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Subject: [External] Mercy Hospital E-mail Address and Talking Points

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Hey Lesesha! Great talking to you today! Here is the email address where you can send your email about stopping the closing of Mercy Hospital: dph.hfsrb.publichearings@illinois.gov

Here are the talking points by category and I'll follow up with you on Thursday! Take care,

Icu beds

This review board has approved the closing of multiple hospitals serving black and brown low income communities recently, including Westlake, MetroSouth and Franciscan Health.

These closures have had catastrophic consequences for the communities served.

They've resulted in too many communities—too many black and brown communities—not having access to the life-saving and life enhancing care they need. And now, in the midst of this pandemic and the increased health risks of the virus—and of the increased poverty levels brought about by the failure to help working people during this pandemic crisis—those hospitals are missed even more.

We can't afford to lose Mercy.

It's your job to NOT allow Trinity to close Mercy if the criteria aren't met for their application.

And I want to lift up just one issue for you—

If Trinity closes Mercy, it will mean a serious ICU bed shortage in the Chicago South Side planning area.

At a time when we are all aware how the shortage of ICU beds has a life and death impact on communities, and at a time when black and brown people are dying of this virus at higher numbers than everyone else, we can't afford to lose any ICU beds on the South Side.

The administrative code you work from says that Trinity has to show that closing won't have an adverse impact on access to care...

Well, just looking at the ICU bed shortage—you can see that letting Trinity close Mercy will have an adverse impact. People will die as a result.

It's time to enforce those codes and the standards—for black and brown and low income communities as well as for other communities.

I'm asking you, on behalf of my community and the patients that Mercy serves—don't let Trinity close Mercy. Trinity is a rich hospital system—and it's time they put care—and our lives—ahead of the bottom line.

Outpatient care

In 2018, Mercy had over 350,000 thousand outpatient visits.

Think about that—over 350,000 visits.

That's hundreds of thousands of visits even if some of the patients served went multiple times.

And some did go multiple times—because most of them don't have any place else to access healthcare.

Let me tell you a little something about the kind of patients who need to go to Mercy for outpatient care:

Low income and Black and brown people don't have access to health insurance or other health care

They tend to have the diseases related to poverty and working hard jobs, like diabetes, heart disease, cancer that gets diagnosed later than it should be, mental health and substance abuse issues

Mercy is a lifeline for these patients. Every day now, Mercy is saving lives, more lives than ever in the midst of this pandemic.

You don't let a rich hospital system with billions in assets close down a lifeline—not before a pandemic, not during a pandemic—and not after a pandemic if we ever get there.

That's why I'm here to ask you to reject Trinity's application to close Mercy.

FD visits

If you've ever been to the Mercy Emergency Department, you know that everyone there is desperate—desperate for care, desperate because they can't afford care elsewhere, desperate because there are no other emergency departments anywhere near there.

People go to the Mercy ED because their lives are at risk, because they're in serious pain, because they are desperate and scared and don't have any other resources and they don't have anywhere else to go.

Mercy currently has over 50,000 ED visits a year. That's a lot of desperate and very sick people with nowhere else to go.

(Describe situations that take people to ED, what the population is like)

Where else are those thousands of people going to go? How many of them will die in transport, die trying to get somewhere else? How many will stay home and risk dying because they're scared of bills or just can't make it to another hospital?

You have a responsibility to say no to Trinity's application to close Mercy if it will have a significant impact on people's lives—well, here are 50,000 reasons for you to say no to this application.

For the sake of these patients and their families and these communities, I ask that you reject Trinity's application to close Mercy.

OB care

As a mother of _____ children, I can tell you how scary it is to face the prospect of having a baby without access to quality and affordable care.

Mercy provided that kind of care to over 1,500 mothers and their families last year, with the hospital welcoming 1,654 children into the world.

These are mothers who didn't have anywhere else to go—not anywhere they could access quickly, that they could afford, that they could count on. Mercy was it for them. Without Mercy, they didn't have an option for nearby care to keep them and their babies safe.

If you approve this application allowing Trinity to close Mercy, it's going to leave thousands of pregnant mothers and families in the South Side with nowhere to go.

Black and brown women already face a much higher risk of death during childbirth.

And black and brown children already face a harder time getting the care they need as infants to help them thrive in those important early months.

I'm asking you not to put any more pregnant women's lives on the line. Don't set up more black and brown babies for negative outcomes. If you're poor and black and brown on the South Side, you are already set up for a higher risk of death and you have a lot of negative outcomes just waiting for you.

Trinity has billions in assets—it can afford to keep Mercy open. It can afford to do right by the pregnant mothers and babies of the South Side. But we can't do without Mercy.

Please say not to this application to close Mercy. Our lives depend upon it.

Profits

I'm here today because Trinity wants to believe a lie—Trinity wants you to think that their health system is poor—too poor to be able to afford to keep Mercy open.

Now, I know something about being poor and struggling to get what you need—struggling to pay the rent, put food on the table and struggling to get the healthcare you need to keep you and your family healthy—and to keep you and your family alive.

Trinity isn't anything like poor.

I know they don't say "poor"—what they say is that keeping Mercy open is not "economically feasible."

But you know what? Mercy recorded over 4 million in excess revenue over expenses in 2020, after Trinity claimed the hospital was losing millions. That doesn't sound too poor to me. It actually sounds pretty economically feasible.

And Trinity, which owns and runs Mercy, reported having over 30 billion—yes, that's BILLION with a B—in assets earlier this year, that included nearly 12 Billion—yes, that's another B—in unrestricted cash and investments—meaning money they can use however they want.

It seems that Trinity just doesn't want to use that money to keep Mercy open.

And, if I understand your job, you're supposed to look over their application to close Mercy and say NO if people have a desperate need for Mercy and if Trinity can afford to keep Mercy open.

Well, people have a desperate need for Mercy—other speakers here today are talking about that.

And, let's be clear, Trinity CAN easily afford to keep Mercy open—they don't even have to dip into their billions in cash to do that. With all the federal payments they get one way or another, they can afford to stay open even without going into their billions in excess cash.

So on behalf of all the people whose health and lives depend upon Mercy staying open, I ask you to reject Trinity's application to close the hospital. They can afford to keep it open, and the people of the South Side can't afford for the hospital to close.

Healthcare disparity

Trinity likes to throw around all these misleading facts and figures and pretend they can't afford to keep Mercy open.

I have a few other facts and figures to share.

Mercy's service area includes ZIP 60621 in Englewood where life expectancy is only 59.9 years (30 years less than ZIP 60611 in Streeterville). Now the people who live in Englewood and on the South Side are more likely to be black and brown and more likely to be low income than those who live in white and rich areas like Streeterville. But that doesn't mean we deserve to live 30 years less.

Mercy's service area also includes the Douglas and Fuller Park Community Areas which have some of the worst health outcomes in the city. You have a really high risk of dying of diabetes or cancer if you live in these areas.

And there's a really high infant mortality rate in these communities, too.

I know other people are talking about how Trinity has plenty of money to keep Mercy open, so I won't go into that.

But I will talk about priorities. It seems that with all that money, Trinity just doesn't think that keeping Mercy open—and even investing in more care like they should—just isn't that big a priority. Trinity doesn't seem to care about the black and brown people—and the black and brown babies—who are dying because of lack of care and lack of other resources.

Since Trinity doesn't have their priorities in the right place—I'm asking you, the board, to have your priorities in the right place. The south side needs Mercy—and allowing Mercy to close will make the racial disparities in care—and in the life expectancy and death rates—much worse.

Please reject Trinity's application to close Mercy. Trinity may have all kinds of misleading figures on their application—but the numbers that really matter are the lives and years of life lost.

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