

June 23, 2026

Mr. John Kniery
Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

Re: Project Number: #25-003 Advocate Trinity Hospital (“the Project”)

Annual Progress Report

Advocate Health and Hospitals Corporation d/b/a Advocate Trinity Hospital, Advocate Aurora Health, Inc., Advocate Health, Inc.

Dear Mr. Kniery:

Advocate Trinity Hospital is pleased to submit to you our Annual Progress Report on the project referenced above in accordance with the requirements outlined in Title 77, Chapter II, Subchapter b, Part 1130, Section 1130.760.

The project is for the establishment of a 40 Bed Acute Care Hospital.

The HFSRB Review Board granted the permit for this Project on June 24, 2025.

1. Current status of the Project

Obligation: The Project was obligated on March 12th, 2026, by signing a construction contract with Power Ujamaa 7 LLC (Construction) obligating 66.5% of the permit value.

Percentage of the project finished: the Project is approximately 30% complete.

Components of Project finished (Phase 1):

- Design & Engineering
- Site Survey
- Soil Investigation
- Mobilization & Groundbreaking

Components yet to be finished

- Site Demolition & Preparation
- Substructure & Foundations, Site Utilities
- Superstructure & Structural

- Core & Shell
- Interior Build-Out
- Sitework & Landscaping

Changes in scope and size: None

Commitment of Funds:

As of May 30, 2026, 67% of total funds assigned to the project costs were committed to be expended by signed contracts.

2. Costs

Costs incurred to date and a comparison of those costs to the approved permit amounts are shown below.

USE OF FUNDS	COST INCURRED TO DATE	PERMIT AMOUNT
Pre-Planning Costs	\$ 1,604,355	\$ 2,096,950
Site Survey and Soil Investigation	\$ 416,767	\$ 450,000
Site Preparation	\$ -	\$ 27,794,120
Off Site Work	\$ -	\$ 5,545,500
New Construction Contracts	\$ 8,716,480	\$ 156,008,444
Contingencies	\$ -	\$ 15,600,844
Architectural/Engineering Fees	\$ 5,269,936	\$ 9,510,000
Consulting and Other Fees	\$ 100,670	\$ 13,882,500
Movable or Other Equipment (not in construction contracts)	\$ -	\$ 40,841,800
Bond Issuance Expense (project related)	\$ -	\$ 2,786,996
Net Interest Expense During Construction (project related)	\$ -	\$ 25,692,486
Other Costs To Be Capitalized	\$ -	\$ 19,347,842
TOTAL USES OF FUNDS	\$ 16,108,209	\$ 319,557,482

3. Method of financing the Project and sources of Funds Chart

SOURCE OF FUNDS	PERMIT AMOUNT
Cash and Securities	\$ 93,810,786
Bond Issues (project related)	\$ 225,746,696
TOTAL SOURCES OF FUNDS	\$ 319,557,482

The Project completion date for the permit is 6/25/2029. The Project is proceeding with due diligence and in compliance with the permit.

Provided below is the additional information requested in the CON permit letter that includes:

- Update on successful aspects of the ambulatory forward plan and areas that require improvement
- Updates of the expenditure of the \$1B investment
- Rollout and effectiveness of the community care sites

Update on Successful Aspects of the Ambulatory Forward Plan and Areas that Require Improvement

In December of 2024, Advocate Health Care announced a \$1B investment to expand access to primary care, specialty care and wellness services on the South Side of Chicago. This plan includes more locations across the South Side, more preventative programs and services, a new, state-of-the-art community hospital, and more. This is one of the largest, long-term community-focused health care investments in the nation aimed at closing the 30-year life expectancy gap between individuals who reside on the South Side, and those residing and living longer on the North Side.

The expansive investment in a wellness model is the direct result of an extensive community input process over much of 2024, which included more than 20 listening sessions and engaged hundreds of South Side residents. During these sessions, participants shared ideas and suggestions for improving access to outpatient and specialty care, using technology to improve care, providing robust health education and support for chronic conditions such as diabetes and high blood pressure, and building a state-of-the-art hospital to modernize inpatient care.

Advocate Health Care has been executing on this plan in 2025 and now in 2026. Milestone highlights include:

- The Advocate Medical Group Imani Village Expansion added an Immediate Care Center in December 2025.
 - A 4,600-square-foot expansion to the Imani Village outpatient care facility at 901 East 95th Street. The upgraded facility added 16 exam rooms, two procedure rooms, imaging capabilities including mammography and ultrasound, cardio and vascular diagnostics, virtually assisted behavioral health care, and a new automated pharmacy kiosk.
 - The new Immediate Care Center has seen over 2,500 visits since opening and will accommodate 14,000 additional patient appointments annually and offer walk-in and appointment-based care six days a week.
 - A Determination of Eligibility for this project was submitted last year.
- Expanding our Neighborhood Care network
 - Six are currently operating, with more in development. A map with the locations is included in the Appendix.
 - This Innovative model has seen over 2,000 patients to date.

- A first mobile Neighborhood Care location utilizing Advocate’s mobile health vehicle opened this Spring at Compassion Baptist Church.
- Launching new chronic condition, pharmacy access and maternal health programs
 - Opened two pharmacy kiosks at Advocate Trinity and AMG Imani Village.
 - Launched the maternal health navigation program and four maternal centering program cohorts at our Advocate Medical Group Imani Village location.
 - Hired new maternal health providers creating 7,000 new appointments.
 - Opened chronic condition clinics for cardio-metabolic, cardio-obstetrics, and diabetes.

Advocate Health Care’s deployment of our ambulatory forward model is iterative. We continue to review work processes, community demand for services, and awareness of care offerings to ensure we are providing the best quality of care and experience for our communities and patients. We are working on strategies to further increase awareness of our Neighborhood Care and chronic condition care models. We are implementing a new, AI-driven patient navigation system to help patients get the right care, at the right place, at the right time.

Update of the Expenditure of the \$1B Investment

This investment reflects a 10-year, long-term commitment to building and sustaining access to care in our communities. It includes both the capital required to develop new care sites: including a new hospital and Neighborhood Care locations, and the ongoing resources needed to support the caregivers, teams, and infrastructure that make that care possible.

Calendar Year 2025	
Total	\$59,032,567

In calendar year 2025, this investment totaled \$59 million. Over the next decade, Advocate will continue to invest in completion of the replacement hospital, expansion of ambulatory access points, and strengthen our clinical workforce, to ensure we have the capabilities in place to deliver high-quality care close to home.

As part of this 10-year investment, Advocate has hired over 58% of our 3-year goal of 1,000 new teammates who reside in the zip codes around Advocate Trinity Hospital on the South Side of Chicago into roles throughout Advocate.

- The top roles for these new teammates include nursing and support services.
- Since Feb 2025, Advocate Health Care has held over 59 Community Pop-up Events featuring the Recruitment Van, VR Technology and PLUM Assessment matching skills to roles. These events saw over 2,500 attendees and involved 190+ community partners.
- We continue to focus on the development of current teammates with new pipeline programs that open additional career opportunities.

Update on the Rollout and Effectiveness of the Neighborhood Care Sites

Guided by the feedback community members have shared through listening sessions and ongoing conversations, Advocate Health Care continues to expand care in ways that reflect what our neighbors said they need most: more access, closer to home. We are proud to share that our Neighborhood Care network is growing, with five sites now open and two scheduled to open later this spring/early summer. Below outlines the six locations across the South Side, expanding access to same-day, nonemergency care in our communities.

Now open:

- **Neighborhood Care at House of Hope**
752 E. 114th St., located through Gate 3
Sundays, 12 – 3 p.m.
- **Neighborhood Care at Salem Hope Center**
10909 S. Cottage Grove Ave., Front Conference Room
Mondays through Fridays, 8 a.m. – 4:30 p.m.
- **Neighborhood Care at The Cov**
7640 S. Cottage Grove Ave., Suite 114
Monday through Friday, 8 a.m. – 4:30 p.m.
- **Neighborhood Care at Trinity Hospital Professional Office Building**
2301 E. 93rd Street, Suite 201
Monday through Friday, 8 a.m. – 6 p.m.
- **Neighborhood Care at Rey B. Gonzalez Children & Family Center**
3050 E. 92nd St.
Mondays, Wednesdays and Fridays, 7:30 a.m. – 4 p.m.
- **Neighborhood Care at Salud Center**
3039 E. 91st St.
Tuesdays and Thursdays, 8 a.m. – 4:30 p.m.

A map of our Neighborhood Care locations is included in the appendix. Additionally, there are mobile health unit providing community-based primary care or screenings at two locations:

- **Advocate Care Everywhere Mobile Health at Compassion Baptist Church**
2650 E. 95th St.
Wednesdays, 10 a.m. – 3 p.m.
- **Advocate Care Everywhere Mobile Health at Imani Sankofa Market**
901 E 95th St.
Tuesdays, 10:00 am to Noon

These sites build on the momentum of Advocate Health Care's Neighborhood Care network of community-based care across the South Side advancing plans to expand to 10 locations.

Together, these locations make it easier to find care close to home, with access to same-day services and connections to Advocate Health Care's financial counselors to help patients

understand coverage and costs. Patients can walk into a Neighborhood Care location or call 312-268-6627 to schedule an appointment. The marketing flyer with a map of the Neighborhood Care locations is in the Appendix.

Advocate Health's Live Well Mobile Van offers free health screenings and wellness support each week at Sankofa Food Market, 901 E. 95th St., on Tuesdays from 10 a.m. to 3 p.m. Services include blood pressure, cholesterol and glucose screenings, one-on-one consultations with a nurse practitioner, health education and connections to community resources to support overall health.

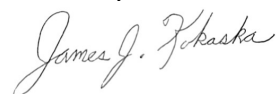
Since its inception, our Neighborhood Care network has seen over 1,800 in person visits, treating a range of conditions. Patients have reported an overwhelming positive experience with scores ranging between 9-10 out of 10 and willingness to return for future visits. Clinically, these sites have been able to provide care for patients that has resulted in avoiding ED visits as well as establishing on-going chronic condition management.

Advocate's team of epidemiologists recently studied our Neighborhood Care patients and found that patients who successfully completed a Neighborhood Care Site visit demonstrated significantly greater engagement with primary care and consistently lower utilization across multiple acute care measures. Compared with patients who did not complete their scheduled visit, successful patients experienced an 118% increase in primary care utilization, a 48% reduction in inpatient visits, a 54% reduction in inpatient length of stay, a 33% reduction in emergency department visits, and a 20% reduction in avoidable emergency department visits. These findings suggest that Neighborhood Care Sites are effectively connecting patients to preventive healthcare services and may help reduce reliance on higher-cost acute care settings.

The Appendix of this letter includes a map of our Neighborhood Care locations, a Neighborhood Care flyer, an overview of AMG Imani Village Expansion, and an epidemiology analysis on the effectiveness and impact of the Ambulatory Forward and Neighborhood Care model.

Please contact me at (708) 473-4692 or via email at james.kokaska@aah.org with any questions regarding this annual progress report.

Sincerely,



James Kokaska
Vice President, Midwest Acute Design & Construction
Advocate Health and Hospitals Corporation

cc: Michelle Blakely
Laura Parisi
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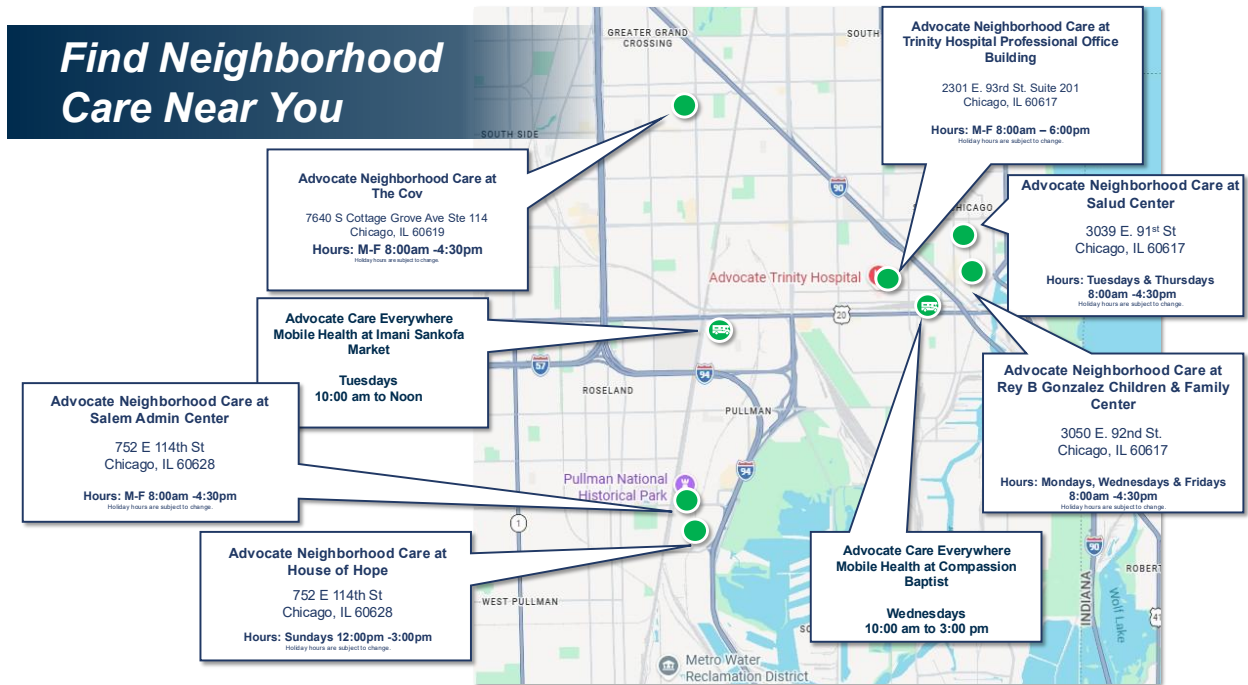
Mike Constantino

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Appendix

1. Advocate Neighborhood Care Locations Map



2. Advocate Neighborhood Care Flyer



Care for the community, in the community Neighborhood Care

No appointment needed | Financial help available

Neighborhood Care gives you easy access to nonemergency care, routine exams and health screenings, as well as management of ongoing health concerns.

Our in-person team helps you with your exam while you have a video visit appointment with a clinician. We offer financial help to patients who qualify and can connect you with community resources for things like food, housing and transportation.

Things we treat/offer:

- Anxiety and depression
- Diabetes
- High blood pressure
- Respiratory issues/sinus infections
- Routine health screenings
- Medicare wellness visits
- STIs/STDs
- and more

(Note: Visit our website for a full list.)



Scan to
learn more

Walk in for the next
available appointment
or call to schedule.

312-268-6627

*In case of an emergency,
please call 911 or visit
your nearest hospital.*



Why use Neighborhood Care?

We are conveniently located throughout the South Side in familiar places like churches and other community spaces.

We offer financial help to patients who qualify. Eligibility is automatically reviewed.

We can connect you with community resources for things like food, housing and transportation.



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3. Advocate Medical Group Imani Village Expansion Opens

SPOTLIGHT:

AMG Imani Village

Expansion – Opened December 2025

The expansion adds 4,600 square feet to the Imani Village clinic's footprint. The upgraded facility includes 16 exam rooms, two procedure rooms and specially equipped areas to support:

- **Immediate Care** intake, triage and treatment
- **Cardio diagnostics** and vascular diagnostics
- **Imaging services**, including screening and diagnostic mammography, general x-ray, ultrasound
- Virtually assisted care for **behavioral health and other specialties**
- A new automated **pharmacy kiosk** for common and maintenance prescription medications



4. Epidemiology Analysis on the Effectiveness of the Ambulatory Forward Model

To date, Advocate Health Care's Ambulatory Forward Model has demonstrated effectiveness in advancing two key goals: 1) serving patients from the South Side of Chicago and 2) connecting patients to long-term, preventive healthcare solutions through ambulatory forward care pathways.

To evaluate the early effectiveness of these goals, we identified an analytic cohort of 5,065 Trinity Health patients who engaged with at least one of two ambulatory forward care pathways: 1) a Neighborhood Care Site (NCS) visit or 2) a Virtual Primary Care (VPC) visit between 1/1/2023 through 5/31/2026. All patients who initiated scheduling through either pathway were included in the cohort. Patients who completed their scheduled visit were classified as "successful," while patients who declined, cancelled, or did not attend their visit were classified as "unsuccessful."

For this exploratory analysis, outcomes among successful patients were compared with unsuccessful patients as an internal comparison group. As the initiative continues to mature, future analyses will incorporate more advanced statistical methods and comparison group approaches to further strengthen evaluation of rigor.

The analytic cohort included 2,366 successful visits across the NCS and VPC pathways, representing an overall visit completion rate of 46.7% (See Table 1).

Table 1. Visit Completion Across Ambulatory Forward Care Pathways

Pathway	Successful	Unsuccessful	Total	Success Rate
Virtual Primary Care	566	615	1,181	47.9%
Neighborhood Care Sites	1,800	2,084	3,884	46.3%
Total	2,366	2,699	5,065	46.7%

Goal #1: Serve patients from the South Side of Chicago. Patients utilizing Southside Healthcare Transformation ambulatory forward care pathways are representative of the initiative's intended population and differ substantially from the broader Illinois ambulatory population. Compared with the larger Illinois regional population, which is predominantly White (55.6%), patients utilizing Southside Transformation pathways were overwhelmingly Black/African American, representing 82.4% of Virtual Primary Care patients and 75.1% of Neighborhood Care Site patients (See Table 2).

The two care pathways appear to serve complementary populations. Virtual Primary Care patients were predominantly female (76.5%) and younger, with 60.3% under age 40. In contrast, Neighborhood Care Sites served a larger proportion of older adults, with nearly 30% of patients aged 65 years and older. Patients utilizing Southside Transformation services were also less likely

to have commercial insurance and more likely to be covered through Medicaid or Medicare than the broader Illinois ambulatory population (See Table 2).

Collectively, these findings suggest that the Southside Healthcare Transformation Initiative is successfully reaching populations that experience disproportionate barriers to healthcare access while leveraging multiple care delivery models to engage different segments of the South Side community.

Table 2. Patient Demographic Characteristics

		Illinois n = 31,841		Trinity VPC n = 1,181		Trinity NCS n = 3,884	
Variable	Value	Freq.	%	Freq.	%	Freq.	%
Gender	Female	20986	65.91	903	76.46	2037	52.45
	Male	8876	27.88	278	23.54	1532	39.44
	Unknown	1979	6.22	0	0.00	315	8.11
Race	Black	5552	17.44	973	82.39	2918	75.13
	Hispanic	4181	13.13	114	9.65	431	11.10
	Other	4393	13.8	47	3.98	373	9.60
	White	17715	55.64	47	3.98	162	4.17
Age	< 40	20245	63.58	712	60.29	1187	30.56
	40-64	9920	31.15	387	32.77	1564	40.27
	>= 65	1676	5.26	82	6.94	1133	29.17
Insurance	Commercial	19217	60.35	606	51.31	745	19.18
	Medicaid	5500	17.27	299	25.32	1150	29.61
	Medicare	2680	8.42	123	10.41	1338	34.45
	Self	1351	4.24	58	4.91	362	9.32
	Other	3093	9.71	95	8.04	289	7.44

Goal #2: Connect patients to long-term, preventive health care solutions through ambulatory forward care pathways.

Beyond reaching the intended population, the long-term success of Advocate Health Care's Ambulatory Forward Model depends on whether these pathways successfully connect patients to ongoing preventive healthcare services and improve downstream health outcomes.

The strongest evidence of impact was observed among patients who successfully completed a Neighborhood Care Site visit. Compared with patients who did not complete their scheduled visit, successful patients demonstrated a 118% increase in primary care utilization ($p < 0.001$), suggesting that Neighborhood Care Sites are effectively connecting patients to ongoing, longitudinal primary care. In addition to increased primary care engagement, successful patients

experienced significant reductions across multiple acute care utilization measures, including inpatient visits (-48%), inpatient length of stay (-54%), emergency department visits (-33%), and avoidable emergency department visits (-20%) (all $p < 0.05$; See Table 3).

Importantly, the Neighborhood Care Site population appears to represent a substantially higher-risk patient population than those utilizing Virtual Primary Care. Neighborhood Care Site patients without successful engagement had approximately six times more inpatient visits, three times more emergency department visits, and less than half the primary care utilization of Virtual Primary Care patients without successful engagement. These findings suggest that Neighborhood Care Sites are reaching patients with greater healthcare needs who are less connected to preventive healthcare services. The substantial increase in primary care utilization observed among successful Neighborhood Care Site patients may therefore represent an especially meaningful opportunity to improve care continuity and reduce reliance on acute care settings among some of the community's highest-risk patients.

Among Virtual Primary Care patients, successful engagement was associated with a 12% increase in primary care utilization compared with patients who were unsuccessful, although this finding did not reach statistical significance ($p = 0.1225$). Successful Virtual Primary Care patients also experienced a statistically significant 46% reduction in inpatient length of stay hours ($p = 0.0186$), suggesting a meaningful reduction in healthcare utilization intensity following engagement with the program.

These findings are particularly important because the ambulatory forward care model is designed not only to provide an immediate episode of care, but also to serve as a bridge into the broader healthcare system. Many patients engaging through these pathways face barriers to accessing traditional healthcare services, including lack of an established primary care provider, transportation challenges, competing social needs, financial barriers, and historical disengagement from healthcare. The observed increases in primary care utilization and reductions in acute care utilization suggest that these pathways are helping patients overcome barriers to care and transition from episodic healthcare encounters toward more continuous, relationship-based care.

Table 3. Key Outcomes Associated with Successful Neighborhood Care Site Engagement

Outcome	Unsuccessful Patients (n=2,084)	Successful Patients (n=1,800)	Relative Change	p-value
Primary Care Visits	2.45	5.34	+118%	<0.001
Inpatient Visits	1.50	0.78	- 48%	<0.001
Inpatient Length of Stay (Hours)	199.92	91.75	- 54%	<0.001
Emergency Department Visits	3.85	2.60	- 33%	<0.001
Avoidable Emergency Department Visits	0.22	0.17	- 20%	0.028

Key Takeaway: Patients who successfully completed a Neighborhood Care Site visit demonstrated significantly greater engagement with primary care and consistently lower utilization across multiple acute care measures. Compared with patients who did not complete their scheduled visit, successful patients experienced a 118% increase in primary care utilization, a 48% reduction in inpatient visits, a 54% reduction in inpatient length of stay, a 33% reduction in emergency department visits, and a 20% reduction in avoidable emergency department visits. Collectively, these findings suggest that Neighborhood Care Sites are effectively connecting patients to preventive healthcare services and may help reduce reliance on higher-cost acute care settings.

A substantial body of evidence demonstrates that primary care plays a critical role in preventing illness, improving health outcomes, and supporting more efficient healthcare delivery. Strong primary care systems are associated with better overall health outcomes, greater healthcare access, improved health outcomes, and lower per-capita healthcare costs (Schneider et al., 2022). Primary care achieves these benefits through preventive services, chronic disease management, care coordination, and continuity across the healthcare continuum (NASEM, 2021). By successfully connecting patients to primary care and demonstrating early evidence of reduced inpatient utilization, the Southside Healthcare Transformation Initiative is taking an important first step toward improving long-term health outcomes in a population that experiences significant health access challenges and disproportionate chronic disease burden.

1. Schneider, E. C., Shah, A., Doty, M. M., & Tikkanen, R. (2022). *Primary care in high-income countries: How the United States compares*. The Commonwealth Fund. <https://www.commonwealthfund.org/publications/issue-briefs/2022/mar/primary-care-high-income-countries-how-united-states-compares>
2. National Academies of Sciences, Engineering, and Medicine (NASEM). (2021). *Implementing high-quality primary care: Rebuilding the foundation of health care*. The National Academies Press. <https://doi.org/10.17226/25983>