



2009 ANNUAL REPORT
Illinois Hospital Association

Proud to Serve...

YOU

Illinois Hospital Association

Mission

To advocate for and support hospitals and health systems as they serve their patients and communities.

Vision

Illinois hospitals and health systems consider IHA membership essential to their ability to fulfill their missions.

Values

Excellence

We exceed our members' expectations by providing programs and services that not only respond to member needs, but also anticipate them.

Respect

We respect the worth and dignity of every human being and value diversity among our members and employees.

Unity

We create synergy by harnessing members' energies in pursuit of goals that transcend individual differences.

Ethical Practice

We conduct our affairs according to high ethical principles, making decisions fairly and honestly, and treating others as we wish to be treated.

Stewardship

We use the resources entrusted to us wisely and efficiently.

Message from the President



As I begin my first year as president of the Illinois Hospital Association, I am invigorated by the dedication and collaborative spirit I have encountered among the IHA members I met at the Leadership Summit and at my meetings with you around the state.

When I decided to join IHA, I knew I was joining an organization with a stellar reputation. I also knew I was becoming the president of a state hospital association during a period of great turmoil. I took on this challenge with relish because I think this is one of the most exciting times to be in health care. What could be more inspiring than to lead an organization like IHA during the creation of a new national health care system?

And what an opportunity for us to fulfill the mission of the Illinois Hospital Association: "To advocate for and support hospitals and health systems as they serve their patients and communities." That's a mission I can sign up for; in fact it's one that I am passionate about.

This is a period of great uncertainty and there are many things we simply can't predict. But there are some things we do know. We know that health delivery will be different in the future. Our hospitals will be transforming to a "new normal," integrating with physicians, health plans and other providers, expanding primary care and preventive services and developing care management systems to address the needs of the chronically ill.

We know that we will need to understand and embrace new business models that address workforce shortages, utilize transformations in medical and bio-technology, and implement innovative service delivery programs.

We know that quality will be more crucial than ever. This will be a major focus going forward as we design our quality advocacy agenda and develop tools, information and education to assist you.

We know that we must find the balance between advocating for a sustainable health care system going forward and embracing the change that's needed. We don't want to be carried along with the tide. We intend to lead.

We know that continuing to build and maintain strong relationships with state government, elected officials, allied health professionals and others is critical to our efforts in achieving our advocacy goals, in protecting the interests of the hospital community, and strengthening the health care delivery system.

Change is good; challenges keep us sharp and relevant. But I also want to assure you that I understand the firm foundation and tradition the Association has already established. The Illinois Hospital Association will continue its tradition of providing a strong forum for discussion, input and participation, as it always has.

Like New York, the state I came from, you are a very diverse membership and you have differing views on positions to take and how to proceed. But through this diversity of thought, our power of association will be strong if we agree to listen, sort through our differences and stay united as a hospital community. And while it's important to understand your differences, your distinctions, and the unique roles that you play in your communities, it's just as important for you to know you have a home to come to in the Association. We will always listen to you and represent your needs. I am confident that the Illinois hospital community and IHA together can provide leadership in the transformation to a better system and emerge from this unprecedented chapter in health care as a stronger, more unified hospital community.

In my first year as your president, I want to spend a great deal of time with you. I want to learn from you, listen to your issues and your perspectives, understand the strategies you are employing, and learn and fine-tune how the Association can continue to provide value and service to you as we work together.

Finally, I want you to know that it is a great pleasure for me to embrace Illinois as my new home state, to be your partner representing your needs, working with you to build a strong, vibrant and sustainable health care system for Illinois. It is with deep gratitude that I serve Illinois hospital leaders who are serving their patients and communities with dedication and commitment.

*Maryjane A. Wurth
President*

A Remarkable Year for Illinois, IHA and You

2009 has been a year of fast-moving events and unrelenting challenges: Illinois government facing serious challenges, an unstable economy in recession, the elevation of national health care reform to a top priority under a new President, and what appeared to be inevitable cuts in Medicaid funding. In this harsh environment, while you dealt with economic pressures, the impact of a new influenza, continued funding delays from Medicaid, increasing uncompensated care, and numerous regulatory and legal challenges, IHA focused on you. **leadership** **challenges**

We were your partner, working behind the scenes to help you fulfill your mission of service. We greeted with confidence and enthusiasm our new president Maryjane Wurth as we bid farewell to former president Ken Robbins, continuing our dedication to our members under her leadership.

Meeting your needs is our goal, woven throughout the fabric of our organization. This report highlights the work we did for you.

We Listen to You

We are constantly on the lookout for what's on your mind and how we can help you. Every year we ask for your suggestions about how we can serve you better in our annual member survey, and we rely on your answers to guide us in focusing our resources on your priorities. We talk to you in person during our fall flyarounds and at regional and member meetings throughout the year. Your colleagues give us feedback during meetings of the IHA Board, our policy and advocacy councils, and many other member committees. **feedback**

While we thrive on analyzing bills, crafting legislation and advocating for the greater good, it is the input we get from you who are on the front line providing care 24/7 that motivates us. Our member task forces on Certificate of Need, Medicaid, Quality, and Workforce were invaluable in providing the guidance that helped us move forward on these issues. **networking**

From CEO teleconferences to informal phone calls and emails, networking at special events like the Leadership Summit and regular hospital visits by staff where we discuss member concerns, we're always eager to listen, ready to learn and prepared to help.

We listen to you. Then we take action to make a positive difference for you.

Medicaid

You Told Us: Advocacy Comes First

Advocacy is our core service for IHA members. Despite 2009's daunting political and economic environment, IHA achieved its major advocacy goals: protecting Medicaid funding, keeping the assessment payments to hospitals coming, getting hospitals in the state capital program, and CON reform.

Led by IHA, Illinois hospitals rallied around our flagship issue: Medicaid. You wanted us to advocate for adequate reimbursement on a timely basis. We took your fight for survival and sustainability to the halls of the state capital. We overturned destructive and misleading myths about Medicaid, telling the Governor, legislators and the media that, far from draining the state's budget, hospitals are generating \$900 million a year in federal funds through the Hospital Assessment Program, and that moving large numbers of Medicaid beneficiaries into HMOs is not a solution, but would result in squeezing rates to doctors and hospitals that are already too low even lower and lead to lower quality of care.

assessment payments

We nurture our relationships with legislators by working with them to write legislation that impacts us, providing the expert analysis and knowledge to find workable solutions for our members. In October IHA President Maryjane Wurth, accompanied by dozens of women hospital executives, reached out to legislators at our annual Conference of Women Legislators (COWL) reception in Springfield.

Through timed, strategic advocacy efforts, IHA and the hospital community were able to protect Medicaid funding for hospitals in the state budget – the FY2010 budgeted appropriation is \$470 million above the appropriated FY2009 budget. Even though the state had cash flow challenges, we worked with the Governor and General Assembly to ensure that more than \$1 billion in payments were made to hospitals in February and March under the new hospital assessment program. In addition, \$150 million for hospitals was included in the state's new capital program.

IHA is continually seeking ways to support our members, advancing proposals of benefit to hospitals whenever the opportunity arises, even in challenging economic times for the state. In the final day of the fall Veto Session in late October, IHA was able to successfully push for passage of a legislative package – **Senate Bills 1181 and 1265** and **House Bill 542** – to pump nearly \$1.1 billion in new federal Medicaid funds into the state economy, including \$155 million in Medicaid stimulus payments to hospitals. IHA worked closely with the bill's sponsors, legislative leaders, the Governor's Office, the Department of Healthcare and Family Services and supporters of the legislation to work out the details of the legislation to bring the greatest benefit to our members. The legislation establishes a new fund, the Health Care Provider Relief Fund, which when fully implemented, will

facilitate payments of Medicaid quarterly and other payments to hospitals, ensuring that they are timely and maximize the state's enhanced FMAP Medicaid matching rate under the federal economic stimulus law. The legislative package was passed in less than 24 hours, thanks to the aggressive advocacy of IHA and the outstanding response to our advocacy alert by members who contacted their legislators.

We were also successful – for the eighth straight year – in stopping mandatory nurse-patient staffing legislation, with the support of hospital nurse leaders who testified before key legislative committees, making it clear that the IHA-supported Nurse Staffing by Patient Acuity law successfully addresses nurse staffing based on patient needs and nursing resources.

certificate of need

IHA and members worked hard all year to see that the recommendations of the state Task Force on Health Planning Reform were implemented and the streamlined Certificate of Need (CON) program extended for ten years without a proposed charity care mandate being imposed on hospitals. Our efforts with a member task force and other key stakeholders on legislation designed to get acute stroke patients appropriate care resulted in a law that permits hospitals capable of providing emergent stroke care to participate in regional stroke protocols so that acute stroke patients get the best care in the shortest time.

We were successful in improving a flawed bill that would have allowed certain post-surgical recovery centers to become hospitals without going through the CON process or meeting all the requirements of the Hospital Licensing Act. The final legislation requires a recovery center to meet all Hospital Licensing Act requirements and obtain a CON.

On the federal level, we worked with AHA and the Illinois Congressional Delegation, carefully monitoring the impact of various health care reform proposals on Illinois hospitals. Through our direct work with federal legislators and their assistants, we made sure the specific needs of Illinois hospitals were well-known, including working successfully to include hospitals in a Medicaid prompt pay provision in the federal economic stimulus law. Thanks to that provision, Illinois hospitals are being paid their Medicaid claims on a timely basis. We provided resources and updates on health care reform developments on our web site, with advocacy alerts designed to make it easy for members to send messages to members of Congress. IHA's position has been consistent: reduce the number of uninsured as much as possible, but not by paying providers Medicare rates that are below costs.

health care reform

community benefits

Speaking Out for You

IHA's third annual community benefits report, "Illinois Hospitals Caring for Their Communities: More than You See," did more than report on the \$4.7 billion in community benefits provided by our hospitals under the Illinois Community Benefits Act. It also showcased the work done by Illinois hospitals as they care for their local communities in countless unseen ways with compelling, personalized stories contributed by more than four dozen hospitals and health systems throughout the state. The reports were hand-delivered or mailed to our target audience of state and federal elected officials along with an extensive state-wide mailing to media outlets. The award-winning report was featured in *AHA News* as an exceptional example of an association advocating for its hospitals.

Raising your issues to a higher level of visibility can be exceptionally challenging with so many issues competing for attention during this economic downturn. But we know IHA makes a difference in the health care services delivered in Illinois and in the quality of those services. We know that in Illinois there is a little boy or girl receiving the care he or she needs at every moment of every day because of the work IHA has done on public policy and legislation to strengthen the health care delivery system. We know that through our work to support good public policy and legislation and to block harmful legislation, Illinois has a better health care delivery system today. **media**

In an article about Maryjane Wurth becoming IHA's new president, *Crain's Chicago Business* called IHA "...one of the state's most powerful lobbying groups. In recent years, it has been key to bringing several billion dollars in extra Medicaid funding to the state from Washington, D.C." *The Chicago Tribune*, in an editorial about the 10-year extension of the Certificate of Need program, asked, "Why is this happening? Because the Illinois Hospital Association wanted it – and the association is a powerful lobby."

But it's not about IHA being a powerful lobby – you'll never hear those words from us. It's about IHA being the strongest advocate for our hospitals because we put patients and communities first. It's about *effective* advocacy that achieves good outcomes. It is an honor to be the voice of Illinois hospitals.

Helping You Lead with Quality

While you are squeezed by increasingly intense pressures to contain costs, you also are dedicated to patient safety and quality improvement. IHA provides the technical support, resources and leadership you need so you can meet your performance improvement goals and sustain your tradition of excellence.

support

IHA represents the interests of members by serving on many national and state quality organizations, including the National Quality Forum, the National Uniform Billing Committee, the National Association of Health Data Organizations, the Illinois Department of Public Health Facilities Report Card Advisory Group, the Illinois Adverse Health Care Event Reporting Law Advisory Committee and the Illinois Health Information Exchange Advisory Group.

In 2009 the Quality Care Institute was created to assist members in improving quality and patient safety. As part of this effort, in July the Agency for Healthcare Research and Quality (AHRQ) recognized IHA's *Illinois Patient Safety Organization* as an official Patient Safety Organization (PSO) to serve as the umbrella organization for Illinois providers involved in multiple PSOs to come together and identify common opportunities to advance quality throughout all Illinois hospitals.

innovation

Among IHA's quality improvement programs is our ongoing Quality Encounter series of educational programs for senior leadership and trustees, where host hospitals share their successes with specific clinical best practices with other hospitals. Since 2005, IHA's Patient Safety Collaboratives have helped members implement innovative patient safety solutions. Each year, the focus is based on the improvements that are most needed, best for shared learning, and most likely to save lives. This year IHA was selected as part of The Johns Hopkins University's nationally-recognized, multi-state "Stop Central Line Associated Blood Stream Infections" initiative. More than 50 Illinois hospitals are participating in the two-year program, which has been identified by Congress and health policy experts as a model for national improvement in quality of care and effective use of health care funds.

Being prepared for public health emergencies such as the H1N1 flu is a vital patient safety and community issue. Starting in April we helped you stay on top of safety requirements and best practices with constant updates on our web site, including a web page dedicated to useful resources, such as links to key state and federal resources, the Illinois Department of Public Health, and the Centers for Disease Control and Prevention. In collaboration with the Metropolitan Chicago Healthcare Council, this fall we held weekly conference calls with members to share H1N1 information and answer hospital-specific questions.

H1N1

Your Workforce Issues

When we surveyed members last year, more than a third of you named workforce issues as among your most challenging concerns. We know that recruiting and retaining physicians, nurses and allied health professionals remains a major problem. Guided by our member Workforce Task Force and Post-Acute Care Constituency Steering Committee we concentrated on two major issues: physician supply and retention, and nursing and allied health shortages.

shortages

retention

IHA took a visible lead with the Illinois Board of Higher Education participating in regional forums across the state to reinforce the importance of aligning sufficient educational resources with needs in the health care field. We also convened physician leaders from across the state, resulting in a state House Joint Resolution recommending that health care stakeholders and educational institutions partner to develop an Illinois Physician Workforce Institute. The institute would collect and analyze Illinois-specific physician workforce data on the supply, demand, distribution and use of physicians across the state. The measure is expected to be taken up by the Senate in January 2010. A pilot initiative to demonstrate the need for the Physician Workforce Institute was conducted in May to assess how physician residency programs in Illinois hospitals impact the decisions new physicians make about practicing in Illinois. The Illinois Department of Commerce and Economic Opportunity has shown a willingness to align this private effort with the state's current workforce data activities to develop an accurate physician supply and demand profile for Illinois.

careers

In March, IHA published a *Workforce Profile*, based on an IHA member survey, to identify workforce shortages and how members are addressing them to serve as a benchmark for future planning. In September we created *Illinois Health Care Careers*, an innovative web site dedicated to helping students, parents, guidance counselors and others explore varied health care career options. The site offers resources to help choose a school, finance education and begin the process. The "Hospital Profiles" section is a compilation of individual hospital workforce profile pages unique to each hospital, serving both as a resource for those interested in local health care careers, as well as an effective advocacy resource for hospitals as they interact with the community and legislators. We continued to publish *Workforce Progress Notes*, a concise summary of the month's developments relating to workforce issues.

Keeping You Informed **action alerts**

Throughout the year, we kept members up to date through regular written, electronic and teleconference communications, keeping you informed on a broad range of specific issues and concerns important to you. We acknowledge the many demands on your time, and strive to offer concise, clear and well thought-out communications.

IHA *e-Update*, sent via e-mail to more than 1,300 member executives and leaders every Friday, includes the *Reporter*, a succinct summary of the week's key legislative developments, significant studies and other hospital-related news. IHA *e-Update* includes "This Week's Mail," convenient links to recent member communications, upcoming programs and the IHA web site. This all-in-one electronic format is accessible, convenient and can easily be forwarded to your colleagues. Member CEOs indicate the *Reporter* is a valuable, credible resource.

Action alerts on critical state and federal issues are sent directly via email to member CEOs, Government Relations personnel, and other specific groups such as CFOs and Public Relations staff as warranted. Legislators often mention the response generated by our members on issues of concern to them. This year, through member CEOs, we expanded our efforts to include even more groups in our grassroots advocacy outreach.

"Hospitals Weather A Stormy Session," IHA's 2009 legislative report, provided an easy-to-read summary of a complex legislative session. It's IHA's way of putting the General Assembly's session in perspective as we focus on the successful advocacy work done for our members.

e-updates

IHA's Web site, www.ihatoday.org, is a comprehensive, highly-respected legislative and educational resource, offering timely updates and advocacy alerts on state and federal issues, and reliable, fully-researched information on potential and enacted legislation, regulations, upcoming educational meetings and events. Links, resources and IHA staff contacts are available through the Web site to assist you.

webinars

Health care is ever-changing, and IHA offers a multitude of educational opportunities to help you stay current in your fields of expertise. Our IHA Management Institute offered six popular programs held at videoconferencing sites throughout the state. Four informative quality improvement programs for small and rural hospitals were held at multiple videoconferencing sites. Other educational programs included webinars on topics ranging from the use of restraints, to physician discipline, and IT contracting. About 225 hospital leaders attended our annual Quality Leadership Conference in May, focusing on performance measurements, public accountability, integrating quality into electronic health records, and pay for performance.

Member participation increased at several special events this year such as the Small and Rural Hospitals Constituency Section Annual Meeting, 2009 Volunteer Leadership Retreat, and our capstone event, IHA's Leadership Summit. "Forging Ahead: Doing our Best in Good Times and Bad" broke all previous records for attendance and received outstanding evaluations. It was the perfect opportunity for members to welcome Maryjane Wurth and say farewell to Ken Robbins.

participation

Business Solutions Designed for You

IHA's core service, advocacy, can't succeed unless we also give members the concrete tools and business services and infrastructure they need to make sound business decisions and enhance their cost-effectiveness, efficiency, and quality. IHA provides this through several subsidiaries that provide cost-effective management, consulting, and insurance services. IHA's Association Venture Corporation offers a portfolio of innovative solutions to strengthen the value of IHA membership while helping to secure IHA's financial future.

savings

More than 100 member hospitals participate in some way in IHA's insurance programs, whether as a part of our innovate risk pooling programs for medical malpractice and workers compensation coverage or through our expertise with claims management and risk consulting for self-insured hospitals. Many of our insurance products are owned and governed by member hospitals, so they receive the outstanding administrative functions provided by IHA along with control over and stability in their insurance premiums – and all the profits go back to them. For example, in 2009 the Illinois Compensation Trust, a risk pooling program for workers compensation, returned \$3.3 million dollars in refunds to members, and the Illinois Provider Trust, a risk pooling program for professional and general liability, paid a \$2.2 million dollar dividend to its membership. The Illinois Purchasing Collaborative (IPC) has 28 hospital members who reported average savings of 12.8% across a portfolio of 91 regional contracts in 2009. IPC members convene monthly to vote on contracts, share best practices, and discuss future supply chain initiatives. Members find the opportunity to network with their peers a particularly valuable component of the IPC.

risk pooling

As one IPC member said, "The IPC has been extremely valuable, especially with the current economic climate. We have realized significant savings primarily in commodity areas... I've been able to focus my time on physician preference items that require a unique approach at each of my facilities or on other organization projects. Another thing I most enjoy about the IPC is the networking opportunities. The input I've obtained from fellow members with similar size facilities and cultures has been invaluable."

value

What's Next for IHA and You?

A year like no other faces IHA and our members, with our biggest challenge being the state's deteriorating budget and revenue situation. Meanwhile national health care reform draws closer to reality, the number of uninsured continues to rise, H1N1 stresses hospitals' operations and staff, and an early February Illinois primary impacts how our legislators vote in Springfield. As the Kaiser Commission on Medicaid and the Uninsured reported, many states "may be pressured to consider previously unthinkable [Medicaid] eligibility and benefit reductions."

In addition, across Illinois we have our own distinct problems: a state budget that is billions of dollars in the red with growing pressure to cut spending and an unyielding refusal to raise income taxes; continually late Medicaid quarterly payments from the state; inadequately-funded mental health and nursing home systems with an ever-increasing negative impact on hospitals; and state revenues lagging far behind projections, adding further to the budget deficit. **problems**

As Illinois' budget problems worsen, we will see more proposals to control Medicaid spending. We'll also face more challenges on the charity care and nurse ratio fronts, while keeping up with caring for patients from the H1N1 pandemic surge. We will need to be diligent with our visibility, focus and attention to the implications of national health reform for hospitals and the state. We will advocate for your interests in Washington, D.C., along with our national partner, the American Hospital Association. We will analyze and help shape reform efforts at the state level.

As the challenges grow, you may be assured that IHA will intensify its advocacy efforts. Our top priority will be preserving the adequacy and timeliness of Medicaid payments. We'll pressure the state and the Illinois Congressional Delegation for a permanent increase in the state's FMAP Medicaid matching rate. We'll keep reminding our legislators that a substantial majority of Medicaid payments to hospitals come from the Hospital Assessment Program and other federal funds, not from state funds. We'll work with Governor Quinn and the General Assembly on potential solutions to relieve pressures on the state budget – solutions that will not harm hospitals. And members will see IHA with a stronger, more prominent presence in Washington, D.C. **partner**

We will be launching our new public advocacy web site, *Protect Illinois Health Care*, designed to mobilize consumers about the health care issues that affect them and give them the tools to contact their legislators on issues that matter to hospitals. Other plans include the continued development of our Quality Care Institute as an umbrella organization for IHA activities related to quality, including the Patient Safety Organization and a "Illinois Hospitals Caring for You" consumer web site that will offer comprehensive, useful information on the services provided by our hospitals.

Whatever challenges lie ahead, it's more essential than ever that we enter into constructive dialogue with one another and that we are open to differing points of view. We must translate that diversity into a vision for better health care in Illinois and speak with an unwavering voice on your behalf. We are proud to be partners with a strong, well-informed and committed membership. It's our most valuable asset for success.

success

Mark Your Calendar

February 2, 2010

Illinois Primary Elections for Governor,
Other Constitutional Officers,
U.S. Senator, State Senators and State Representatives

June 22-24, 2010

IHA Small & Rural Hospital Constituency Section Annual Meeting
Crowne Plaza Hotel, Springfield

For more information, call 217-541-1163

September 23-24, 2010

IHA Leadership Summit and Annual Meeting
Eagle Ridge Resort & Spa, Galena

For more information, call 630-276-5440

November 2, 2010

Illinois General Elections

Date to be announced

IHA Quality Conference

For more information, call 630-276-5588

♦ Abraham Lincoln Memorial Hospital ♦ Adventist Bolingbrook Hospital ♦ Adventist GlenOaks Hospital ♦ Adventist Hinsdale Hospital ♦
 Adventist La Grange Memorial Hospital ♦ Adventist Midwest Health ♦ Advocate Bethany Hospital ♦ Advocate Christ Medical Center ♦ Advocate
 Condell Medical Center ♦ Advocate Good Samaritan Hospital ♦ Advocate Good Shepherd Hospital ♦ Advocate Health Care ♦ Advocate Illinois
 Masonic Medical Center ♦ Advocate Lutheran General Hospital ♦ Advocate South Suburban Hospital ♦ Advocate Trinity Hospital ♦ Alexian
 Brothers Behavioral Health Hospital ♦ Alexian Brothers Hospital Network ♦ Alexian Brothers Medical Center ♦ Alton Memorial Hospital ♦
 Anderson Hospital ♦ Blessing Health System ♦ Blessing Hospital ♦ BroMenn Healthcare System ♦ BroMenn Regional Medical Center ♦ Carle
 Foundation Hospital ♦ Carlinville Area Hospital ♦ Centegra Health System ♦ Centegra Hospital-McHenry ♦ Centegra Hospital-Woodstock ♦
 Central DuPage Hospital ♦ CGH Medical Center ♦ Chicago Lakeshore Hospital ♦ Children's Memorial Hospital ♦ Clay County Hospital
 ♦ Community Health Systems ♦ Community Memorial Hospital ♦ Cook County Health & Hospitals System ♦ Crawford Memorial Hospital ♦
 Crossroads Community Hospital ♦ Decatur Memorial Hospital ♦ Delnor Hospital ♦ Dr. John Warner Hospital ♦ Edward Hospital ♦ Edward
 Hospital & Health Services ♦ Elmhurst Memorial Hospital ♦ Eureka Community Hospital ♦ Evanston Hospital ♦ Fairfield Memorial Hospital
 ♦ Fayette County Hospital & Long Term Care ♦ Ferrell Hospital ♦ FHN Memorial Hospital ♦ Franklin Hospital ♦ Galesburg Cottage Hospital ♦
 Gateway Regional Medical Center ♦ Genesis Medical Center, Illini Campus ♦ Gibson Area Hospital & Health Services ♦ Glenbrook Hospital
 ♦ Good Samaritan Regional Health Center ♦ Gottlieb Memorial Hospital ♦ Graham Hospital ♦ Greater Peoria Speciality Hospital ♦ Greenville
 Regional Hospital ♦ Hamilton Memorial Hospital District ♦ Hammond-Henry Hospital ♦ Hardin County General Hospital ♦ Harrisburg Medical
 Center ♦ Heartland Regional Medical Center ♦ Herrin Hospital ♦ Highland Park Hospital ♦ Hillsboro Area Hospital ♦ Holy Cross Hospital ♦
 Holy Family Medical Center ♦ Hoopston Regional Health Center ♦ Hospital Sisters Health System ♦ Human Service Center ♦ Illini Community
 Hospital ♦ Illinois Valley Community Hospital ♦ Ingalls Memorial Hospital ♦ Institute of Physical Medicine & Rehabilitation ♦ Iroquois Memorial
 Hospital & Resident Home ♦ Jersey Community Hospital ♦ John and Mary E. Kirby Hospital ♦ John H. Stroger, Jr. Hospital of Cook County ♦
 Katherine Shaw Bethea Hospital ♦ Kewanee Hospital ♦ Kindred Chicago Central Hospital ♦ Kindred Chicago Lakeshore ♦ Kindred Hospital
 Chicago North ♦ Kindred Hospital Chicago Northlake ♦ Kindred Hospital-Sycamore ♦ Kindred Hospitals of Illinois ♦ KishHealth System ♦
 Kishwaukee Community Hospital ♦ La Rabida Children's Hospital ♦ Lake Forest Hospital ♦ Lawrence County Memorial Hospital ♦ Lincoln Prairie
 Behavioral Health Center ♦ Linden Oaks at Edward ♦ Loretto Hospital ♦ Louis A. Weiss Memorial Hospital ♦ Loyola University Health System
 ♦ Loyola University Medical Center ♦ MacNeal Hospital ♦ Marianjoy Rehabilitation Hospital & Clinics ♦ Marshall Browning Hospital ♦ Maryville
 Scott Nolan Center ♦ Mason District Hospital ♦ Massac Memorial Hospital ♦ McDonough District Hospital ♦ Memorial Health System ♦
 Memorial Hospital, Belleville ♦ Memorial Hospital, Carthage ♦ Memorial Hospital, Chester ♦ Memorial Hospital of Carbondale ♦ Memorial
 Medical Center ♦ Mendota Community Hospital ♦ Mercer County Hospital ♦ Mercy Harvard Hospital ♦ Methodist Medical Center of Illinois
 ♦ MetroSouth Medical Center ♦ Midwest Medical Center ♦ Morris Hospital & Healthcare Centers ♦ Morrison Community Hospital ♦ Mount
 Sinai Hospital ♦ NorthShore Univeristy HealthSystem ♦ Northwest Community Hospital ♦ Northwestern Memorial HealthCare ♦ Norwegian
 American Hospital ♦ Oak Forest Hospital of Cook County ♦ OSF Healthcare System ♦ OSF Holy Family Medical Center ♦ OSF Saint Anthony
 Medical Center ♦ OSF Saint Francis Medical Center ♦ OSF Saint James-John W.Albrecht Medical Center ♦ OSF St. Joseph Medical Center ♦ OSF
 St. Mary Medical Center ♦ Ottawa Regional Hospital & Healthcare Center ♦ Our Lady of the Resurrection Medical Center ♦ Palos Community
 Hospital ♦ Pana Community Hospital ♦ Paris Community Hospital ♦ Passavant Area Hospital ♦ The Pavilion ♦ Pekin Hospital ♦ Perry Memorial
 Hospital ♦ Pinckneyville Community Hospital ♦ Proctor Hospital ♦ Provena Covenant Medical Center ♦ Provena Health ♦ Provena Mercy
 Medical Center ♦ Provena Saint Joseph Hospital ♦ Provena Saint Joseph Medical Center ♦ Provena St. Mary's Hospital ♦ Provena United
 Samaritans Medical Center ♦ Provident Hospital of Cook County ♦ Red Bud Regional Hospital ♦ Rehabilitation Institute of Chicago
 ♦ Resurrection Health Care ♦ Resurrection Medical Center ♦ Richland Memorial Hospital ♦ Riveredge Hospital ♦ Riverside Medical Center ♦
 RML Specialty Hospital ♦ Rochelle Community Hospital ♦ Rockford Memorial Hospital ♦ Roseland Community Hospital ♦ Rush Oak Park
 Hospital ♦ Rush System for Health ♦ Rush University Medical Center ♦ Rush-Copley Medical Center ♦ Sacred Heart Hospital ♦ Saint Anthony
 Hospital ♦ Saint Anthony's Health System ♦ Saint Francis Hospital ♦ Saint Joseph Hospital ♦ Saints Mary & Elizabeth Medical Center/Saint
 Elizabeth ♦ Saints Mary & Elizabeth Medical Center/Saint Mary ♦ Salem Township Hospital ♦ Sarah Bush Lincoln Health Center ♦ Sarah D.
 Culbertson Memorial Hospital ♦ Schwab Rehabilitation Hospital ♦ Shelby Memorial Hospital ♦ Sherman Hospital ♦ Shriners Hospitals for
 Children-Chicago ♦ Silver Cross Hospital ♦ Sinai Health System ♦ Skokie Hospital ♦ Southern Illinois Healthcare ♦ Sparta Community Hospital
 ♦ St. Alexius Medical Center ♦ St. Anthony's Memorial Hospital ♦ St. Elizabeth's Hospital ♦ St. Francis Hospital ♦ St. James Hospital & Health
 Centers/Chicago Heights ♦ St. James Hospital & Health Centers/Olympia Fields ♦ St. John's Hospital ♦ St. Joseph Memorial Hospital ♦ St. Joseph's
 Hospital, Breese ♦ St. Joseph's Hospital, Highland ♦ St. Margaret's Health ♦ St. Mary's Good Samaritan, Inc. ♦ St. Mary's Hospital, Centralia ♦
 St. Mary's Hospital, Decatur ♦ St. Mary's Hospital, Streator ♦ Streamwood Behavioral Health Hospital ♦ Swedish Covenant Hospital
 ♦ SwedishAmerican Hospital ♦ Taylorville Memorial Hospital ♦ Thomas H. Boyd Memorial Hospital ♦ Thorek Memorial Hospital ♦ Touchette
 and Kenneth Hall Regional Hospitals ♦ Trinity Regional Health System ♦ Union County Hospital ♦ University of Chicago Medical Center ♦
 University of Illinois Medical Center at Chicago ♦ ValleyWest Community Hospital ♦ Van Matre HealthSouth Rehabilitation Hospital ♦ Vista Medical
 Center East ♦ Vista Medical Center West ♦ Wabash General Hospital ♦ Washington County Hospital ♦ West Suburban Medical Center ♦
 Westlake Hospital ♦

Illinois Hospital Association