austin's Place- Sober Women's Shelter (must due intake during day hours) (Tuesday – Friday 12p-4pm); Men's Sober Shelter is open every night 8:30pm-7:30am (must due intake during day hours) (Tuesday – Friday 12p-4pm)

Mailing Address: 70 E. Washington

Champaign, IL 61820

Phone Number: (217) 819-4569 Emergency Number: (217) 888-0329

Crosspoint at the Y-Residential Program: Dormitory style housing for 23 homeless, self-sufficient women (18 and

older); Domestic Violence Shelter & Transitional housing

Mailing Address: 201 N. Hazel Street

Danville, IL 61832

Phone Number: (217) 709-0331 Fax Number: (217) 443-6845

Bloomington Area Homeless Shelters/Transitional Housing

Home Sweet Home Ministries: Provides case management and other supportive services to the homeless such as shelter, hot meals, access to clothing and toiletries, and job training. Our goal is to help people find independence, restore their hope and share the love of Jesus Christ with them.

Phone: 309-828-7356 Address: 303 E. Oakland Avenue, Bloomington, IL 61701

Website: Home Sweet Home Ministries - Humbly Serving Bloomington-Normal (hshministries.org)

Neville House Shelter: Residents staying at Neville House work closely with a trained domestic violence advocate that will assist in finding resources for housing, childcare, employment, legal representation, transportation, and enhancement of life skills. Twenty-four hour emotional and educational support is available to assist individuals and families responce to crisis and increase self-sufficiency.

Phone: 309-827-7070

Address: 1301 West Washington Street, Bloomington, IL 61701

Website: Neville House Shelter - Domestic Violence Crisis Assistance (mccainc.org)

Salvation Army Safe Harbor Shelter: Services offered include emergency shelter, transitional housing, casework

services, and food & nutritional programs.

Phone: 309-829-7399

Address: 601 West Washington Street, Bloomington, IL 61701

Website: Bloomington (salvationarmy.org)

Project Oz: Homeless youth between the ages of 17-23. Offer survival aid, help finding and keeping a job, safety planning, GED enrollment, legal aid, medication connections, emotional support, and we'll work to connect you to housing.

Phone: 309-827-0377; there is a 24-hour crisis worker who can talk to you about emergency housing by calling 2-1-1

anytime of night or day.

Address: 1105 W Front St., Bloomington, IL 61701 Website: Housing and Homeless Resources | Project Oz

Oxford House Bloomington: Males only. A concept in recovery from drug and alcohol addiction. In its simplest form, an Oxford House describes a democratically run, self-supporting and drug free home. Fill out application and set up interview.

Phone: 309-829-5014

Address: 501 McLean, Bloomington, IL 61701

Website: Oxford House

Oxford House West Bloomington: Women only. A concept in recovery from drug and alcohol addiction. In its simplest form, an Oxford House describes a democratically run, self-supporting and drug free home. Fill out application and set up interview.

Phone: 309-808-1632

Address: 704 W Scott Street, Bloomington, IL 61701

Website: Oxford House

YWCA Labyrinth House: A transitional living program for formerly incarcerated McLean County women. Residents live in a shared two-bedroom furnished apartment and receive on-site support from residential counselors each evening. Residents have access to economic/employment resources and a counselor/case manager. Residents are able to increase their privilege level over time and can remain for up to two years.

Phone: 309-662-0461

Address: 1201 North Hershey Road, Bloomington, IL 61704

Website: https://ywcamclean.org/what-we-do/prevention-and-empowerment-services/labyrinth/



Title	FIN - Presumptive Eligibility for Financial Assistance						
Region	Carle Health Central - BroMenn, Carle Health Central - Eureka, Carle Health East, Carle Health South, Carle Health West - Methodist, Carle Health West - Pekin, Carle Health West - Proctor						
Scope	All Entities						
Document type	Policy & Procedure						
Owner	Jodi Eeten (Mgr - Fin Svc Self Pay Rec)						
Reviewer(s)	Christi Kosheba (Dir - Finance Carle West), Dawn Walden (Sr VP & Chief Revenue Cycle Officer), Steven Smith (Dir - Financial Services)						
Approver(s)	APM Administrators, Dennis Hesch (Exec VP & Chief Finance and Strategy Officer)						
Effective Date	02/27/2014	Next Review Date:	08/02/2026	Approval Date	08/02/2023		

ATTACHMENTS N/A

PURPOSE/ SCOPE

- A. To identify and assist those patients where financial need has been determined by other means outside of the Carle Financial Assistance application.
- B. Certain identified patient populations are presumptively eligible for the Carle Financial Assistance Program or Carle Regional Financial Assistance Program.
 - 1. Experian Financial Assistance Screening Probable
 - 2. Homelessness
 - 3. Deceased with no estate
 - 4. Mental incapacitation with no one to act on patient's behalf
 - 5. Illinois Medicaid eligibility
 - a. Title XIX
 - b. Title XXI
 - c. In-network Medicaid Managed Care plans
 - 6. WIC (Women, Infants and Children Nutrition Program)
 - 7. SNAP (Supplemental Nutrition Assistance Program)
 - 8. LIHEAP (Low Income Home Energy Assistance Program
 - 9. Illinois Free Lunch and Breakfast Program
 - 10. Frances Nelson Health Center discount referral
 - 11. Community Health Care Clinic Referral
 - 12. Receipt of grant assistance for medical services

DEFINITIONS

- A. Family/Household Size includes those dependents listed on tax returns, divorce decree or child support order. Defined by the IRS for tax filing purposes under section 36B (d) (1), "a taxpayer's family consists of the individuals for whom the taxpayer claims a personal exemption deduction under section 151 for the taxable year. Taxpayers may claim a personal exemption deduction for themselves, a spouse, and each of their dependents. Section 152 provides that a taxpayer's dependent may be a qualifying child or qualifying relative, including an unrelated individual who lives with the taxpayer. Family size is equal to the number of individuals in the taxpayer's family."
- B. **Resident** a person who lives in the state of Illinois and who intends to remain living within Illinois indefinitely. Relocation for the sole purpose of receiving health care benefits does not satisfy the residency requirement.
- C. **Experian Information Solutions**, **Inc. (Experian)** is a third party vendor that uses proprietary data analytics to provide unique information related to patients for the purpose of financial assistance and recovery of patient debt.

STATEMENT OF POLICY

- A. The Carle Foundation Hospital and other participating Carle entities (a.k.a. Carle) desire that all patients be aware of the various forms of assistance available.
- B. Carle will strive that those eligible for assistance be identified as early in the care and billing process as possible, and that the process be as simple as possible for the patient.

PROCEDURE

A. Patients who appear to need financial assistance should be identified by Carle personnel as soon as possible in the registration, care, treatment or billing process.

- B. The following will serve as documentation of inclusion for certain presumptively eligible patients. This documentation is to be submitted to Self Pay Receivables Management for administration and management of the various discount programs at Carle.
 - 1. Experian Financial Assistance Screening
 - a. Result of Probable with a low likelihood of payment
 - b. Documentation within the Experian web portal and/or Epic Prelude
 - 2. Homelessness
 - a. Medical documentation of homeless status
 - b. Letter from local area shelter
 - 3. Deceased with no estate
 - a. Death certificate
 - b. Deceased Patient Application Form
 - 4. Mental incapacitation with no one to act on patient's behalf
 - a. Verification by Carle Social Worker or other qualified medical staff
 - b. Court documentation
 - 5. Illinois Medicaid eligibility
 - a. HFS.com online verification.
 - 6. WIC (Women, Infants and Children Nutrition Program)
 - a. Indication of participation on Carle Financial Assistance Program application
 - b. Copy of current participation document
 - c. Letter from WIC office
 - 7. SNAP (Supplemental Nutrition Assistance Program)
 - a. Indication of participation on Carle Financial Assistance Program application
 - b. Copy of award letter
 - 8. LIHEAP (Low Income Home Energy Assistance Program)
 - a. Indication of participation on Carle Financial Assistance Program application
 - b. Copy of award letter
 - 9. Illinois Free Lunch and Breakfast Program
 - a. Indication of participation on Carle Financial Assistance Program application
 - b. Copy of award letter
 - Current exclusion: School districts that are approved to provide the IL Free Lunch and Breakfast Program
 to all school members are excluded from presumptive qualification. Listing published by State of Illinois
 Board of Education.
 - 10. Frances Nelson Health Center discount referral
 - a. Discount referral form to Carle from Frances Nelson
 - 11. Community Health Care Clinic Referral
 - a. Discount referral form to Carle from Community Health Care Clinic
 - 12. Receipt of grant assistance for medical services
 - a. Copy of award letter

OTHER RELATED LINKS AS APPLICABLE TO SITE

- ALL policies and links in process of being updated to include BRAVO entities.
- FIN Carle Financial Assistance Program
- FIN Carle Regional Financial Assistance Program
- FIN IL Hospital Uninsured Patient Discount Program
- FIN Self-Pay Billing and Collection Policy

REFERENCES

- 210 ILCS 88/27 Fair Patient Billing Act
- 210 ILCS 89 Hospital Uninsured Patient Discount Act
- 79 FR 78953 Federal Register, Department of the Treasury (IRS 501r Rules and Regulations)

Attachment 4A: Community Benefits Supplemental Information

LANGUAGE ASSISTANCE SERVICES:

A robust language assistance program is provided for patients who have limited English proficiency or who are hearing impaired, at both the hospital and clinic locations. While Carle BroMenn Medical Center did fund the cost of language assistance services for the hospital at a loss of \$19,223, the Carle Health system has considered language assistance services to be routine hospital business, and conservatively has not reported this amount as part of the hospital's community benefit figures.

GOVERNMENT-SPONSORED INDIGENT HEALTH CARE:

The cost of health care services often exceeds the amount the State of Illinois and federal government reimburse for providing services to Medicaid and Medicare recipients, respectively. In 2024, the cost to provide care to Medicaid patients exceeded reimbursement by more than \$6 million, and the cost to provide care to Medicare patients exceeded reimbursement from the federal government by more than \$29 million.

DONATIONS:

To strengthen our community, Carle provides substantial resources to other organizations in support of missions and goals that closely align with ours. In total, the Carle Health made donations benefitting over 100 civic, health improvement and educational endeavors, as well as mission work. Specific to Carle BroMenn Medical Center, significant donations included \$19,000 to Illinois State University for a BroMenn Endowed Professorship in Nursing.

VOLUNTEER SERVICES:

Employee: While Carle Health does not have an organized/initiated employee volunteer program, Carle BroMenn Medical Center administrators and leaders provided more than 100 hours on behalf of the hospital for participation in community boards, committees and community functions in 2024. Most of these hours were spent by senior leaders, including the president and several vice presidents.

Non-employee: In 2024, non-employee volunteers put in 31,022 hours at the hospital, receiving no payment but contributing to Carle's mission. At a minimum wage for this time period of \$14 this equated to \$434,308 of potential wages that Carle BroMenn Medical Center saved by having such a strong volunteer program.

EDUCATION:

Through a variety of activities including significant donations, scholarship programs, and physician, nurse and allied health education, more than \$1,000,000 was invested in programs that address community-wide workforce and education issues, strengthening the training and availability of professionals to care for our communities' healthcare needs now and in the future.

SUBSIDIZED HEALTH SERVICES:

Over the years, multiple Carle BroMenn initiatives have provided additional access to care. Because these services continue to meet an enormous need, the programs have been maintained, though they operate at a loss. Some of these subsidized services include: Crisis Counseling, Acute Rehab Services, Trauma Services, and more.

CY 2024 Carle BroMenn Medical Center Report – Attachment 4A For period from 1/1/2024 through 12/31/2024

Another critical community benefit service subsidized by Carle BroMenn was the mental health unit. The mental health unit at Carle BroMenn Medical Center treats patients with mental health concerns like depression, suicidal thoughts, and other mental health crises. It is the only inpatient mental health unit in McLean County and has recently expanded in response to growing needs for local programs. The state-of-the-art unit is designed to provide a bright, fresh environment as well as safe and secure for both staff and patients. It includes features like dimming lights, space for music therapy, and large group rooms with varying levels of privacy.

BAD DEBTS:

By expanding the presumptive eligibility screening processes and determining the financial status of patients up-front, Carle BroMenn has been able to pinpoint those needing assistance early in the process, minimizing bad debt and optimizing our ability to help. However, there is still some loss incurred for services we provided but which payment was never received.

Bad debt incurred by Carle BroMenn Medical Center in 2023 was \$3,897,968

CY 2024 Carle BroMenn Medical Center Report – Attachment 4 For period from 1/1/2024 through 12/31/2024

Attachment 4: Financial Assistance Data

Data on Financial Assistance Applications:

- The number of applications submitted to the hospital, both complete and incomplete;
 - 0 28.294
- The number of applications approved; and
 - o **52,076**
- The number of applications denied and the 5 most frequent reasons for denial.
 - Number Denied:
 - 6,976
 - Top 5 Reasons for Denial (Unordered):
 - Incomplete Application
 - Income Exceeds Policy Threshold
 - Patient Qualifies for Medicaid
 - Patient Out of Qualifying Area
 - Other

To the extent that race, ethnicity, sex, or preferred language is collected and available for financial assistance applications, the data outlined in paragraph (5) shall be reported by race, ethnicity, sex, and preferred language.

- Carle Health's Financial Assistance Program experiences the same five reasons for denial across all
 applicants; therefore, the top five reasons for denial are the same across all races, ethnicities, sexes, and
 preferred languages.
 - Top 5 Reasons for Denial (Unordered):
 - Incomplete Application
 - Income Exceeds Policy Threshold
 - Patient Qualifies for Medicaid
 - Patient Out of Qualifying Area
 - Other

¹28,294 represents applications approved across the health system

CFAP covers Carle Foundation Hospital (CFH), Carle Hoopeston Regional Health Center (CHRHC), Carle Richland Memorial Hospital, Carle BroMenn Medical Center, Carle Eureka Hospital, Carle Health Methodist Hospital, Carle Health Proctor Hospital, Carle Health Pekin Hospital, Carle Physician Group, Carle West Physician Group and a number of other distinct businesses like Arrow Ambulance and Champaign SurgiCenter; all of which are part of The Carle Foundation. When a patient applies for financial assistance, their application is considered for, and approval or denial is granted for, all Carle entities.

Carle BroMenn Medical Center CY 2024 – 210 ILCS 76/22 Public Report

§ 22(a): In order to increase transparency and accessibility of charity care and financial assistance data, a hospital shall make the annual hospital community benefits plan report submitted to the Attorney General under Section 20 available to the public by publishing the information on the hospital's website in the same location where annual reports are posted or on a prominent location on the homepage of the hospital's website. A hospital is not required to post its audited financial statements.

- 1. Reporting Period:
 - a. 1/1/2024 through 12/31/2024
- 2. Charity Care:
 - a. Hospital Total Charity at Cost: \$2,654,622
 - b. ED Subset: \$557,969
- 3. Total Net Patient Revenue
 - a. \$235.429.622
- 4. Carle Health System Total Community Benefits Spending
 - a. \$324,669,658
- 5. Data on Financial Assistance Applications:
 - a. The number of applications submitted to the hospital, both complete and incomplete;
 - i. 28,294¹
 - b. The number of applications approved; and
 - i. 52,076
 - c. The number of applications denied and the 5 most frequent reasons for denial.
 - i. Number Denied:
 - 1. 6,976
 - ii. Top 5 Reasons for Denial (Unordered):
 - 1. Incomplete Application
 - 2. Income Exceeds Policy Threshold
 - 3. Patient Qualifies for Medicaid
 - 4. Patient Out of Qualifying Area
 - 5. Other
- 6. To the extent that race, ethnicity, sex, or preferred language is collected and available for financial assistance applications, the data outlined in paragraph (5) shall be reported by race, ethnicity, sex, and preferred language.
 - a. Carle Health's Financial Assistance Program experiences the same five reasons for denial across all applicants; therefore, the top five reasons for denial are the same across all races, ethnicities, sexes, and preferred languages.
 - i. Top 5 Reasons for Denial (Unordered):
 - 1. Incomplete Application
 - 2. Income Exceeds Policy Threshold
 - 3. Patient Qualifies for Medicaid
 - 4. Patient Out of Qualifying Area
 - 5. Other

¹28,294 represents applications approved across the health system

CFAP covers Carle Foundation Hospital (CFH), Carle Hoopeston Regional Health Center (CHRHC), Carle Richland Memorial Hospital, Carle BroMenn Medical Center, Carle Eureka Hospital, Carle Health Methodist Hospital, Carle Health Proctor Hospital, Carle Health Pekin Hospital, Carle Physician Group, Carle West Physician Group and a number of other distinct businesses like Arrow Ambulance and Champaign SurgiCenter; all of which are part of The Carle Foundation. When a patient applies for financial assistance, their application is considered for, and approval or denial is granted for, all Carle entities.