

IHFSRB OB COE Questions

Jack Axel

August 29, 2025

Rebuttal to Mr. Axel's responses: Angela Filpi, BSN (former Labor and Delivery nurse of Alexian Brothers Medical Center)

1.) How will the closure of the OB unit affect the availability and accessibility of labor and delivery care for pregnant individuals in Elk Grove Village and surrounding areas?

Rebuttal: Mr. Axel did not answer the question. He did not address how the closure of the OB unit will affect the availability and accessibility of labor and delivery care for pregnant individuals in Elk Grove Village and the surrounding areas. Instead, he gave statements about locations of other hospitals, insinuating that "within 30 or less minutes" is a reasonable amount of travel time for patients in need of acute obstetric care. This is common knowledge. The question is how the increase in travel time will affect the care of pregnant individuals? For this rebuttal, I will focus only on St. Alexius and Alexian Brothers. I fail to understand how mentioning Endeavor, Advocate, and Prime are relevant if Ascension's goal is to transition St. Alexius Women and Children's Hospital into a center of excellence. This is why I will choose to ignore Mr. Axel's attempt to use them as examples of access.

The primary service area (PSA) of Ascension Alexian Brothers Medical Center includes:

Elk Grove Village, Roselle, Addison, Des Plaines, Mount Prospect, Bloomingdale, Rolling Meadows, Arlington Heights, Bensenville, and Woodale (healthcare.ascension.org; FY24 Annual Hospital Community Benefits Plan Report).

The PSA of Ascension St. Alexius Medical Center (this includes St. Alexius Women and Children's Hospital) includes:

Hoffman Estates, South Barrington, Schaumburg, Streamwood, Inverness, Hanover Park, Bartlett, Rolling Meadows, and Palatine (healthcare.ascension.org; Community Health Needs Assessment, 2021).

A comparison of travel times with respect to the primary service area of Alexian Brothers Medical Center (data obtained from Google Maps).

1.) Roselle

- Distance from Alexian Brothers: 11-16 minutes
- Distance from St. Alexius: 16-18 minutes

2. Addison

- Distance from Alexian Brothers: 13-14 minutes

- Distance from St. Alexius: 25-26 minutes

3. Des Plaines

- Distance from Alexian Brothers: 16 minutes
- Distance from St. Alexius: 24-27 minutes

4.) Mount Prospect

- Distance from Alexian Brothers: 14-16 minutes
- Distance from St. Alexius: 21-25 minutes

5.) Bloomingdale

- Distance from Alexian Brothers: 14-17 minutes
- Distance from St. Alexius: 21-23 minutes

6.) Arlington Heights

- Distance from Alexian Brothers: 17-20 minutes
- Distance from St. Alexius: 21-22 minutes

7. Bensenville

- Distance from Alexian Brothers: 11 minutes
- Distance from St. Alexius: 23-28 minutes

8.) Woodale

- Distance from Alexian Brothers: 7-9 minutes
- Distance from St. Alexius: 21-24 minutes

The distance from Alexian Brothers to St. Alexius is 17-20 minutes. Again, how will this closure affect pregnant individuals in Alexian Brothers' primary service area? Assuming they have access to a private vehicle, the scenario is that a pregnant patient in need of acute obstetrical care would be driven to St. Alexius. While the added minutes of travel time may not matter to Mr. Axel and his colleagues, I can assure you it matters to that patient. Another scenario is if the patient drives themselves directly, putting them, as well as the public in danger. Consider the patients that depend on public transportation or ride sharing. The time from realizing they need care to receiving it has increased even more. This is one way these patients are affected.

"There are no obstetric services offered at Ascension Alexian Brothers that are not already offered at Ascension St. Alexius." Again, a statement of common knowledge that does not address the question. Mr. Axel was asked about how the closure would affect this special patient population. Highlighting that both obstetric units offer obstetric services is hardly evidence that supports the closure of one over the other. I find it insulting that Mr. Axel assumes the residents of Elk Grove Village, as well as the patients of Alexian Brothers in

their primary service area are so uninformed and naive, that they would accept that statement as anything other than a weak attempt at making his response seem deeper.

Mr. Axel tries to paint the executive board decision makers as empathetic and thoughtful by adding, “In accordance with regulatory requirements and as added courtesy” before listing the other hospitals that can provide obstetric care in the surrounding areas. The fact is that courtesy has nothing to do with other hospitals taking on displaced patients when a unit closes. As he stated, it is “in accordance with regulatory requirements”; hospitals cannot choose to turn a patient in labor away. The Emergency Medical Treatment and Labor Act or EMTALA is a U.S. law requiring hospitals that receive funding from Medicare to provide medical care to any patient presenting with an emergent medical condition or in active labor (www.cms.gov, 2025). Accepting these patients is not an act of courtesy; it is obeying a law. These patients will be given the most basic care and be transferred out as soon as possible. It should not come as surprising to anyone how overrun emergency rooms have become, struggling to handle their own established patient population with inadequate staffing, faulty equipment, and cheap supplies. It is quite easy for Mr. Axel and the board members he represents to give these shallow, scripted answers when they will not have to deal with the fallout. They will all move on to a new hospital to destroy, continue to make millions of dollars, and never think about these patients, nurses, or doctors again.

2. Will patients, especially those from underserved communities, be forced to travel further, increasing risks and potentially delaying emergency care?

Rebuttal: Again, Mr. Axel does not address the question he was asked. He alluded to EMTALA in his first response without explaining what it was and in his second response, he is repeating himself. Mr. Axel has already established that Alexian Brothers as well as other hospitals are required to provide these services. This does not address how increased travel times will affect patients from underserved communities, potentially increasing risk and delaying care.

According to data gathered from hdpulse.nimhd.nih.gov (2025), the poverty rate for the primary service area of Alexian Brothers was 6.5% while the poverty rate for the PSA of St. Alexius was 5.3% (2019-2023). The difference may seem negligible, however with Cook County having a poverty rate of 13.3% compared to the entire state of Illinois (which sits at 11.7%), the number will increase. With the two primary service areas having similar poverty rates, it would make more sense to keep obstetric services available at Alexian Brothers. A growing underserved population needs as many resources as possible. The underserved obstetric population experiences higher rates of maternal mortality and morbidity. In Cook County, the leading causes of maternal mortality are as follows:

- Substance use disorder
- Cardiac and coronary conditions
- Pre-existing chronic medical conditions

- Sepsis
- Mental Health
- Embolism
- Obstetric hemorrhage
- Preeclampsia

(Illinois Maternal Morbidity and Mortality Report, 2023)

Time equals life and minutes matter. Delaying care, even by 15-30 minutes, can have catastrophic consequences. Patient populations that are identified as being underserved suffer even more. According to FEMA.gov, underserved populations are groups that have limited or no access to resources or that are otherwise disenfranchised. These groups include people who are socioeconomically disadvantaged; people with limited English proficiency; educationally disenfranchised people; people of color and women and children (fema.gov/glossary, 2023). The Illinois Maternal Morbidity and Mortality Report identified lack of access to services as a contributing factor to some of the highest rates of maternal death in the country (dph.illinois.gov, 2023). Barriers to access of care include lack of providers, distance to services, and lack of access to transportation (dph.illinois.gov, 2023). The Illinois Department of Public Health has already answered this question in their report. There is no gray area in this matter; increased travel time directly impacts underserved populations. I have provided the link to the report below.

<https://dph.illinois.gov/content/dam/soi/en/web/idph/publications/idph/topics-and-services/life-stages-populations/maternal-child-family-health-services/maternal-health/mmmr/maternal-morbidity-mortality-report2023.pdf>

Regarding underserved populations being “forced to travel further.” I would assume Ascension’s response would be that no one is forcing anyone to travel anywhere they do not want to go. There are plenty of options for them to choose from for obstetric care. Force can be defined as making someone do something against their will (Oxford Dictionary). Manipulation can force people to make decisions they do not want to make. In this case, systematic manipulation has forced this population to go elsewhere for their obstetric care. The Illinois Department of Health as part of their recommendations for hospitals and health systems state,

“Promote birth equity through:

- Participating in ongoing state and regional birth equity initiatives
- Developing and evaluating processes for patient reported experience measures that include opportunities to report if patients are receiving respectful care and report discrimination.
- Engaging in patient/community partners or advisory panels with hospital quality improvement teams to gather patient and community input on hospital efforts focused on birth equity.” (2023)

Ascension has made it clear they have no intention of following these (or any) recommendations in the Maternal Morbidity and Mortality Report.

3. What measures are being taken to ensure that all patients have access to equivalent and quality obstetric care at the new location in Hoffman Estates?

Rebuttal: The issue is not whether Saint Alexius provides quality care. Saint Alexius Women and Children's Hospital provide wonderful care. The issue is about closing Women and Infant Services at Alexian Brothers because they provide equally wonderful care. Mr. Axel states that this will centralize certain services, reduce duplication, and improve the efficiency of resources. This translates to more profit with fewer resources. Mr. Axel went on to boast about the services St. Alexius WCH offers; however, he neglected to mention that Alexian Brothers Women and Infant Services offer all the same (apart from a level III NICU and Perinatal Mood Disorders program on campus). I worked in labor and delivery at Alexian Brothers for a total of 7 years and not one time was this ever an issue. We also participated in all ILPQC initiatives (I was on the promoting vaginal birth committee and saw a decrease in primary cesarean sections because of that). Alexian Brothers is also a baby friendly designated hospital. Alexian Brothers Women and Infant Services has also won awards. Mr. Axel is trying to defend the notion that "Centers of Excellence" are the gold standard for quality care. According to Li, Burson, Clapp, and Fleisher (2020) there are significant inconsistencies in the process for defining centers of excellence (Li et al, 2020). Currently, there is no standardized designation for centers of excellence. Many operational challenges were identified including patient access to care, distribution in a network, and coordination of care between CoEs and local providers (Li et al, 2020). The research concluded that outcomes between CoEs and non-CoEs are mixed with some findings with no clinically significant differences in outcomes or cost (Li et al, 2020).

Please see the article provided in the link below:

<https://www.sciencedirect.com/science/article/abs/pii/S2213076419302507>

4.) How will the hospital address the concern that patients who are familiar with the new arrangements may show up at the Elk Grove Village location expecting to deliver and be turned away.

Rebuttal: First, please note that Mr. Axel's response to this question was copied and pasted from his answer to question 2; this is indicative of laziness and shows that Ascension does not feel this is important enough to take the time to answer these questions genuinely.

“Emergency deliveries will continue at Ascension Alexian Brothers consistent with the Emergency Medical Treatment and Labor Act (EMTALA) state and federal requirements. We will also provide emergency transportation services for patient best served by the Level III NICU at Ascension Saint Alexius Women and Children’s Hospital and are working with our EMS providers and patient transport service to ensure a smooth process for such transfers. Patients will not incur any costs associated with transfers to Ascension Saint Alexius Women and Children’s Hospital for a higher level of care”. (Mr. Axel’s answer to question 2)

“First and foremost, no one will be turned away. Emergency deliveries will continue at Ascension Alexian Brothers consistent with the Emergency Medical Treatment and Labor Act (EMTALA) state and federal requirements. We will also provide emergency transportation services for patients best served by the level III NICU at Ascension Saint Alexius Women and Children’s Hospital. Patient s will not incur any costs associated with transfers to Ascension Saint Alexius Women and Children’s Hospital for a higher level of care. We are working with our EMS providers and patient transport service to ensure a smooth process for such transfers. (Mr. Axel’s answer to question 4)

I am very doubtful that the obstetric providers currently practicing out of Alexian Brothers will be sending their patients to St. Alexius. That should not be a problem though because, as Mr. Axel stated, “there are seven hospitals within 30 or less minutes of Elk Grove that provide labor and delivery services”. Ascension does not seem too concerned about sending business elsewhere. Once this is complete, I believe Ascension will sell to Prime Healthcare. This has been the pattern with 13 Ascension facilities up to this point.

5.) How will the closure impact the dedicated labor and delivery nurses and staff, including those with decades of experience at the Elk Grove Village location?

Rebuttal: The nurses were left with no choice. In fact, the announcement came as a shock. In March of 2025, the former president and CEO of Alexian Brothers met with Vanessa Hiland COO of Ascension St. Alexius and Clayton Ciha, president and CEO of Ascension Illinois Alexian Brothers Behavioral Health Hospital to talk about the strengths and benefits of a smaller health care system. In May, out of nowhere, the CEO of Alexian Brothers Medical Center was replaced and in June the announcement was made to close Women and Infant Services. Mr. Axel seems to think the “retention bonus” and “pay increase” have softened those that were told they had mere months to either accept a position within Ascension or look elsewhere. I would like to assure Mr. Axel that it has not.

6.) Will the nurses and staff be guaranteed positions at the new Hoffman Estates location with comparable wages and benefits?

Rebuttal: Mr. Axel again copied and pasted his answer from question 5. I want to make sure that everyone understands it was never about wanting guaranteed positions at St. Alexius, it has always been about wanting Women and Infant Services at Alexian Brothers to remain open.

7. How will Ascension ensure a smooth and safe transition of patients and medical records between the two facilities?

They share an electronic medical record system. This is not an issue. The bigger issue, is that Ascension does not have any plan about how staff will be trained, how each obstetric emergency will be handled, protocols, management of newborns, ensuring transportation can provide critical obstetric care, how the safety of nurses will be promoted, how the operating room will be circulated, who will be able to scrub, etc.

SOURCES:

https://hdpulse.nimhd.nih.gov/data-portal/social/table?age=001&age_options=ageall_1&demo=00008&demo_options=poverty_3&race=00&race_options=race_7&sex=0&sex_options=sexboth_1&socialtopic=080&socialtopic_options=social_6&statefips=17&statefips_options=area_states

-poverty rates

https://datausa.io/profile/geo/cook-county-il/?completionsUniversities=carnegie_0°reesOrSector=degreesOption&genderOccupations=sex0&genderRaceOptions=genderOption&genderTreemapIndustries=sex0&growthOccupations=value&measureOccupations=workforce&measureTreemapIndustries=workforce&propertyTaxesValue=propertyValue&sexAgeRacePoverty=raceOption&statusEducation=statusEducation0&yearlyChangeTreemapIndustries=valueMeasure#:~:text=Children%20in%20Poverty,the%20children%20living%20in%20poverty.

-where cook county stands

https://healthcare.ascension.org/-/media/project/ascension/healthcare/markets/illinois/illinois-annual-reports/cb_ag_report-ascension_alexian_brothers.pdf

FY24 Community Benefits Report

<https://healthcare.ascension.org/-/media/project/ascension/healthcare/markets/illinois/ilchi/pdfs/ty21-chna-saint-alexius.pdf>

TY21 CBR

<https://hfsrb.illinois.gov/content/dam/soi/en/web/hfsrb/events/documents/2024/december-10-2024-state-board-meeting/OVERVIEW%20.pdf>

Financial Data for the sale of Ascension to Prime

<https://www.chiefhealthcareexecutive.com/view/sale-of-8-illinois-hospitals-finalized>

DEMANDS

Nurses demands:

1. The Illinois Health Facilities and Services Review Board must DENY Alexian Brothers request for exemption for a Certificate of Need, and application for exemption for the discontinuation of the 28-bed obstetric category of service at [Alexian Brothers Medical Center, 800 Biesterfield Road, Elk Grove Village, Illinois \(#E-008-25\)](#).
2. Ascension must fulfill its mission and take the following steps to become an industry leader in combating the meteoric rise in obstetric health care deserts and lowering the pregnancy-related mortality rate:
 - a. Listen to nurses, safely staffing every unit to ensure the best care for patients;
 - b. Maintain obstetric services at Alexian Brothers Medical Center
 - c. Commit to reopening closed labor and delivery wards; and
 - d. Provide obstetrics services at all new hospitals Ascension opens or acquires.

Background information:

In July of 2025, Alexian Brothers Medical Center in Elk Grove Village filed an application with the state of

IL to discontinue services at its 28-bed obstetrics unit. Since then, nurses have fought against these cuts for the safety of their patients.

Facts and themes you can add to your testimony:

The Dangerous Trend

- The US has the highest rate of death among pregnant women and infants among comparably wealthy countries.
 - The maternal mortality rate is more than ten times the average among comparable wealthy nations, such as Australia and Japan, and infant mortality is almost double.
 - For the first time in two decades, infant mortality has risen, largely due to pregnancy-related complications.
 - **Experts attribute this increase to limited access to specialists who specialize in complicated pregnancies.**
 - A recent report by the Centers for Disease Control and Prevention (CDC) found that in 2021, maternal mortality in the United States increased by almost 40 percent, to 33 deaths per 100,000 live births — further widening longstanding racial disparities.
- Black women are more than twice as likely to die during childbirth and are nearly three times more likely to die in childbirth than white women.
- As health outcomes for patients delivering babies and infants have plummeted, a recent report by March of Dimes found 36 percent of U.S. counties now lack obstetrics services at hospitals or birth centers.
- Hospital consolidation has skyrocketed over the past two decades. More than 67 percent of hospitals belong to a larger system, compared to just 45 percent of hospitals in 2000.
- Numerous studies have found highly consolidated health care markets lead to an increase in prices, and may even result in worse patient care outcomes.
- The elimination of obstetric services, the branch of medicine that provides care during pregnancy and childbirth, has emerged as a major casualty of hospitals in highly concentrated markets that want to cut costs.

NURSES SPEAK

- Nurses say that shutting down obstetrics units usually also means forcing patients to change doctors or providers — perhaps even during a pregnancy — which can cause interruptions in the continuity of care and added stress for patients, especially if the new provider hasn't been with them throughout the current pregnancy or previous pregnancies.

- In communities where Ascension still provides obstetrics services to pregnant patients and babies, nurses report that they are severely under-staffed and under-resourced, and specialties within obstetrics (such as antepartum and nursery care) are being discontinued.
- Ascension is also removing departments, like higher levels of neonatal intensive care services, and consolidating them at regional facilities.

Ascension is GREEDY, not struggling financially-

Ascension is the second-largest and wealthiest nonprofit and Catholic health system in the country. In fiscal year 2021, Ascension reported a net income of more than [\\$5.7 billion](#), and the system's CEO took home a compensation package worth more than [\\$13 million](#). Additionally, according to a 2022 Securities and Exchange Commission filing, Ascension runs an investment company that manages more than [\\$41 billion](#).

- In 2012, there were 3,059 hospitals with a labor and delivery department. Between 2012 and 2021, 469 labor and delivery departments closed in the United States.
- In 2012, Ascension hospitals had 61 labor and delivery departments. Between 2012 and 2021, Ascension closed 11 of its labor and delivery departments. Just since 2022, Ascension has closed five more of its labor and delivery departments — for a total closure rate of 26 percent of those labor and delivery departments existing in 2012.
- Ascension's obstetrics closures disproportionately impact metropolitan areas. Between 2012 to 2021, Ascension cut 21 percent of its labor and delivery units in metropolitan areas, whereas the closure rate for metropolitan obstetrics units nationwide was only 6 percent.
- The median poverty rate of census tracts with Ascension hospitals that provide obstetrics services is 10.5 percent, while nationally, census tracts with closures is 13 percent. Since 2012, 10 out of 16 hospitals with obstetrics closures are in census tracts with higher poverty rates than the surrounding county. (A census tract is a small geographic subdivision of a county for which the U.S. Census Bureau collects data.)
- In 2022 and 2023, Ascension closed five obstetrics units. Four out of the five closures were at hospitals with a higher Medicaid participation rate than the surrounding county average.
- Since 2017, Ascension has closed obstetric services at 10 hospitals, with eight of these closures in neighborhoods where the number of Black and Latine residents is higher than the surrounding county.
- All five of Ascension's obstetrics closures since 2022 were in health care markets that are moderately or highly concentrated, meaning there is less competition from other health care systems in the area.
- Half the counties where Ascension closed labor and delivery units have higher rates of infant mortality than the national average.

The conditions Ascension nurses are reporting track with a broader pattern of **Ascension's greed**, which has garnered the scrutiny of local and national news media and regulators, including:

- A **February 2023** [letter to Ascension CEO Joseph Impicicche by U.S. Sen. Tammy Baldwin](#), calling into question Ascension's nonprofit status and mission-driven values.

- Two [separate reports](#) in **January 2023** from Milwaukee, Wis., discussing “disruptions to patient care, long wait times in the emergency department, delayed surgeries and staff concerns about patient safety” at Ascension facilities.
- A [lawsuit](#) filed by Travis County, Texas in **January 2023**, alleging a breach of contract by Ascension-owned Dell Seton Medical Center, arguing Ascension had not complied with “its commitments to...the low-income Travis County residents who depend on Central Health for healthcare services.”
- A **December 2022** [Wall Street Journal investigation](#) into Ascension’s deals, finding it has closed hospitals serving low-income neighborhoods and communities that have private insurance coverage below area median levels – instead choosing to open facilities in wealthier neighborhoods.
- A **December 2022** [New York Times investigation](#) into Ascension’s staffing conditions, reporting that the hospital “spent years reducing its staffing levels in an effort to improve profitability, even though the chain is a nonprofit organization with nearly \$18 billion of cash reserves.”
- A **November 2021** [STAT News investigation](#), describing Ascension as a hospital system “moonlighting as a private equity firm,” valued at \$1 billion.

SOURCES

<https://www.nationalnursesunited.org/press/ascension-has-cut-a-quarter-of-its-labor-and-delivery-departments-in-the-past-decade>

https://www.nationalnursesunited.org/sites/default/files/nnu/documents/1223_AscensionSeton_Obstetrics_DangerousDescent_Report.pdf

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