

Filled With
OUTRAGEOUS
hope

For I know the plans I have for you," declares the LORD, "plans to prosper you and not to harm you, plans to give you hope and a future. - Jeremiah 29:11

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Mission

We serve together in Trinity Health,
in the spirit of the Gospel,
to heal body, mind and spirit,
to improve the health of our communities,
and to steward the resources entrusted to us.

Core Values

Respect
Social Justice
Compassion
Care of the Poor and Underserved
Excellence

Vision

Inspired by our Catholic faith tradition, Trinity Health will be distinguished by an unrelenting focus on clinical and service outcomes as we seek to create excellence in the care experience. Trinity Health will become the most trusted health partner for life.

Guiding Behaviors

We support each other in serving our patients and communities
We communicate openly, honestly, respectfully and directly
We are fully present
We are all accountable
We trust and assume goodness in intentions
We are continuous learners

Filled With

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For Trinity Health, 2011 was a year in which it was necessary to take action to prepare for shifts in the national health care landscape. Throughout the year, we moved decisively and nimbly in our efforts to prepare for the move from volume to value through carefully crafted strategy, while still maintaining consistently strong financial and clinical results.

While we at Trinity Health understand the general direction in which health care is moving, it is abundantly clear that no one — from governmental agencies and insurers to hospitals and clinicians — knows for certain what the future of health care holds. However, at Trinity Health, we are fortunate to have a dedicated path established by our Mission and Founding Principles, which stand the test of time and have been purposely and diligently integrated into who we are. Our strong Catholic foundation, provided by our founding congregations, enables us to bear the relentless forces of change now upon us. It is why, despite uncertainty, we are able to look toward the future “Filled with Outrageous Hope.”

Trinity Health’s foundation provides us with our Mission of serving people who are poor and underserved and improving the health of our communities. This clarity of purpose provides our stability and comfort. Our Mission and Founding Principles define us and create our safe harbor. They are at the root of everything we do, including some of our most significant initiatives over the last year:

- The decision to consolidate with Loyola University Health System in greater Chicago
- Target 20/15, our comprehensive effort to assess and prepare for the impact of health care reform
- Our never-ending pursuit of excellence in our patient-care experience and the quality of care we provide
- The continuing focus on meeting the ever-increasing health care needs of our communities
- A concerted effort to leverage our strength as a Unified Enterprise Ministry® by creating centralized, shared services through Unified Service Organizations

So while Trinity Health, like all other health systems across the country, will face tumultuous change and uncertainty over the next several years, we look to a bright future “Filled with Outrageous Hope.” This annual report tells the stories of the extraordinary people of Trinity Health, who bring our Mission and Founding Principles to life every day through compassion for those in need, service to our communities and excellence in care.

Mary Mollison CSA

Mary Mollison, CSA
Chair, Trinity Health Board of Directors

Joseph R. Swedish

Joseph R. Swedish
President and CEO
Trinity Health



“She can enjoy
her life more
peacefully.”

One Tool, One Word,
One Smile at a Time

Red-haired, pigtailed Aryan, 5, loves her iPad. Her mom, Sally, does, too.

The iPad, something the family could never have afforded without support, was provided by therapists at the Mercy Service Club Autism Center, part of Mercy Medical Center – Dubuque (Iowa), as one component of a therapy plan helping Aryan learn to speak. Speech pathologist Laura Keehner recommended the tool to Aryan's mother, whose fondest wish is for her daughter to be able to communicate better.

Aryan, only recently diagnosed with autism, used the prescribed therapies and rapidly went from the use of less than a dozen words to nearly 20 words to express herself. And her life changed in many other ways, too.

Often fidgety, Aryan can now sit for a half hour without pacing and is learning to take turns with the iPad without becoming frustrated. These rudimentary social skills allow her to function in the world, when applied to real life situations at home, school and in the community.

"I thought it was my fault she was not talking like other kids," said Sally. "We just didn't know how to address her behavior and language issues, though. We needed help."

Staff at the Autism Center provided Aryan and her mom with a diagnostic evaluation, and with speech, occupational and behavioral therapy, among other support, in addition to the iPad technology.

Sally said she and Aryan have received more beneficial help in the past few months at the Autism Center than they had the entire first five years of Aryan's life.

The Centers for Disease Control and Prevention, in Atlanta, indicates about one in 110 children are diagnosed annually with autism or an autism spectrum disorder.

Like many autistic children, Aryan's red flags included a lack of — and delay in — language ability and poor eye contact, as well as challenging social interactions with her mother and others.

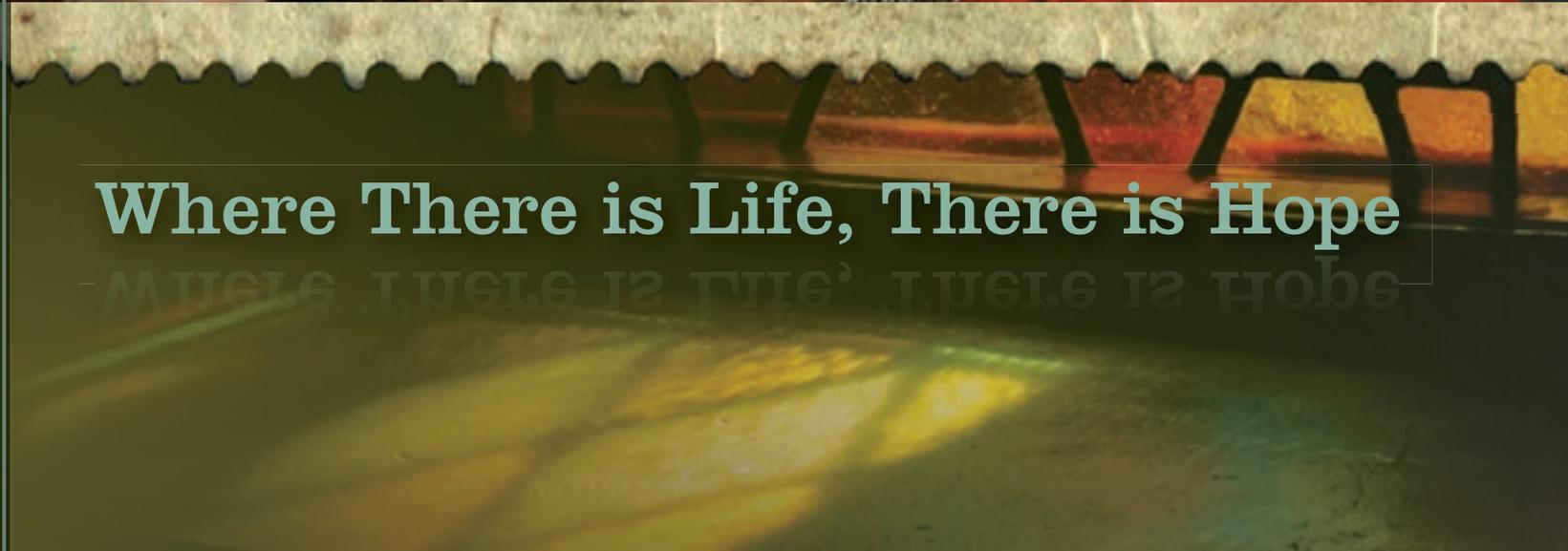
"Before we came to Mercy, she would bite, pull her hair out, scream, punch me or other people, and throw herself on the ground. It was really difficult for all of us. Now she is able to look at books, play games on the iPad, take turns and use tools like a body sock to help calm herself when she is agitated," said Sally. "And I've learned how to help calm her, too, so she can enjoy her life more peacefully."

According to Sally, the thrice-weekly half-hour visits to the center also provide a source of constancy in their lives. In a world of uncertainty, it is one thing they can count on.

"Aryan does best with a routine and the Center has helped provide that," she said. "We are so excited about her going to a special needs kindergarten program this fall and we are grateful to the Autism Center. She wouldn't be doing as well as she has been without them."



“They did more than just help with our health. They stimulated our morale.”



Where There is Life, There is Hope

— WHERE THERE IS LIFE, THERE IS HOPE

When he looks back, J.C. is faced with moments of regret.

"Once, I had it all — three successful businesses and a nice home and car," he reflected. "But because of my drug addictions and my...criminal status, I lost everything."

The downward spiral of his life eventually led J.C. to a Columbus, Ohio, shelter where he lived for 11 months. Then the time came when he had to move on. With no other options, J.C. joined the ranks of the homeless who live in one of the many camps that dot the woods around Columbus, Ohio. That's where Mount Carmel's Street Medicine team found him. Every week, a four-person team from Mount Carmel's Street Medicine program trudges through the fields and woods to reach the camps. As they approach, they call out, "Mount Carmel Outreach!"

"Street Medicine gives us an opportunity to treat those who can't get to our mobile clinic," said Jack O'Handley, MD, Medical Director. "This is a chance to get the people in the camps hooked up with primary care or outreach sites."

"Mount Carmel hospital is a household name among the homeless," J.C. said. "If it wasn't for them and others, we wouldn't have a map to help us get connected."

Mostly, the Street Medicine team treats common ailments such as toothaches, colds, high blood pressure and diabetes.

"We try to get to them before their health problems manifest into something bigger and they end up in an ICU or the ER," said Brian Pierson, Director.

J.C. says it was help he needed desperately. Life was never easy in the camps.

"It was sometimes miserable," he recalled. "We would suffocate in the heat. You had to walk into town to haul water and ice. You always thought about the weather — were the tarps tied down enough to withstand a strong wind or storm? Mount Carmel made living there a little less stressful, just knowing that someone cared. But they did more than just help with our health. They stimulated our morale."

The medical piece of Street Medicine is almost secondary, according to Patient Advocate Ken Andrews. "Where we really help people is with their mental and spiritual health, in hooking them up with a housing coordinator and social services," he said.

J.C. wanted out of the camp for a long time, but found obstacles where he didn't expect them.

"I needed a form filled out about my health to prove I qualified, but I couldn't get my doctor to do it," he said. "One of the nurses took care of it for me. She said, 'No one should be homeless if they really want a place to live.'"

At 54-years-old, J.C. is four years sober and suffers from several chronic health issues including mental illness. These days, he has an apartment of his own and is on the Citizens Advisory Council of the community shelter board.

"The council opens the door of knowledge for me to share what I've learned with others," J.C. said. "What I got was given to me freely and I want to give back."

"You never give up on people," O'Handley said. "No matter how bad off they seem, there's always hope."



“It’s keeping me alive
physically and mentally.
I’m still agile and that
makes me feel good.”



**Exuberant, Energetic,
More Healthful Elders**

MORE HEALTHFUL ELDER
EXUBERANT, ENERGETIC

With days full of gardening, shopping, caring for her home and driving herself from place to place visiting with family and friends, Bernice, 81, lives a life as busy and active as someone half her age.

One may think she's found the fountain of youth, but her secret is staying in shape through Holy Cross Hospital's Senior Fit program.

This free exercise program is offered through a partnership between Holy Cross Hospital, Kaiser Permanente and their community partners. It has been helping adults age 55 and older in Silver Spring, Md., and surrounding communities, improve their overall health, manage chronic disease and maintain their independence since 1995. Bernice, a lifelong fitness enthusiast, has been a participant in the program for the last seven years.

"I was exercising at the YMCA and then I heard about Senior Fit and the location and price were right. This program is much better than anything I've tried," she said.

Senior Fit offers a 45-minute workout for older adults of varying physical abilities. The program has grown to 61 classes weekly at 21 locations with 2,852 participants who may take as many as six classes per week or as few as one. Senior Fit has been so successful at Holy Cross Hospital that several other Trinity Health Ministry Organizations have modeled it for the seniors who live in their service areas. Bernice, a two-time gold medalist at the Maryland Senior Olympics, attends classes at the Bauer Drive Community Center in Rockville, Md., three times a week under the instruction of Keith Federman. She said the program has made an incredible impact on her life.

"It's keeping me alive physically and mentally. I'm still agile and that makes me feel good. Exercising keeps me thinking positively and helps me get a good night's sleep. Also, Keith is an exceptional teacher and role model. He's wonderful to us and genuinely cares," she said.

Keith said the feeling is mutual.

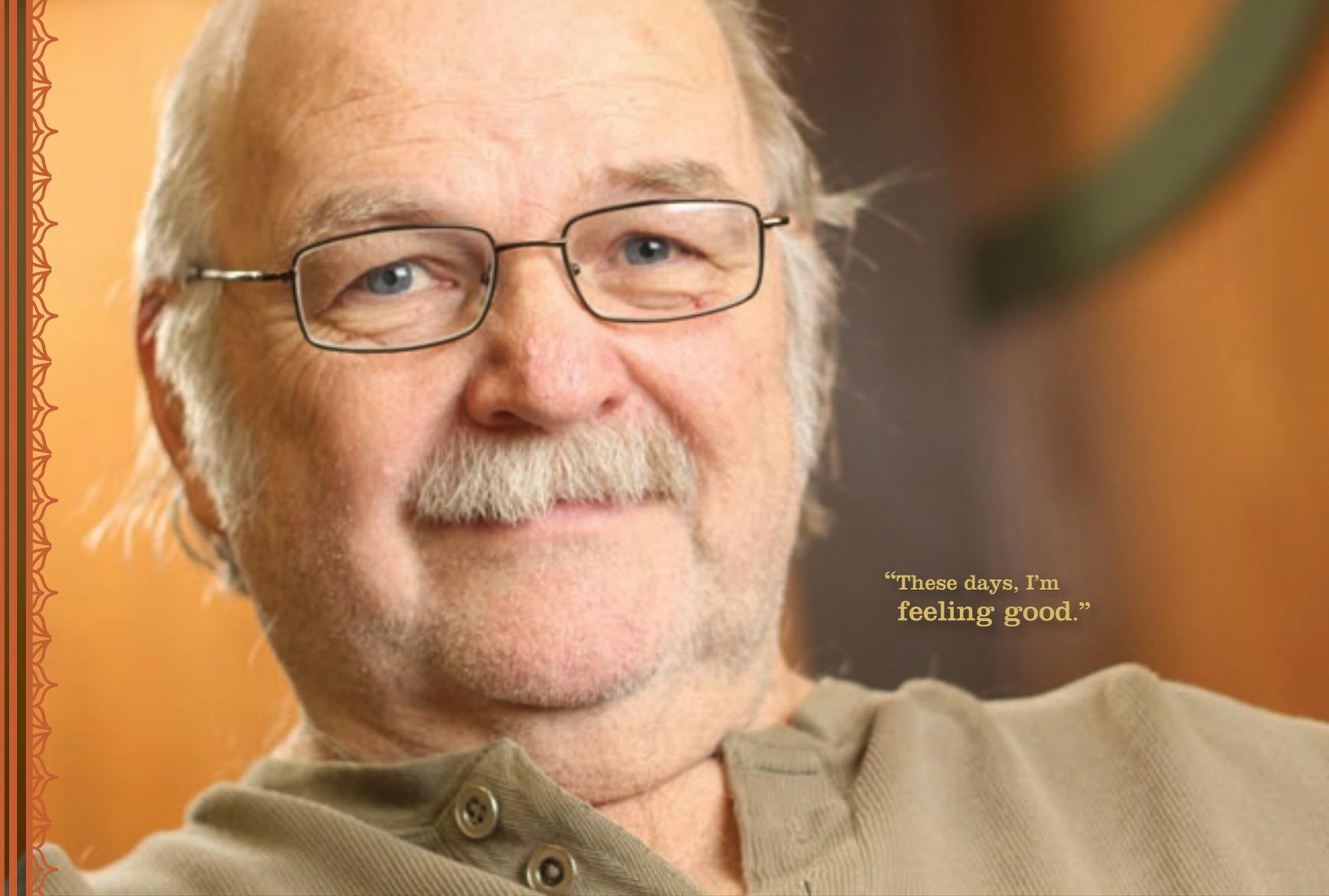
"We have a mutual admiration society. I love being part of the group and contributing to people's well-being. Teaching these classes is one of the most favorite aspects of my life," he said.

Senior Fit participants often form strong friendships and social ties. In Keith's classes, he and some members exchange healthy recipes and go out for coffee after class. Some trade knitting patterns. Those who drive take others who need a ride to doctor appointments and many go on outings together. They care for one another like family.

"It's a splendid class and then there is the fact that you make all these friends and everyone looks out for each other. It's the greatest thing seniors have in the area. We're very lucky to have Holy Cross doing this for us," Bernice said.

Although the benefits of regular exercise are immeasurable, one of the major barriers for many older adults is cost. Senior Fit provides a resource that makes it possible for those in the Holy Cross community to live healthier lives.

"A lot of people wouldn't be able to afford to pay for an exercise class," said Bernice. "Many seniors are on a fixed income and don't have the money to do it, so they don't exercise. The fact that it's free is the reason people are able to come. We're so fortunate to have it."



“These days, I’m
feeling good.”

Traveling Life’s Roads

TRAVELING LIFE'S ROADS



For 22 years, the road was his home.

Driving thousands of miles through 48 states hauling the nation's goods, he helped American commerce move steadily forward. He handled the big rigs with grace and skill, each one up to 48-feet long and weighing as much as 40 tons. Big numbers. In fact, numbers were the defining minutia of his career — miles traveled, gallons of diesel fuel consumed, gross weight of the rig and freight. Then one day, a rather unexpected number stopped him in his tracks.

Danny left Michigan for Minnesota in the fall of 2010 to take a new trucking job. He was nearing retirement but wasn't ready to slow down yet. He went through the usual formalities — filling out paperwork, providing references and taking a physical, and felt confident. But that was as far as he would go. A blood pressure check showed his systolic number at well over 200 — too high for DOT regulations, too high to get hired.

"I knew I had high blood pressure, but I didn't know it was that high," Danny said, adding that he was surprised the medication he was using did not appear to be working. "This was the first time my health had kept me from a job."

With this new job halted before it had even begun, with the economy in disarray, and with other life circumstances weighing in, Danny found himself suddenly facing homelessness. When the bottom falls out of your world, all you can do is hope that someone is compassionate enough to catch you. Returning to Michigan's west coast, Danny ended up at the Men's Rescue Mission, where staff from the Muskegon Community Health Project (MCHP) found him.

MCHP offers many avenues of assistance and they quickly helped Danny fill out a financial assistance program application. They connected him with a primary care physician. They got him applications for food stamps and pharmaceutical assistance. They coordinated referrals for housing and mental health services. They helped him enroll in the Low-Income Pharmacy Cares program and provided him with a blood pressure monitor so he could check his health daily. MCHP staff also assisted with a SOAR application (expedited social security/social security disability for chronically ill and homeless individuals) as well as Medicare and Medicaid forms. And things began to look up again, however briefly.

One morning, Danny's health took a turn for the worse.

"I was in a Bible class and suddenly I was shaking and couldn't breathe," he said. "When I went back to the mission, I slept for two-and-a-half days straight. I didn't eat."

At Mercy Health Partners, where he spent a week in the hospital, he learned he had suffered a heart attack and would now require even more costly medications. Again, MCHP stepped in to ensure that he would have what he needs. These days, "I'm feeling good," said Danny, thanking MCHP for his second and third chances. With their help, he has come a long way from those desperate and frightening moments. He is preparing to move into his own apartment soon and end his stint with homelessness.

With his blood pressure, heart health and diabetes now managed, other health issues, including the slow failure of his only kidney, are preventing him from going back to work. He faces this reality with faith, knowing there is a place he can go to find what he really needs: people who care, someone to catch him if he falls, a hope to bring with him while traveling the rest of life's roads.



“I found support for my needs, better health and friendship, as well. It was life affirming and more than welcome.”



Getting Better All the Time

After 36 sessions of pulmonary rehabilitation at Mercy Hospital Cadillac, Nancy feels a lot better.

She has learned to use her inhaler properly. She has learned proper breathing techniques. And, she has learned she is not alone.

“Being around other people with the same problem helps you from being depressed,” she said. “It gives you a different attitude, a more positive attitude toward life.”

And that was just what she needed.

Nancy, 68, couldn't afford to drive from Tustin, Mich., to Traverse City, Mich., three times a week for the pulmonary rehabilitation she needed to treat her Chronic Obstructive Pulmonary Disorder (COPD). Her financial reality led her to try to get along without rehab — and not following through with her doctor's recommendation worried her.

Then she learned that Mercy Hospital Cadillac, only 15 miles from her home, was starting a pulmonary rehabilitation program. Medicare, however, would only cover a portion of the cost, and she couldn't afford the rest. Fortunately, for Nancy, the hospital had a solution, an assistance program making some \$757,000 available in subsidies to low-income area residents.

COPD has been recognized as the third leading cause of death in the United States. The incurable disease affects more women than men and is marked by symptoms that can include severe shortness of breath, coughing, tightening of the chest and wheezing. It primarily refers to an obstruction in the lungs caused by either chronic asthmatic bronchitis or emphysema. Many people with COPD have both.

Nancy was terrified about what COPD and its challenges meant for her, but her qualification for the program in Cadillac — started in August 2010 — changed her life and her health.

“We take our Mission seriously, so we do what we can to make sure people have access to the care they need,” said Bob Doering, Director of Mission Services.

“I think it's wonderful that the hospital helps people who can't afford it,” said Nancy. “When you don't have insurance, you end up not taking care of your health.”

After just 18 weeks of rehab, Nancy was stronger, breathing better, and motivated to continue exercising to help delay further deterioration of her lungs. She found that her time at Mercy Hospital helped her make friends with similar lifestyles and health issues and that they could support each other.

“This was invaluable to me. The instructors were very friendly and uplifting and helped me along gently with my health goals,” she said. “When I went to Mercy Hospital, I found support for my needs, better health and friendship, as well. It was life affirming and more than welcome; it was needed.”

“Filled with Outrageous Hope”

Trinity Health’s Mission and Vision are steeped in the legacies of its founding congregations — the Sisters of the Holy Cross and Sisters of Mercy — and in the leadership of its sponsoring entity, Catholic Health Ministries (CHM). When, in 2006, leaders at CHM praised Trinity Health for its advocacy work helping America “Find a Way” to health care reform and for its continuous engagement in finding answers to difficult challenges, that organization also made a commitment. By promising to participate with Trinity Health to build healing cultures of hope that are centered on the teachings of Jesus Christ, CHM developed a new Vision statement — one that set the stage for our continued journey together:

“Filled with outrageous hope, we are prophetic in strengthening the healing ministry of Jesus. We commit to integrity of our proclamation and practice, calling others to join us in being a community of committed persons seeking the common good and engaging in ongoing formation.”

Half a decade later, Trinity Health remains inextricably linked to that commitment and to their awe-inspiring belief in our strength as a system — as a community of committed persons working together, in Trinity Health, to heal body, mind and spirit. **This hope is our anchor.**

hope

for Our Communities
and Our Ministry

The **Trinity Health Mission** instructs, inspires and requires us to improve the health of our communities. It drives our financial stewardship efforts, awakens our compassion, reminds us of our Guiding Behaviors and guides us to serve.

Community Benefit Ministry

Responding to the shifting needs of people and communities facing changing and challenging times, Trinity Health’s Community Benefit Ministry addresses the needs of all segments of society, particularly those who are poor and underserved. In FY11, our dedication to the wellness of our communities through programs, services and a commitment to excellence grew 6 percent, continuing our momentum and benefiting many.

Through programs that addressed both nationwide and community challenges, our total Community Benefits Ministry spending in FY11 was \$453 million, up from over \$440 million in FY10, and spending on Charity Care increased for the fifth consecutive year.

Trinity Health’s spending on charity care has increased steadily from \$77.9 million in FY06, to nearly \$136.5 million, including an increase of about 10 percent from FY10. This crucial increase helped our Ministry Organizations address the economic pressures and persistently high levels of unemployment, underemployment and poverty their communities faced during the year. Together and individually, our Ministry Organizations made investments to expand programs that:

- Integrate care for chronic conditions, like diabetes and heart disease
- Assist and screen patients and community members for financial assistance and insurance eligibility
- Increase the amount of pharmacy assistance available to those who, otherwise, would not be able to access their prescribed medications
- Help close the gap on disparities in care
- Identify unmet health needs and community priorities

Equity In Care

With the goal of ensuring that every person we serve receives the same high-quality care as any other, Trinity Health's Ministry Organizations:

- Participated in a system-wide effort to collect self-identified patient information on race, ethnicity and language preference
- Adopted a plan to address possible inequities in care
- Trained their registration personnel on asking patients their race and language preferences
- Conducted studies to examine falls, pressure ulcers and pain medication by race and language for inpatients

Advocacy Efforts

Trinity Health's federal and state advocacy campaign, Lead the Way, kicked off in FY11 to build support for transformative health care policy by educating targeted audiences and inspiring associate engagement.

The campaign, focusing on policy change that expands access to both health coverage and to high-value, coordinated care, addresses the need to:

- Expand patient access to health services
- Increase coordination between providers
- Invest in our health care workforce

Along with previous advocacy efforts, Lead the Way, which included more than 70 Capitol Hill visits during our 2011 Advocacy Action Days program, has established Trinity Health as a trusted health care leader sought by policymakers for insight and guidance. It also deeply connects the business of our work with our Catholic identity, our compassion and our Mission.

Growing Our Ministry

Trinity Health expanded its presence in the Midwest, as well as its strategic national position through a consolidation with Loyola University Health System (LUHS) at the close of the fiscal year. LUHS, a leading academic medical center with a multidisciplinary focus on patient care and medical research and education, is a strong, Catholic health care system very well suited as a Trinity Health member.

LUHS has served its community for 41 years, employs more than 6,800 people and has 22 primary and specialty care facilities covering three counties. Loyola University Hospital lies at the heart of the university's 61-acre Maywood medical campus — 13 miles west of Chicago's Loop. It is a 570-licensed bed facility that houses a Level 1 Trauma Center, a Burn Center and the Ronald McDonald® Children's Hospital of Loyola University Medical Center.

Before the consolidation, LUHS was a wholly owned subsidiary of Loyola University Chicago. With Trinity Health, the medical center will continue to serve as a training ground for students at Loyola University Chicago's Stritch School of Medicine and its Marcella Niehoff School of Nursing — to the significant benefit of the UEM.

We look forward, together, to strengthening Catholic health care and Catholic medical research and education.

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for Our Patients

For patients to find hope in the health care they receive, they must also have confidence in — and place trust in — the **clinical quality and patient safety** offered in the hospitals that treat them.

Trinity Health's Unified Clinical Organization (UCO), is part of a greater initiative to integrate knowledge and services throughout the UEM. The UCO brings clinical teams together in collaboration, further enhancing our ability to deliver excellence in care. In a very short time, and by partnering with clinical leaders at Ministry Organizations across Trinity Health, the UCO has reported significant strides in clinical improvements.

Clinical leaders joined together to form major collaboratives that provided a laser focus on clinical improvements and a heartfelt dedication toward addressing the multiple issues critical to creating a culture of safety for all Trinity Health patients.

For example, the Perinatal Patient Safety Initiative reduced elective deliveries before 39 weeks gestation from nearly 17 percent two years ago to 1.9 percent this year. Work by the Sepsis Collaborative saved 38 lives and more than \$3.5 million in the first five months of its inception.

Our work is being recognized by others, too. As part of the Perioperative Services Initiative, Trinity Health received the 2011 Clinical Excellence award by the HealthTrust Purchasing Group for a pilot project called the Sponge ACCOUNTing System. It improves patient safety in the operating room.

Whether offering a structured protocol to ward off the life-threatening condition of sepsis, assuring that patients come in, receive care and go home from the hospital with the correct medications for their condition, creating an environment where infant and mother receive the finest possible care, or focusing on the elimination of errors in the operating room, UCO collaboratives protect and enhance patient care at Trinity Health.

We also worked to improve care and quality of life for seniors and for those needing care at home. In FY11, Trinity Home Health Services implemented its Transitional Care program, designed to help patients with chronic disease maximize their health potential. The patient is at the center of the plan of care, which stresses management of their chronic disease(s) and early intervention in order to prevent re-hospitalization and complications from chronic disease while maximizing self care and quality of life in the home setting.

With a pledge of improving care for seniors, Trinity Senior Living Communities offers independent and assisted living apartments, nursing care, memory care and rehabilitation services. In FY11, the organization made great strides in training associates and implementing the Sanctuary™ Model of care at each of its 32 communities in Indiana, Michigan, Maryland and Iowa. Each resident and rehab guest is honored, respected and empowered to make decisions affecting their lives and care. In addition, the organization has made a commitment to senior health and wellness, as is seen in the building of four new senior-focused rehabilitation and wellness centers.

Trinity Health also made great strides with its Senior Emergency Department (Senior ER) initiative — strides that position it to become a national leader in the provision of emergency medical care for seniors. The Senior ER program is a proactive response to the aging of America, one of society's greatest — and growing — needs. It focuses on developing a senior-friendly Emergency Room culture, changing the ER's physical environment to promote safety, communication and comfort, and on operational changes to sustain the innovation. The result is a gentler, patient-centered experience for seniors.

After a positive response from patients, community and media to the first-in-the-nation Senior Emergency Department at Holy Cross Hospital in Silver Spring, Md., Saint Joseph Mercy Health System (SJMHS), in Southeast Michigan, embarked on a journey to implement eight of its own Senior ERs in FY11.

That journey included helping develop a system approach to creating an evidence-based model for further replication. Two additional Senior ERs were implemented across Trinity Health using this model — one at Mercy Medical Center in Dubuque, Iowa, and another at Mercy Hospital Grayling, in Grayling, Mich.

As early health information technology (IT) adopters, Trinity Health Ministry Organizations have long known the value of electronic health records (EHRs) in improving patient outcomes. In FY11, our Genesis EHR system boasted nearly nine million individual patient records and our 10-year journey with Genesis had enabled us to prepare our enterprise for a significant series of beneficial accomplishments to take place between now and 2014.

Trinity Health's journey to implement electronic health records and leverage their power to deliver safer and more effective care continued strongly. During FY11, Trinity Health initiated a centrally managed process for our attestation to the federal government as meaningful users of health IT, diligently combining the power of EHRs with the expertise of our clinicians for our patients' gain. As a result of that work, 26 of our hospitals were fully prepared to qualify for Stage 1 Meaningful Use incentives. These incentives were established by the American Reinvestment and Recovery Act to reward medical providers who successfully demonstrate meaningful use of EHRs in ways that improve the quality, safety and effectiveness of patient-centered care.

Our readiness was significant, demonstrating that Trinity Health uses EHRs to deliver better and safer care across the continuum, based on evidence-based practice and leading practices. Perhaps more importantly, though, it also demonstrated our commitment to working together, as a system, to deliver the highest quality, safest, most efficient care, for every patient, every time, at every Trinity Health location. And that, more than anything else, offers us unbridled hope for our patients.



...working together, as a system, to deliver the highest quality, safest, most efficient care, for every patient, every time, at every Trinity Health location.

hope

for Our Physicians

The significant and imminent transformation of America's health care system places our physicians in a unique position. As providers, they will soon make the transition to **value-based care**, making use of best practices that will ensure better outcomes for communities and individuals and enjoying the rewards of that work.

To support our employed and aligned physicians in preparing for these significant changes, Trinity Health's Accountable Health Networks programming during FY11 focused on assisting our physicians with five essential capabilities for value-based care:

- Patient-centered medical home (PCMH) practices
- Clinical integration programs
- Accountable care/financial risk capabilities
- Advanced information technology and communications tools
- Physician-led governance and management structures

PCMHs are a highly integrated, team-based approach and, as such, Trinity Health considers them a best practice model for transforming America's health. In FY11, Trinity Health led the nation in the number of physicians participating in PCMH initiatives. In fact, at the end of the year, more than 250 employed physicians and over 1,000 aligned physicians were participating in PCMH incentive programs. Their participation will result in significant benefits to patients and to their practices as well.

PCMHs help physicians:

- Reduce emergency department visits and avoidable hospital readmissions
- Better prevent and manage chronic conditions, such as diabetes and heart failure
- Develop stronger relationships with their patients
- Improve clinical and utilization outcomes
- Achieve an excellent return on their investment

In FY11, Trinity Health participated in Michigan-based programs including the Blue Cross Blue Shield of Michigan's Organized Systems of Care program, the launch of a 17-payer MultiPayer Advanced Primary Care Practice Demonstration Program and the initiation and expansion of commercial PCMHs.

Additionally, Trinity Health-aligned physicians played leadership roles in these programs, guiding program design and advancement. Through this work, they supported all physicians in their efforts to adapt to these imminent and challenging changes.

Trinity Health physicians in Ohio and Iowa participated in PCMHs, as well, and the formation of state insurance exchanges in Oregon, as well as other initiatives in each of our markets, clearly demonstrated to the entire Unified Enterprise Ministry that change is challenging and well on its way. We were happy to prove, in return, that we will be a beneficial resource and support.

In further support of our physicians' efforts, Trinity Health opened dialogues with policymakers, recommending elements of health care policy crucial to our physicians' success.

We also continued the deployment of electronic health records (EHR) across employed practices, working directly with our physicians to prepare them for meeting the Centers for Medicare and Medicaid Services' "Meaningful Use" incentive program requirements.

By the end of FY11, Trinity Health had conducted "Accountable Care Readiness Assessments" on all of its Ministry Organizations, had readied for meaningful use attestation and had an integrated patient-registry tool in development, as part of the physician office-based EHR.

These and other initiatives strengthened our ability to deliver high-value, coordinated care and to provide our employed and aligned physicians with the essential accountable care capabilities they will need in the future to do the same.



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hope

for Our Associates

Creating an extraordinary work experience — one that inspires our associates to create an extraordinary care experience — means ensuring Trinity Health careers are enriched with a sense of **belonging, purpose and dedication**. Our work toward this purpose in FY11 touched associates from the Home Office to our hospitals and clinics and demonstrated our commitment to our compassionate Mission and to our associates. Through recruitment, wellness, Mission integration and retention efforts, we proved that Trinity Health values and rewards the initiative, talent and dedication of its people.

First, we listened. An engagement survey conducted at the end of FY10 illustrated that Trinity Health associates are very highly and actively engaged and gave us ideas to implement in FY11 for strengthening our position as a 'Best People/Spiritual Workplace.' Our related initiatives included emphasis on diversity and inclusion, the stewardship of our human resources, professional development and more.

Fostering an Inclusive and Diverse Workforce

Trinity Health's diversity and inclusion initiatives in FY11 included the development and delivery of management training, building stronger relationships with key professional organizations and an elevated role for our Associate Resource Groups (ARGs).

ARGs, including the Ability! Associate Resource Group, African American Associate Resource Group, the Women's Inclusion Network and the NextGen Associate Resource Group, were re-focused specifically around career coaching and development, health care reform, associate wellness, and mentoring in FY11. They provided a forum where associates of all ages, physical abilities, genders and ethnic backgrounds could give input on organizational issues. The efforts resulted in greater understanding of our associates' needs as well as a demonstrable increase in minority talent. This was especially evident in Trinity Health's Fellowship Program.

The Fellowship Program is a year-long "real-life" education experience for individuals holding graduate degrees in health care administration, business administration, mission services, ethics and other related fields. Specifically, the program provides fellows with opportunities to work with — and learn from — leaders in all areas of Trinity Health's enterprise and, in many cases, to take on continued employment with the system upon program completion. In FY11, over 50 percent of the fellows came from traditionally under-represented groups — a testimony to our efforts to further diversify our workforce.



By promoting health, wellness and continuous learning as organizational initiatives, we ensure a productive and progressive work culture for our people.

Delivering Better Service and Opportunities for Growth

Our efforts to unify services related to human resources — more specifically, organization and talent effectiveness — helped us ensure our associates have ready access to reliable and timely services as they relate to employment, benefits, career growth and more. We also continued our work to create a best-practice model to support associate wellness, early identification of illness, appropriate care of injury/illness and disability management. The work tells of Trinity Health's understanding that there is a shared responsibility between the enterprise and the individuals within it to create an environment that is socially and financially sustainable and resilient.

By promoting health, wellness and continuous learning as organizational initiatives, we ensure a productive and progressive work culture for our people. By attending to their needs across the career continuum, from fellowship and intern programs to training and career management to succession planning, we nurture their growth — and ours.

Associates were fully engaged in their growth throughout the year:

- 941,000 eLearning courses were completed by associates
- 449 associates were enrolled in 18 Essential Skills for New Leaders cohorts
- More than 200 associates across the UEM completed Crucial Conversations training
- 65 associates graduated from the Foundations in Leadership program

Integrating Our Mission into Our Work

To ensure that all of our associates truly understand — and own — our Catholic foundation and healing Mission, we took a new cohort of leaders through a Mission Formation process during the year. The group, engaged with essential theological competencies and spiritual practices that are at the heart of guiding a Catholic health care ministry, will better be able to help their organizations and associates integrate Catholic moral principles into their day-to-day work. Those principles, inspired by Catholic social teaching, include: caring for those living in poverty, stewardship, participatory community of work, holistic care and respect for life — all essential to the achievement of our Vision and to our associates' sense of purpose in their careers.

hope

for Our Future

Our Mission calls on us to serve every individual in each of our communities as a person with an extraordinary destiny. It calls us to make our most vital ministry — **caring for people who are frail, vulnerable and underserved** — our highest priority. To do this, we act on behalf of justice, promote the common good and responsibly steward our resources. The efforts are aimed both outward — to the vulnerable in our communities — and inward, to our associates and to the business of living our compassionate Mission.

In FY11, we invested more than \$450 million in efforts that improved community health and ensured the provision of direct care for people who are poor and underserved. We invested more in ensuring we can do the same tomorrow.

Improving our Financial Performance

At a crossroads where America's health care system is being transformed, but our Mission remains unchanged, Trinity Health worked diligently to improve its overall financial performance. Our vigilant oversight of resources and tight focus on initiatives intended to increase quality and reduce cost helped us overcome the challenges of a prolonged difficult economy. We enjoyed solid financial results and reported \$225.5 million in operating income. Our reporting of positive operating performance in FY11, and in past years, led to an AA rating from all three major rating agencies. The result was the successful issuance of \$330 million of fixed-rate debt this year at an all-in cost of 4.14 percent — the lowest cost Trinity Health has ever achieved on a fixed-rate debt issue.

The continued effort to consolidate operations through Unified Service Organizations (USOs) profoundly impacts our performance as well. For instance, our Unified Revenue Organization improved operational performance by \$446 million from FY09 to FY11. Our Unified Accounts Payable Organization — about 50 percent complete at the end of FY11 — is expected to have a significant impact and the centralization of several supply chain management functions helped us achieve more than \$80 million in savings this fiscal year, surpassing our target by more than \$20 million.

Our Unified Clinical Organization (UCO) improves our ability to deliver excellence in care through collaboration between our nationwide clinical teams. The UCO's significant work related to sepsis, medication reconciliation, perinatal services, perioperative services and fall reduction is saving lives, and reducing both patients' length of stay and readmissions. It is also resulting in significant cost savings. For instance, costs related to sepsis cases were reduced by more than \$3 million in the first eight months of FY11 compared to the same period last year.

Our Unified Organization and Talent Effectiveness initiative consolidates many human resource functions and is expected to deliver a \$182 million return on investment over five years through the standardization and improvement of processes, programs and technologies.

Investing in Our Future

Investing in the future is about much more than money to Trinity Health.

In FY11, we prudently and strategically managed \$8 billion in pension and operating portfolios, planning for the future. We increased community investments from \$25 million the previous year to \$28.6 million in FY11, including the launch of a \$2 million nursing scholarship loan program with California State University-Fresno.

We joined with partners to form the Heritage Healthcare Innovation Fund, a strategic venture fund that will see each partner invest up to \$10 million in businesses that improve the delivery of health care services. And we looked hard at the financial and cultural impact of transformative health care legislation.

In response to the Affordable Care Act, Trinity Health undertook a comprehensive effort to assess the impact of reform legislation on the UEM. Seeing that payment reform will have an estimated \$2.7 billion impact on our UEM between 2012 and 2019, we launched an assessment project intended to educate leaders on the insurance and actuarial impact of new health care legislation. It will enable us to help our Ministry Organizations develop risk-based arrangements as well as the capabilities they will need for success.

This work was part of Target 20/15, a systematic approach we developed to ensure we meet the requirements of the Affordable Care Act in our 20 markets by 2015. The approach includes initiatives related to access reform, payment reform, accountability and transparency, and culture change.

A four-month process to discern the key requirements needed from a culture and change perspective provided the guidance we needed to create training programs, toolkits and change leadership initiatives that will build competence and confidence in leading these changes. It is all designed to ready us for the future where we will work closely with our associates to ensure they have the knowledge, tools and confidence to work and succeed in this new health care environment while still honoring and upholding the compassionate promise of our Mission and our heritage.



**At a crossroads where
America's health care system
is being transformed, but our
Mission remains unchanged.**

Outrageous Hope Video Inspires and Informs

One woman roamed the dirty streets of 19th century Dublin, searching for young mothers and their children so that she could offer hope, healing and a haven from the ravages of poverty. So began the Sisters of Mercy.

Three women arrived at a Civil War “hospital” in Cairo, Ill., and, appalled by the copious blood on the walls and floors, pinned up their habits to clean and set themselves to the task of bringing comfort, care and compassion to wounded soldiers of both armies. Thus began the health ministry of the Sisters of the Holy Cross.

For 170 years, the Mercy and Holy Cross congregations have responded to the signs of the times, evolving their health ministries to better serve those in need. Perhaps no time in their history, however, has been more momentous than the late 20th century, though, when their paths converged.

“In the early ‘90s, times were changing. We needed to think differently about how we hold the church’s ministry in health care, because we do hold it,” says Gretchen Elliott, RSM, in a new 31-minute documentary titled “Filled With Outrageous Hope.” (Sister Gretchen has since passed away.)

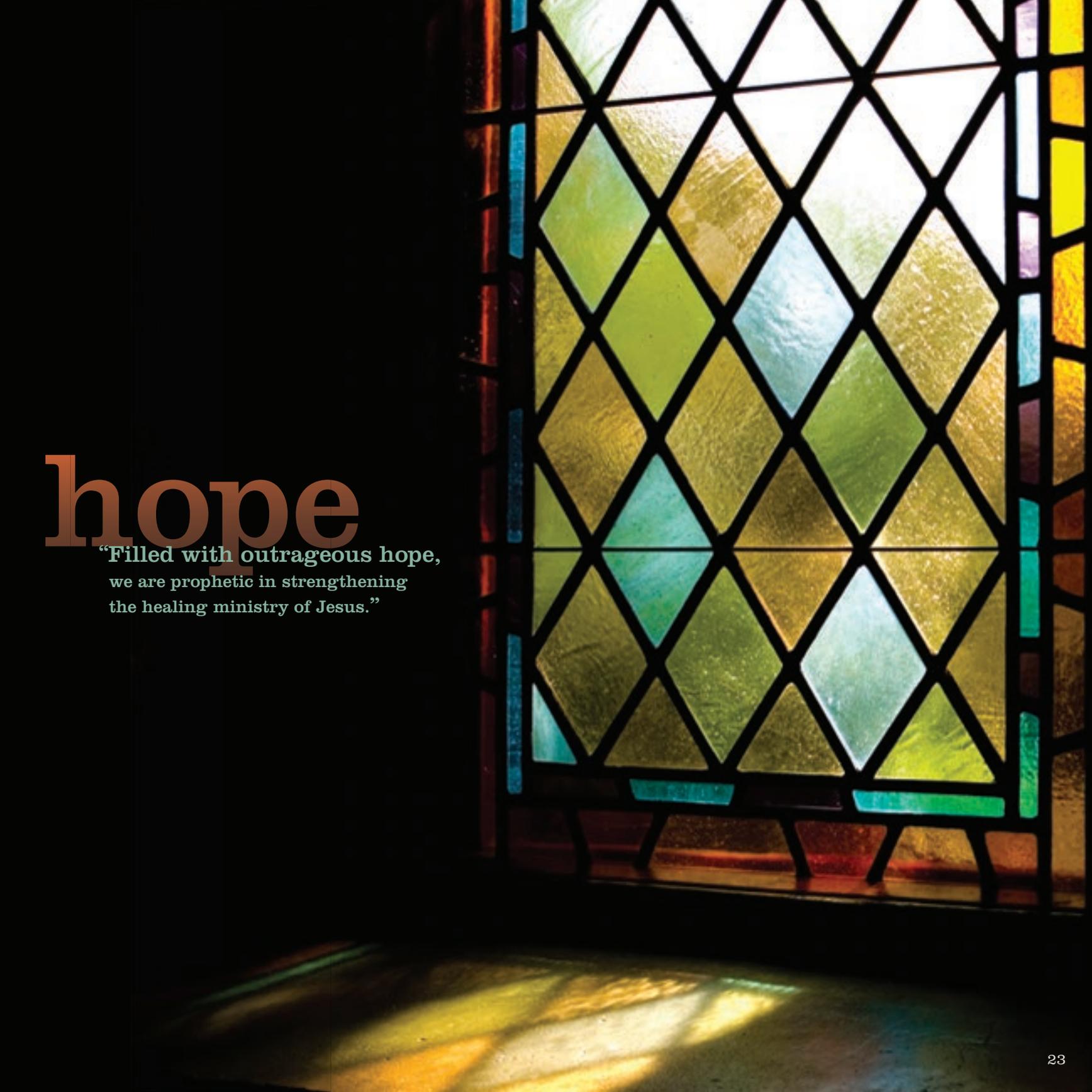
The video features 11 Sisters who reflect on the changing times that compelled them to discern the viability of consolidating their health ministries, as well as creating a “Public Juridic Person” (Catholic Health Ministries) to sponsor the new Trinity Health.

“The fundamental question that moved us, as I recall, was how can we continue to support the ministry of Catholic health care, which is bigger than the Sisters of the Holy Cross, and what does that mean in terms of who we are and what we might need to let go of in order that Catholic health care can strengthen and deepen,” says Joan Marie Steadman, CSC, in the video.

Sharing their wisdom, insights and passion on the first 10 years of Catholic Health Ministries and Trinity Health are: Suzanne Brennan, CSC, Gretchen Elliott, RSM, Yvonne Gellise, RSM, LuAnn Hannasch, RSM, Geraldine Hoyler, CSC, Mary Kelly, RSM, Mary Mollison, CSA, Kathleen Moroney, CSC, Joan Marie Steadman, CSC, Aline Marie Steuer, CSC, and Linda Werthman, RSM. These Sisters served either as members of Catholic Health Ministries or as the Founding Congregation Representative to CHM.

In the documentary’s introduction, Catherine DeClercq, OP, Vice President, Governance and Sponsorship at Trinity Health, comments, “Trinity Health is grateful for the Sisters’ courageous vision: ‘Filled with outrageous hope, we are prophetic in strengthening the healing ministry of Jesus. We commit to integrity of our proclamation and practice, calling others to join us in being a community of committed persons seeking the common good and engaging in ongoing formation.’ We dedicate this video to all the women and men who strive every day to fulfill our Mission.”

The documentary is a must-see for anyone who holds dear the Mission, Values and Vision of Trinity Health. It is informative, inspiring and invaluable to understanding the faith and spirit behind our Ministry. If you would like to receive a copy, please contact comm@trinity-health.org.



hope

“Filled with outrageous hope,
we are prophetic in strengthening
the healing ministry of Jesus.”

Founding Principles

OF CATHOLIC HEALTH MINISTRIES AND TRINITY HEALTH

Catholic Health Ministries, our sponsor, established guiding principles during Trinity Health's formation to direct the organization's Mission and development. They were integrated with principles articulated as part of the system's organizational design and are referenced as the "Founding Principles."

1. Trinity Health will be characterized by a demonstrated commitment to persons who are poor and underserved, with particular attention to the needs of women and children, working to assure access, recognition of health as a basic social right, and effective advocacy.
2. Trinity Health will be committed to the integration, assessment and development of mission in all of its activities, decisions and strategies.
3. In all of its actions and decisions, Trinity Health will recognize and respect the sacredness of all life, the dignity of all persons, and the needs of the whole person - spirit, body and mind.
4. Decision-making within Trinity Health will be characterized by the following attributes: social analysis and Mission Discernment, reflecting a commitment to meeting the needs of the communities it serves, promoting diversity, and locating decision-making at the most appropriate level.
5. Trinity Health's culture will be characterized by collegiality, interdependence and accountability, with respect for the traditions of the founding organizations while creating its own mission and culture.
6. Sponsorship in Trinity Health will be mediated through governance structures that enhance and promote a spirit of a community of persons committed to the Mission, full partnership of religious and laity in governance, management and sponsorship, and continued reflection on the evolution of sponsorship.

7. The members of Catholic Health Ministries, our sponsor, will possess the competencies so required, will be committed to a personal and communal formation in sponsorship, and will be periodically assessed.
8. Trinity Health will be committed to partnering with physicians to assure quality outcomes, cost-effective, compassionate and accessible care.
9. Trinity Health will be an active collaborator consolidating and rationalizing services in its markets and partnering with Catholic and other health and social service organizations to improve the health and overall well-being of those communities.
10. Trinity Health will strive to be the employer of choice, committed to the development of its human resources and to creating workplaces that nurture the human spirit and respect diversity.
11. Trinity Health will leverage its strengths and geography in order to facilitate the sharing and adoption of best practices and learnings across the System as well as to assure its financial stability.
12. Trinity Health through its corporate structure, services, and collective actions will add value, synergy and bring economies to its members.
13. Trinity Health will act as a unified System, recognizing its interdependency in fulfillment of its Mission and Vision.
14. Trinity Health will develop and monitor standards for Mission accountability, financial viability, patient and employee satisfaction, quality enhancement and stewardship of its resources - human, financial, environmental.
15. Trinity Health will faithfully attend to the recruitment, development and retention of governance, management, physician partners and staff.



COMMUNITY BENEFIT MINISTRY

Financial Summary

Years ended June 30, 2011 and 2010 (in thousands)

Note: The financial summaries and statistics for all the fiscal years presented have been reclassified to present an affiliate as a discontinued operation and held for sale at June 30, 2011.

	2011	2010
Ministry for the Poor and Underserved:		
Charity care at cost	\$136,493	\$124,481
Unpaid cost of Medicaid and other public programs	152,014	162,184
Programs for the poor and underserved:		
Community health services	19,613	19,974
Subsidized health services	34,854	32,890
Financial contributions	3,813	7,412
Community building activities	1,811	1,696
Community benefit operations	2,321	1,822
Total programs for the poor and underserved	62,412	63,794
Ministry for the poor and underserved	350,919	350,459
Ministry for the Broader Community:		
Community health services	8,337	9,108
Health professions education	61,308	53,876
Subsidized health services	13,950	13,790
Research	6,782	6,837
Financial contributions	3,174	3,001
Community building activities	5,161	1,364
Community benefit operations	2,914	2,333
Ministry for the broader community	101,626	90,309
COMMUNITY BENEFIT MINISTRY	\$452,545	\$440,768

Community Benefit Ministry amounts have been prepared in accordance with the Catholic Health Association of the United States' (CHA), *A Guide for Planning and Reporting Community Benefit, 2008 Edition*.

Trinity Health contributed \$452.5 million to its communities through our direct programs, charity care, education and research, and the unpaid cost of Medicaid. This amount reflects an increase of \$12 million, or 3%, over the prior year's commitment. Included in total Community Benefit Ministry, \$351 million, or 78%, represents the financial commitment to seek out and serve those who need it the most, especially the poor, the uninsured and the indigent. Trinity Health dedicated \$198.9 million to directly caring for our populations in need in the communities we serve through our outreach programs and charity care.

In addition to charity care, Trinity Health provides a significant amount of uncompensated care to uninsured and underinsured patients, which is reported as bad debt at cost and not included in the amounts reported above. During the years ended June 30, 2011 and 2010, Trinity Health reported provision for bad debt at cost of \$126 million and \$119.9 million, respectively.

SYSTEM FINANCIAL SUMMARY

Consolidated Condensed
Balance Sheets

June 30, 2011 and 2010 (in thousands)

Assets	2011	2010
CURRENT ASSETS:		
Cash, cash equivalents and investments	\$2,217,968	\$2,058,202
Assets limited or restricted as to use, current portion	8,233	9,418
Patient and other receivables, net	933,034	818,216
Assets held for sale	185,437	177,053
Other current assets	<u>355,782</u>	<u>369,392</u>
Total current assets	3,700,454	3,432,281
ASSETS LIMITED OR RESTRICTED AS TO USE:		
Held by trustees	213,863	237,122
By Board	2,309,567	1,962,041
By donors	<u>100,203</u>	<u>94,537</u>
Total assets limited or restricted as to use, non-current portion	2,623,633	2,293,700
PROPERTY AND EQUIPMENT, NET	3,374,103	3,349,524
OTHER ASSETS	331,467	246,075
TOTAL ASSETS	\$10,029,657	\$9,321,580
Liabilities and Net Assets		
CURRENT LIABILITIES	\$2,366,829	\$2,360,351
LONG-TERM DEBT, NET OF CURRENT PORTION	1,530,902	1,406,548
OTHER LONG-TERM LIABILITIES	<u>917,614</u>	<u>1,244,743</u>
Total Liabilities	4,815,345	5,011,642
NET ASSETS:		
Unrestricted	5,104,806	4,205,883
Restricted	<u>109,506</u>	<u>104,055</u>
Total Net Assets	5,214,312	4,309,938
TOTAL LIABILITIES AND NET ASSETS	\$10,029,657	\$9,321,580

SYSTEM FINANCIAL SUMMARY

Condensed Consolidated Statements of Operations and Changes in Unrestricted Net Assets

Years ended June 30, 2011 and 2010 (in thousands)

How our resources are created:

	2011	2010
We billed for services to patients	\$15,093,804	\$14,167,178
We had other operating revenue	855,430	813,975
Our total operating revenue was	15,949,234	14,981,153
However, we did not receive full payment:		
From Medicare, Medicaid and other contracted payors	(8,044,327)	(7,697,321)
From those unable to pay (charity care)	(409,897)	(366,676)
To allow for health benefits to our associates	(143,661)	(137,128)
Therefore, we wrote off	(8,597,885)	(8,201,125)
Our net resources were	7,351,349	6,780,028

How our resources are used:

To pay our associates salary and benefits	3,637,156	3,313,273
To purchase supplies	1,190,255	1,127,789
To pay for medical claims and purchased services	881,915	804,974
To allow for wear and deterioration on buildings and equipment	405,631	407,340
To allow for those patients who are unwilling to pay (bad debts)	323,275	306,079
To pay interest on our outstanding debt	84,071	70,651
To pay for other operating expenses	604,287	546,612
Our total expenses were	7,126,590	6,576,718

Our operating income before other items	224,759	203,310
We had other operating items	—	(48,986)
Our operating income	224,759	154,324
We had other non-operating items, primarily income from investments	458,154	276,305

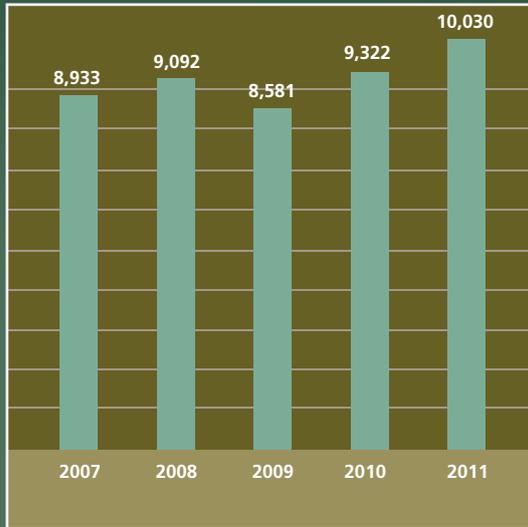
EXCESS FUNDS TO INVEST IN TRINITY HEALTH'S FUTURE:

(Ministry for the Poor and the Broader Community, capital spending, payment on outstanding debt, etc.)	682,913	430,629
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Other changes in total unrestricted net assets, primarily non-cash items:

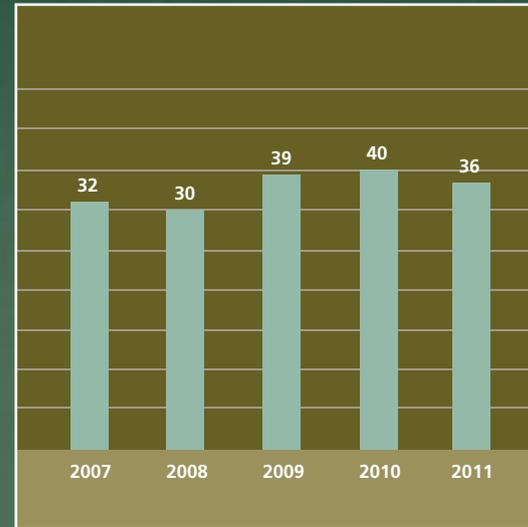
Change in retirement plan items	212,061	(170,962)
Other changes in unrestricted net assets	(4,757)	18,192
Discontinued operations	8,706	15,514
Increase in total unrestricted net assets	\$898,923	\$293,373

Total Assets (in millions of dollars)



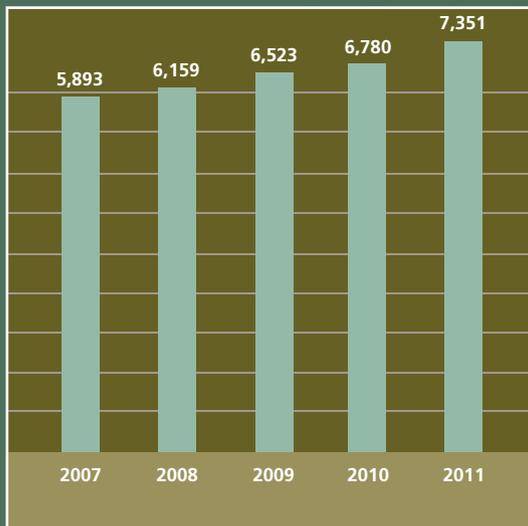
Trinity Health's balance sheet remains strong despite challenges created by the economic conditions and continued to show improvement in FY11.

Debt-to-Capitalization (in percentages)



Trinity Health's debt-to-capitalization ratio showed improvement in FY11, decreasing from 40% to 36%.

Unrestricted Revenue (in millions of dollars)



Operating revenue continued to grow in FY11. The increase of 8.4% over the prior year was primarily due to volume growth, payment rate increases and the acquisitions of affiliates.

Income (in millions of dollars)



Trinity Health reported a significant improvement of revenue over expenses from the prior two years primarily due to improved nonoperating investment income performance. Trinity Health's operating income of \$225 million grew 4.6% from the prior year due to the acquisition of affiliates in strategic markets, revenue growth and continued focus on productivity improvements and cost containment process improvement efforts.

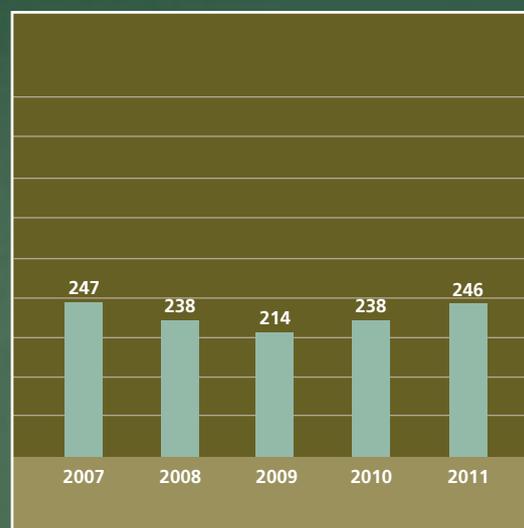
Asset Renewal Rate Percentage, Capital Spending and Depreciation Expense (in millions of dollars)



Trinity Health invested \$515 million into its health care ministry during FY11. The asset renewal rate for Trinity Health (capital spending divided by depreciation) in FY11 equaled 128%.

■ Capital Expenditures ■ Depreciation Expenses

Days of Net Cash on Hand (in millions of dollars)



Days of Net Cash on Hand increased from last year, reflecting a strong balance sheet.

Patient Care and Other Statistics

Years ended June 30, 2011 and 2010

HOSPITAL FACILITIES:

	2011	2010
Patient days	1,380,134	1,357,686
Staffed beds	6,116	6,118
Staffed bed occupancy	61.8%	60.8%
Discharges	327,329	319,882
Average length of stay (days)	4.22	4.24
Outpatient and emergency room visits	8,743,495	7,933,355

LONG-TERM CARE FACILITIES:

	2011	2010
Beds – staffed nursing facilities and homes for the aged	1,726	1,736
Patient days	560,518	558,564
Staffed bed occupancy	89.0%	88.2%

FULL-TIME EQUIVALENT EMPLOYEES

47,100 44,300

Trinity Health's investment in Community Benefit Ministry represents a wide range of initiatives that have meant the difference between despair and hope for thousands of people across the country, some who shared their stories at the beginning of this report.

Total Community Benefit Ministry (in millions of dollars)



- Unpaid Cost of Medicaid and Public Programs
- Charity Care
- Programs for the Poor and Underserved
- Programs for the Broader Community

In addition, provision for bad debt at cost was \$89M, \$90M, \$108M, \$120M and \$126M from FY07 to FY11.

Catholic Health Ministries and
Trinity Health Board of Directors

UNIFIED ENTERPRISE MINISTRY

The Trinity Health Board of Directors oversees the operational decisions and direction of our Unified Enterprise Ministry, setting a vision of excellence and infusing a strong sense of Mission. Our sponsoring entity, Catholic Health Ministries (CHM), a “Public Juridic Person” in the Catholic Church, oversees our Catholic identity and Mission to provide a healing ministry, especially for people who are vulnerable or underserved.



Robert Ladenburger
Chair, Catholic Health Ministries
President and CEO
Exempla Healthcare
Denver, Colorado



Melanie Dreher, PhD, RN
Dean-College of Nursing
Rush University
Chicago, Illinois



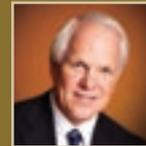
José L. Santillan, CFA
Former Head of Investments
Harris Bank
Chicago, Illinois



Mary Mollison, CSA
Chair, Trinity Health Board of Directors
Vice President of Ministry and Spirituality
Agnesian Health Care
Fond du Lac, Wisconsin



Sarah Eames
Executive Director
Russell Reynolds Associates Inc.
New York, New York



Joseph R. Swedish
President and CEO
Trinity Health
Novi, Michigan



Henry R. Autry
Founder, Chairman and CEO
Conrado Partners
Chicago, Illinois



Uma R. Kotagal, MD
Senior Vice President,
Quality and Transformation
Cincinnati Children’s Hospital
Medical Center
Cincinnati, Ohio



Larry Warren
President and CEO
Howard University Hospital
Washington, D.C.



James D. Bentley, PhD
Former Senior Vice President,
Strategic Policy Planning
American Hospital Association
Silver Spring, Maryland



Paul C. Robertson, Jr.
Chairman and CEO
Robertson Brothers Company
Bloomfield Hills, Michigan



Linda Werthman, RSM
Sisters of Mercy of the Americas
West Midwest Community
Livonia, Michigan



Suzanne Brennan, CSC
Executive Director
Holy Cross Ministries
Salt Lake City, Utah

System Leadership Council

The role of the System Leadership Council is to align key strategies and operations of Trinity Health and serve as a conduit between the Home Office and Ministry Organizations. As such, each member is charged with ensuring the integrity of the organization's Mission and Core Values, achieving operational and clinical quality goals, and advancing the goals of the strategic plan toward the realization of Trinity Health's Vision to be "the most trusted health partner for life" in the communities we serve.

UNIFIED ENTERPRISE MINISTRY



Kedrick Adkins, Jr.
President
Integrated Services



Catherine C. DeClercq, OP
Senior Vice President
Governance and Sponsorship



Gay Landstrom, MS, RN
Senior Vice President
Patient Care Services
and Chief Nursing Officer



James Bosscher
Senior Vice President and
Chief Investment Officer



Daniel Dwyer
Senior Vice President
Mission Integration



Michael Murphy
Executive Vice President
Health Networks



Don Bignotti, MD
Senior Vice President
and Chief Medical Officer



Louis J. Fierens II
Senior Vice President
Supply Chain and Capital
Projects Management



Paul Neumann
Senior Vice President
and General Counsel



Paul Browne
Senior Vice President
Integration Services



Preston Gee
Senior Vice President
Strategic Planning and Marketing



Richard O'Connell
Executive Vice President
and Chief Operating Officer
Hospital Networks



Debra A. Canales
Executive Vice President and
Chief Administrative Officer



Daniel G. Hale
Executive Vice President



P. Terrence O'Rourke, MD
Executive Vice President
and Chief Clinical Officer



Benjamin Carter
Senior Vice President
and Chief Financial Officer



Rebecca Havlisch
Senior Vice President
Insurance and Risk
Management Services



Joseph R. Swedish
President and
Chief Executive Officer



Paul Conlon
Senior Vice President
Clinical Quality and
Patient Safety



Michael R. Holper
Senior Vice President
Organizational Integrity
and Audit Services



Maria Szymanski
Senior Vice President and
Chief Development Officer

Ministry Organizations and CEOs

UNIFIED ENTERPRISE MINISTRY

California

Saint Agnes Medical Center

www.samc.com
Nancy Hollingsworth, RN, President & CEO
1303 E. Herndon Avenue
Fresno, CA 93720-3309
559-450-3000
436 beds

Idaho/Oregon

Saint Alphonsus Health System

Sally Jeffcoat, Regional System CEO

Saint Alphonsus Regional Medical Center – Boise

www.saintalphonsus.org
Sally Jeffcoat, President & CEO
1055 North Curtis Road
Boise, ID 83706-1370
208-367-2121
398 beds

Saint Alphonsus Medical Center – Ontario

www.saintalphonsus.org/ontario
Rick Palagi, CEO
351 SW Ninth Street
Ontario, OR 97914
541-881-7000
49 beds

Saint Alphonsus Medical Center – Nampa

www.saintalphonsus.org/nampa
Karl Keeler, CEO
1512 12th Avenue Road
Nampa, ID 83686
208-463-5000
152 beds

Saint Alphonsus Medical Center –

Baker City
www.saintalphonsus.org/bakercity
H. Ray Gibbons, CEO
3325 Pochontas Road
Baker City, OR 97814
541-523-6461
126 beds

Illinois

Loyola University Health System

Loyola University Medical Center
www.loyolamedicine.org
Larry M. Goldberg, President & CEO
2160 South First Ave.
Maywood, IL 60153
708-216-9000
569 beds

Gottlieb Memorial Hospital

www.gottliebhospital.org
Patricia Cassidy, President
701 West North Avenue
Melrose Park, IL 60160
708-681-3200
255 beds

Indiana

Saint Joseph Regional Medical Center – Mishawaka

www.sjmed.com
Albert L. Gutierrez, President & CEO
5215 Holy Cross Parkway
Mishawaka, IN 46545
574-335-5000
287 beds

Saint Joseph Regional Medical Center –

Plymouth
www.sjmed.com
1915 Lake Avenue
Plymouth, IN 46563
574-936-3181
58 beds

Iowa/Nebraska

The Iowa organizations are part of Mercy Health Network, which is a joint operating arrangement between Trinity Health and Catholic Health Initiatives.

Mercy Medical Center – Clinton

www.mercyclinton.com
Sean Williams, President & CEO
1410 North Fourth Street
Clinton, IA 52732-2940
563-244-5555
358 beds

Morrison Community Hospital ^
Morrison, IL

Mercy Medical Center – Dubuque

www.mercydubuque.com
Russell Knight, President & CEO
250 Mercy Drive
Dubuque, IA 52001-7360
563-589-8000
303 beds

Mercy Medical Center – Dyersville

1111 Third Street, SW
Dyersville, IA 52040
563-875-7101
25 beds

Central Community Hospital ^
Elkader, Iowa

Mercy Medical Center – North Iowa

www.mercynorthiowa.com
James G. FitzPatrick, President & CEO
1000 4th Street, SW
Mason City, IA 50401-2860
641-428-7000
346 beds

Mercy Medical Center – New Hampton

www.mercynewhampton.com
308 North Maple Avenue
New Hampton, IA 50266
641-394-4121
18 beds

Mercy Health Network – North Iowa

Ellsworth Municipal Hospital^
Iowa Falls, IA

Franklin General Hospital^
Hampton, IA

Hancock County Memorial Hospital^
Britt, IA

Kossuth Regional Health Center^
Algona, IA

Mitchell County Regional Health Center^
Osage, IA

Palo Alto County Health System^
Emmetsburg, IA

Regional Health Services
of Howard County^
Cresco, IA

Mercy Medical Center – Sioux City

www.mercysiouxcity.com
Robert J. Peebles, President & CEO
801 Fifth Street
Sioux City, IA 51101-1399
712-279-2010
464 beds

Baum-Harmon Mercy Hospital
www.baumharmon.org
255 North Welch
Primghar, IA 51245
712-757-2300
14 beds

Oakland Mercy Hospital
www.oaklandhospital.org
601 East 2nd Street
Oakland, NE 68045
402-685-5601
23 beds

Hawarden Community Hospital^
Hawarden, IA

Pender Community Hospital^
Pender, NE

Maryland

Holy Cross Hospital
www.holycrosshealth.org
Kevin Sexton, President & CEO
1500 Forest Glen Road
Silver Spring, MD 20910-1484
301-754-7000
448 beds

Michigan

Mercy Health
Roger Spoelman, Regional Executive,
West Michigan

Mercy Health Partners
www.mercy-healthpartners.org
Roger Spoelman, President & CEO

Mercy Campus
1500 East Sherman Blvd.
Muskegon, MI 49444-1889
231-672-2000
196 beds

Hackley Campus
1700 Clinton Avenue
Muskegon, MI 49442
231-726-3511
213 beds

Lakeshore Campus
72 South State Street
Shelby, MI 9455
231-861-2156
24 beds

Saint Mary's Health Care
www.smhealthcare.org
Philip H. McCorkle, Jr., President & CEO
200 Jefferson Street, SE
Grand Rapids, MI 49503-4598
616-685-5000
344 beds

Mercy Hospital Cadillac

www.mercycadillac.com
John L. MacLeod, CEO
400 Hobart Street
Cadillac, MI 49601-2389
231-876-7200
97 beds

Mercy Hospital Grayling

www.mercygrayling.com
Stephanie Riemer-Matuzak, CEO
1100 Michigan Avenue
Grayling, MI 49738-1398
989-348-5461
130 beds

Saint Joseph Mercy Health System

www.stjoeshealth.org
Garry C. Faja, President & CEO
Regional Executive, East Michigan
734-712-3791

Chelsea Community Hospital
www.cch.org
Kathleen Griffiths, President & CEO
775 South Main Street
Chelsea, MI 48118
734-475-4040
113 beds

St. Joseph Mercy Ann Arbor
www.stjoeshealth.org
Rob Casalou, President & CEO
5301 McAuley Drive
Ypsilanti, MI 48197
734-712-3456
537 beds

St. Joseph Mercy Livingston
www.stjoeshealth.org
Rob Casalou, President & CEO
620 Byron Road
Howell, MI 48843
517-545-6000
136 beds

St. Joseph Mercy Oakland
www.stjoesoakland.org
Jack Weiner, President & CEO
44405 Woodward Avenue
Pontiac, MI 48341-5023
248-858-3000
443 beds

St. Joseph Mercy Port Huron
www.mymercy.us
Peter Karadjoff, President & CEO
2601 Electric Avenue
Port Huron, MI 48060-6518
810-985-1500
119 beds

St. Mary Mercy Livonia
www.stmarymercy.org
David Spivey, President & CEO
36475 Five Mile Road
Livonia, MI 48154
734-655-4800
304 beds

Ohio

Mount Carmel Health System
www.mountcarmelhealth.com
Claus von Zychlin, President & CEO
Corporate Services Center
6150 East Broad Street
Columbus, OH 43213-1570
614-546-4000

Mount Carmel East
Paula Autry, President & COO
6001 East Broad Street
Columbus, OH 43213-1570
614-234-6000
438 beds

Mount Carmel West
793 West State Street
Columbus, OH 43222
614-234-5000
514 beds

Mount Carmel St. Ann's
Janet Meeks, President & COO
500 South Cleveland Avenue
Westerville, OH 43081
614-898-4000
338 beds

Mount Carmel New Albany
Richard D'Enbeau, President & COO
7333 Smith's Mill Road
New Albany, OH 43054
614-775-6600
60 beds

Fayette County Memorial Hospital[^]
Washington Court House, OH

Multi-State

Trinity Home Health Services

Grace McCauley, CEO
17410 College Parkway, Suite 150
Livonia, MI 48152
734-542-8200

Trinity Senior Living Communities

www.trinityseniorsanctuary.org
Ken Robbins, President & CEO
17410 College Parkway, Suite 200
Livonia, MI 48152
734-542-8300

3,515 beds/units including:
- Continuing Care Retirement Communities
- Assisted Living

- Memory Care
- Independent Living
- Affordable Housing
- Long Term Care

Home Offices

Trinity Health

www.trinity-health.org

Trinity Health Novi Home Office
27870 Cabot Drive
Novi, MI 48377-2920
248-489-6000

Trinity Health Farmington Hills Home Office
34605 Twelve Mile Road
Farmington Hills, MI 48331-3221
248-489-6000

Mercy Primary Care Center *
5555 Conner Avenue
Detroit, MI 48213
313-579-4000

Note: Numbers reflect licensed beds in FY11.

* Classified as an operating unit of Trinity Health – Michigan

[^] Indicates managed hospital/facility

There are several health care organizations whose names include the term "Trinity" or "Trinity Health." Trinity Health, Novi, Michigan, is not related to any organization whose name or "Doing Business As" designation includes either of these terms.

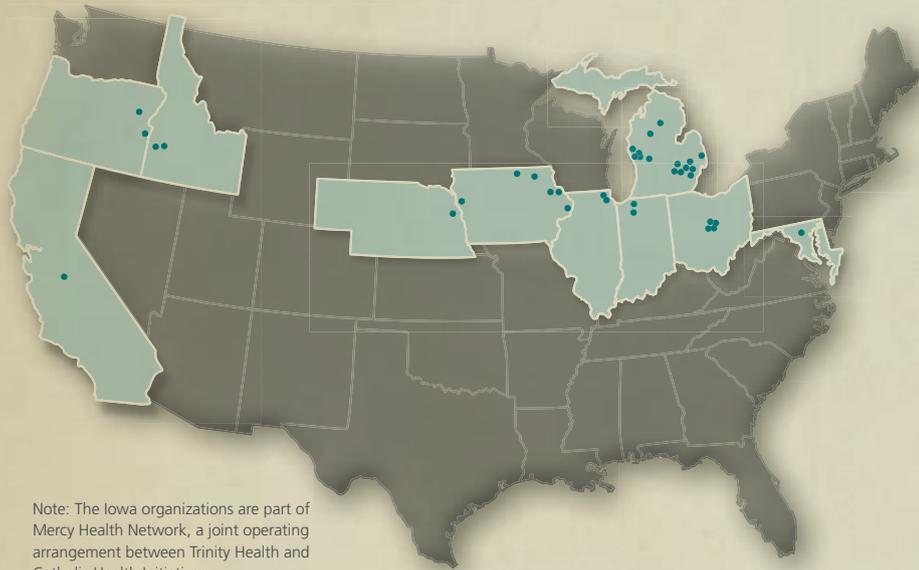
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Trinity Health



Note: The Iowa organizations are part of Mercy Health Network, a joint operating arrangement between Trinity Health and Catholic Health Initiatives.

- One of the largest Catholic health systems in the United States (based on Operating Revenue)
- 53,400 full-time equivalent employees
- More than 9,000 active staff physicians
- 20 Ministry Organizations, encompassing 47 hospitals (35 owned, 12 managed)
- 401 outpatient clinics/facilities, 31 long-term care facilities, numerous home health and hospice programs in 10 states
- Revenues of about \$9 billion
- More than \$453 million in community benefit ministry

Trinity Health is a faith-based organization devoted to a ministry of healing. We serve persons through a network of not-for-profit community hospitals, health care services and advocacy partnerships at the community, regional and national levels.

Our sponsor is Catholic Health Ministries, a governance entity established by the Catholic Church to oversee the healing ministry and Catholic identity of Trinity Health.

Ministry Organizations meet community health needs in rural agricultural areas, suburbia and urban centers. In every market we serve, Trinity Health and its Ministry Organizations work together as an aligned delivery system driven by an entrepreneurial spirit and our living Mission. This geographic diversity prevents the enterprise from being exposed to isolated cyclical or demographic shifts and helps balance overall net revenues and income.

Steadfast commitment to healing in the spirit of the Gospel is the shared bond within Trinity Health. The size and scope of our organization presents opportunities to fulfill our Mission every day for people in our communities.

TRINITY  HEALTH

Novi, Michigan

Sponsored by
Catholic Health Ministries

27870 Cabot Drive
Novi, Michigan
48377-2920
248-489-6000