Hello, My name is Amanda Lake Cismesia, and I am here to share my family's experience with Mercy Health System and the impact of the reductions in care available in our community.

Along with my husband, Jeff, we have two daughters, Hannah and Audrey. My daughters were ages 3 years and 8 months when the new hospital was opened. We live near the facility and can see the hospital from our neighborhood. I remember touring the building at the grand opening and hearing about the services available. As a mother of young children, it was comforting to have a children's hospital so close by and to know that our girls could receive emergency or specialty care at a local hospital, if needed.

As an employee of the State of Wisconsin who lives in Illinois, Mercy Health was one of the only options available through my employer that offered care across the state line. My family was enrolled in the Mercycare HMO, which requires that we receive all services within their network.

Unfortunately, at one year old, our youngest daughter began suffering from significant health complications. Although Audrey was previously healthy, she began having seizures that were later diagnosed as Infantile Spasms, which is a catastrophic type of epilepsy that often leads to intractable seizures, developmental delays, autism, and other behavioral or neurological problems. To this day, we still don't know what caused Audrey to have this disorder.

Audrey's condition requires treatment from a team of specialists as well as frequent inpatient hospitalizations. Unfortunately, as a result of Mercy Health System's reductions in services, our daughter's care team has eroded over the past two years, and we continue to struggle to access services to meet her needs. Audrey's neurologist was let go from the health system in 2020, when Mercy eliminated pediatric neurology services. The inpatient unit that was familiar with Audrey was also closed in 2020. During a recent viral illness, when we called the Mercy emergency room to seek care for an increase in Audrey's seizures, we were told not to bring her there, since they no longer had facilities to help her. We had to drive to Madison UW Children's Hospital for an emergency visit. (It should be obvious that the definition of emergency indicates that driving 2 hours is not an acceptable standard of care.) Audrey needs EEG's at least twice per year and those also now have to be done in Madison or other hospitals. Audrey requires speech, developmental therapies, behavioral health services, and autism services. Mercyhealth has eliminated those services as well. We were recently referred for case management to support Audrey's complex needs, and were informed that Mercy eliminated outpatient case management services. Following a recent physician order for mobility aids and toileting supplies, Mercy stated that, although their Wisconsin home health service works closely with long term support programs to provide these items, the Mercy home health service in Illinois does not offer this. Just last week, we received yet another notification that Audrey's ophthalmologist is leaving and we will need to locate another provider for that service as well.

For her frequent neurology follow-ups, we must travel to Madison, and the health system still requires prior authorization in advance for all of her care, which is considered out of network, even though the Rockford hospitals no longer offer any of those specialties or services.

The amount of time required to coordinate the providers and services, drive to out of state appointments and hospitals, and appeal for insurance coverage has had a direct impact on our family's quality of life and Audrey's health and developmental outcomes.

The Illinois Health Facilities Planning Act requires that modification or closure of healthcare facilities meets the following requirements:

- promotes planning for and development of facilities needed for comprehensive health care, especially in areas where the health planning process has identified unmet needs
- improves the financial ability of the public to obtain necessary health services
- establishes a comprehensive health care delivery system that will guarantee the availability of quality care to the general public
- maintains and improves the provision of essential health care services and increases the accessibility of those services to the medically underserved and indigent
- assures that the reduction and closure of health care services or facilities ... are deemed to be in the best interests of the public

The Rockford region has significant needs for behavioral healthcare, services for children and youth with special needs, and access to quality and comprehensive healthcare services across the lifespan.

I am here to ask that the accrediting bodies and lawmakers involved in this proceeding today would utilize the resources available to require Mercy Health System to follow-through on their commitment to provide adequate care for the needs of our region. Javon Bea Hospital still bears a sign saying Women's and Children's Hospital- that's hardly accurate when they've eliminated pediatric specialties and inpatient services for children. It's clear from the actions outlined here today that Mercy Health lied about their commitment to bettering our community and only sought to receive advantages in order to increase their profits. Each action they have taken has reduced the available care in our community and left families like mine high and dry without critically needed healthcare for our loved ones. I am asking for this body to utilize their authority to hold Mercy Health and Mr. Javon Bea accountable and to ensure that the services needed across our community remain available and accessible at the local hospitals.

Thank you for your time.