



**BEACON**<sup>TM</sup>



# Beacon Health System

## Implementation Strategy Plan (Kalamazoo, Dowagiac, Plainwell, Allegan)

2026–2028 (Draft)

### Introduction

Beacon Health System completed Community Health Needs Assessments (CHNAs) for its Allegan, Dowagiac, Kalamazoo, and Plainwell hospitals in alignment with the Affordable Care Act (ACA) and Internal Revenue Service (IRS) requirements for not-for-profit hospitals. The CHNAs incorporate quantitative data, qualitative input from community members and partners, and hospital utilization data to identify priority community health needs.

This Implementation Strategy Plan (ISP) outlines how Beacon Health System and its Allegan, Dowagiac, Kalamazoo, and Plainwell Hospitals will address the prioritized community health needs over a three-year period. The ISP is designed to be simple, actionable, and adaptable as community conditions, partnerships, and resources evolve.

### Executive Summary

A comprehensive Community Health Needs Assessment (CHNA) was adopted by the hospital board in April 2025. The CHNA was conducted in adherence with federal requirements for not-for-profit hospitals set forth in the Affordable Care Act (ACA) and by the Internal Revenue Service (IRS). The assessments included a comprehensive review of secondary data on health outcomes and community health status, along with primary data collection. This involved input from community members and organizations through surveys, stakeholder interviews, focus groups, and access audits.

Beacon Health System's Allegan, Dowagiac, Kalamazoo, and Plainwell Hospitals are committed to improving the health and well-being of the communities they serve. Based on findings from recent Community Health Needs Assessments, Beacon identified **Access to Healthcare** as the primary community health priority across its Michigan service areas and approved this priority area in the fall of 2025.

Community members and partners consistently shared that challenges such as limited provider availability, long wait times, transportation barriers, affordability concerns, and difficulty navigating the healthcare system make it harder for individuals and families to get the care they need. These challenges are often compounded by unmet mental and behavioral health needs and social factors such as housing instability, food insecurity, and economic stress.

This Implementation Strategy Plan focuses on improving access to health care while recognizing that true access goes beyond clinical services alone. Beacon's approach integrates mental and

behavioral health supports, care coordination, and efforts to address social drivers of health that affect a person’s ability to seek, receive, and continue care.

Through collaboration with community partners and a focus on practical, patient-centered strategies, Beacon Health System aims to reduce barriers, strengthen connections to care, and support healthier communities across Michigan.

## About Beacon Health System – Allegan, Dowagiac, Kalamazoo, and Plainwell Hospitals



Beacon Health System is a locally owned and governed health system residents in northern Indiana and Southwest Michigan. We provide specialized services closer to home for thousands of patients and over 11,000 associates throughout the region, Beacon connects you with the care you and your family need to be your very best. That takes expertise. We are the regional leader in comprehensive, integrated services — from childbirth and pediatrics to cancer, trauma, heart and vascular, stroke, orthopedics and sports medicine, surgery, mental health and so much more. Our passion is not only saving lives, but also making them better. That’s why we created a health care system that is here for people no matter where they are ... in their physical location or in their wellness journey. We have locations across the region that provide a wide variety of expert, nationally recognized services available only at Beacon. This ensures everyone is connected with the care they need so they can live their best lives, right here. Beacon Health System acquired Allegan, Dowagiac, Kalamazoo, and Plainwell hospitals officially io July 1, 2025. These facilities provide a range of inpatient, outpatient, emergency, and specialty services and play a critical role in addressing access, equity, and health outcomes in both rural and semi-rural communities.



**Beacon Allegan**



**Beacon Dowagiac**



**Beacon Kalamazoo**



**Beacon Plainwell**

<small>Founded in 1938</small> <b>Beacon Allegan</b>	<small>Founded in 1954</small> <b>Beacon Dowagiac</b>	<small>Founded in 1889</small> <b>Beacon Kalamazoo</b>	<small>Founded in 1961</small> <b>Beacon Plainwell</b>
<ul style="list-style-type: none"> <li>• 24/7 Emergency Room</li> <li>• 25-licensed bed critical access hospital*</li> <li>• Joint Commission-accredited hospital and laboratory with Medication Compounding and Swing Bed certifications</li> <li>• Medical specialties (primary care, orthopedics, cancer, general surgery, radiology, pulmonology, dermatology, vascular, neurology, cardiac rehab and audiology)</li> <li>• Diagnostic imaging services</li> <li>• Laboratories</li> </ul>	<ul style="list-style-type: none"> <li>• Level IV Trauma Center</li> <li>• 24/7 Emergency Room</li> <li>• 25 staffed beds</li> <li>• Joint Commission-accredited hospital and laboratory with Medication Compounding and Swing Bed certifications</li> <li>• Medical specialties (heart, cancer, stroke, women's health)</li> <li>• Diagnostic imaging services</li> <li>• Laboratories</li> <li>• Onsite physical and occupational therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Level II Trauma Center</li> <li>• 24/7 Emergency Room</li> <li>• 268 staffed beds</li> <li>• Robotic-assisted procedures, like Mako SmartRobotics™</li> <li>• Bariatric Surgery</li> <li>• Inpatient behavioral health units</li> <li>• Comprehensive stroke center</li> <li>• Medical specialties (heart, lung, cancer, sleep, women's health)</li> <li>• Birthing center</li> <li>• Diagnostic imaging services</li> <li>• Laboratories</li> <li>• Rehabilitation and respiratory therapies</li> </ul>	<ul style="list-style-type: none"> <li>• 24/7 Emergency Room / 13 emergency beds</li> <li>• 22 staffed beds</li> <li>• Joint Commission-accredited hospital and laboratory with Medication Compounding certification</li> <li>• Medical specialties (heart, stroke and women's health)</li> <li>• Diagnostic imaging services</li> <li>• Laboratory services and cardiology testing (EKGs)</li> <li>• Inpatient rehabilitation</li> <li>• Mammography recertification (American College of Radiology)</li> <li>• Long-Term Acute Care Unit (LTAC)</li> </ul>

## About Implementation Strategy Plans

In alignment with the Affordable Care Act (ACA), the Internal Revenue Service (IRS) and applicable federal requirements for not-for-profit hospitals, Beacon Health System completed a comprehensive regional Beacon Community Health Needs Assessment (CHNA) for its four hospitals. The CHNA was adopted by each of the hospital boards in April 2025. The priority areas identified from the CHNA were adopted by the hospital boards in September 2025.

In addition to the CHNA, not-for-profit hospitals are also required to complete an Implementation Strategy Plan (ISP). The intent of the ISP is to respond to the community needs with an implementation plan that can be effectively executed leveraging hospital resources as well as community partners. This ISP was also adopted by each of the hospital boards in March 2026.

The ISP is an iterative plan and should be modified as internal and external factors change, including emerging needs, availability of resources, partnerships and policies. An ISP should build on and leverage prior success while simultaneously adjusting strategies and actions as obstacles are encountered.

The following Beacon Health ISP is a working document and may be updated over the course of the next three years as internal and external factors change. A revised version of the plan may be added to the Beacon Health website to replace the original version. Each version will notate any changes made to the plan.

### Definitions

When a hospital or health system develops an ISP, it tracks both outputs and outcomes to support the monitoring and evaluation of its success. Both output measures and outcome measures are used to assess the effectiveness, but they serve different purposes.

Aspect	Output Measures	Outcome Measures
<b>Definition</b>	The immediate results or deliverables of an activity.	The broader impact or benefits resulting from an activity.
<b>Focus</b>	Quantity of work done.	Quality of change or impact.
<b>Timeframe</b>	Short-term and easier to measure.	Longer-term and harder to measure.
<b>Example</b>	# of patients seen by a doctor.	Reduction in disease rates or improved patient health.
<b>Measurement Type</b>	Typically quantitative (count, frequency, percentage).	Can be qualitative or quantitative (surveys, observations, statistics).

In response to the needs identified from the community served, we will define vulnerable populations as individuals at risk of experiencing poor health outcomes due to social, economic, or environmental factors. Factors such as low income, chronic diseases, uninsured, underinsured, homelessness, substance misuse, rural areas, and inner cities throughout this document.

In response to needs identified by the communities we serve, Beacon Health System defines vulnerable populations as individuals at risk of poor health outcomes due to social, economic or environmental factors. These may include people with low income, chronic conditions, who are uninsured or underinsured, experiencing homelessness or substance misuse, or living in rural or inner-city areas. This Implementation Strategy Plan focuses on the social drivers of health most directly limiting access to care—housing instability, food insecurity and transportation barriers—while remaining responsive to emerging community needs.

## Methodology

The Implementation Strategy Plan (ISP) was developed with the insights and input from service line leaders from the Allegan, Dowagiac, Kalamazoo, and Plainwell hospitals and from listening tours from local organizations and leaders across the region.

The ISP was informed by the findings of the Community Health Needs Assessments (CHNAs) for Allegan County, Kalamazoo County and Cass County and reflects the priorities identified through those assessments. Development of the ISP also considered Beacon Health System’s regional and system-wide strategic priorities to ensure alignment between community health improvement efforts and broader organizational goals.

Additionally, a literature review of best practices and case studies was conducted to identify potential initiatives or programs that could be implemented at Beacon Health to improve overall healthcare access in the three-county service area.

## Priority Area: Access to Health Care

Based on review of the 2024–2025 Michigan Community Health Needs Assessments for Cass County (Borgess-Lee Hospital), Kalamazoo County (Borgess Hospital and partners), and Allegan County (Borgess Allegan Hospital), Beacon Health System identified **Access to Healthcare** as the primary community health priority for its Allegan, Dowagiac, Kalamazoo, and Plainwell Hospitals.

Across all three CHNAs, limited access to care was consistently identified as a root issue contributing to poorer health outcomes. Barriers include provider shortages, long wait times, transportation challenges, affordability, fragmented care coordination, and limited access to behavioral health services.

While this Implementation Strategy Plan is centered on improving access to health care, Beacon recognizes that access cannot be addressed in isolation. Therefore, strategies under this priority area intentionally incorporate: - Mental and behavioral health access and coordination - Social drivers of health that impact an individual’s ability to obtain and sustain care, including housing, food, transportation, and economic stability.

This focused approach allows Beacon Health System to address a single primary priority area while implementing comprehensive, upstream, and patient-centered strategies.

## Strategy Plan

**Goal: Improve access to timely, coordinated, and equitable health care for residents served across Beacon Health System’s Allegan, Dowagiac, Kalamazoo, and Plainwell hospitals’ service area.**

### Strategy 1: Improve Access to Healthcare Services and Providers

Expand access to primary care, specialty care, maternal health, behavioral health, and chronic disease management services to reduce disparities in infant mortality and improve

management of preventable conditions. Strengthen alignment with Federally Qualified Health Centers (FQHCs), local health departments, and community mental health agencies to ensure coordinated and equitable access.

### **Key Tactics**

- Beacon Medical Group and hospitals draft and follow a three-year recruitment plan for primary and specialty care with specific targets.
- Strengthen partnerships between hospitals, outpatient providers, FQHCs, maternal health providers, local health departments and community mental health agencies that will lead to referrals.
- Improve timely access to prenatal and postpartum appointments, including early entry into prenatal care, in collaboration with FQHCs and public health partners.
- Implement the Michigan Hospital Association – supported *Cooking Matters* chronic disease management program, beginning with a pilot in Kalamazoo County in 2026 and expanding to additional Michigan hospitals as feasible.
- Expand use of telehealth and alternative care delivery models where appropriate.

### **Output Measures**

- Annual review of BHS three-year strategy recruitment plan.
- Number of strengthened partnerships with FQHCs, health departments, and community mental health agencies.
- Number of behavioral health and OB patients enrolled in wraparound services.
- Number of participants enrolled in chronic disease management program.

### **Outcome Measures**

- Reduce Emergency Department utilization for behavioral and mental health needs.
- Reduce Emergency Department utilization for OB patients.

## **Strategy 2: Integrate Mental and Behavioral Health into Access Efforts**

Improve identification, access, and coordination of mental health and substance use services as part of routine health care access, including implementation of the Michigan Clinical Consultation & Care (MC3) program across all Michigan hospitals. Strengthen collaboration with community mental health agencies and public health partners to support timely, coordinated behavioral health care.

### **Key Tactics**

- Implement and promote MC3 participation within the Emergency Departments across Michigan hospitals.

- Establish or strengthen referral and feedback loops with community mental health agencies.
- Partner with local health departments and community-based organizations to align maternal mental health and substance use initiatives.

### **Output Measures**

- Number of providers participating in MC3.
- Number of psychiatric consultations accessed through MC3.
- Number of formalized referral pathways with community mental health agencies.
- Number of patients screened and referred for behavioral health services.

### **Outcome Measures**

- Reduce Emergency Department utilization for behavioral and mental health needs.

## **Strategy 3: Address Social Drivers of Health That Limit Access to Care**

Identify and respond to social drivers of health needs: transportation, food insecurity, and housing barriers that prevent individuals from accessing healthcare services.

At Beacon Kalamazoo this includes providing transportation vouchers for patients with discharge transportation needs and utilizing a specially equipped behavioral health transport vehicle for safe, dignified transfers. Beacon Kalamazoo also actively participates in the WMed street medicine program to reach unhoused and vulnerable individuals where they are.

### **Key Tactics**

- Expand screening for social drivers of health in clinical settings.
- Strengthen referral and follow-up processes for transportation and housing-related services.
- Collaborate with housing agencies, transit providers, and community-based organizations.
- Enhance the integration of transportation and housing support into discharge planning and care coordination.

### **Output Measures**

- Number of patients screened for social drivers of health
- Number of referrals made for transportation assistance
- Number of referrals made for housing-related services
- Number of community partnerships supporting transportation and housing access
- Number of patients receiving transportation and housing support at discharge

- Number of patients seen through the Street medicine program

### **Outcome Measures**

- Increase the percentage of identified transportation and housing needs addressed.
- Decrease in hospital readmission rates for vulnerable populations.

## **Strategy 4: Build Trust with Community Members and Providers**

Strengthen trust between community members and both clinical and non-clinical providers to improve engagement, continuity of care and health outcomes.

### **Key Tactics**

- Establish and strengthen cross-hospital collaboration to build trust between providers and community partners, strengthen outreach, and support initiatives.
- Partner with Cradle Kalamazoo, FQHCs, health departments, and community mental health agencies for coordinated outreach
- Deliver chronic disease education and maternal health initiatives in community-based settings
- Support community health workers, peer support specialists, and navigators connected to trusted organizations

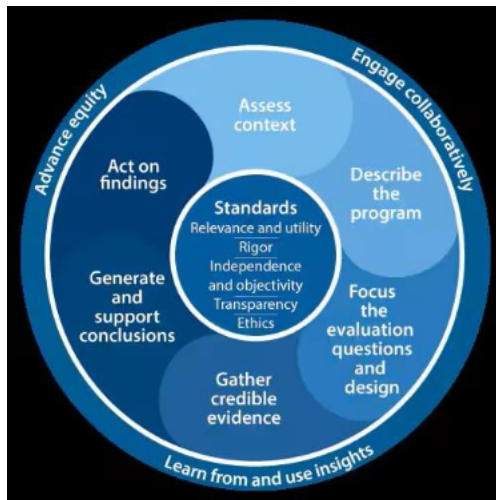
### **Output Measures**

- Number of joint outreach activities conducted with community partners
- Number of trainings provided on how to build trust
- Number of community-based chronic disease (i.e. Cooking Matters) or maternal health sessions delivered
- Number of community engagement events supported
- Number of patients served by non-clinical staff

### **Outcome Measures**

- Improved patient-reported trust in providers and healthcare systems

## Evaluation and Monitoring



Evaluation of any Implementation Strategy Plan is just as critical as the implementation of strategies, programs, and initiatives. To measure progress of goals, Beacon Health System will utilize the Centers for Disease Control and Prevention (CDC) Program Evaluation Framework (2024). The three foundational principles of the Framework are engaged collaboratively, advance equity, and learn from and use insights.

The Framework includes six steps to complete a successful evaluation:

1. Assess the context
2. Describe the program
3. Focus the evaluation question and design
4. Gather credible evidence
5. Generate and support conclusions
6. Act on findings

The Implementation Strategy may be amended over the three-year period in response to changing community needs, available resources, or partnership opportunities, consistent with IRS requirements and Beacon Health System governance processes.

Beacon Health System will monitor progress on this Implementation Strategy quarterly and report on it annually. Monitoring will include tracking outputs, assessing progress toward outcomes, and identifying opportunities for improvement. Baseline data will be established during the first year of implementation where needed.

The ISP may be amended over the three-year period in response to changing community needs, resources, or partnerships, consistent with IRS requirements and Beacon Health System governance processes.

Beacon Health System will monitor progress on this ISP annually using a combination of quantitative and qualitative measures. Baselines will be established in Year 1 where needed, and progress will be reviewed internally to support continuous improvement.

Evaluation activities will align with established public health and quality improvement frameworks and emphasize learning, equity, and accountability.

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## Appendices

### Appendix A: CHNA Alignment Summary

The table below illustrates how the primary priority area of **Access to Healthcare** and its supporting strategies align with significant needs identified in the Michigan Community Health Needs Assessments.

ISP Focus Area	Cass County	Kalamazoo County	Allegan County
Access to healthcare services and providers	✓ Healthcare Access	✓ Healthcare Access & Quality	✓ Healthcare Access
Mental and behavioral health access	✓ Substance Use	✓ Behavioral Health	✓ Mental & Behavioral Health, Substance Use
Care coordination and navigation	✓ Care Coordination	✓ Healthcare Access & Quality	✓ Healthcare Access
Social drivers impacting access (housing, food, transportation, economic stability)	✓ Economic Stability, Housing	✓ Economic Stability, Housing	✓ Economic Stability, Food Insecurity, Housing

This alignment demonstrates that while Beacon Health System selected a single primary priority area for its Allegan, Dowagiac, Kalamazoo, and Plainwell Hospitals, the strategies outlined in this Implementation Strategy Plan respond directly to the significant needs identified across all three CHNAs.

<sup>1</sup> *This strategy is specific to Kalamazoo County and reflects findings from the Kalamazoo County Community Health Needs Assessment, which identified disparities in maternal and infant outcomes. Beacon Health System will continue to align this work with existing local initiatives and partners to avoid duplication and maximize impact.*

## Appendix B: Best Practices for Addressing Access to Healthcare

The following best practices reflect national guidance and evidence-based approaches that support Beacon Health System’s strategies to improve access to care, integrate behavioral health, strengthen cross-sector partnerships, address transportation and housing barriers, and build trust within Michigan communities.

### Improving Access to Healthcare Services

- **Strengthen cross-sector referral systems:** Develop shared workflows and feedback loops between hospitals, FQHCs, local health departments, and community mental health agencies to reduce fragmentation and improve continuity of care.
- **Prioritize early and coordinated maternal care:** Support early entry into prenatal care, structured postpartum follow-up, and integrated pediatric services to improve maternal and infant outcomes.

- **Embed chronic disease self-management into care delivery:** Incorporate nutrition education and evidence-informed programs such as Cooking Matters to support prevention and management of diet-sensitive conditions.

## Integrating Mental and Behavioral Health

- **Expand provider capacity through consultation models:** Utilize psychiatric consultation programs such as MC3 to support pediatric and perinatal providers in managing behavioral health conditions within primary and maternal care settings.
- **Standardize screening and referral pathways:** Integrate behavioral health screening into clinical workflows and formalize partnerships with community mental health agencies for coordinated follow-up.
- **Align with public health and community mental health systems:** Coordinate initiatives with local health departments and community agencies to ensure consistent and equitable access to services.

## Addressing Transportation and Housing Barriers

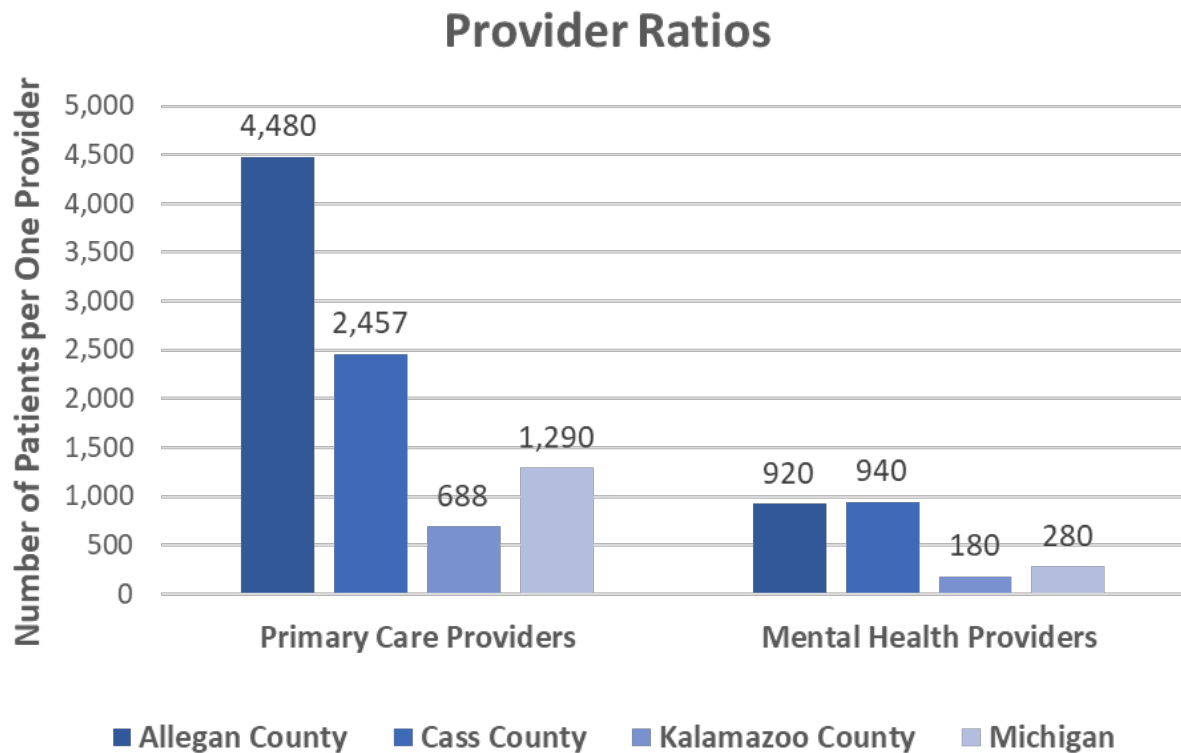
- **Screen early and consistently:** Incorporate transportation and housing stability screening into intake, care planning, and discharge processes.
- **Leverage existing community infrastructure:** Partner with housing agencies, transit providers, and human service organizations rather than duplicating services.
- **Target high-risk populations:** Focus interventions on individuals with frequent emergency department utilization, chronic disease, or complex maternal and infant health needs.
- **Building Trust Through Community Partnership**
- **Invest in cultural humility and trauma-informed care training:** Equip clinical and non-clinical staff to serve as trusted partners.
- **Co-design community outreach:** Partner with trusted organizations such as Cradle Kalamazoo, FQHCs, health departments, and community mental health agencies to collaboratively deliver education and support.
- **Deliver programs in accessible community settings:** Offer initiatives such as Cooking Matters in community-based locations to create consistent, positive engagement opportunities.
- **Measure engagement and trust:** Utilize patient-reported experience measures and participation trends to assess strengthened relationships and sustained care engagement.

## Evidence and Guidance Sources

The above best practices are informed by the following sources:

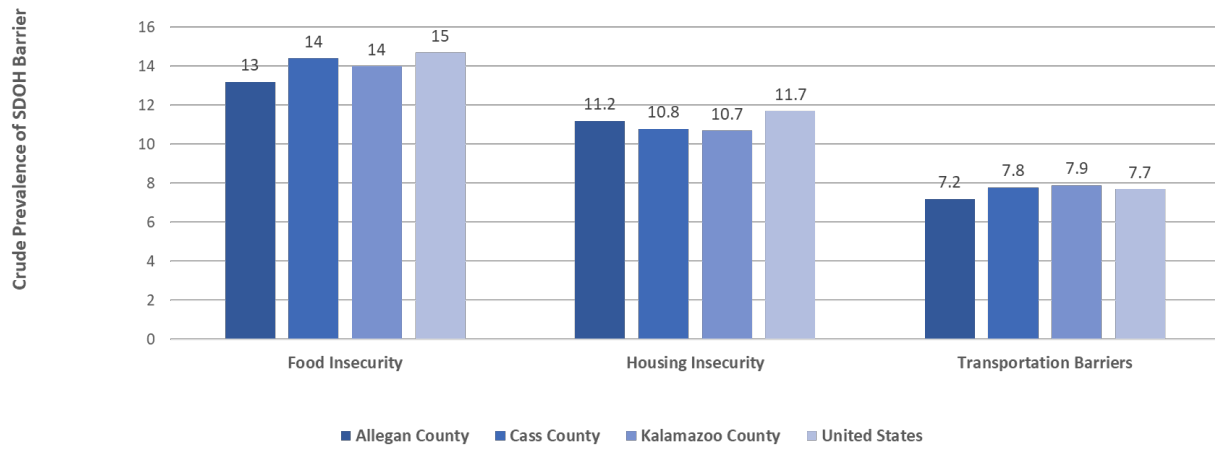
- Agency for Healthcare Research and Quality (AHRQ). *Care Coordination Measures Atlas*.
- Centers for Disease Control and Prevention (CDC). *Social Determinants of Health Framework*.
- Centers for Medicare & Medicaid Services (CMS). *Accountable Health Communities Model Evaluation*.
- Health Resources and Services Administration (HRSA). *Health Center Program Compliance Manual*.
- Michigan Department of Health and Human Services. *Michigan Clinical Consultation & Care (MC3) Program Overview*.
- National Academies of Sciences, Engineering, and Medicine. (2019). *Integrating Social Care into the Delivery of Health Care: Moving Upstream to Improve the Nation's Health*.
- Share Our Strength / Cooking Matters. *Evidence and Evaluation Findings on Nutrition Education and Food Security Interventions*.

## Appendix C: Access to Healthcare Data Overview



Source: NPPES, 2024 and County Health Rankings, 2024

### SDOH Barriers



Source: CDC Places, 2023