Ascension Via Christi

Implementation Strategy for the 2025 CHNA
Sedgwick County, Kansas

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The purpose of this Implementation Strategy (IS) is to describe how Ascension Via Christi hospitals in Sedgwick County plan to address the prioritized needs from the 2025 Community Health Needs Assessment (CHNA). Rationale is provided for the significant needs the hospitals do not intend to address through the IS. Special attention has been given to the needs of individuals and groups with adverse health outcomes or social factors that may put them at high risk.

The 2025 IS was approved and adopted by each authorized governing body of the following hospitals for fiscal year 2025 (tax year 2024). The IS applies to the following three-year CHNA cycle: July 1, 2025, to June 30, 2028.

Ascension Via Christi Hospitals Wichita, Inc.
929 N. St. Francis St. | Wichita, KS 67214
healthcare.ascension.org
P: 316-268-5000
Hospital EIN: 48-1172106
Board adoption: September 18, 2025

Ascension Via Christi Rehabilitation Hospital, Inc.
1151 N. Rock Road | Wichita, KS 67206
healthcare.ascension.org
P: 316-268-5000
Hospital EIN: 48-1158274
Board adoption: October 15, 2025

Ascension Via Christi Hospital St. Teresa, Inc.
14800 W. St. Teresa St. | Wichita, KS 67235
healthcare.ascension.org
P: 316-796-7000
Hospital EIN: 27-1965272
Board adoption: September 18, 2025

Kansas Surgery & Recovery Center, LLC
2770 N. Webb Road | Wichita, KS 67226
kansas.surgery
P: 316-634-0090
Hospital EIN: 48-1148580
Board adoption: July 23, 2025

Rock Regional Hospital, LLC
3251 N. Rock Road | Derby, KS 67037
rockregionalhospitalderby.com
P: 316-425-2400
State license: H-087-014
Board adoption: September 16, 2025

This report, as well as the CHNA and previous IS report, can be found on our public website: https://healthcare.ascension.org/chna. We value the community's voice and welcome feedback. Comments and questions can be submitted via the website.

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Introduction

About Ascension

Ascension is one of the nation's leading nonprofit and Catholic health systems, with a Mission of delivering compassionate, personalized care to all, with special attention to those most vulnerable. In fiscal year 2024, Ascension provided $2.1 billion in care of persons living in poverty and other community benefit programs. Across 16 states and the District of Columbia, Ascension's network encompasses approximately 99,000 associates, 23,000 aligned providers, 94 wholly owned or consolidated hospitals, and ownership interests in 27 additional hospitals through partnerships. Ascension also operates 30 senior living facilities and a variety of other care sites offering a range of healthcare services.

Ascension's Mission provides a strong framework and guidance for the work done to meet the needs of communities across the U.S. It is foundational to transform healthcare and express priorities when providing care and services, particularly to those most in need.

> **Mission:** Rooted in the loving ministry of Jesus as healer, we commit ourselves to serving all persons with special attention to those who are poor and vulnerable. Our Catholic health ministry is dedicated to spiritually-centered, holistic care which sustains and improves the health of individuals and communities. We are advocates for a compassionate and just society through our actions and our words.

For more information about Ascension, visit https://www.ascension.org.

Ascension Via Christi

As a Ministry of the Catholic Church, Ascension Via Christi (AVC) is governed by a local board of trustees represented by community members, medical staff, and sister sponsorships, and has provided medical care in Kansas since 1883. Throughout the state, AVC operates four fully-owned hospitals with five campuses and 75 other sites of care and employs more than 6,400 associates. In fiscal year 2024, AVC provided about $62.4 million in community benefit, including care of persons living in poverty.

AVC's fully-owned hospitals in Sedgwick County are Ascension Via Christi Hospital St. Teresa, Ascension Via Christi Rehabilitation Hospital, and Ascension Via Christi Hospitals Wichita, which has two campuses: Ascension Via Christi St. Francis and Ascension Via Christi St. Joseph. AVC's joint venture hospitals in Sedgwick County include Kansas Surgery & Recovery Center, LLC, and Rock Regional Hospital, LLC.

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Overview of the Implementation Strategy

Needs Prioritization

Included in Section 501(r)(3) of the Internal Revenue Code is the requirement that hospitals must provide a description of the process and criteria used to determine the significant health needs of the community, identified through the CHNA, along with a description of the process and criteria used to determine the prioritized needs to be addressed by the hospital.

AVC hospitals used a phased prioritization approach to assess the needs of Sedgwick County. The first step was to determine a broader set of identified needs through community listening sessions, key informant interviews, and secondary data analysis. The CHNA narrowed identified needs to a group of significant needs determined the most important to be addressed within the community.

Following the CHNA, the significant needs were further narrowed down to prioritized needs that the hospitals will address through the IS. To arrive at the prioritized needs, AVC used the forced ranking method. Through the forced ranking method, market and hospital leadership and other key internal collaborators individually ranked the significant needs on a scale of 1 to 4, with "1" assigned to the need deemed most important to address. The criteria used to rank the significant needs were:

- Alignment with organizational strengths and priorities
- Ability to leverage organizational assets
- Existing community resources and opportunities for partnership
- Feasibility of change and availability of tested approaches

The needs were then weighted based on these rankings and ordered from highest to lowest priority in the following manner: 1) access to care, 2) chronic conditions, 3) health equity, and 4) social determinants of health.

Needs That Will Be Addressed

Based on the prioritization activity, the hospitals selected the prioritized needs outlined below for the 2025 IS. Ascension has defined "prioritized needs" as the significant needs the hospitals have prioritized to address during the three-year CHNA cycle:

- **Access to care:** This need was selected because it aligns strongly with the Ascension mission and the hospitals' strengths and strategic priorities. The hospitals can leverage organizational resources and partnerships to address access to care among patients and within the community.
- **Chronic conditions:** This need was selected because both secondary data and community input revealed significant disparities in Sedgwick County for chronic condition prevention and management. Additionally, AVC is well-positioned to develop or enhance programs that address heart disease, cancer, and other chronic conditions.

- **Social determinants of health:** This need was selected because the hospitals can leverage community partnerships and organizational resources to advance the health system's response to social determinant of health (SDoH) needs. In particular, the hospitals will focus on the following SDoH needs:
    - **Food security:** This SDoH need was a major focus of both community input and secondary data in the CHNA. Among the SDoH needs, food security was determined to have higher feasibility for the hospitals to address.
    - **Transportation:** This SDoH need was a major focus of community input in the CHNA. Among the SDoH needs, transportation was determined to have higher feasibility for the hospitals to address.

AVC understands the importance of all the community's needs. The hospitals are committed to playing an active role in community health improvement. For the IS, however, the hospitals have focused efforts on the above priorities.

Needs That Will Not Be Addressed

The health need the hospitals will not address through the IS as an independent prioritized need is:

- **Health equity:** Health equity is the state in which everyone has a fair and just opportunity to attain their highest level of health.[1] This need was not selected for specific action plans because it was decided to be an underlying current of all IS action plans. For example, the health equity lens was applied to target specific patient or community populations for certain strategies under access to care, chronic conditions, and social determinants of health (e.g., mammography screenings in rural and low-income areas).

This report encompasses only a partial inventory of actions the hospitals plan to take to support health and well-being in the community. The hospitals may consider investing resources in other areas as appropriate and as needed by residents of Sedgwick County, depending on opportunities to leverage organizational assets and community-based partnerships.

A list of resources for all the significant needs is included in the 2025 CHNA: https://healthcare.ascension.org/chna.

Written Comments

This IS has been made available to the public and is open for comments or questions via the website: https://healthcare.ascension.org/chna.

[1] Centers for Disease Control and Prevention. (2024, June 11). *What is health equity?* https://www.cdc.gov/health-equity/what-is/index.html

Approval and Adoption by the Hospitals' Board of Directors

To ensure the hospitals' efforts meet the needs of the community and have a lasting and meaningful impact, the 2025 IS was presented to and adopted by each hospital's board of directors by Nov. 15, 2025. Although an authorized body of each hospital must adopt the IS to be compliant with provisions in the Affordable Care Act, adoption of the IS also demonstrates the board is aware of the IS, endorses the prioritized needs, and supports the action plans developed to respond to those needs.

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Action Plans

The action plans below are based on prioritized needs from the hospitals' most recent CHNA. The strategies within these action plans represent where the hospitals will focus their community efforts over the next three years.

Prioritized Need: Access to Care

Strategy 1: Access to Health Insurance Assist patients with eligibility and applications for public health insurance programs.
Hospitals: AVC Hospitals Wichita AVC Hospital St. Teresa AVC Rehabilitation Hospital
Objective: By June 30, 2028, the percentage of the Sedgwick County population under age 65 without health insurance will decrease. This objective aligns with the following Healthy People 2030 objectives: • AHS-01: Increase the proportion of people with health insurance. • AHS-04: Reduce the proportion of people who can't get medical care when they need it.
Collaborators: • Other Ascension hospitals: AVC Hospital Manhattan • Joint ventures: Kansas Surgery & Recovery Center, Rock Regional Hospital, Wamego Health Center • Ascension affiliate: R1 RCM
Resources: • People: financial counselors, care coordinators (e.g., social workers, case managers, navigators, and care managers) • Processes: patient referrals, financial assessments • Other investments: IT infrastructure
Tactics: • Identify and refer patients who are uninsured. • Educate patients about Medicaid, the Children's Health Insurance Program (CHIP), and other public programs. • Assess patients' eligibility for programs. • Assist patients with (re)enrollment processes.
Anticipated impact: This strategy will improve access to healthcare services, increase preventive care, and reduce avoidable emergency visits for the currently uninsured patient population.

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Strategy 2: Access to Affordable Medications
Provide free or reduced-cost medications for qualifying uninsured and underinsured individuals.

Hospitals:
AVC Hospitals Wichita
AVC Hospital St. Teresa
AVC Rehabilitation Hospital

Objective: By June 30, 2028, the percentage of the Sedgwick County population unable to obtain prescription medicines due to cost will decrease. This objective aligns with the following Healthy People 2030 objective:

- AHS-6: Reduce the proportion of people who can't get prescription medicines when they need them.

Collaborators:

- Other Ascension hospitals: AVC Hospital Manhattan
- Joint ventures: Kansas Surgery & Recovery Center, Rock Regional Hospital, Wamego Health Center
- Community-based organizations: Cairn Health, federally qualified health centers (FQHCs) and other community clinics
- Other collaborators: 340B Drug Pricing Program, Dispensary of Hope

Resources:

- People: pharmacists and pharmacy technicians, care coordinators
- Processes: AVC Hospitals Wichita dispensing sites, 340B Committee, patient screenings and referrals
- Other investments: IT infrastructure, medications and supplies, program membership fees, AVC Foundation funding support

Tactics:

- Pay program membership fees for participating pharmacies.
- Assess patients' eligibility for programs.
- Provide free and/or reduced-cost medications and testing supplies to qualifying uninsured and underinsured individuals.
- Promote awareness of the 340B Drug Pricing Program and Dispensary of Hope in the community and among caregivers.
- Explore options to expand the number of dispensing sites at AVC and/or in collaboration with community clinics.

Anticipated impact: This strategy will enhance adherence to prescribed medications, improving health outcomes for individuals whose income is near or below the federal poverty line.

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Strategy 3: Access to Primary Care
Increase primary care connections for individuals who are uninsured or receive Medicaid.

Hospitals:
AVC Hospitals Wichita
AVC Hospital St. Teresa
AVC Rehabilitation Hospital
Kansas Surgery & Recovery Center
Rock Regional Hospital

Objective: By June 30, 2028, the number of preventable hospital stays* for Sedgwick County will decrease. This objective aligns with the following Healthy People 2030 objectives:

- AHS-07: Increase the proportion of people with a usual primary care provider.
- AHS-08: Increase the proportion of adults who get recommended evidence-based preventive healthcare.
- AHS-04: Reduce the proportion of people who can't get medical care when they need it.

**Rate of hospital stays for ambulatory-care sensitive conditions per 100,000 Medicare enrollees*

Collaborators:

- Other Ascension hospitals: AVC Hospital Manhattan
- Joint ventures: Wamego Health Center
- Community-based organizations: federally qualified health centers (FQHCs), nonprofit community clinics, government and social service agencies

Resources:

- People: Ascension Data Science Institute (ADSI), Medicaid & Uninsured Transformation initiative leads, patient navigators, care managers, social workers, Medical Mission at Home planning committee
- Processes: data analysis, cross-market collaboration, care site optimization (e.g., electronic health record payor identification), patient referrals
- Other investments: printed materials, restricted donations

Tactics:

- Complete an environmental scan of community clinic assets and capacities.
- Identify key partners for navigation of "unattached" patients, Medical Mission at Home attendees, and other individuals as appropriate.
- Explore opportunities to financially invest in community safety-net clinics.

Anticipated impact: This strategy will improve access to healthcare services, increase preventive care, and reduce avoidable emergency visits for the uninsured and Medicaid populations.

Prioritized Need: Social Determinants of Health

Strategy 1: Transportation Provide non-emergency rides to medical appointments for individuals experiencing barriers to reliable transportation.
Hospitals: AVC Hospitals Wichita AVC Hospital St. Teresa
Objective: By June 30, 2028, the percentage of no-show appointments for the hospitals will decrease. This objective aligns with the following Healthy People 2030 objective: ● AHS-04: Reduce the proportion of people who can't get medical care when they need it.
Collaborators: ● Other Ascension hospitals: AVC Rehabilitation Hospital ● Joint ventures: Kansas Surgery & Recovery Center, Rock Regional Hospital ● Collaborators: Ascension Medical Group Via Christi clinics, other healthcare providers
Resources: ● People: security transportation associates ● Processes: SDoH patient screenings, patient referrals, transit coordination ● Other investments: hired services (e.g., Lyft, taxi, and bus), van maintenance and mileage, AVC Foundation funding support
Tactics: ● Collaborate with area hospitals, FQHCs, other community clinics, and nonprofit organizations to coordinate transportation services. ● Screen patients for barriers to reliable transportation. ● Refer patients in need of a non-emergency ride to AVC hospital transportation services. ● Provide transports for eligible patients to medical appointments in the area.
Anticipated impact: This strategy will ensure timely healthcare services and reduce both avoidable emergency visits and no-show appointments for ambulatory care.

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Strategy 2: Food Security Support food security efforts of community partners through cash and in-kind donations.
Hospitals: AVC Hospitals Wichita AVC Hospital St. Teresa AVC Rehabilitation Hospital Kansas Surgery & Recovery Center Rock Regional Hospital
Objective: By June 20, 2028, the percentage of food-insecure households in Sedgwick County will decrease. This objective aligns with the following Healthy People 2030 objective: ● NWS-01: Reduce household food insecurity and hunger.
Collaborators: ● Other Ascension hospitals: AVC Hospital Manhattan ● Joint ventures: Wamego Health Center ● Community-based organizations: food banks, organizations that offer free meals or grocery items
Resources: ● People: Mission Integration, Finance, TouchPoint, and Internal Communications teams; interested associates and volunteers ● Processes: distribution networks, volunteer facilities and locations, associate outreach and communication, coordination ● Other investments: market, hospital, or AVC Foundation funding support; food items
Tactics: ● Identify local organizations in need of support to drive food security programs. ● Provide cash and/or in-kind donations. ● Promote volunteer opportunities among associates and volunteers.
Anticipated impact: This strategy will enhance access to healthy food in the community.

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Strategy 3: Community Resources Connect patients and community members with identified social needs to local community resources.
Hospitals: AVC Hospitals Wichita AVC Hospital St. Teresa AVC Rehabilitation Hospital Kansas Surgery & Recovery Center Rock Regional Hospital
Objective: By June 30, 2028, the annual totals of Neighborhood Resource active users, searches, interactions, and programs added/claimed for Sedgwick County will increase. This objective aligns with several Healthy People 2030 SDoH objectives.
Collaborators: ● Third-party vendor: FindHelp ● Community-based organizations
Resources: ● People: associates who conduct SDoH screenings, Neighborhood Resource initiative leads, Marketing and Internal Communications teams, Medical Mission at Home planning committee ● Processes: SDoH screenings, patient connections and referrals, awareness campaign ● Other investments: Neighborhood Resource platform, printed materials, IT infrastructure
Tactics: ● Conduct an SDoH screening for all patients at least annually. Offer the SDoH screening tool publicly on the Neighborhood Resource community site. ● Use Neighborhood Resource to refer patients to free or reduced-cost social services and other community-based resources based on their individual needs. ● Explore integration of Neighborhood Resource into AVC's EHR systems. ● Participate in Ascension's Neighborhood Resource awareness campaign. ● Promote Neighborhood Resource at Medical Mission at Home events.
Anticipated impact: This strategy will increase wrap-around services for social needs of patients and community members, thereby promoting an improved environment for positive health behaviors and outcomes.

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Prioritized Need: Chronic Conditions

Strategy 1: Heart Disease Coordinate care for high-risk heart disease patients through Transitional Care Clinic programs.
Hospitals: AVC Hospitals Wichita AVC Hospital St. Teresa AVC Rehabilitation Hospital
Objective: By June 30, 2028, the heart disease mortality rate in Sedgwick County will decrease. This objective aligns with the following Healthy People 2030 objectives: ● HDS-02: Reduce coronary heart disease deaths. ● HDS-03: Reduce stroke deaths. ● HDS-01: Improve cardiovascular health in adults.
Collaborators: ● Joint ventures: Kansas Surgery & Recovery Center, Rock Regional Hospital ● Other collaborators: Ascension Employed Clinician Network (AECN) clinics, GraceMed Health Clinic, Hunter Health
Resources: ● People: Transitional Care Clinic associates, care coordinators ● Processes: patient referrals, telehealth and in-home visits, healthcare services ● Other investments: IT infrastructure, community health worker FTEs
Tactics: ● Collaborate with area hospitals, FQHCs, other community clinics, and nonprofit organizations to coordinate healthcare and wrap-around services. ● Provide care through the following specialized programs: ○ Community Cares: A program to deliver routine and acute care for homebound patients with chronic diseases ○ COPD program: A program to coordinate care and improve quality of life for patients living with COPD ○ Congestive heart failure program: A program to coordinate care and improve quality of life for patients living with heart failure ○ Outpatient stroke clinic: A program to coordinate care and monitor recovery for patients who have survived a stroke
Anticipated impact: This strategy will improve health outcomes for patients experiencing or at risk for chronic obstructive pulmonary disease (COPD), congestive heart failure, stroke, and other chronic conditions, with a focus on patients at high risk for emergency visits and unplanned hospitalizations.

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Strategy 2: Cancer Provide lung screenings for first responders through the Firefighter Screening Initiative.
Hospitals: AVC Hospitals Wichita
Objective: By June 30, 2028, increase the proportion of adults who received a lung cancer screening based on the most recent guidelines. This objective aligns with the following Healthy People 2030 objective: ● C-03: Increase the proportion of adults who get screened for lung cancer.
Collaborators: ● Other Ascension hospitals: AVC Rehabilitation Hospital, AVC Hospital St. Teresa ● Joint ventures: Kansas Surgery & Recovery Center, Rock Regional Hospital ● Collaborators: City of Wichita, Wichita Firefighters IAFF Local 135, Beyond the Call, Heartland Dermatology
Resources: ● People: dedicated program navigators; associates from Occupational Health, Cancer Outreach and Risk Assessment, and Surgery ● Processes: patient referrals, scheduling, healthcare services, collaboration meetings, Firefighter Health Committee monthly reviews ● Other investments: AVC Foundation funding support for patient medical costs not covered by insurance
Tactics: ● Collaborate internally and with community partners to coordinate lung screenings and wrap-around services. ● Screen firefighters for lung cancer, other health conditions, and social needs. ● Provide navigation support and referrals as needed. ● Explore program expansion to other first responders (e.g., EMS and police).
Anticipated impact: This strategy will improve health outcomes for firefighters and other first responders — individuals at high risk for lung cancer — through early screening, prevention, and wrap-around services.

Strategy 3: Cancer Provide breast screenings across the community via HOPE Mobile Mammography.
Hospitals: AVC Hospitals Wichita
Objective: By June 30, 2028, the percentage of mammography screenings* for Sedgwick County will increase. This objective aligns with the following Healthy People 2030 objective: • C-05: Increase the proportion of females who get screened for breast cancer. **Percentage of female Medicare enrollees ages 65-74 who received an annual mammography screening*
Collaborators: • Other Ascension hospitals: AVC Rehabilitation Hospital, AVC Hospital St. Teresa • Joint ventures: Kansas Surgery & Recovery Center, Rock Regional Hospital • Other collaborators: local employers, rural health facilities
Resources: • People: primary care providers, mobile unit nurses and drivers • Processes: patient referrals, scheduling, community collaborations • Other investments: 3D mammography technology, grant funding to support patients who are uninsured, mobile unit maintenance and mileage
Tactics: • Coordinate with community partners in healthcare deserts, rural areas, areas with transportation barriers, and other hard-to-reach locations. • Provide breast screenings and referrals to other healthcare and wrap-around services as appropriate. • Assess needs and services and develop ongoing partnerships and referral systems.
Anticipated impact: Through increased accessibility, this strategy will improve the prevention and early detection of breast cancer and, therefore, health outcomes for women eligible for the screening.

Evaluation

The hospitals will develop a comprehensive measurement and evaluation process to monitor the strategies outlined in this report. The impact of each action plan is documented and reported on the hospitals' annual IRS Form 990 Schedule H, as well as the next CHNA.