



Community Benefit Report

Connecting Communities to Care. Advancing Health Together.

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Our Mission

We deliver outstanding care, inspire health and connect with heart.

Our Values

Trust | Respect | Integrity | Compassion

Beacon Health System complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

Beacon Health System cumple con las leyes federales de derechos civiles aplicables y no discrimina por motivos de raza, color, nacionalidad, edad, discapacidad o sexo.

Find us on social media



Greetings

At Beacon Health System, our commitment to community is at the heart of everything we do. Each year, our Community Benefit Report reflects not only the programs we support, but the partnerships we build, the lives we touch, and the progress we make together.

In 2025, our work was guided by a simple yet powerful principle: **connecting communities to care and advancing health together**. This means meeting individuals where they are, addressing barriers to access, and working collaboratively across sectors to improve health outcomes for all.

Through our Community Health Needs Assessment and Implementation Strategy, we continued to focus on key priorities such as access to care, perinatal health, health literacy, and the social drivers of health. We strengthened our approach by aligning clinical care with community-based services—ensuring that support extends beyond the walls of our hospitals and into the neighborhoods we serve.

This year, we expanded screening and referral efforts to better identify social needs, increased engagement with community health providers (clinical and non-clinical), and deepened partnerships with local organizations. Whether addressing food insecurity, supporting maternal and infant health, or improving access to behavioral health services, our efforts reflect a coordinated and data-driven approach to care.


We are also proud to welcome our communities in southwest Michigan. As we expand our reach, we are beginning by listening—working to understand the unique health needs of each community. This foundational work will guide our strategy, and we look forward to sharing more in future reports about the partnerships and initiatives underway to create lasting impact.

None of this work happens in isolation. It is made possible through the dedication of our associates, the trust of our patients, and the collaboration of community partners. Together, we are building a more connected system of care—one that is responsive, equitable, and rooted in the needs of our communities.

As we look ahead, we remain committed to innovation, partnership, and continuous improvement. We will continue to listen, learn, and lead with purpose—ensuring that every individual has the opportunity to achieve their best health.

Thank you for being part of this journey with us.

With gratitude,



Kimberly Green Reeves, MPA
Vice President, Community Impact & Partnerships
Beacon Health System



We will continue to listen, learn, and lead with purpose—ensuring that every individual has the opportunity to achieve their best health.

Who we are: a regional system, a shared responsibility for a healthier you



Beacon Health System is a locally owned, not-for-profit health system with medical practices and hospitals caring for our neighbors in Indiana and Michigan. Headquartered in South Bend, Indiana, with hospitals, outpatient centers, specialty practices and more than 11,000 associates, Beacon provides comprehensive care across the region.

Our integration of several new Michigan hospitals in 2025 deepened our commitment to rural and **semi-rural** communities where access to care is often made more challenging by geography, workforce shortages and transportation challenges.

Across both states, Beacon is committed to:

- Delivering high-quality care, regardless of ability to pay
- Investing in community health improvement
- Strengthening cross-sector collaboration
- Measuring progress and ensuring accountability

With acute care hospitals in both Indiana (Beacon Children’s Hospital, Beacon Granger Hospital, Community Hospital of Bremen, Elkhart General Hospital, Epworth Hospital and Memorial Hospital of South Bend) and Michigan (Three Rivers Hospital, Beacon Kalamazoo, Beacon Dowagiac, Beacon Allegan and Beacon Plainwell), Beacon Health System leads system-wide Community Health Needs Assessment (CHNA) coordination and Implementation efforts. These include strategy development, partnership engagement, maternal and behavioral health initiatives, workforce programs and evaluation efforts.

We operate as one system — aligned in purpose, responsive in practice and rooted in compassion.

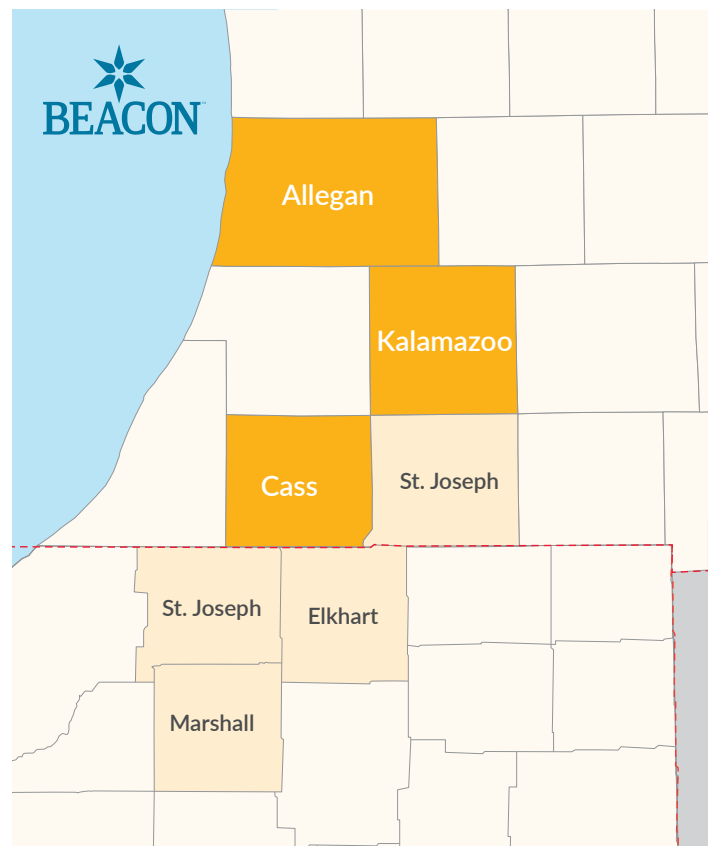
Who we serve

In 2025, Beacon was proud to expand our service area to include Allegan County, Cass County and Kalamazoo County in Michigan. Our core service area now comprises seven counties in Indiana and Michigan:

Indiana: St. Joseph County, Elkhart County, Marshall County

Michigan: St. Joseph County, Allegan County, Cass County and Kalamazoo County

For certain services, such as trauma care and pediatrics, Beacon’s reach is much wider.



Caring for our community

Beacon Health System has a steadfast commitment to improving health and well-being across the communities we serve. In 2025, that commitment expanded as Beacon welcomed new hospitals and communities in Allegan, Cass and Kalamazoo counties in Michigan, strengthening our role as a regional health system serving families across northern Indiana and southwest Michigan. While our service area has grown, our mission remains the same: to deliver outstanding care, inspire health, and connect with heart.

Through Community Health Needs Assessments and ongoing engagement with residents, community leaders, and partner organizations, Beacon works to understand the most pressing health challenges in the communities we serve. Across both Indiana and Michigan, many of these needs are interconnected – including access to healthcare providers, behavioral health services, transportation, and other social and economic factors that influence health outcomes.

To help address these needs, Beacon supports programs and services that:

- Provide education on prevention and wellness
- Offer tools and resources that support healthier lifestyle choices
- Expand maternal and perinatal services to improve outcomes for mothers and infants
- Reduce barriers to care by meeting people where they are through community partnerships

We advance this work by:

- **Investing in nonprofit organizations and community partners** addressing CHNA priority areas.
- **Working with local agencies, businesses, and public health partners** to strengthen the community's ability to respond to its top health needs.
- **Delivering educational**, clinical, and care coordination programs directly to residents, including services that support maternal and infant health, behavioral health access, and chronic disease prevention.
- **Expanding strategic research partnerships**, including collaboration with the University of Notre Dame, to better understand community needs, measure outcomes, and strengthen the impact of our work.

Together, these efforts help Beacon build stronger, healthier communities and ensure families across Indiana and Michigan have the resources and support they need to thrive.

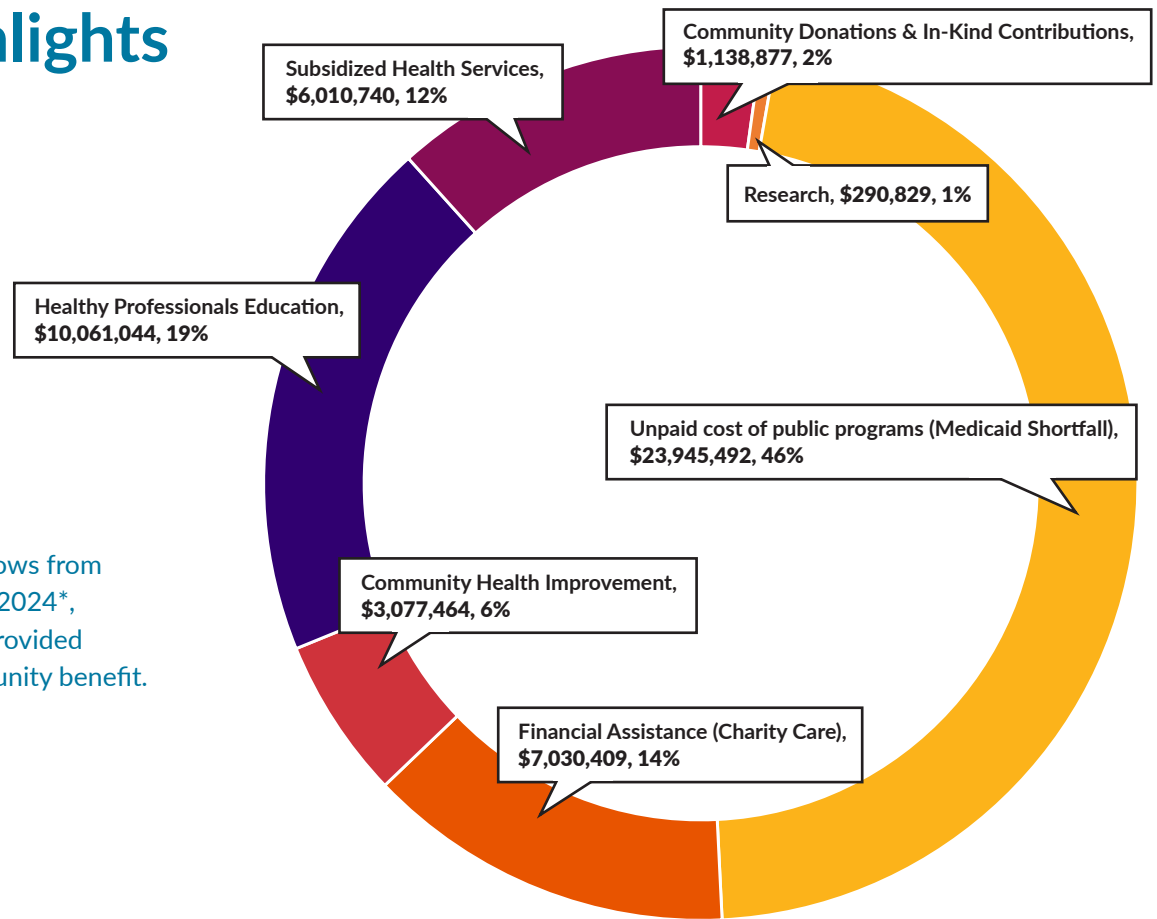


2025 Highlights



Changing Lives in Our Communities

Our community benefit flows from our mission. In fiscal year 2024*, Beacon Health Services provided \$51,554,855.00 in community benefit.



By the Numbers

4

new hospitals integrated into Beacon Health System

3

Michigan counties added to Beacon's service area

15

community organizations partnered

57

households assisted with financial needs

18,000+

individuals helped by Community Health Workers or other non-clinical care services

9,000+

rides to medical appointments provided in 2025

7,000+

individuals screened for social needs

4

federally qualified health centers gained tools to improve continuity of care across agencies and care teams

9,040

food items donated to combat food insecurity



University of Notre Dame research partnership launched

The power of community

Transportation makes a difference:

For one cancer patient, unreliable transportation threatened their ability to complete radiation therapy. Through coordinated partnership with the Council on Aging of Elkhart County, consistent transportation was secured for emergency visits, imaging appointments, and radiation treatments. The patient completed therapy and reached remission. "I cannot believe anyone cares this much," the patient shared.

Community Health Workers step in:

When an individual experienced the sudden loss of a spouse while managing medical complications, a Community Health Worker coordinated burial assistance, disability benefits, food support and long-term care navigation. Another client was facing potential eviction and had no heat until a Community Health Worker identified emergency resources.

A growing family's journey:

Becoming a parent came with an abundance of newfound joy for one mother but also fear that she may not know how to properly care for her son and be able to financially support an addition to the family. The Family Journey Program provided a variety of relevant resources and available supports that she and her husband probably would not have found on their own – "and yet have been so necessary and helpful in my journey of motherhood," she said.

Lifesaving blood pressure monitoring:

When a snowstorm nearly derailed a patient's appointment, the nurse switched to a video visit. She determined that the patient, who was 32 weeks pregnant, had dangerously high blood pressure, and she instructed her to go to the hospital right away. Mother and baby received timely care that likely prevented serious, life-threatening complications.

Encouraging associates to volunteer:

Beacon recognizes that volunteering enriches the lives of the workforce and the community. Community service through "Beacon's Helping Hands" programs encourages Beacon associates to participate in community activities aligned with Beacon's Mission and Values. During 2025, 84 Beacon associates volunteered 291.2 hours for Toys for Tots, Community Health Talks, Food Bank of Northern IN, Cultivate Food Rescue, Food Drives and other community service activities.



Council on Aging of Elkhart County



The Family Journey Program



Food Bank of Northern IN

Community Health Needs Assessments: Listening to our communities



Beacon
2024 CHNA



SW MI
2024 CHNA

In 2024, Beacon Health System completed a series of Community Health Needs Assessments (CHNAs) across northern Indiana and southwest Michigan. These assessments were finalized and adopted by hospital boards throughout 2024, marking the beginning of a new three-year implementation cycle.

In Indiana counties and St. Joseph County, Michigan, Beacon conducted a system-wide CHNA in 2024, engaging multiple counties through a coordinated regional process guided by the MAPP 2.0 framework (Mobilizing for Action through Planning and Partnerships). This approach emphasized community engagement, data transparency, and shared prioritization.

Across all assessments, Beacon combined:

- Secondary data analysis of health indicators
- Beacon service utilization data
- Community surveys
- Focus groups
- Stakeholder interviews
- Advisory Council participation
- Multi-stage prioritization processes

These were not one-time conversations. In Indiana, for example, the prioritization process included multiple survey rounds, in-depth discussion, scoring based on impact and feasibility, and final validation by community leaders and hospital boards.

We worked diligently to ensure that the priorities selected reflected both measurable data trends and lived community experience.

When Beacon acquired four hospitals in mid-2025, CHNAs for Allegan County, Cass County and Kalamazoo County had already been completed earlier that year. These assessments were finalized and adopted in late 2024, providing the foundation for the 2026–2028 Michigan Implementation Strategy.

What we learned

The Indiana CHNA, including St. Joseph County, Michigan, ultimately prioritized **Access to Providers** as the focus for the 2025–2027 Implementation Strategy recognizing that workforce capacity, referral systems and integration of non-clinical support would be essential to improving outcomes.

Michigan's CHNAs prioritized **Access to Healthcare**, reflecting the understanding that access encompasses the full ecosystem that allows individuals to obtain and sustain care.

Though Indiana and Michigan used slightly different language in their prioritization, the alignment is strong, with communities across both states emphasizing:

- Provider shortages
- Behavioral health access
- Transportation barriers
- Housing instability
- Economic stress
- System fragmentation
- The need for improved care coordination

While the 2024 and 2025 Community Health Needs Assessments revealed distinct challenges unique to each county, several overarching themes were evident throughout the region. Most notably, communities consistently identified the need to improve access to healthcare providers, enhance behavioral health services, and strengthen care coordination. In addition, social drivers of health—such as economic conditions, transportation, and housing—as well as a general mistrust of healthcare systems, were recurring concerns across counties.

Workforce shortages and long wait times for primary and specialty care, especially behavioral health care.

Behavioral and mental health access was repeatedly elevated as an urgent need. In Kalamazoo (MI), stakeholders emphasized behavioral health integration and social drivers of health as interconnected issues influencing

emergency department utilization and preventive care access. Emergency department usage patterns reinforce community concerns overall and particularly for behavioral health populations.

In Kalamazoo (MI) behavioral and mental health needs were particularly concerning for children, adolescents and vulnerable adults. Stakeholders additionally cited mental health service gaps and substance use challenges.

Community Health Priority	St. Joseph (IN)	Elkhart (IN)	Marshall (IN)	St. Joseph (MI)	Cass (MI)	Kalamazoo (MI)	Allegan (MI)
Access to Healthcare / Providers	Provider access	Provider access	Rural provider access	Healthcare access	Healthcare access	Healthcare access & quality	Healthcare access
Behavioral & Mental Health	Behavioral and mental health	Behavioral and mental health, substance use	Behavioral and mental health	Mental health & substance use	Substance use	Behavioral health	Mental & behavioral health
Care Coordination & Navigation	Care coordination	Care coordination	Care coordination	Care navigation	Care coordination	Access & care coordination	Care navigation
Social Drivers of Health (housing, food, transportation, economic stability)	Housing, transportation	Housing, food access	Housing, economic stability	Housing, transportation	Economic stability, housing	Economic stability, housing	Housing, food access
Trust & Community Relationships	Strengthening trust in care	Culturally responsive care	Community awareness of services	Navigating healthcare systems	Community trust & engagement	Healthcare system trust	Community engagement

While the Community Health Needs Assessments highlight important trends across the region, these challenges are most clearly understood through the experiences of individuals and families in our communities. Many residents facing health concerns are also navigating barriers such as housing instability, financial hardship, and limited access to support services.

Community partners and frontline professionals often play a critical role in helping individuals overcome these challenges by connecting them to resources and care. The story below, shared by our partners at Pivotal Behavioral Health, illustrates how coordinated support and community collaboration can help stabilize a difficult situation and create a path forward.

Delays in follow-up care

Transportation barriers were frequently cited as a reason people missed or delayed medical appointments. In Allegan (MI) and Cass (MI) counties especially, rural geography compounds provider shortages. Long travel distances limited public transportation and fewer specialty providers make access challenges more pronounced.

In Indiana, housing instability and economic stress were also identified as factors contributing to delayed care and avoidable hospitalizations. In rural Michigan communities, stakeholders expressed concerns about financial hardship and affordability.





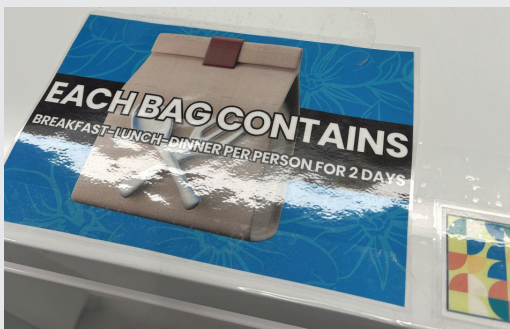
An employee from **Pivotal Behavioral Health** recently assisted a client who was experiencing critical housing and utility crisis

due to a back injury that left her unable to work. Her landlord had refused to assist with propane, and she was facing potential eviction. After being contacted by Peer Support, the employee, a Community Health Worker, immediately identified emergency resources.

Within 24 hours, a local church provided the necessary propane and generously organized a holiday celebration for the client's children. Shortly thereafter, the client secured new employment and achieved stability. She expressed deep gratitude, noting that without intervention and resource navigation, she would not have known how to overcome these obstacles.



"Addressing food insecurity is essential to improving overall health, and this initiative showed the power of our Beacon community," said Kimberly Green Reeves, Vice President, Community Impact & Partnerships, about Beacon's **Food Relief Collaborative**. "I'm deeply grateful to our associates whose time, donations and care turned this effort into meaningful support for so many."



Challenges navigating referral systems

Importantly, community members emphasized not just availability, but coordination. Nearly half of survey respondents in Indiana and Three Rivers (MI) indicated that improving communication and collaboration between providers would improve their healthcare experience. In Kalamazoo (MI), respondents cited the complexity of the healthcare system as a concern.

These are not separate concerns, but related dimensions of the same access continuum.

Provider capacity without transportation solutions limits reach.
Behavioral health integration without coordination limits continuity.
Navigation support without provider availability limits impact.

Listening beyond the data

While statistics identified trends, qualitative data added depth to our understanding of community needs.

Residents spoke of:

- Delayed mental health appointments
- Long driving distances for specialty care
- Missed appointments due to lack of transportation
- Limited preventive care that leads to emergency department strains

Community members also highlighted strengths:

- Robust nonprofit networks
- Engaged local agencies
- Collaborative public health leadership

Beacon's CHNAs recognized both challenges and assets as we worked to identify where partnerships could amplify existing strengths.

From listening to responsibility

By formally adopting these CHNA assessments in 2024 and committing to Implementation Strategy Plans for 2025–2027 (Indiana) and 2026–2028 (Michigan), Beacon publicly affirmed its responsibility to act.

These assessments:

- Shaped measurable strategies.
- Informed workforce investment decisions.
- Strengthened cross-state alignment.
- Guided partnership development.

Most importantly, they reinforced that community voices must remain central to system-wide decision-making and that listening is an ongoing commitment.

Our approach

Within Beacon Health System, the Beacon Community Impact department leads efforts to impact our priority area of provider/healthcare access using a combination of internal programs and collaborative partnerships. Our Implementation Strategy incorporates a three-pronged approach:

- 1. We deliver comprehensive direct services** through Beacon's Early Childhood Services and Community Health Services teams, which have expanded their reach and offerings to match the growth of the health system. Early Childhood Services include the St. Joseph County (Ind.) WIC program, two sickle cell programs, and Maternal and Infant Health Programs—all of which now serve a broader population of women, infants, and young families across additional counties. Our Community Health Services team has scaled prevention efforts, deploying more community health educators and expanding school curricula throughout middle and high schools in the three Indiana counties we serve, with plans to reach new regions as Beacon's footprint grows. Summer programming now includes additional health-related day camps and increased participation at community health fairs. The teams continue to provide mental health screening and referrals, emphasizing trusted adult relationships as protective factors for youth, with enhanced support systems to accommodate a larger population.
- 2. We invest in and partner with local community organizations** that possess specialized expertise in their service areas. As Beacon Health System grows, we have increased funding and support for community nonprofits operating in our most vulnerable neighborhoods and serving increasingly diverse populations. Each funded partner addresses key healthcare priorities and reports participant numbers and outcome metrics, which are now tracked across a wider service area. Beacon has expanded its partnership with the local health department in Three Rivers, Michigan, supporting the development of their Community Health Worker Program to further enhance healthcare access—including mental health access—across a growing region.
- 3. Beacon administers state and federal grants as the fiscal agent** to deliver direct programming and strengthen data infrastructure in Beacon communities. With the health system's growth, Beacon now manages a larger portfolio of grants and programs. In 2025, Beacon Community Impact was awarded new and renewed funding totaling \$3.7 million to support core maternal and child health programming, behavioral health partnerships, and community-based services across Elkhart, St. Joseph, and Marshall counties. These awards include My Healthy Baby, WIC, TANF, Sickle Cell, and Healthy Start. Additional grants support Maternal and Infant Health programs, such as remote patient monitoring for maternal patients with high blood pressure, promoting safe sleep for infants, educating parents, and maintaining the fetal infant mortality review (FIMR) program. Beacon also collaborates with community partners through various grant-supported initiatives, strengthening Beacon's ability to deliver coordinated maternal and child health services across the region.

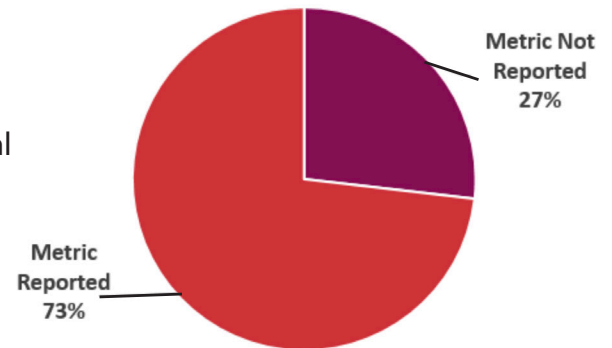
Acknowledgment

Beacon's work in the community would not be possible without the support and effort of our community partners. We truly value the opportunity to continue to build relationships with them and would like to thank them for all that they do to improve health in the community.



Beacon Health System Initiatives – turning priorities into action

In the first year of our 2025–2027 Implementation Strategy Plan, the Beacon Community Impact department within Beacon Health System launched targeted efforts to improve Access to Providers across Indiana counties and St. Joseph County, Michigan. This approach leverages a blend of internal programs and collaborative partnerships to address these priorities. Additionally, the three new Michigan counties will begin developing and implementing their Implementation Strategic Plan in 2026, expanding our impact on Access to Healthcare and engagement across a broader region.



Access to providers

Beacon Health System’s Implementation Strategy Plan addresses access to providers through four complementary strategies that expand community health worker and navigation services, strengthen care coordination and data sharing between providers, increase access to clinical services through workforce development and community partnerships, and build trust through culturally responsive, patient-centered care. Together, these strategies aim to improve timely access to care, reduce system fragmentation, and strengthen connections between healthcare providers and community-based resources.

Care coordination & navigation

Beacon’s integrated approach in 2025 emphasized care coordination and navigation to help individuals and families access services more efficiently. Internal teams screened patients for social drivers of health and mental health challenges and connected them to appropriate resources, while community partners provided on-the-ground support to help residents navigate healthcare systems and community services.

As fiscal agent for several state and federal grants, Beacon also supported the deployment of crisis response teams through Oaklawn, strengthening pathways for individuals experiencing behavioral health emergencies and ensuring smoother transitions to ongoing care. The continued expansion of data infrastructure and referral systems has also improved the tracking and coordination of services across clinical and community partners.

These efforts directly support the outcomes outlined in Beacon’s Implementation Strategy Plan.



Key outputs

- Established a baseline of 1,844 referrals from clinical services to non-clinical services. (See Figure A on page 13)
- In 2025, website visits to this partner’s resource guides grew from a baseline of 302 at the start of the year to 489 by year-end, marking a 62% increase and demonstrating heightened engagement with the available resources.

Key outcomes

- Increased the number of social needs successfully addressed for patients and community residents. (See Figure C on page 13)
- Decrease emergency department utilization for individuals whose needs can be addressed through community-based care and navigation. (See Figure B on page 13)
- Improve maternal and infant health outcomes, including conditions such as high blood pressure, pre-term births, and maternal mental health challenges in historically underserved populations. (See Figures D1 and D2 on page 13)

Communication and data access

Beacon's work in 2025 also focused on strengthening communication and data access between healthcare providers and community partners to improve coordination of care. By enhancing referral pathways, increasing use of health information exchanges, and improving data-sharing practices, Beacon is helping providers access the information needed to support timely and coordinated care across settings.

These efforts help ensure patients experience smoother transitions between hospitals, clinics, and community services while reducing gaps in communication that can delay care.



Key outputs

- We conducted an audit to understand how many healthcare organizations utilize health information exchanges with plans to increase provider participation in secure data-sharing platforms such as health information exchanges. In 2025, we identified 31 healthcare organizations who currently use information exchanges across Indiana and Michigan.
- Expanded training and engagement with providers to improve communication across different data systems through training to the 4 FQHCs who received read-only access to Beacon's EHR.

Key outcome

- We want to see a decrease in the percentage of CHNA respondents who report the need for improved coordination of care between service providers, which will be collected again in the summer of 2026.

Trust & community relationships

Building and sustaining trust within the community was a key outcome of Beacon's 2025 strategies. Direct engagement through health educators, summer camps, and outreach events fostered relationships with youth and families, emphasizing the protective role of trusted adults. Partnerships with local organizations deepened community involvement, ensuring that programs were responsive to local needs and that community voices remained central to decision-making. Ongoing advocacy and research further strengthened these relationships, promoting transparency, collaboration, and continuous improvement in healthcare delivery.



Key outputs

- Expanded Community Health Worker outreach and education within priority populations. (See Figure G on page 13)
- Increased provider engagement in community health events and outreach activities. (See Figure F on page 13)
 - In 2025, 73 providers participated in community events in target ZIP codes to help increase trust and cultural competency (See Figure I and Figure J on page 13)
 - Strengthened internal collaboration to address social drivers of health needs in priority populations.

Key outcome

- We want to see a decrease the percentage of community residents who report a lack of trust in healthcare providers or staff, which will be collected again in the summer of 2026.

Social drivers of health & expanding access

In 2025, Beacon focused on improving healthcare access for community residents by strengthening partnerships with community organizations and increasing access to providers through targeted recruitment and workforce development efforts. The system expanded services to reach underserved populations, including efforts to enhance language line access and culturally competent care, ensuring that communication barriers did not prevent individuals from receiving the support they needed. These strategies also elevated healthcare navigation support, empowering residents—especially those in vulnerable and historically overlooked groups—to better access resources, understand their care options, and engage fully with the health system. By leveraging collaborative relationships and innovative outreach, Beacon made meaningful progress toward health equity and broader access to essential services.



Key outputs

- Increased provider recruitment and workforce development initiatives across the region.
- By the end of 2025, 68% of Beacon's patient population had successfully registered and created accounts within Beacon's Cerner portal, reflecting our efforts to engage and empower patients through digital healthcare access.
- Expanded language access and navigation support for underserved populations with over 45,000 calls across the region with Spanish as the main language utilized. (See Figure E on page 13)
- The Beacon Youth Summit invited youth ages 8 and up to a unique, hands-on look at the world of health care. Students enjoyed immersive experiences such as:
 - Interactive booths to explore different healthcare specialties.
 - ER nursing workshops with real-world scenarios.
 - A wheelchair obstacle course and adaptive sports demonstration by the River City Rollers.
 - Ground and air transport vehicles to tour up close.
 - We had nearly 500 individuals attend in 2026, including youth, parents & guardians, educators, volunteers, and Beacon associates.
- Increased access to care through 10,809 transportation incentives distributed to individuals with identified transportation needs, primarily supporting medical appointments, along with mental health visits, and grocery access. Distribution by county included 649 in Elkhart County, 14 in Marshall County, 175 in St. Joseph County, IN, and 2 in St. Joseph County, MI, reflecting focused support across the service area. (See Figure H on page 13)

Key outcomes

- Increased the number of social needs successfully addressed for community residents and Beacon patients. (See Figure B on page 13)
- Reduce the number of individuals using the emergency department for non-emergency conditions. (See Figure C on page 13)

Beacon Health System Initiative Results

Figure A

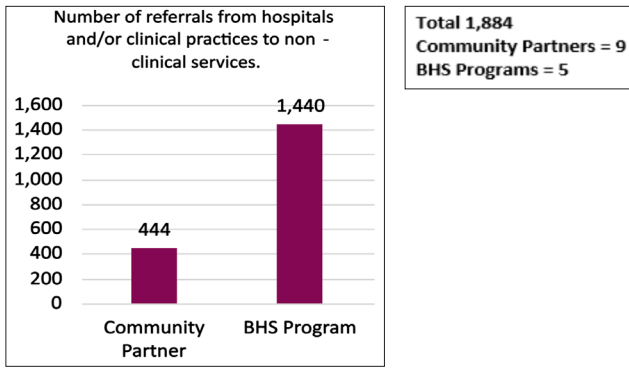


Figure E

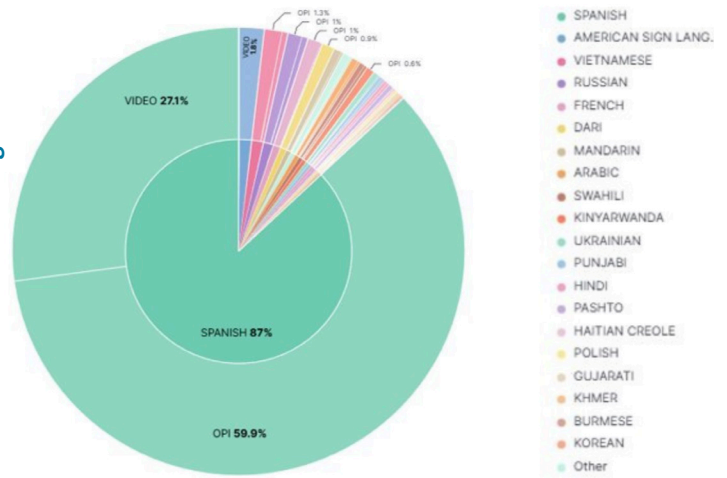


Figure B

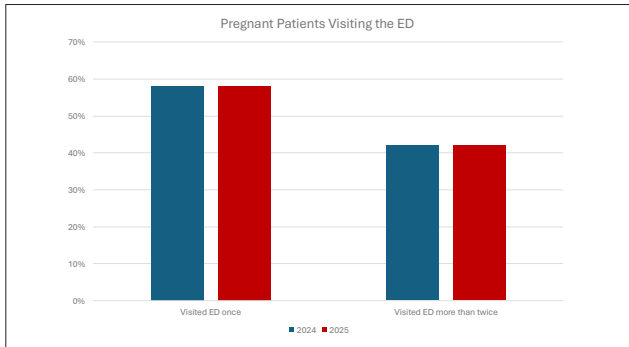


Figure F

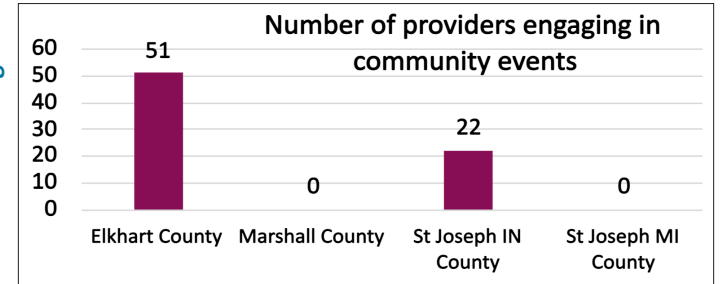


Figure C

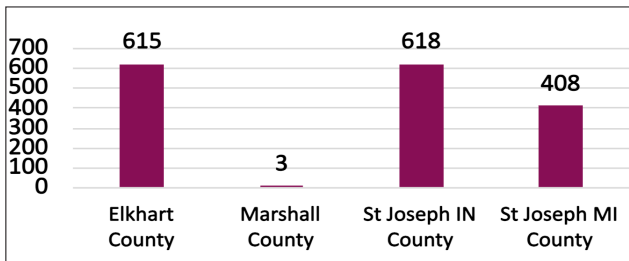


Figure G

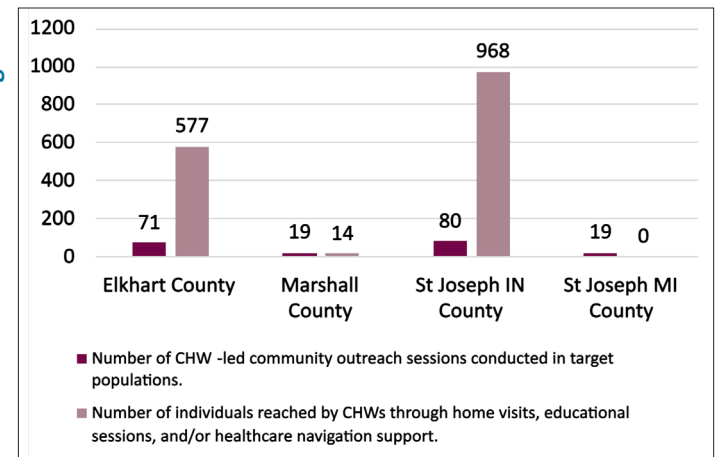


Figure D1

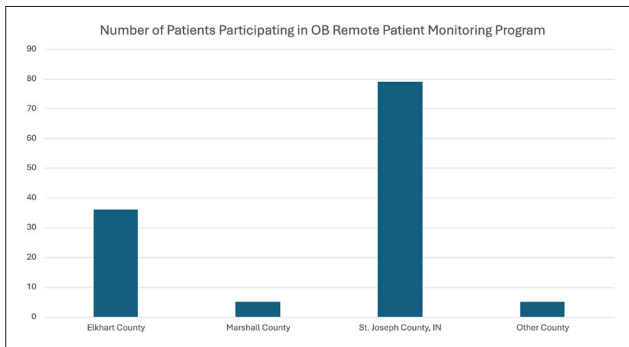


Figure H

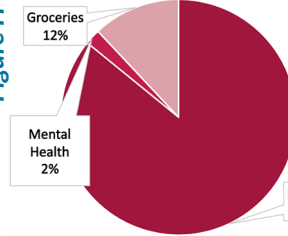


Figure I

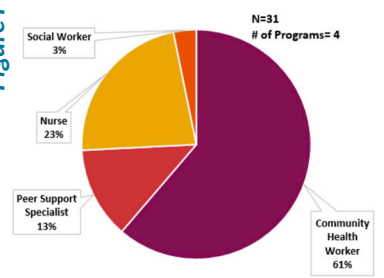


Figure D2

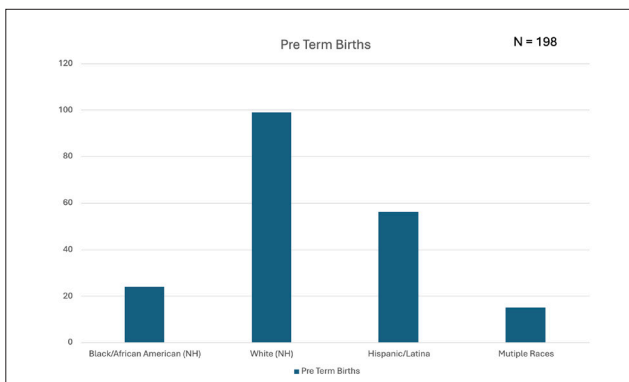
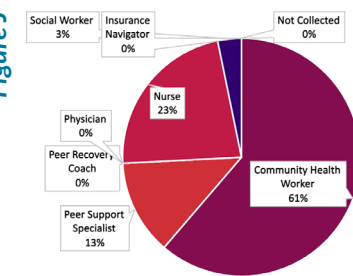


Figure J



Beacon Health System Initiatives – organizations, programs and departments

Participating organizations

- Branch-Hillsdale Community Health Agency
- Council on Aging of Elkhart County
- La Casa de Amistad
- Oaklawn Psychiatric Center
- Pivotal Health
- REAL Services, Inc.
- RETA- Reason Enough to Act
- Self-Healing Communities Collective
- United Health Services- Covering Kids & Families
- University of Notre Dame, Michiana Community Health Coalition
- LOGAN Community Resources
- MHAM- Mental Health Awareness Michiana
- Ribbon of Hope, Inc. (cancer patient support)
- Center for Healing and Hope
- Marshall County Council on Aging (COA)

Beacon Community Impact programs

- Early Childhood Services - BABE Store, OB Remote Hypertension Monitoring Program, Sickle Cell Program and Family Journey- Care Coordination and Doula
- Community Health Services (health & wellness education programs)
- WIC (Women, Infants & Children) Program in St. Joseph, Starke and Marshall Counties- IN

Beacon departments

- Beacon Medical Group
- Finance: Value-Based Care Coordination
- Strategy/Digital: Patient Access Services
- Memorial Hospital of South Bend: Operations, Coordination Supportive Services
- Human Resources: Talent and Culture, DEIB
- Clinical Services: Medical Affairs, Risk Management
- Medical Education Committee



Crystal was my social worker for almost seven years on and off. The care and support she gave my family and me during some of our lowest moments were truly phenomenal.

I still remember the first time I met her. I had been referred by a family friend, and before she came into my life, I was nervous and scared about becoming a new mother. Crystal made everything feel easier. She was patient, understanding, and comforting when I felt confused or overwhelmed. She was always just a phone call or text away. Even on days when she couldn't physically make it to me, she still found a way to make time for me.

In the last two years, I experienced the heartbreaking loss of my mother. I felt completely lost and unsure of how to find myself again. Crystal was right there, offering every resource, every bit of guidance, and every ounce of support I needed to feel whole again.

Crystal will always hold a special place in my heart. She is more than a social worker – she is a friend, a steady presence, and someone I trust deeply.

Beacon Community Impact Client



Educating our clinicians and community

Beacon Health System's Medical Education Committee provides the system's medical professionals with

timely and relevant educational sessions for which providers can earn continuing education credits. Beacon is accredited by the Indiana State Medical Association and can provide these sessions free of charge.

In addition, Memorial Hospital of South Bend and Elkhart General Hospital each host two Grand Rounds educational sessions every month; attendance is free and open to the public. Topics addressed include disease and condition management, updates on new studies, discussions of social determinants of health and more.

2025 Grand Rounds events included **2,719** physician learners and **2,258** other learners.

The 2025 Beacon Youth Summit brought together more than **240 attendees**, including local students, families and community members, for a day of inspiration, discovery and connection.

This year's event featured 26 interactive tables, four hands-on workshops and an exciting adaptive sports game with the River City Rollers. Students explored healthcare careers up close, talked with our MedFlight crew, toured a Beacon ambulance and enjoyed immersive experiences led by Beacon team members from across the system.

This couldn't have happened without the incredible Beacon associates who gave their time, energy and passion on a Saturday to engage and inspire future healthcare professionals. From nurses and lab scientists to HR, IS and administrative teams, Beacon was represented across nearly every corner of health care.

"Sharing what we do and how to become a laboratory scientist was an incredible experience," Megain Hamilton, Lab Manager at Memorial Hospital said. "Watching the kids and parents engage and exclaim, 'I can do this as a job?' made the day even more rewarding. I'm excited to see future generations inspired to pursue careers as medical laboratory scientists. What a wonderful opportunity to connect with and give back to our community. I can't wait until next year!"

The day also featured inspiring messages from Dr. Dale Okorodudu of Black Men in White Coats and Duane Wilson, Chief Executive Officer of the Boys and Girls Club of Northern Indiana, reminding attendees that, "I have permission to be great," and encouraging them to "reach as high as you can, then reach higher."

We are grateful for our many community partners, including **Boston Scientific, Boys & Girls Clubs of Northern Indiana, Edwards Lifesciences, Everwise Credit Union, the River City Rollers and the Tolson Center, W.L. Gore & Associates**, who helped us create another unforgettable experience.



Empowering future healthcare leaders: 2025 Beacon Youth Summit

As part of our commitment to education and community enrichment, the 2025 Beacon Youth Summit convened more than 240 local students, families, and community members for a day dedicated to inspiration, learning, and meaningful connection.

This year's summit offered 26 interactive informational tables and four hands-on workshops, providing attendees with immersive experiences in healthcare careers. Highlights included an adaptive sports demonstration with the River City Rollers, direct conversations with our MedFlight crew, and tours of a Beacon ambulance. Beacon team members from a variety of disciplines—including nursing, laboratory science, human resources, information services, and administration—were on site to engage participants and showcase the breadth of opportunities within the healthcare field.

The event was made possible by the dedication of Beacon associates who volunteered for their time and expertise, fostering curiosity and inspiring future healthcare professionals. As one laboratory manager reflected, "Sharing our work and seeing students realize, 'I can do this as a job?' was incredibly rewarding." It's inspiring to connect with the next generation and encourage their interest in medical laboratory science."

Attendees benefited from motivational presentations by leaders such as Dr. Dale Okorodudu of Black Men in White Coats and Duane Wilson, CEO of the Boys and Girls Club of Northern Indiana, who encouraged youth to embrace their potential and aspire beyond their perceived limits.

The summit's success was bolstered by the support of valued community partners, including Everwise Credit Union, Boston Scientific, Edwards Lifesciences, W.L. Gore & Associates, Boys & Girls Clubs of Northern Indiana, River City Rollers, and the Tolson Center. Their collaboration helped create a memorable and impactful event, strengthening our collective investment in the education and empowerment of our community's youth.



Expanding access

Access extends beyond clinical appointments. Through partnership across the region, there was an expansion of Community Health Worker (CHW)

integration, peer recovery support and navigation services across counties. In 2025:

- **More than 7,000 individuals were screened for social needs**
- **Over 1,800 identified needs were actively followed up**
- **More than 18,000 individuals were served across counties**

Behind each number is a person navigating complex circumstances.



Impact Highlights

When one individual experienced the sudden loss of a spouse while managing medical complications, a Community Health Worker coordinated burial assistance, disability benefits, food support, and long-term care navigation. Access became stability.

For individuals experiencing homelessness, both stigma and lack of transportation make it difficult to manage healthcare needs. A special program brings the care to these individuals instead (See *"Improving Access to Care Through Street Medicine South Bend"*)



Addressing emergency needs

The Community Impact team has developed a process for providing financial relief to patients who screen positive for a social determinant of health on our WellRx questionnaire or who encounter an emergent need.

The voices of patients express their realities: threat of eviction, inability to afford life-saving medication, utility shut-off and transportation barriers. Their concerns motivated our program to develop a process for immediate and long-term solutions.

Our program provides urgent financial assistance, up to a specified dollar amount, with the goal of meeting the pressing need and getting the family out of crisis. From there, our team continues resource navigation and connects the family with other support to address long-term needs.

Since initiating this process just over a year ago, we have assisted 57 households with emergency financial needs. We plan to continue to expand our work in this area over the coming year and continue to develop how we can best stand beside our warriors on the hardest days.



Impact Highlights

One mom came to Beacon early in her pregnancy and was struggling over whether she would be able to keep her baby. "I felt completely alone as a single mom of four, with baby number five on the way ... I wasn't sure I could provide for him and my other four children," she shared.

Through Beacon, she received a car seat for her newborn and earned baby coupons that helped her get clothes, baby soap, bath items and much more. "Not only did they help ease my mind during a very difficult decision no mother ever wants to face, but when I fell behind on my bills, they were also able to help me with one of them," she said, adding that her caseworker "never judged me for wanting to keep my son, even though he was conceived when I was taken advantage of. Instead, she supported me through it."



Improving access to care through Street Medicine South Bend

The Beacon Memorial Family Medicine Residency program launched the Street Medicine South Bend (SMSB) program in December 2022. Based on an emerging field of medicine that began in 1992 in Pittsburgh, PA, street medicine programs aim to address the health needs of individuals experiencing homelessness and meet them where they are to provide care. Since its inception, SMSB clinicians have seen **293** unique patients and had more than **665** total patient encounters.

SMSB's goal is to improve the health care of individuals experiencing homelessness by understanding their realities, building trust, minimizing barriers to accessing medical care and reducing the individuals' cost of care (as well as the overall cost of health care delivery in the South Bend community).

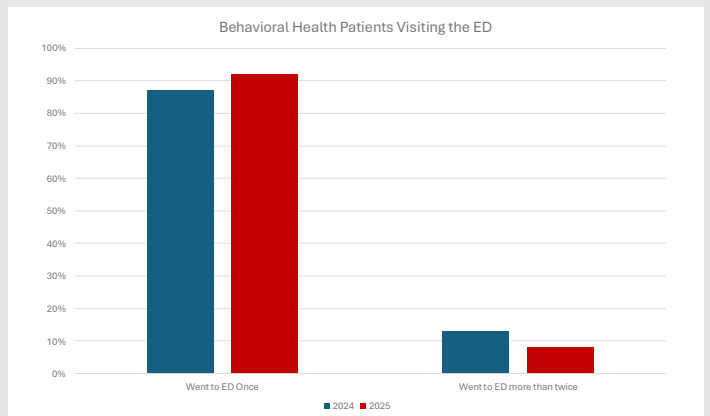
In collaboration with the Beacon Health System Foundation, SMSB travels to the Knights Inn in South Bend, where Motels4Now is providing shelter to those experiencing homelessness. SMSB provides on-site evaluation, diagnostic testing and treatment, and volunteer clinicians connect patients to long-term primary care through a local federally qualified health center, HealthLinc.

In 2025, SMSB launched its second site of care at Our Lady of the Road, a laundromat cafe just south of downtown, serving the roughest sleeping individuals in South Bend.

In November 2025, SMSB presented research at the American Public Health Association's National Conference in Washington, D.C. This research explored the impact of SMSB on emergency department (ED) utilization and days of hospitalization.

SMSB demonstrated a 40% overall reduction in emergency department (ED) visits (*see graphs at right*) for patients who received care from SMSB when comparing ED utilization in the year prior to a patient's first encounter with SMSB to their ED utilization in the year following their first encounter with SMSB.

Further, a 54% decrease was seen in days of hospitalization in the year following a patient's first encounter with SMSB. While this second result was not statistically significant, the research suggests that SMSB's work not only positively impacts the lives of individual patients, but also benefits the health system as a whole.





Strengthening care coordination

Community members expressed the need for better coordination between providers.

Beacon standardized referral pathways and strengthened secure information-sharing. Four federally qualified health centers now have limited read-only system access to Beacon’s electronic medical record system to improve continuity of care.



Impact Highlights

An adult with significant medical and intellectual disabilities was found living in severe neglect. Through rapid coordination between Beacon, Adult Protective Services, and community partners, guardianship and Medicaid coverage were secured within just nine days.

Care coordination reduces fragmentation and restores dignity.



B.A.B.E. Store



The coordination of care requires the support for families. We provide care coordination teams across the region with access to the incentive program, the BABE Store. The BABE Store is an innovative program that connects maternal health education with practical support for growing families. The BABE Store was designed to encourage healthy behaviors during pregnancy and early childhood while reducing financial barriers that can affect maternal and infant well-being.

Through the program, expectant and new parents earn “baby coupons” by participating in activities that support healthy pregnancies and early childhood development. These activities include attending prenatal and postpartum care visits, completing health screenings, engaging with community health workers, and participating in educational programs focused on topics such as nutrition, safe sleep practices, breastfeeding, and infant care. Coupons can then be redeemed for essential baby supplies, helping families obtain items that are critical to a safe and healthy start for their child.

In 2025, the BABE Store distributed **136,464** BABE coupons, supporting **over 23,000** unique individuals across Beacon’s service area. Through collaboration with 85 community partners, the program helps ensure that families have access not only to education and care coordination, but also to the basic necessities that support healthy infant development. The most frequently

redeemed items included diapers and baby wipes, reflecting the everyday needs that can place significant financial strain on families during a child’s first year of life.

Beyond providing material assistance, the BABE Store serves as a gateway to broader maternal and infant health supports. Each interaction offers an opportunity for staff and community health workers to reinforce healthy behaviors, connect families to resources, and strengthen relationships that encourage continued engagement with prenatal and pediatric care.

By linking incentives to prenatal visits, education, and preventive screenings, the program helps encourage earlier and more consistent prenatal engagement among participating families. Early and regular prenatal care is one of the most important factors in improving birth outcomes, helping providers identify potential complications sooner and ensuring mothers receive the support they need throughout pregnancy.

Programs like the BABE Store demonstrate how addressing practical needs can strengthen maternal health engagement and improve outcomes for both mothers and infants. By reducing barriers, supporting preventive care, and building trusted relationships, the program helps families navigate pregnancy and early parenthood with greater confidence, stability, and connection to care.

Nanny and Mylikea

Once an active and independent woman with lots of “get up and go,” Nanny was struggling with mobility issues and a risk of falling. Following an illness, she moved in with her granddaughter, Mylikea.

Nanny needed help getting to all her doctor’s appointments, but like many family caregivers, Mylikea found herself stretched thin. She worried about work absences affecting her job as a medical assistant.

“At first I was scared and stressed. I felt very frustrated,” she said. She spoke to other family members about needing help for Nanny, “but they all work and have busy schedules, too,” she said. Reluctant to burden her granddaughter, Nanny repeatedly told Mylikea she didn’t want to be a bother.

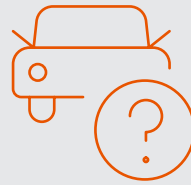
Fortunately, Nanny had been helped by the Elkhart County Council on Aging in the past. She wondered if they could help again, now that she was unable to drive.

The Council’s transportation program turned everything around for Mylikea and Nanny. “It helped tremendously! I can’t imagine not having it,” said Mylikea. “They also were so

calming and reassuring over the phone, helping me to figure everything out.”

Not only is Nanny able to get to all her necessary medical appointments, she has regained independence and even enjoys the company.

“She talks about how her and the drivers always chat and how friendly they are. Just getting out to appointments makes her happy,” Mylikea said. “She’ll continue to live with me now, but the transportation program will definitely be a part of our lives for a while. I’m just so grateful, thankful and glad Beacon helps them to stay afloat to help people like my Grandma!”



The cost of missed access

In our Community Health Needs Assessments, community members described missing appointments due to lack of reliable transportation.

Seniors shared concerns about limited ride availability. Rural residents spoke about traveling long distances to reach specialty care. Behavioral health patients described transportation as a barrier to consistent therapy engagement. Families managing chronic illness explained that unreliable transportation often meant choosing between work obligations and medical appointments.

- » A missed primary care visit can delay chronic disease management.
- » A missed behavioral health appointment can interrupt continuity of care.
- » A delayed specialty visit can escalate medical risk.

Reliable transportation becomes a key determinant of continuity of care – and, ultimately, of health and well-being for those affected.





Confronting food insecurity

In response to rising food insecurity across northern Indiana and southwest Michigan, Beacon Health System launched the Beacon Food Relief Collaborative in

November 2025, delivering immediate, meaningful support to families in need.

It quickly became a powerful example of who we are at Beacon, thanks to the generosity, time and compassion of so many associates. The impact included these outcomes:

- 9,040 food items were donated
- 141 boxes and collection bins were filled
- 1,200 meals were distributed
- 3,827 people were served

Seventy-five associates volunteered their time to organize meal prep drives. Gratitude poured in from the families receiving support and the associates who volunteered to further put our mission into action and show what's possible when we come together. These volunteers describe the experience as eye-opening, humbling, and deeply rewarding, reminding us how small acts of kindness can create meaningful change.

In addition, the Food Pantry at Family Medicine Residency Clinic was started in the summer of 2022 by Deb Pavey, one of the Memorial Family Medicine Residency residents who has since graduated. She saw the impact food insecurity has on our patients and dedicated her longitudinal service project for the residency's Care of the Underserved curriculum to meet this need.

In 2025:

- 1,099 food bags were distributed
- 764 households received food from our food pantry
- 2,562 individuals utilized the food pantry



Empowering families to access healthy food

A WIC participant recently shared that she had struggled to successfully use her benefits at a local grocery store. In the past, several items had been declined at checkout, leaving her feeling embarrassed and discouraged. Because of these experiences, she often avoided using her WIC benefits altogether.

During a one-on-one visit, a WIC staff member walked with the participant through the store, helping her identify WIC-eligible foods such as whole grains, milk, cereal, eggs, juice, and fresh fruits and vegetables. Together they reviewed the WIC Program Booklet and the INWIC Mobile App, comparing product labels to ensure each item met program guidelines.

With this hands-on guidance, the participant was able to confidently select the correct items and complete her WIC transaction without any issues at the register. She shared that it was the first time she felt fully confident using her WIC benefits during a shopping trip.

By removing barriers and providing personalized support, this interaction helped the participant build the confidence and knowledge needed to access nutritious foods for herself and her family—strengthening food security and supporting healthier communities.



Impact Highlights

Participant comments capture the impact of this work:

“Volunteering taught me how to listen, have patience, empathy and a stronger sense of purpose. You find more joy when you help others.”

“It was humbling hearing ‘thank you’ and ‘you have no idea how much this helps.’ It makes you feel so good on the inside, helping others.”

Other associates said the experience inspired them to keep volunteering and even encouraged them to explore new ways to serve our community.



Removing transportation barriers

Across Indiana and Michigan, transportation emerged as one of the most consistent and cross-cutting barriers identified in our Community Health Needs Assessments.

When transportation is unreliable, health care becomes more reactive than preventive. In both Indiana and Michigan, emergency departments often become the safety net when preventive access fails. As a result, transportation barriers affect both individual health outcomes and the healthcare system as a whole.

Thus, addressing transportation is both a health improvement strategy and a system efficiency strategy.

Recognizing transportation as a critical barrier, Beacon and community partners expanded transportation assistance across counties.



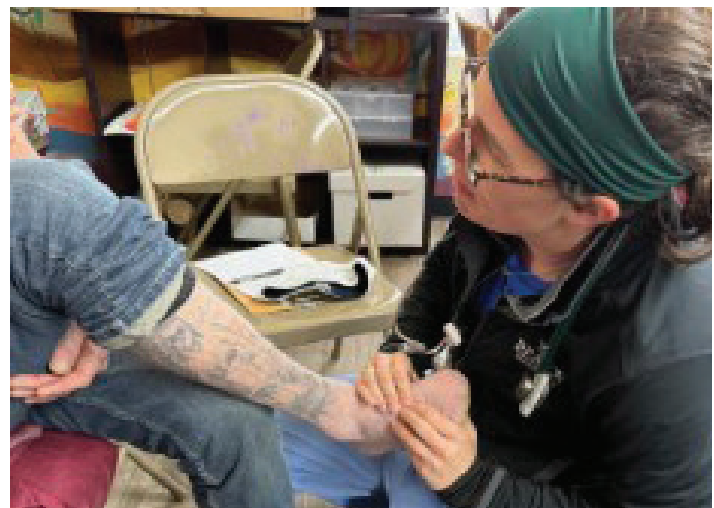
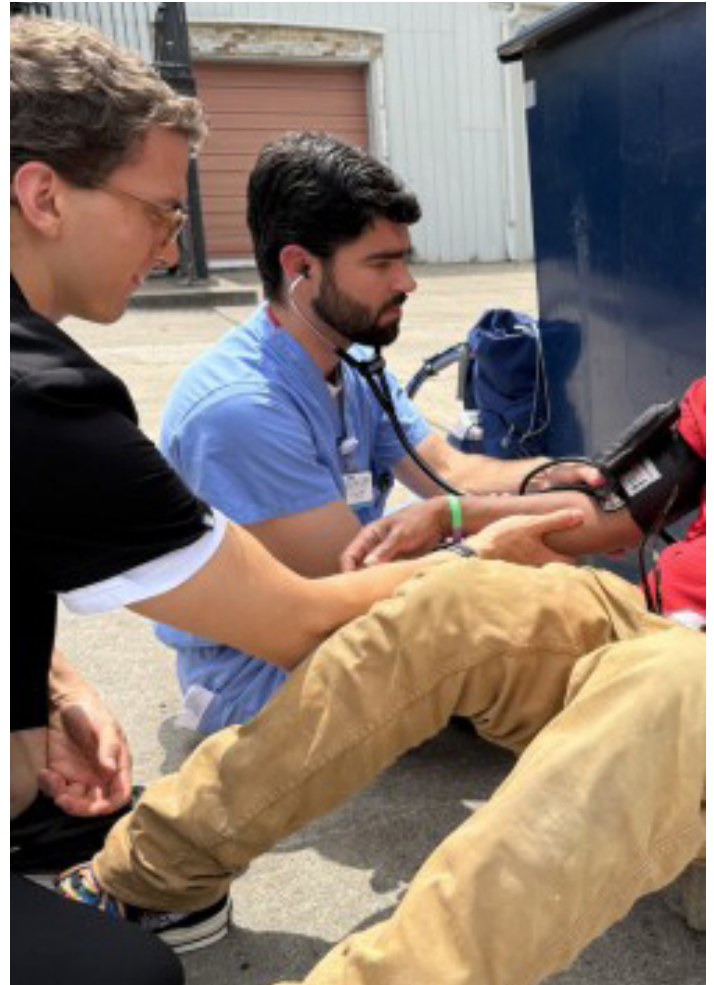
Impact Highlights

Addressing transportation can also mean bringing care to the individual. The Beacon Memorial Family Medicine Residency program launched the Street Medicine South Bend (SMSB) program in December 2022 to improve the health care of individuals experiencing homelessness by understanding their realities, building trust, minimizing barriers to accessing medical care and reducing these individuals' cost of care.

In collaboration with the Beacon Health System Foundation, SMSB travels to the Knights Inn in South Bend, where Motels4Now provides shelter to those experiencing homelessness. SMSB provides on-site evaluation, diagnostic testing and treatment, and volunteer clinicians connect patients to long-term primary care through one of the local federally qualified health centers, HealthLinc. In 2025, SMSB launched its second site of care at Our Lady of the Road, a laundromat cafe just south of downtown, serving the roughest sleeping individuals in South Bend.

In 2025 alone:

- More than **9,000** transportation supports were provided for medical appointments.
- Additional support facilitated behavioral health visits and essential needs such as grocery access.





Advancing behavioral health integration

Behavioral health needs were a key concern in every Community Health Needs Assessment completed across Indiana and Michigan in 2024. Community members spoke openly about long wait times for counseling and psychiatric services. Parents described difficulty finding care for adolescents. Providers shared concerns about patients cycling through emergency departments during mental health crises. Rural stakeholders emphasized the limited availability of local behavioral health specialists.

While each county expressed the need in slightly different ways, the message was consistent: behavioral health access remains strained.

Across Indiana, emergency department utilization patterns reflected high volumes of behavioral health-related visits. Workforce shortages in psychiatry, therapy, and substance use treatment contributed to delayed access and inconsistent follow-up.

In Michigan counties — particularly Allegan and Cass — rural geography amplified these challenges. Limited specialty providers and longer travel distances made consistent outpatient engagement more difficult.

Addressing behavioral health requires strengthening both clinical capacity and community stability. However, behavioral health integration is not solely about increasing provider numbers. It is about creating systems where individuals feel safe seeking care — and confident that care will be coordinated.

Historically, when preventive behavioral health access is limited, emergency departments become the safety net. Community feedback and hospital utilization data reinforced the need to move from reactive crisis response toward coordinated, preventive engagement.

Beacon's Implementation Strategies across both states prioritize:

- Strengthened referral pathways between emergency departments and outpatient behavioral health providers
- Improved communication between hospital teams and community mental health agencies
- Integration of behavioral health navigation support
- Social needs screening to identify underlying contributors to instability
- Coordination with transportation and housing partners



Impact Highlights

Early indicators across the system show fewer repeat emergency department visits among behavioral health patients, suggesting that improved follow-up and navigation are strengthening continuity of care.

This progress reflects alignment between Indiana's provider capacity focus and Michigan's whole-person healthcare framework. Indiana strengthens clinical integration and referral coordination; Michigan strengthens continuity by addressing rural barriers and social drivers. Together, these strategies reduce fragmentation and support sustained engagement.





Behavioral health and social stability

The Community Health Needs Assessments revealed that behavioral

health access cannot be separated from social context. It intersects with housing insecurity, unemployment, trauma exposure, substance use and chronic disease management.

Individuals facing housing instability are at higher risk of mental health crises. Transportation gaps interrupt therapy continuity. Financial stress can exacerbate anxiety and depression. Substance use disorders are often intertwined with unemployment and trauma.

Community stakeholders emphasized that transportation barriers and financial stress often compound behavioral health instability.

Beacon's approach integrates behavioral health within broader access initiatives. Community Health Workers and peer recovery specialists support individuals navigating both clinical and social barriers.

When transportation assistance is provided, therapy attendance improves.

When housing stabilization occurs, crisis visits decrease. When follow-up appointments are coordinated, trust increases.

Behavioral health integration is therefore both clinical and relational.

Strengthening trust and reducing stigma

Community members also emphasized stigma as a barrier to seeking behavioral health care. Behavioral health integration is not solely about increasing provider numbers. It is about creating systems where individuals feel safe seeking care and confident that care will be coordinated.

Beacon's efforts to strengthen trust and reduce stigma include increasing cultural responsiveness, enhancing provider training and expanding access points that feel approachable and inclusive.

Across Indiana and Michigan, Beacon continues to leverage partnerships with community mental health agencies, social service providers and advocacy organizations to ensure

that behavioral health services are integrated, accessible and sustainable.

Connecting communities to care means ensuring mental health support is available when and where it is needed, and improving behavioral health access strengthens overall community resilience.





Promoting physical activity

Held in South Bend, Indiana, Sunburst Races features a half marathon, 10K run, 5K run and family friendly 5K Fitness Walk. Open to all ages and fitness levels,

it's the perfect opportunity for community members to challenge themselves and enjoy a fun-filled race day.

Each year, nearly 5,000 participants cross the finish line while supporting Beacon Children's Hospital. The funds specifically support the Child Life and Creative Services Program, which helps kids cope with the challenges of hospitalization through art, music, pet therapy and more. Sunburst is more than just a race—it's a tradition that brings the community together for a great cause.



Impact Highlights

The race has been a beloved community tradition since 1984. In 2025, the 41st anniversary of Sunburst Races, we had 4,550 participants ranging in age from infant to 89 years old, and more than 280 volunteers supported the event. The 2025 races brought in **\$58,700** in sponsorship dollars and **\$13,936** in donations and fundraising, totaling **\$72,636** to support patient care at Beacon Children's Hospital.





The power of partnerships

No health system can address behavioral health gaps, transportation barriers, housing instability and workforce shortages alone. Community health improvement is rarely the result of a single decision or a single organization. It is the result of countless moments of coordination — a phone call between agencies, a shared case review, a provider reaching out to a partner to ensure follow-up, a community advocate stepping in when a barrier feels insurmountable.

Beacon's Community Health Needs Assessments made clear that health is shaped by interconnected systems — and improving access requires shared responsibility. Partnership is therefore foundational to Beacon's work.

Partnership transforms referral into follow-through, crisis into stability and access into lived experience.

Community organizations: Grassroots partnership and support

Mental health stigma and systemic barriers prevent many residents from accessing care, particularly underserved communities.

Mental Health Awareness of Michiana (MHAM) has been a longtime partner with Beacon, providing education and awareness and improving health outcomes. MHAM employs a peer support specialist to help individuals navigate complex community systems. Over the years, they have expanded outreach while building trust with vulnerable populations, with their outreach efforts reaching hundreds of residents across St. Joseph and Elkhart counties through community-wide education events. MHAM also provides valuable training to professionals, and their peer support model helps to establish hospital referral pathways.

United Health Services Covering Kids & Families (UHS) has worked with Beacon for many years. They are a wonderful partner working to provide total health coverage to residents in Hoosier Healthwise, HIP, Medicaid and Marketplace plans. Navigators meet patients in person at

local hospitals, health fairs and community events, striving to minimize the stress families experience from trying to obtain and navigate health insurance in a very complicated system. Navigators who speak English and Spanish increase the chances of those served being accepted into their program and provide further peace of mind for families during the application process. UHS typically achieves an approval/awarded rate exceeding 93% for those they serve. Their collaboration is outstanding in that they work closely with other CHNA partners to help close the gap for our most vulnerable patients.



Local agencies: Where strategy meets real life

Across Indiana and Michigan, Beacon partners with organizations that understand community realities at a deeply personal level.

When an adult with significant intellectual and medical disabilities was found living in severe neglect, the **LOGAN Center**, working alongside Beacon and Adult Protective Services, quickly intervened (see “Emergency Interventions Restore Safety and Quality of Life”).

In Marshall County, the **Marshall County Council on Aging** intervened quickly to secure housing for an older adult at risk of displacement — preserving not only shelter but continuity of medical care within the county.

The **Branch Hillsdale St. Joseph Community Health Agency** partnered with Beacon to support a family navigating sudden loss and financial hardship, connecting them to burial assistance, disability benefits, food support and health services.



Matt Costello
Director of LOGAN
Protective

Emergency interventions restore safety and quality of life

LOGAN Center: St. Joseph (IN), Marshall, Elkhart counties

A 47-year-old man with Down Syndrome, Klinefelter Syndrome and multiple serious health conditions was discovered by police after being bedridden for two months in his caregiver's home, lying in accumulated waste. His guardian and caregiver, who has since been arrested on neglect charges, failed to provide basic hygiene or seek medical help.

The man suffered severe skin breakdown, cellulitis, extreme obesity, weakness, and ongoing discomfort from the neglect, compounded by his significant intellectual disability that limited his ability to advocate for himself.

LOGAN responded swiftly by coordinating with Adult Protective Services, hospitals, police, and the nursing facility to secure emergency temporary guardianship within nine days. LOGAN helped to reactivate his Medicaid coverage, organized comprehensive care plan meetings with medical staff and family, and arranged therapeutic support to help him participate in physical therapy and personal hygiene. LOGAN also redirected his Social Security benefits so they could be properly managed, engaged a loving family member as a potential long-term guardian, and began planning for appropriate residential services.

Through this partnership and referral to LOGAN, the individual now has proper medical care, consistent advocacy, and a pathway toward improved health and quality of life after years of suffering.

“This work is a reminder of why LOGAN exists and why the support of our partners like Beacon makes all the difference. Without intervention, this man would have continued to suffer in a neglectful situation, invisible to the very systems that exist to protect him,” explained Matt Costello, Director of LOGAN Protective Services. “Other guardianship programs in our area either limit their services to elderly populations or operate on a for-profit basis, placing them out of reach for clients who cannot afford private payment. This client would have had no advocate to secure physical therapy, a wheelchair, a medically appropriate diet or even basic hygiene care.”

Costello added that getting to know this client has been a gift. “He's delightful, and watching his progress has been one of the most rewarding experiences of my career. The first time I met him, he was in agony and couldn't even shift his position in bed. Now he's wheeling himself through the halls of his nursing facility and spending his days socializing in the activity room.”

Clinical collaboration: Strengthening continuity

Beacon's partnerships extend across the healthcare ecosystem to strengthen coordination and improve patient outcomes.

In Indiana, Beacon partnered with four Federally Qualified Health Centers (FQHCs) to provide limited, read-only access to our electronic health record system, enhancing communication and reducing fragmentation between care teams. This collaboration supports seamless transitions across care settings, improves follow-up care, and reduces duplication of services—ultimately advancing continuity and quality of care for shared patients.

In Michigan, collaboration with local providers strengthens rural referral pathways and improves behavioral health coordination, helping ensure patients can access the right level of care in a timely manner.

Together, these clinical partnerships ensure that expanded provider capacity translates into coordinated, patient-centered care across the communities we serve.



A win for all of us

I'm so excited to share some wonderful news from our community. Recently, the hospital reached out to Beacon Community Impact and asked us to write a grant to help expand the doula program. They had seen the difference our doulas make – the calm we bring into birthing rooms, the strength we help families discover, and the heart-centered care that surrounds every parent we support.

When I sat down to help write that grant, it felt deeply personal. I thought about all the families who could benefit from having a doula by their side, especially those who might not otherwise have access. Every line of that proposal carried our collective hope to make birth experiences safer, more supported, and more empowering for every family.

And I'm so proud to say: we were awarded the grant. This means we'll be able to hire more doulas, strengthen training, and reach more families across our community.

It's a beautiful reminder of what's possible when hospitals and community organizations come together with shared purpose and vision ... This is a win for all of us, and for every family whose birth story will be touched by compassion and care.

Jamila Alkattan

Birth Doula/ Community Health Worker for Beacon Community Impact



Enhancing partnership through research

Beacon's partnership with the University of Notre Dame introduces a new way to support and strengthen our community health work. Together, we are building a shared approach to learning that connects community experiences with strong research support and helps us improve the way we serve people across the region.

Through shared data analysis, secure research tools, thoughtful survey design, and clear evaluation methods, this collaboration helps ensure that Beacon's strategies remain grounded in evidence and real community experience. It gives us a clearer understanding of what is working, where gaps remain, and how to adjust our efforts so they continue to meet community needs.

Our collaboration creates a framework for translating data and frontline healthcare insight into actionable knowledge that improves patient and community health outcomes. By bringing community perspectives together with informed research support, this partnership helps Beacon refine decision-making, remain transparent in our approach and strengthen the impact of our work as community needs evolve.



Stronger together

Behind every transportation ride secured, every housing placement stabilized, and every behavioral health referral completed is a relationship.

The stories shared throughout this report — from securing guardianship in a matter of days, to completing cancer treatment through consistent transportation, to stabilizing a family navigating sudden loss — are not stories of isolated intervention. They are stories of collective action.

They reflect what becomes possible when organizations trust one another, communicate openly and share responsibility.

Beacon's work across Indiana and Michigan reflects a belief that sustainable health improvement depends on shared commitment. The challenges identified in our Community Health Needs Assessments are complex and interconnected. Addressing them requires humility, coordination and persistence.

In Indiana, strengthening provider capacity has required collaboration across hospitals, federally qualified health centers, workforce programs and community agencies. In Michigan, addressing rural access realities has required coordinated transportation solutions, housing stabilization, behavioral health integration and deep listening to local stakeholders.

Though the context varies by county, the approach remains the same: no barrier is addressed alone.

When we move together — aligning provider capacity with transportation support, integrating behavioral health with housing stability, strengthening referral systems with trusted community partners — we create a regional network of care that is stronger than any one organization alone.



Our reach

Counties and associated hospitals

Community Hospital of Bremen • Elkhart General Hospital • Memorial Hospital of South Bend • Three Rivers Health



Community Impact - 2025

Total Community Impact Investment:

\$4,535,893.92

In 2025, we focused on support that is nearby, familiar and easy to use. We partnered with organizations people trust, operated programs that meet families where they are and sustained essential services that are free when that is what access requires.

Community Investments and Partnerships:

\$814,020.54

Guided by Community Health Needs Assessments and shaped by longstanding relationships, investments in 2025 supported nonprofit partners that help families every day. Funding prioritized the CHNA to focus on access to providers and the social and environmental conditions that make access possible. Partners used these dollars to strengthen prevention; connect residents to practical resources like food, housing, and transportation; and expand behavioral health and family support. Sponsorships and grants have been applied in collaboration with community leaders, so help remains close to home and solutions grow from within the community.

Community Health Improvement:

\$3,380,663.96

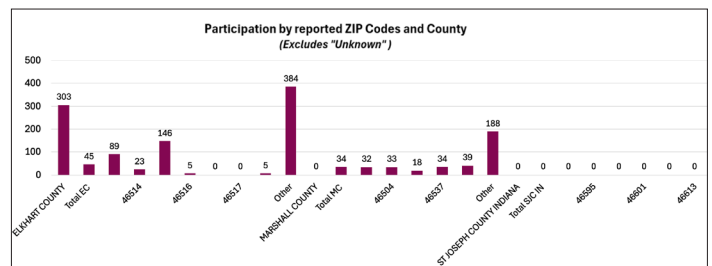
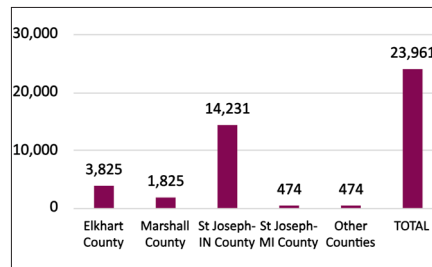
Improving health requires more than clinical care. In 2025, coordinated programs supported maternal and child health, expanded behavioral health supports, improved prevention and management of chronic conditions and promoted family stability. Services were delivered in homes, clinics and neighborhood settings, so care was within reach and responsive to community needs.

This work included trusted supports for families through efforts like Family Journey, collaboration with partners such as the North Central Indiana Sickle Cell Alliance, and nutrition and breastfeeding support through WIC. These approaches reduce barriers, connect people to timely and culturally responsive care and help families move toward long-term well-being.

Subsidized Community Services:

\$341,209.42

In 2025, we sustained essential offerings even though they operate at a financial loss, because they close gaps for people facing transportation, cost or provider availability barriers. Remote Patient Monitoring supported high-risk patients during pregnancy and postpartum periods, providing oversight between visits so concerns could be identified early and addressed safely. School-based Health and Wellness teams provide prevention, health education, social/emotional support and direct connections to resources inside community schools at no cost to students and families.





To the future and beyond!

Now:

In 2024, Beacon Health System completed Community Health Needs Assessments across northern Indiana and southwest Michigan. These assessments identified Access to Providers in Indiana and Access to Healthcare in Michigan as priority areas guiding Beacon's Implementation Strategies for the coming years. Through surveys, focus groups, and collaboration with community partners, stakeholders, and internal leaders, we elevated the voices and experiences of the communities we serve to better understand the barriers affecting health across the region. In partnership with the University of Notre Dame, Beacon is expanding opportunities for collaborative research that strengthens community health.

Near:

As the Michigan Implementation Strategy Plan goes into effect, Beacon will continue aligning efforts across Indiana and Michigan to improve access to healthcare providers and services, expand behavioral health integration, and address social drivers of health such as transportation, housing, and economic stability. We will continue growing strategic partnerships, research collaborations, and advocacy efforts that strengthen community voice and advance access to care across both states.

Far:

Looking ahead, Beacon Health System will continue building a stronger regional system of care across Indiana and Michigan—one where individuals and families can more easily access the services, support, and resources they need to live healthier lives.

