St. Luke's Hospital



Community Health Needs Assessment 2016



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Message to the Community



Over the past 150 years, St. Luke's Hospital has continued to deliver world-class care to all our patients, many with complex conditions. This is our mission, and we work to fulfill it each day – continually raising the bar on the quality of care and providing hope where once there was none.

What began as a single hospital a century and a half ago has grown to include an entire network of services, providing care across 26 locations and in more than 60 specialty areas. This includes our rich tradition of community outreach services, offering extensive health education programs and screenings throughout the areas we serve.

We cannot do this alone. As a healthcare leader and community partner, we collaborate with many local and regional organizations to help improve the health of the community. This includes an extensive network of community-based health organizations that we continue to collaborate with on disease prevention, risk factor modification and helping those with complex medical conditions live more fulfilling and active lives. Though our organization identified three areas of focus for our previous Community Health Needs Assessment plan, we expanded our reach to provide a wealth of resources and information for other critical conditions and issues.

In addition, St. Luke's recently announced a new affiliation with Cleveland Clinic's Heart & Vascular Institute. This unique affiliation offers our region the highest level of cardiac and vascular care available in the country using the latest heart treatments – all close to home.

As an independent, nonprofit hospital, we belong to this community, and we are privileged to serve it.

Sincerely,

Christine M. Candio, RN, FACHE

President & CEO St. Luke's Hospital

Executive Summary

St. Luke's Hospital is an independent, nonprofit healthcare provider committed to improving the quality of life for its patients and the community. In its 150-year history, St. Luke's has grown from a single hospital location to an advanced network of care. It provides personalized healthcare services in over 60 specialty areas at its 493-bed hospital in Chesterfield, Mo. and offers 25 other locations across the greater St. Louis area, bringing quality healthcare services close to home. St. Luke's is nationally-recognized for quality care and consistently earns high patient satisfaction scores. In addition, St. Luke's is the exclusive St. Louis affiliate of the nation's No. 1 heart hospital, Cleveland Clinic's Sydell and Arnold Miller Family Heart & Vascular Institute.

St. Luke's has a robust community outreach program, offering free and low cost programs addressing the needs of the community at our campus and various offsite locations. In addition, St. Luke's works with more than 100 local employers to help impact community health through worksite wellness initiatives.

Based on the Patient Protection & Affordable Care Act (PPCA), all nonprofit hospitals conduct a Community Health Needs Assessment (CNHA) every three years, and work on implementation plans to drive community results. St. Luke's conducted its second CHNA in 2015-2016, and will continue to focus on the three key areas as identified in its 2013 needs assessment:

- · Obesity and sedentary lifestyle
- · Cancer screenings and support services
- · Management of chronic conditions

The needs assessment document provides any available updates to local data and information about St. Luke's work in the community on these focus areas to help improve the health of the community.



St. Luke's Hospital Overview

St. Luke's Hospital, located in Chesterfield, Missouri, is a regional healthcare provider committed to improving the quality of life for patients and the community. Founded nearly 150 years ago to meet the expanding needs of a growing St. Louis, St. Luke's has kept true to its Episcopal-Presbyterian heritage and its mission to improve the health and quality of life for patients and the community. This is evident not only in the breadth of services St. Luke's offers, but also in the many ways we reach out to help the community every year. Using talents and resources responsibly, our medical staff, employees and volunteers provide care for the whole person with compassion, professional excellence and respect for each other and those we serve.

St. Luke's achieves recognition from various sources for clinical excellence. Since 2009, St. Luke's Hospital has been recognized nationally for excellence in women's health by being named a Spirit of Women Premier Hospital. Spirit of Women is a coalition of hospitals and healthcare providers across the United States that ascribes to the highest standards of excellence and innovation in women's health, education and community outreach. The standards were developed by the Spirit of Women Health Network in consultation with the Office on Women's Health in the U.S. Department of Health and Human Services. As the region's exclusive Spirit of Women hospital, St. Luke's is focused on providing exceptional women's services, education and community outreach programs that help women take action for better health for themselves and the health of their families.

In addition, St. Luke's is recognized by a variety of organizations for its clinical quality, and receives top-tier patient satisfaction based on ongoing patient surveys. St. Luke's has received the Outstanding Patient Experience Award (2011-2016) from Healthgrades.

Improving the quality of life for the community is something St. Luke's puts into practice every day, remaining committed to our vision as a catalyst for building a healthy community.

St. Luke's Hospital Mission

Faithful to our Episcopal-Presbyterian heritage and its ministry of healing, St. Luke's Hospital is dedicated to improving the health of the community.

Using talents and resources responsibly, our medical staff, employees and volunteers provide care for the whole person with compassion, professional excellence and respect for each other and those we serve.

St. Luke's Hospital Vision

St. Luke's will be a premier regional healthcare provider serving St. Louis Metro, portions of Eastern Missouri and Southwestern Illinois. We will actively reach out to the public, physicians, employees, referring providers, and the communities we serve offering a wider range of health services than a traditional hospital.

Overview of St. Luke's Rehabilitation Hospital

St. Luke's Rehabilitation Hospital, a joint venture between St. Luke's Hospital and Kindred Healthcare, is located three miles west of St. Luke's Hospital on the campus of Surrey Place. The **35-bed**, nearly **30,000 square-foot** rehab hospital provides intensive inpatient rehabilitation programs and services to patients with severe illnesses and injuries, including stroke, traumatic brain injury, neurological disorders, amputation, spinal cord injury and other debilitating conditions.

St. Luke's Rehabilitation Hospital provides a dedicated facility to meet the complex needs of today's rehabilitation patient. It also offers private patient rooms and areas for family-physician conferences, allowing for recovery in a home-like atmosphere. Many of the hospital's patients arrive after treatment at St. Luke's Hospital, while others come from other healthcare systems to receive their rehabilitation care.

The next page shows the scope of St. Luke's locations in the community.

Scope of St. Luke's locations in the community



- 🍁 St. Luke's Hospital
- 2 The Mr. and Mrs. Theodore P. Desloge, Jr. Outpatient Center
 - Cardiology Services
 - Laboratory Draw Station
 - Radiology and Imaging Services
 - Therapy Services and Cardiac Rehabilitation
 - Vascular Services
 - Albert Pujols Wellness Center for Adults with Down Syndrome
- 3 Surrey Place Skilled Nursing/Residential Care
- 4 St. Luke's Urgent Care in Chesterfield
- 5 St. Luke's Urgent Care in Creve Coeur
- 6 St. Luke's Urgent Care in Ellisville
- 7 St. Luke's Urgent Care in Fenton
- 8 St. Luke's Urgent Care in Ladue
- 9 St. Luke's Urgent Care in Kirkwood
- 1 St. Luke's Urgent Care in O'Fallon
- 1 St. Luke's Urgent Care in Weldon Spring
- 12 St. Luke's Pediatric Care Center

- 13 St. Luke's Medical Offices and Therapy Services in Ellisville
- St. Luke's Medical Offices and Therapy Services at WingHaven®
- (5) Chesterfield Valley: St. Luke's Women's Center and St. Luke's Center for Diagnostic Imaging
- 6 St. Luke's Center for Diagnostic Imaging WingHaven®
- 17 St. Luke's Center for Diagnostic Imaging Frontenac
- St. Luke's Center for Diagnostic Imaging Midwest Breast Care Center
- 19 St. Luke's Vascular Access Center
- 20 St. Luke's Rehabilitation Hospital
- 21 St. Luke's Therapy Services at the Jewish Community Center Creve Coeur
- 22 St. Luke's Therapy Services at the Jewish Community Center Chesterfield
- 23 St. Luke's Home Health & Hospice Services
- St. Luke's Sleep Medicine Center O'Fallon Location
- 23 St. Luke's Convenient Care at Dierbergs Des Peres
- 26 Open Upright MRI of Missouri

Community Profile

Based in West St. Louis County, St. Luke's Hospital serves residents throughout the St. Louis County area, which has a population of **1,002,898** residents. The **19** municipalities that define the West County area represent a population of **286,668** and account for **54.4%** of the combined inpatients and outpatients St. Luke's serves within St. Louis County (*Figure 1*).

Our community outreach efforts reach a broad population, with more than **75**% of participants in health education classes and screenings residing in the West County area.

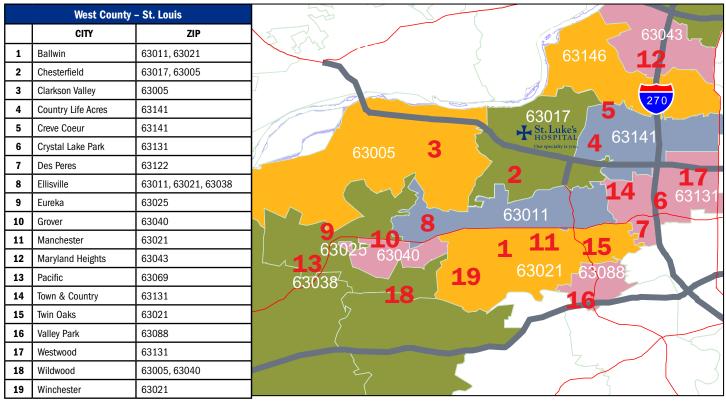


Figure 1. West County defined ZIP codes and map



| 2016 Base Counts | | | |
|--|-----------------------|--------------------|--------------------|
| 2016 Population | 286,668 | 1,002,892 | 6,091,286 |
| 2016 Households | 113,037 | 409,407 | 2,428,974 |
| 2016 Housing Units | 120,024 | 444,930 | 2,785,062 |
| 2016 Families | 78,973 | 266,386 | 1,587,705 |
| Percent Pop Growth 2010 to 2016 | 1.62% | 0.39% | 1.71% |
| Percent Household Growth 2010 to 2016 | 2.08% | 1.15% | 2.25% |
| Percent Housing Unit Growth 2010 to 2016 | 2.27% | 1.57% | 2.67% |
| Percent Family Growth 2010 to 2016 | 1.93% | 1.12% | 2.29% |
| | West St. Louis County | St. Louis | Missouri |
| 2016 Population by Single Ra | ace and Sex | | |
| 2016 Population | 286,668 | 1,002,892 | 6,091,286 |
| White | 247,554 (86.36%) | 689,191 (68.72%) | 4,987,822 (81.88%) |
| Black/Af Amer | 10,859 (3.79%) | 238,813 (23.81%) | 708,892 (11.64%) |
| Am Ind/AK Native | 559 (0.19%) | 2,164 (0.22%) | 29,837 (0.49%) |
| Asian | 19,690 (6.87%) | 40,453 (4.03%) | 115,746 (1.90%) |
| Native HI/PI | 49 (0.02%) | 222 (0.02%) | 7,811 (0.13%) |
| Some Other Race | 2,319 (0.81%) | 9,689 (0.97%) | 94,154 (1.55%) |
| 2+ Races | 5,638 (1.97%) | 22,360 (2.23%) | 147,024 (2.41%) |
| | West St. Louis County | St. Louis | Missouri |
| 2016 Pop by Ethnicity and Si | | | 1 |
| Hisp/Lat | 286,668 | 1,002,892 | 6,091,286 |
| Not Hisp/Lat | 29,037 (2.90%) | 255,032 (4.19%) | 4,987,822 (81.88%) |
| | West Ct Louis County | Ct Lavia | Missauri |
| 0040 Danielatian his Aza | West St. Louis County | St. Louis | Missouri |
| 2016 Population by Age | 1000 000 | 14 000 000 | Lc 004 000 |
| 2016 Population by Age | 286,668 | 1,002,892 | 6,091,286 |
| 286,668 | 1,002,892 | 6,091,286 | 4,987,822 (81.88%) |
| 2016 Pop, Age <18 | 004 400 (00 05%) | 1 201 202 (20 25%) | |
| 62,698 (21.87%) | 221,102 (22.05%) | 1,391,622 (22.85%) | |
| 2016 Pop, Age 18+ | 704 700 (77 050) | 4.000.004.(77.450) | |
| 223,970 (78.13%) | 781,790 (77.95%) | 4,699,664 (77.15%) | |
| 2016 Pop, Age 25+ | 200.005 (00.005) | 4.000.050.405.0044 | |
| 198,707 (69.32%) | 690,295 (68.83%) | 4,098,058 (67.28%) | |
| 2016 Pop, Age 65+ | | | |
| 52,878 (18.45%) | 171,702 (17.12%) | 972,976 (15.97%) | |
| 2016 Median Age | | 7 | |
| 43.46 | 40.50 | 1 38.60 | |

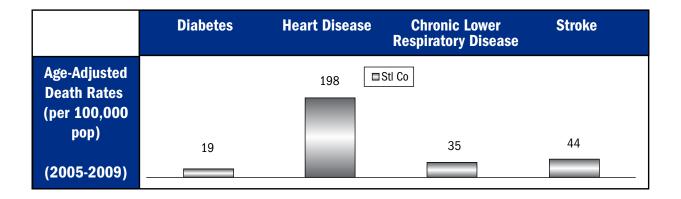
St. Louis

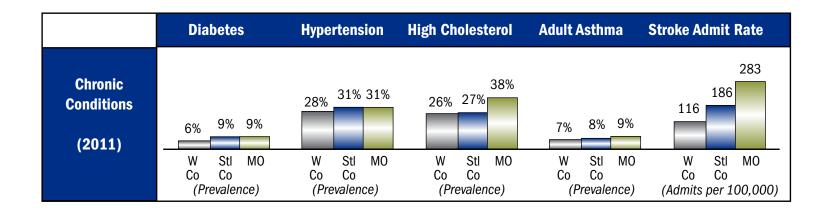
Missouri

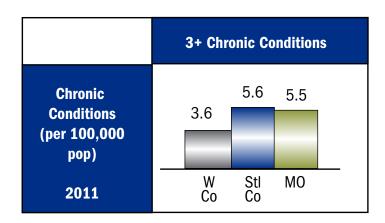
West St. Louis County

Chronic Conditions

Chronic conditions including heart disease, cancer and diabetes are the leading causes of death and disability in the United States. Heart disease is the top killer of St. Louisans and is also a significant cause of disability.







All data in this section was provided by the 2011 St. Louis County Community Health Needs Assessment.

Data Collection

Community stakeholder focus group feedback and consumer surveys to prioritize healthcare needs in St. Louis make up the primary data collection for this Community Health Needs Assessment. County and state secondary data were collected to assess community demographics and health status. Analyses were conducted at the most local, age and race-specific level possible, based on availability and significance of the data.

Major Secondary Data Sources Included:

· 2011 St. Louis County Community Health Needs Assessment

The St. Louis County Department of Health conducted a consumer telephone study to identify the most important health issues in the county, both overall and within four distinct sub-county study regions. The assessment identifies priority health issues where better integration of public health and healthcare can improve access, quality and cost effectiveness of services to residents of St. Louis County.

Healthy Communities Institute

HCI provides an online dashboard of health indicators for St. Louis County as well as the ability to evaluate and track the information against the Healthy People 2020 goals. Sources of data include the National Cancer Institute, Environmental Protection Agency, U.S. Census Bureau, U.S. Department of Education and other national, state and regional sources.

· Healthy People 2020

An initiative of the U.S. Department of Health and Human Services, Healthy People provides science-based, 10-year national objectives for improving the health of all Americans. These goals encourage collaboration across communities and sectors, empower individuals to make informed health decisions and measure the impact of prevention activities.

Primary Research Methodology

Hospital Conducted Focus Groups

St. Luke's Hospital, in collaboration with Barnes-Jewish West County Hospital, Missouri Baptist Medical Center, and St. Anthony's Medical Center, solicited input from health experts and individuals with special interest in populations served by these hospitals, specifically in the West and South St. Louis county areas.

Hospital representatives formulated a two-step process. An initial focus group was conducted in June 2012 to solicit feedback from these individuals on the needs of the St. Louis County population. Eighteen individuals representing various St. Louis County organizations participated in the first focus group, identified collectively between all four collaborating hospitals (*Appendix A*). Each individual was sent a worksheet to complete prior to the meeting, to identify their perceptions of the greatest healthcare needs in St. Louis County, their knowledge of available resources to address those needs, and the greatest gap that exists between need and available resources (*Appendix B*). Based on feedback from the focus group worksheets, the most frequently mentioned needs in St. Louis County were ranked and compared to the biggest concerns identified by St. Louis County residents in the 2011 consumer needs assessment.

This same group of community leaders was invited to a second meeting in July 2012, where the healthcare needs compiled from the previous meeting were presented, along with available secondary data that aimed to quantify the size of the need. At the conclusion of the meeting, community leaders were asked to re-evaluate the 12 identified health care needs in terms of their priority in the community on a scale of 1 (low concern) to 5 (high concern), as well as the ability for community resources to collaborate around them on a scale of 1 (little or no potential) to 5 (significant potential). The final results of the perceived priority health needs of St. Louis County were ranked based on level of need and ability to collaborate (*Appendix C*).

· Spirit of Women Member Surveys

To further validate the prioritized needs determined by the focus group, in October 2012, surveys were distributed to more than 9,000 women currently enrolled as St. Luke's Spirit of Women members, asking them to rank the top eight health care needs previously identified in order of perceived importance. The 230 survey results were measured against the focus group feedback and assessed by the St. Luke's CHNA advisory task force. (Appendix D)..

Day of Dance Participant Health Surveys

St. Luke's Hospital conducts a free wellness event called Day of Dance to help people take action for their health through fitness class samplings and learn valuable health and wellness information from physicians and health educators. At the February 2013 event, participants were asked to complete a health status survey, and results and key findings from the 689 completed surveys were compiled into a group health profile (Appendix E).

· St. Luke's Passport to Wellness Group Health Profiles

Passport to Wellness is an employee wellness program designed to encourage all employees to improve their health and quality of life through access to free biometric screenings (for cholesterol and glucose), blood pressure, weight/waist measurements and health consultations on individual results, as well as health-related educational and activity-based events throughout the year

The program is available to all St. Luke's employees, whose data is captured and tracked through a confidential personal health profile. The St. Luke's Passport to Wellness employee health profile (Appendix F) provides an aggregate overview of the overall health characteristics of St. Luke's Hospital employees. For comparative purposes, this information is contrasted with other data collected locally and across the United States.

Externally, St. Luke's partners with over 195 employer groups representing over 127,000 employees to be proactive in identifying, addressing and reducing employee health risks. The community health profile (Appendix G) is a health snapshot of the workforces participating in Passport to Wellness at large. The aggregated data is based on over 18,000 employee profiles collected from partnering employer groups through biometric health screenings, community events, health fairs or health risk assessment collections. These profiles help identify specific population health risks and trends, over time, improvements in the health of this workforce population. St. Luke's Employer Relations Specialist meets with leaders from each organization to review an aggregate report of the company's results and provide recommendations and services to help address the workforce health risks.

St. Luke's CHNA Advisory Task Force (*Appendix H*) reviewed and evaluated all primary and secondary data and three major healthcare needs emerged: obesity and sedentary lifestyles, cancer screening and support services, and management of chronic conditions.

St. Luke's Hospital Areas of Focus

Obesity & Sedentary Lifestyle

Initiative: Offer tools to help combat rising rates of adults who are obese or overweight; encourage active lifestyles.

Obesity statistics continue to be staggering and countless studies have shown the negative impact of obesity on one's health including the development of chronic conditions. The lack of nutritious foods in one's diet and absence of physical activity both contribute to overweight and obesity populations that continue to increase. The term overweight is defined as having a Body Mass Index (BMI) of 25 or above. Obesity is defined as a BMI of 30 or greater.

- · In 2011, there were 20% of adults living in West County that were recorded as having no physical activity. This compares to 22% of adults living in St. Louis County and 27% of adults living in Missouri that were recorded as having no physical activity.
- •There were 20% of adults living in West County that reported having a BMI greater than 30 in 2011. This compares to 27% of adults living in St. Louis County reported having a BMI greater than 30 and 31% of adults living in Missouri who reported having a BMI greater than 30 in 2011.

Being overweight is a major contributor to chronic diseases including:

Obesity Complications

- · Coronary Heart Disease
- ·Type 2 Diabetes
- · Cancers: Endometrial, Breast, Colon, Prostate
- $\cdot \ Hypertension$
- · Dyslipidemia: High Cholesterol, High Triglycerides
- · Stroke
- · Liver & Gallbladder Disease
- · Sleep Apnea & Other Respiratory Problems
- · Osteoarthritis
- · Gynecological issues: Abnormal Menses, Infertility

Current Clinical Strategies

- · Our nutrition wellness center and therapy services provide physicians with easy to use nutrition and fitness resources that St. Luke's offers the community to help educate patients at point-of-care and encourage lifestyle changes.
- · Our HeartCaring program provides materials to physicians to help encourage dialogue between caregivers and patients regarding the known risk factors for heart disease, including a discussion on BMI.
- Dietitians consult with all inpatients with a BMI of 40+. Services include: nutritional screening, assessment of readiness to change and referral to resources including outpatient
- · Nutrition Wellness Center for weight management.
- · Our inpatient menu offers reduced calorie options including house-made reduced sugar/fat desserts, lean meats and vegetarian entries. Soda is not available on the menu.
- · Cardiac rehabilitation services help beyond the initial recovery and promote appropriate exercise as a part of the individual's lifestyle.
- · At St. Luke's Rehabilitation Hospital, the occupational therapy sessions incorporate healthy food preparation and the dietitian provides a diet and menu plan to facilitate healthy eating and weight loss, if needed. The rehab facility also offers physical therapy to patients, as well has home therapy instructions once patients are discharged from the facility.

Current Community Strategies

- · St. Luke's offers free blood pressure checks every day at six Urgent Care Centers and our Convenient Care Center.
- •The St. Luke's therapy services department and food/nutrition services collaborate to offer individualized, fee-based programs, including:
- Perfect Fit: scheduled nutrition and fitness 1:1 consults

Therapy services offers:

- Supervised exercise: use of our fitness center with supervision on a per time fee basis
- Personal training: fee-based individualized fitness training
- · Food and nutrition services offers individualized, fee-based programs including:
- Weigh to Lose: weight loss program with group and individual sessions
- Nutrition Wellness Center: Individualized weight management
- Nutri-hand: internet access to dietician for ongoing support
- · Our retail food service locations provide nutrition information at point-of-service to promote informed food selections for visitors and employees. We offer a wide variety of house-made foods with reduced fat/sugar content and vegetarian options are also available.
- •The St. Luke's website provides comprehensive health information and resources to the community with a health encyclopedia that includes information about medical conditions, symptoms and treatments.
- · Our HealthAware online risk assessments help individuals determine their risk of a heart or stroke incident. For those at risk who opt into the program, a St. Luke's nurse health educator will follow up and schedule a free consultation including a cholesterol check.
- · Our Passport to Wellness program provides wellness education and screenings to more than 175 employers and is also offered to our St. Luke's Hospital employees.
- · Our community outreach programming includes free lectures for the public throughout the year on a variety of wellness topics.
- · Our HeartCaring Check Ups offer fee-based individualized screenings that include blood pressure, body composition, fasting lipid profile, glucose screening, take-home stress management exercises and a health risk assessment. A health professional reviews the results with the individual and provides coaching tips for actions to improve their health.

- •The St. Luke's Spirit of Women free membership program provides monthly health information about wellness and prevention to women via e-mail and through the St. Luke's website to encourage actionable steps to take for prevention and recommended screening information.
- · St. Luke's offers free Pre-Diabetes Workshops taught by diabetes educators who focus on lifestyle changes, exercise and diet tips for those at risk for diabetes.
- St. Luke's Day of Dance provides free dance fitness classes to the community at our annual event that is focused on overall wellness and heart health. The event impacts 1,200+ with fitness, education and free health screenings. More than 90% of attendees say the event motivates them to take action for their health.
- · St. Luke's provides dietitians to participate in Dierbergs Des Peres store's on-site culinary classes and provide nutrition education.
- · St. Luke's offers a quarter-mile outdoor track for employee, patient and community use.
- •The Albert Pujols Wellness Center for Adults with Down Syndrome offers health education and wellness to meet the needs of adults 18+. The center offers classes in fitness, nutrition, safety and social/emotional well-being as well as classes for caregivers.
- •Through the St. Luke's Passport to Wellness program, a steering committee shapes education programs for our employees throughout the year and offers biometric screenings and consults to all employees with a nurse health educator. Programs include topics such as general health and wellness, nutrition and fitness.
- •Therapy Services offers convenient employee fitness classes to encourage staff to begin or increase their fitness regimen.

Cancer Screening & Support Services

Initiative: Provide education and screenings to help identify cancers earlier. Offer comprehensive education and support services to cancer patients.

Most everyone knows someone who has been affected by cancer and the diagnosis of cancer continues to grow. Due to advanced technology for screening, many cancers are identified earlier, which leads to more successful treatment.

Cancer screenings are currently recommended for breast, prostate, colon and ovarian cancer. However, there have been recent studies and information that have led to confusion regarding screening guidelines for mammography and pap smears, and perhaps a lower rate of screening.

The deadliest and most common form of cancer in both men and women is lung cancer. According to the Centers for Disease Control and Prevention (CDC), lung cancer affects more Americans than breast, colon and prostate cancers combined. Lung cancer screenings are not currently covered by Medicare or insurance for lung cancer, though new screening options are emerging.

- · In 2011, the three leading types of cancers with the highest incidence among males in Missouri were prostate, lung and colorectal cancer. Among women, the leading cancers were breast, lung and colorectal cancer.
- Approximately 7.6% of adults living in St. Louis County have had a diagnosis of cancer.
- The all-cancer incidence rate in St. Louis County is just over 10% higher than the state rate. There is some variation by region, but all are above the state rate.
- •The all-cancer incidence rate in West County per 100,000 population is 541 compared to 556 in St. Louis County and 502 for the state of Missouri.
- · Mortality /incidence ratios are lower in St. Louis County than in the state, indicating appropriate access for cancer screening and treatment.

Cancer Screening Rates 2011

| Screening | West County | St. Louis County | Missouri |
|--|--------------------|------------------|----------|
| Pap Smear - % of females reported having a pap smear within the past two years | 61% | 62% | 66% |
| Mammogram - % of females (age 40+) reported having a mammogram within the | 64% | 60% | 58% |
| last year | | | |
| Colonoscopy - % of adults (age 50+) reported having a colonoscopy within the past | 65% | 60% | 51% |
| 5 years | | | |

There are many factors that can contribute to cancer including: tobacco use, physical inactivity, obesity, poor diet and alcohol use. Following recommendations for screenings is critical to help identify cancers and allow for earlier treatment.

Current Clinical Strategies

- •The St. Luke's Cancer Resource Center offers resources and support for cancer patients, their family and community members. Diagnosis, treatment, coping techniques, support groups, community resources and other general information are available. Assistance is provided in a quiet, relaxing atmosphere.
- · Resources include:
- Oncology-certified resource nurse consultations
- Social worker consultations
- Pamphlets and brochures on various cancer topics
- Lending library that offers books, CD's, DVD's, videos and audio tapes
- Internet access via computer workstations on-site
- Referrals to reliable websites for information
- Access to nutrition counseling services

The Center coordinates the American Cancer Society's Reach to Recovery program at St. Luke's for women diagnosed with breast cancer. In addition, free wigs and turbans are available for patients.

Information on St. Luke's sponsored FOCUS breast cancer support group and the Look Good, Feel Better program are available. The center also sponsors yoga classes for cancer patients, survivors and their caregivers.

- St. Luke's became the first STAR certified cancer rehabilitation provider in the St. Louis area, offering cancer patients access to comprehensive therapy services for improving their quality of life post-treatment.
- · Nutrition screenings are performed for patients who are undergoing cancer treatment. Referrals are made to a dietitian for nutrition assessment and management.
- Several St. Luke's mammography locations offer a free breast cancer risk assessment at the time of the screening mammogram to help identify women at higher risk for breast cancer and offer them guidance for developing a plan for more aggressive monitoring to catch cancers earlier.
- · St. Luke's offers a High Risk Breast Care Clinic for women at higher risk which includes an office consult with a breast surgeon and development of a screening plan tailored to the patient's risk assessment findings.

- · St. Luke's offers Genetic Counseling Services to provide information and support to families who have members with birth defects or genetic disorders and to families who may be at risk for a variety of inherited diseases. Certified genetic counselors investigate problems present in a family, interpret information about an identified disorder, analyze inheritance patterns and risks of recurrence, and review available options with the family.
- · St. Luke's is committed to the ongoing research and development of new cancer therapies and treatments. Clinical research is an integral part of the comprehensive cancer services offered at St. Luke's Hospital. Physicians are able to offer the latest treatment and prevention options to their patients through well-respected local and national clinical trial groups.

Current Community Strategies

- · St. Luke's has improved access to mammography by offering a mobile mammography van at locations throughout the community and three mammography centers in addition to the hospital location.
- · St. Luke's has provided free prostate screenings for men.
- · St. Luke's offers free smoking cessation educational opportunities to the community.
- · We offer low-cost tobacco cessation therapy with a respiratory therapist.
- · St. Luke's offers free cancer educational programming to the community, including information on prevention and treatment of cancer.
- · Our worksite wellness program offerings include PSA screenings at employer locations.
- · We communicate cancer-related screenings via Spirit of Women decade-specific printed materials and Men's Health Tip materials.
- · St. Luke's offers free skin cancer screenings to the community.
- · St. Luke's promotes recommended cancer screenings at community and worksite wellness events. This information is also emailed to subscribers in our email database and to our employees.

Management of Chronic Conditions

Initiative: Improve education about chronic conditions and related risk factors. Reduce readmissions of hospitalized patients with heart failure, heart attack and pneumonia.

Chronic diseases account for 70% of all deaths in the U.S. and they also inpact the quality of life for 1 out of 10 Americans, according to the CDC.

Common Chronic Conditions

| | West County | St. Louis County | Missouri |
|---------------------|-------------|------------------|----------|
| High Blood Pressure | 28% | 28% | 31% |
| High Cholesterol | 26% | 27% | 38% |
| Diabetes | 6% | 9.4% | 8.7% |
| Asthma | 6.6% | 8.4% | 9.2% |
| COPD | 0.7% | 2.4% | NA |

- · In West County, 3.6% of adults report they have been diagnosed with three or more chronic conditions, compared to 5.6% in St. Louis County and 5.5% in Missouri.
- · Ambulatory Care Sensitive (ACS) Conditions rates for inpatient hospital admissions for St. Louis County are elevated compared to the state rates; however, ACS emergency room visit rates are lower than the state, particularly in West County.

Hospital Admission Rates for Ambulatory Care Sensitive (ACS) Conditions per 100,000 Population

| West St. Louis County | St. Louis County | Missouri |
|-----------------------|------------------|----------|
| 1,194 | 1,947 | 1,673 |

There are several chronic conditions that hospitals nationwide are focused on related to preventing readmissions to the hospital in the 30-day period after the patient is hospitalized:

Heart failure is a condition in which the heart can no longer pump enough blood to the body. The condition may affect only the right side or only the left side of the heart. These are called right-sided heart failure and left-sided heart failure. More often, both sides of the heart are involved.

· Heart disease mortality is somewhat higher in St. Louis County than in the state.

A **heart attack** occurs when blood flow to a part of the heart is blocked for a long enough time that part of the heart muscle is damaged or dies. Most heart attacks are caused by a blood clot that blocks one of the coronary arteries. The coronary arteries bring blood and oxygen to the heart. If the blood flow is blocked, the heart is starved of oxygen and heart cells die.

• The hospital admission rate for Acute Myocardial Infarction (AMI) per 100,000 population is 86 for West County residents compared to 113 for residents of St. Louis County and 101 for the state of Missouri.

Pneumonia is a respiratory condition in which there is an infection of the lung. It is a common illness that affects millions of people each year in the United States.

- · Current hospitalization rates for pneumonia are similar in the county and the state.
- · Adults in the 45-64 age group living in West County had much lower rates of pneumonia when compared to the state, with the exception of the 65+ age group.
- · Hospital admission rates for pneumonia, bronchitis and asthma are the highest for the 65+ population living in West County.

Current Clinical Strategies

- •The St. Luke's heart failure department manages patients who are admitted with the diagnosis of congestive heart failure. Nurses provide education to the patient while they are in the hospital, including how to manage their condition at home and when to call for problems. Once the patient leaves the hospital, there is an outpatient disease manager nurse who calls the patient and manages their condition via telephone.
- •The St. Luke's social workers currently provide discharge planning services for heart failure, stroke and pneumonia patients to help patients return home with a plan for home care, access to medications and follow-up appointments. For those who need financial assistance, social workers connect them with the appropriate community resources and patient financial services at the hospital.
- Dietitians at St. Luke's Hospital and St. Luke's Rehabilitation Hospital manage every patient who is admitted with congestive heart failure and patients are put on a sodium-restricted diet. The patient menus offer house-made soups and entrees with reduced sodium content. The sodium content is printed on the menu to help educate patients.
- · Dietitians provide education that outlines Medicare coverage for diabetes outpatient medical nutrition therapy.
- Respiratory therapy arranges for any post-discharge respiratory equipment and calls those patients within 24 hours after leaving the hospital to confirm their equipment arrived and is working satisfactorily. After discharge, the patient/family/facility receives follow-up calls from St. Luke's. If any problems are found, they are immediately addressed.
- · St. Luke's Rehabilitation Hospital continues care coordination for CHF patients with the hospital the patient was discharged from, providing specialized diets, nutritional education and medication management.
- · St. Luke's Home Health Services continues physician ordered care in the patient's home, allowing for additional one-on-one education tailored to the patient's learning style and confirmation that patients are following their prescribed orders to help prevent readmissions.

Current Community Strategies

- · St. Luke's offers support groups for pulmonary, diabetes and heart disease to offer education and resources to patients who are managing chronic conditions.
- · St. Luke's offers free pulmonary screenings at community events, such as Day of Dance and employee wellness programs in St. Louis.
- · St. Luke's provides retail food service options with information on sodium content and offers lower sodium options. Salt free seasonings are available.
- Educational material that outlines Medicare coverage for diabetes outpatient Medical Nutrition Therapy is available in the cafeteria and distributed to physician offices.
- •The Nutrition Wellness Center offers Individualized Diabetes Management.
- · St. Luke's offers health information about chronic conditions and preventive screenings to proactively manage conditions at community events, including our Spirit of Women programs, community lectures and worksite wellness programs.

Other Identified Needs

Additional health issues identified through the community health needs assessment and feedback from the focus groups have not been included in the final recommendations because they will be indirectly impacted by implementation of initiatives focused on the recommended health needs or they cannot be addressed due to limited resources and St. Luke's Hospital's ability to impact the issue. While the hospital acknowledges the significance of the remaining needs, it was determined to be most prudent to focus on the biggest issues that are most aligned with our strategic direction and mission. The following section addresses the existing resources to meet these needs in the community.

Access

One of the focus group's identified needs for access was for the under and uninsured in the St. Louis County area. St. Luke's lives out its ministry of healing by dedicating itself to improving the health of the community through the wide array of services it makes available to the St. Louis metropolitan area. St. Luke's Hospital is proud of our mission to provide care to patients regardless of their ability to pay.

- **Financial assistance** is provided to all patients with an identified need. St. Luke's Hospital reaches out to self-pay and underinsured patients in a number of ways, including raising awareness of Medicaid health insurance and the hospital's self-pay plan for patients. By assisting our patients with the Medicaid application process, St. Luke's helps patients obtain the benefits for which they qualify. We are committed to working with patients who do not have private insurance and who do not qualify for Medicaid, offering self-pay discounts in line with those that have been negotiated with private insurance companies. In addition, patients may be eligible for a "prompt pay" discount. Financial assistance may be available for patients, depending on income, assets, family size and medical needs. Eligibility is based on Federal Poverty Guidelines. Assistance may be available in the form of free services or reduced rates.
- **Transportation** is made accessible to patients through St. Luke's Hospital's arrangement with Older Adults Transportation Services (OATS) Transit, providing complementary transportation to St. Luke's patients needing transportation to and from medical appointments on the St. Luke's campus.
- St. Luke's Pediatric Care Center is a mission-based agency of St. Luke's Hospital that has been providing primary and preventative care to medically underserved and underinsured children from birth to age 18 in North St. Louis City and County for more than 60 years. St. Luke's Hospital funds this community project, with operating costs exceeding \$1 million dollars.

The primary goal of the Center is to establish and maintain access to healthcare for families through a primary care physician, thereby helping them understand and deal with potential health issues before the issues become serious enough to require acute care. The staff consists of two full-time, board-certified pediatricians, as well as a site manager, registered nurse, social worker and office coordinator, all of whom are dedicated to improving healthcare for children and families.

• **Healing Grace** was formed in June 2007 by one of our St. Luke's Medical Group physicians with the goal of providing a clinic for the uninsured in West St. Louis County by using primarily volunteer help and low cost generic medications. The clinic is located on the grounds of Central Baptist Church in Eureka.

St. Luke's Hospital has provided medical supplies and used equipment for the clinic. Our joint venture imaging centers provide physician-ordered radiologic scans at no cost. Volunteer physicians, including several from St. Luke's Medical Group, nurses, and clerical staff work at the clinic each Saturday morning. Over the last three years, 752 new patients have been cared for at Healing Grace.

Volunteers in Medicine is a national nonprofit dedicated to building a network of sustainable free primary health care clinics for the uninsured in local communities. Our local West County chapter serves adults between the ages of 18-24 residing in the cities of Ballwin, Chesterfield, Des Peres, Ellisville, Manchester and Town & Country. Any adult in this service area meeting the requirements of being uninsured in a household with income below 200% of the federal poverty level is eligible for free care, provided by local volunteers and retired medical professionals.

Additionally, several resources exist within the St. Louis County area including:

- · Grace Hill Clinic
- · Health Care for Kids
- · John C. Murphy Health Center
- · Show Me Healthy Women
- · South County Health Center
- · St. Louis ConnectCare

Insurance and affordability is only one of the identified needs for access; another significant barrier regarding access is transportation. The major concern is that people do not have a car, gas or convenient access to a bus, which limits their access to the medical professionals who provide them care. In addition to St. Luke's Hospital's contract with OATS to provide transportation for older adults to the hospital and physician offices, other services in the St. Louis County area provide transportation to various hospitals and medical institutions:

- · American Cancer Society's Road to Recovery Program
- · Mid-East Area Agency on Aging (MEAAA)
- · St. Louis County's County Older Residents Program (CORP)
- · Missouri Department of Social Services provides non-emergency medical transportation to eligible Medicaid participants.
- · Select HMO insurance providers offer a certain number of rides to medical appointments.

Senior Citizens

Several concerns with regard to the elderly exist in the community. These include access to care and ability to pay for necessary services, safety in the home (risk of falling), managing medications, and delayed diagnosis and treatment of cognitive disorders such as Alzheimer's disease or dementia.

- · In St. Louis County, 29.3% of seniors aged 65+ reported living alone in 2010, and 6.3% reported living below the poverty level.
- · In 2009, falls were the cause of 63% of the total unintentional deaths in Missouri, and the state's death rate from falling is 31% higher than the national average.

St. Luke's Hospital provides a scope of services which address these, and other, issues affecting the elderly. These services include:

- Home Health Services provide patients with the care they need in the comfort of their home, when their physician orders home health as a medically necessary part of recovery. The St. Luke's Home Health team works closely with the patient's physician to develop a plan to provide care for the patient at home. Home care offers a full range of nursing, therapy, social work, and aide services. The home nurse works with each patient on comprehensive care plans including assessments, teaching, treatments and therapies needed for recovery.
- **Senior Solutions** is a partnership between St. Luke's Hospital and St. Andrew's Resources for Seniors System, providing customized support for St. Louis metropolitan area seniors living in their own homes, retirement living communities, assisted living facilities and skilled nursing facilities. Services include personal care, housekeeping, transportation, dementia care, medication management, caregiver counseling and much more. All services are provided by an experienced and compassionate team including geriatric care managers, nurses and other professionals.

St. Luke's also refers patients and community members seeking additional resources or care to the following organizations:

- · Alzheimer's Association
- Extra Help Program, in partnership with the Social Security Administration, to provide assistance for those who qualify financially with monthly costs of premiums, deductibles and prescription co-pays
- · Missouri Aging Information Network
- · Missouri Rx, in partnership with the Missouri Department of Social Services
- · Show Me Falls Free Missouri, in partnership with the Missouri Department of Health and Senior Services
- · Supplemental Nutrition Assistance Program (SNAP) for persons/older adults with low income,

Substance Abuse

Four major concerns regarding drug and alcohol abuse were identified by focus group respondents: (1) prescription medication abuse, (2) illegal drugs (i.e., heroin), (3) binge drinking in females over the age of 65 in Mid- and West St. Louis County, and (4) the use of multiple medications at the same time. Several resources in St. Louis County exist with a focus on providing intervention and treatment for these issues:

- · Alcoholics Anonymous St. Louis Chapter
- · Barnes-Jewish Hospital Chemical Dependency Program
- · CenterPointe Outpatient Center
- · Hyland Behavioral Health
- · Mercy Behavioral Health
- · National Council on Alcoholism and Drug Abuse (NCADA) St. Louis Area
- · Providence Counseling

Mental Health

The stakeholder focus groups identified two major needs for mental health within the West County area. First, a need for outpatient mental health for adults, including counseling and psychiatric services, and secondly, a need for adolescent day care for children discharged from hospitals needing extra support. While St. Luke's Hospital has limited resources to address the mental health status of our community, St. Louis County has a very robust offering of behavioral health services to adequately address this health issue:

- · Barnes-Jewish Hospital
- · Mercy Hospital
- · SSM DePaul Health Center
- · SSM St. Mary's Health Center
- · St. Anthony's Medical Center
- · St. Louis Children's Hospital
- · Grace Hill Clinic
- · Kids First in St. Louis County (children ages 19 and under)

The St. Louis County Health and Wellness program offers a Family Mental Health Collaborative which focuses on meeting the mental health needs of St. Louis County. The services are provided on a sliding scale based on the family's income and insurance plan and include crisis intervention, counseling, assessments, case/care management, psychological testing, psychiatric evaluation and medication. The following facilities participate in this program:

- · BJC Behavioral Health
- · Catholic Family Services
- · Jewish Family & Children's Service
- · Lutheran Family & Children's Services
- · Provident Counseling

Cultural Competence & Health Literacy

Health care experts make a clear connection between cultural competence, quality improvement and the elimination of racial and ethnic disparities. As the United States becomes more diverse, clinicians will increasingly see patients with broad perspectives regarding health, often influenced by their social or cultural backgrounds. Provider-patient communication is linked to patient satisfaction, adherence to medical instructions and health outcomes.

Being "health literate," or having someone act as an advocate on your behalf, is a necessary requirement in today's complex health system for a person to receive timely and effective healthcare services. Adults with low health literacy tend to have poor health status, use emergency rooms and inpatient care more frequently and have a higher risk of death. Low health literacy is not associated with gender or measurement instrument, but is associated with level of education, ethnicity and age.

St. Luke's Hospital supports the patient care needs and educational needs of patients and families through a library of print and online resources, as well as one-on-one patient education. Additionally, we maintain the competency of our professional staff by providing educational courses available throughout the year.

Appendix A: Community Stakeholder Focus Group Participant Roster

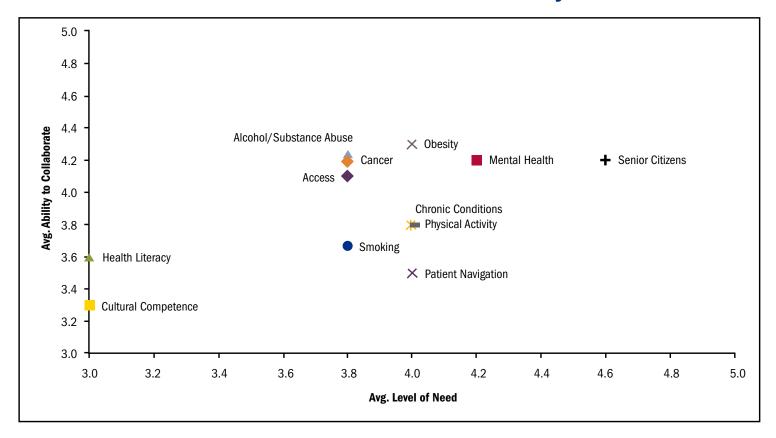
| Participant | Organization |
|--|--|
| Executive Director | American Cancer Society |
| Community Health Director | American Heart Association |
| Executive Director | Catholic Representative/Catholic Family Services |
| Health/Wellness Director | Chesterfield YMCA |
| Assistant City Administrator | City of Chesterfield |
| Glendale Alderwoman | City of Glendale |
| Representative | Jewish Community Center |
| Associate Pastor | Manchester United Methodist Church |
| Chief | EMS, Fire Protection District |
| Representative | Mid East Area on Aging |
| Director of Community Services | National Council on Alcohol and Drug Abuse |
| RN, MSN Public Health Nursing Supervisor | South County Health Center |
| Health Informatics Analyst | St. Louis County Health Dept. |
| RN, School Nurse | St. Louis Suburban School Nurses |
| Councilwoman | St. Louis County Council 3rd Dist Town & Country |
| Representative | United Way |
| Clinic Manager | Volunteers in Medicine (FQHC) |

Appendix B: St. Louis County Needs Assessment Worksheet

| 1.) | In your opinion, what are the three greatest health needs or challenges that exist within the St. Louis County population? |
|-----|---|
| | a.) |
| | b.) |
| | c.) |
| 2.) | To your knowledge, what resources are currently available in St. Louis County for addressing each one of these health needs? Who/what organization is trying to address them? |
| | a.) |
| | b.) |
| | c.) |
| 3.) | In your opinion, where is the largest gap between an existing need and available services in St. Louis County? |
| | |

Appendix C: St. Louis County CHNA Evaluation of Healthcare Need Versus Ability to Collaborate

St. Louis County CHNA
Evaluation of HealthCare Need Versus Ability to Collaborate



Based on survey results from July 18, 2012 meeting.

Appendix D: Spirit of Women Member Survey: Health Priority Ranking, 230 responses

Recently St. Luke's and other area hospitals conducted focus groups with community leaders to discuss the top healthcare issues in our community. Please rank the following eight healthcare issues in order of how important you think they are in our community, with 1 being the most important, and 8 being the least important:

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | Rating Avg | Rating Count |
|---------------------------------|---------------|---------------|---------------|---------------|---------------|---------------|-------------------|----------------|---------------|-----------------|
| Alcohol/ Drug Abuse | 8.7% (20) | 12.2% (28) | 13.1% (30) | 11.8% (27) | 12.7% (29) | 14.0% 932) | 17.5% (40) | 10.0% (23) | 4.69 | 229 |
| Access to Health Care | 23.6% (54) | 11.8% (27) | 17.5% (40) | 11.8% (27) | 10.0% (23) | 7.9% (18) | 7.9% (18) | 9.6% (22) | 3.76 | 229 |
| Cancer | 16.1% (37) | 17.0% (39) | 16.5% (38) | 14.3% (33) | 16.1% (37) | 11.3% (26) | 7.0% (16) | 1.7% (4) | 3.68 | 230 |
| Lack of Physical Activity | 12.2% (28) | 14.8% (34) | 19.6% (45) | 17.8% (41) | 13.5% (31) | 10.9% (25) | 7.0% (16) | 4.3% (10) | 3.88 | 230 |
| Mental Health | 3.1% (7) | 6.1% (14) | 7.9% (18) | 12.2% (28) | 18.8% (43) | 21.8% (50) | 20.1% (46) | 10.0% (23) | 5.34 | 229 |
| Obesity | 23.0% (53) | 21.3 (49) | 5.2% (12) | 13.9% (32) | 10.0% (23) | 14.8% (34) | 8.7% (20) | 30.% (7) | 3.61 | 230 |
| Senior Citizens' Health | 8.7% (20) | 10.5% (24) | 10.5% (24) | 10.9% (25) | 14.4% (33) | 13.5% (31) | 20.5% (47) | 10.9% (25) | 4.89 | 229 |
| Smoking | 4.8 (11) | 6.5% (15) | 10.0% (23) | 7.4% (17) | 4.8% (11) | 6.1% (14) | 11.3% (26) | 49.1% (113) | 6.10 | 230 |



Appendix E:
Day of Dance Participant
Health Profile

Group Health Profile

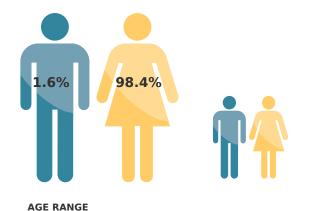
parameters: Event: 2013 DAY OF DANCE (694)

Our specialty is you.

The Group Health Profile is a health "snapshot" of your population or workforce based on information provided to us through our confidential Personal Health Profile. The information contained in the Group Health Profile is intended to provide you an aggregate overview of your group's health characteristics. For comparative purposes, your information is contrasted with other data collected across your local area and the United States.

Number of Respondents: 694

Gender and Age



| AGE HARGE | | |
|-----------------|------|-------|
| Younger than 20 | 0.0% | 1.5% |
| 20-29 | 0.0% | 8.0% |
| 30-39 | 0.2% | 11.5% |
| 40-49 | 0.2% | 18.4% |
| Greater than 50 | 1.2% | 59.0% |
| Average Age | 57 | 51 |
| | | |

Key Health Risks

| LESS HEALTHY | Percentage Points Worse* |
|---------------------------------------|--------------------------|
| High LDL Level | 9.7 |
| Glucose Screening Level Above Normal | 9.2 |
| Increased Risk HDL Level | 7.2 |
| Blood Pressure Screening Hypertension | 5.2 |
| Depression Symptom | 5.2 |
| Self Reported High Blood Pressure | 5.1 |

| MORE HEALTHY | Percentage Points Better* |
|------------------------------------|---------------------------|
| No Primary Physician | 13.5 |
| High Triglycerides Level | 12.7 |
| Overweight/Obese | 10.7 |
| Increased Risk Waist Circumference | 9.8 |
| Never Exercise | 8.8 |
| Metabolic Syndrome | 6.2 |

*Compared to National Results

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MODIFIABLE LIFESTYLES

Modifiable lifestyle characteristics indicate the percentage of your population that represents or participates in unhealthy lifestyle choices. By changing these characteristics, you may significantly reduce the incidence of health related claims through the promotion of good health.

| TOBACCO | Group | Market | National |
|-------------------|-------|--------|----------|
| Smoke Cigarettes | 3.6% | 11.2% | 16.0% |
| Smokeless Tobacco | 0.6% | 1.4% | 3.3% |



Smokeless Tobacco:

Smoke Cigarettes:



| EXERCISE | Group | Market | National |
|--------------|-------|--------|----------|
| Never/Rarely | 9.5% | 15.8% | 18.3% |
| Sometimes | 31.0% | 49.1% | 51.4% |
| Frequently | 59.5% | 35.1% | 30.3% |
| | | | |
| | | | |

| WEAR SEATBELTS | Group | Market | National |
|----------------|-------|--------|----------|
| Never/Rarely | 2.4% | 2.1% | 3.5% |
| Sometimes | 2.4% | 4.5% | 7.6% |
| Frequently | 95.2% | 93.4% | 88.9% |
| | | | |
| | | | |

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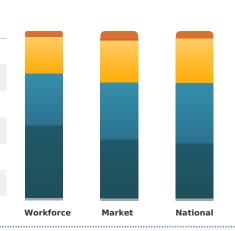


Our specialty is you.

BODY COMPOSITION

Body composition is an estimate of the distribution of fat and muscle throughout the body. People who have a healthy body composition generally have a reduced risk of many chronic diseases and conditions including cancer, coronary heart disease, diabetes, and high blood pressure.

| BODY MASS INDEX | Group | Market | National |
|------------------------|-------|--------|----------|
| Severly Obese | 3.6% | 5.7% | 4.6% |
| Obese | 21.6% | 24.9% | 26.3% |
| Overweight | 30.6% | 33.6% | 35.6% |
| Desirable | 42.8% | 34.6% | 32.3% |
| Underweight | 1.4% | 1.3% | 1.3% |
| Total Overweight/Obese | 55.8% | 64.1% | 66.5% |
| | | | |



| BODY FAT PERCENTAGE | Group | Market | National |
|---------------------|---------|--------|----------|
| Worse Than Average | No Data | 67.9% | 43.2% |



| WAIST CIRCUMFERENCE | Group | Market | National |
|---------------------|-------|--------|----------|
| Increased Risk | 31.3% | 41.8% | 41.1% |



Body Mass Index (BMI) Norms

| Underweight | <18.6 |
|----------------|-----------|
| Desirable | 18.6-24.9 |
| Overweight | 25.0-29.9 |
| Obese | 30.0-39.9 |
| Severely Obese | >=40.0 |

Waist Circumference Norms

| | Men | Women |
|----------------|------|-------|
| Desirable | <40 | <35 |
| Increased Risk | >=40 | >=35 |

Body Fat Percentage by Age Norms

| | 20 | -29 | 30 | -39 | 40 | -49 | 50 | -59 | 60 | 0+ |
|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| | Men | Women |
| Poor | >22.4 | >27.7 | >24.2 | >29.3 | >26.1 | >32.1 | >27.5 | >35.6 | >28.5 | >36.6 |
| Fair | 17.5-22.4 | 23.8-27.7 | 20.6-24.2 | 25.0-29.3 | 22.6-26.1 | 28.2-32.1 | 24.2-27.5 | 31.7-35.6 | 25.1-28.5 | 32.6-36.6 |
| Average | 14.2-17.4 | 20.7-23.7 | 17.6-20.5 | 21.7-24.9 | 19.7-22.5 | 25.0-28.1 | 21.4-24.1 | 28.6-31.6 | 22.1-25.0 | 29.4-32.5 |
| Good | 9.5-14.1 | 17.2-20.6 | 14.0-17.5 | 18.1-21.6 | 16.4-19.6 | 21.4-24.9 | 18.1-21.3 | 25.1-28.5 | 18.5-22.0 | 25.2-29.3 |
| Excellent | <=9.4 | <=17.1 | <=13.9 | <=18.0 | <=16.3 | <=21.3 | <=17.9 | <=25.0 | <=18.4 | <=25.1 |

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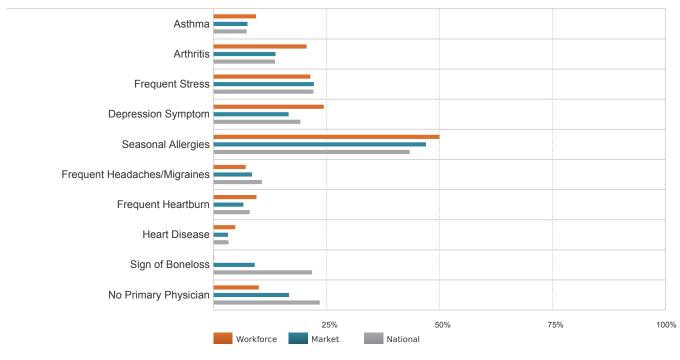


HEALTH CONDITIONS

Health Conditions is a listing of specific health conditions present in your group that can lead to increased health claims. Each condition represents an opportunity to reduce claims by proactively treating or managing each health condition before it results in serious disease or illness.

| HEALTH CONDITIONS | Group | Market | National |
|------------------------------|---------|--------|----------|
| Asthma | 9.4% | 7.5% | 7.3% |
| Arthritis | 20.6% | 13.7% | 13.6% |
| Frequent Stress | 21.4% | 22.2% | 22.1% |
| Depression Symptom | 24.4% | 16.6% | 19.2% |
| Seasonal Allergies | 50.0% | 47.0% | 43.4% |
| Frequent Headaches/Migraines | 7.1% | 8.5% | 10.7% |
| Frequent Heartburn | 9.5% | 6.6% | 8.0% |
| Heart Disease | 4.8% | 3.2% | 3.3% |
| Sign of Boneloss | No Data | 9.1% | 21.8% |
| No Primary Physician | 10.0% | 16.7% | 23.5% |

HEALTH CONDITIONS GRAPH



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DIABETES

Diabetes is a chronic disease in which the body does not generate or appropriately use insulin, a hormone that is created in the pancreas. The presence of diabetes causes blood glucose (blood sugar) levels to rise dangerously high and may lead to dangerous complications. Of the 25.8 million Americans currently suffering from diabetes, 7 million of them are unaware of their condition.

| DIABETES | Group | Market | National |
|-------------------------------|-------|--------|----------|
| Have Diabetes | 6.7% | 4.5% | 5.0% |
| Of These with Type 2 Diabetes | 90.9% | 88.3% | 80.1% |

Have Diabetes:

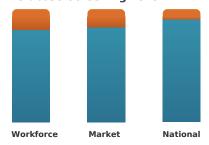


Of These with Type 2 Diabetes:



| GLUCOSE SCREENING | Group | Market | National |
|--------------------------------|-------|--------|----------|
| Above Normal Screening Level | 18.8% | 16.5% | 9.6% |
| Normal Glucose Screening Level | 81.3% | 83.5% | 90.3% |

Glucose Screening Level:



Blood Glucose Norms

| | Glucose (Fasting) | Glucose (Non-Fasting) |
|--------------|-------------------|-----------------------|
| Normal | <100 | <140 |
| Above Normal | >=100 | >=140 |

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BLOOD PRESSURE PROFILE

Elevated blood pressure results indicate an increased risk of heart disease and strongly suggest you take preventative measures as a means to enhance population health and reduce the incidence of related healthcare claims.

| SCREENING RESULTS | Group | Market | National |
|-------------------|-------|--------|----------|
| Hypertension | 18.8% | 18.5% | 13.6% |
| Pre-hypertension | 43.8% | 47.7% | 31.4% |
| Normal | 37.5% | 33.9% | 55.0% |
| | | | |
| | | | |

| SELF REPORTED | Group | Market | National | Have High Blood Pressure: |
|--------------------------|-------|--------|----------|---------------------------|
| Have High Blood Pressure | 29.2% | 25.3% | 24.1% | |
| Of These on Medication | 21.6% | 17.0% | 66.0% | Workforce Market Na |

Of These on Medication:



National

Blood Pressure Norms

| | Systolic | Diastolic |
|----------------------|----------|-----------|
| Normal | <120 | <80 |
| Pre-hypertension | 120-139 | 80-89 |
| Hypertension Stage 1 | 140-159 | 90-99 |
| Hypertension Stage 2 | >=160 | >=100 |

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LIPID PROFILE

The lipid profile is a group of tests that are often ordered together to determine risk of coronary heart disease. They are tests that have been shown to be good indicators of whether someone is likely to have a heart attack or stroke caused by blockage of blood vessels or hardening of the arteries.

Total Cholesterol: A measure of LDL cholesterol, HDL cholesterol, and other lipid components

HDL: Protects against heart disease by taking "bad" cholesterol out of the blood and keeps it from building up in arteries

LDL: Can build up on the walls of arteries and increase chances of getting heart disease

Triglycerides: Chemical form in which most fat exists in food and the body

| TOTAL CHOLESTEROL | Group | Market | National | | | |
|-------------------|-------|--------|----------|-----------|------------|----------|
| High | 12.5% | 6.4% | 11.1% | | | |
| Borderline High | 25.0% | 24.6% | 28.4% | | | |
| Desirable | 62.5% | 69.1% | 60.5% | Workforce | Market | National |
| HDL | Group | Market | National | Workloree | - Indirect | |
| Increased Risk | 31.3% | 35.8% | 24.1% | | | |
| Moderate | 25.0% | 31.9% | 49.7% | | | |
| Desirable | 43.8% | 32.3% | 26.2% | | | |
| | | | | Workforce | Market | National |
| LDL | Group | Market | National | | | |
| High | 20.0% | 5.3% | 10.3% | | | |
| Borderline High | 60.0% | 52.2% | 23.0% | | | |
| Desirable | 20.0% | 42.5% | 66.7% | | | |
| | | | | Workforce | Market | National |
| TRIGLYCERIDES | Group | Market | National | | | |
| High | 0.0% | 12.1% | 12.7% | | | |
| Borderline High | 10.0% | 12.9% | 13.9% | | | |
| Desirable | 90.0% | 75.1% | 73.4% | | | |
| | | | | Workforce | Market | National |

Lipid Norms

| | Total Cholesterol | LDL | Triglycerides |
|-----------------|-------------------|---------|---------------|
| Desirable | <200 | <100 | <150 |
| Borderline High | 200-239 | 100-159 | 150-199 |
| High | >=240 | >=160 | >=200 |

HDL Norms

| | Men | Women |
|----------------|-------|-------|
| Desirable | >=60 | >=60 |
| Moderate | 40-59 | 50-59 |
| Increased Risk | <40 | <=50 |

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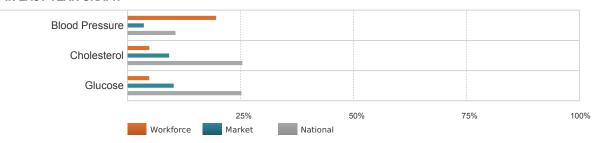


SCREENING HISTORY

Early detection is key to the prevention and treatment of illness and disease, and there is no better way to foster good health than by participating in routine health screenings and physical examinations. The screening profile details the percentage of individuals who have not participated in a listed screening event as recommended by medical experts.

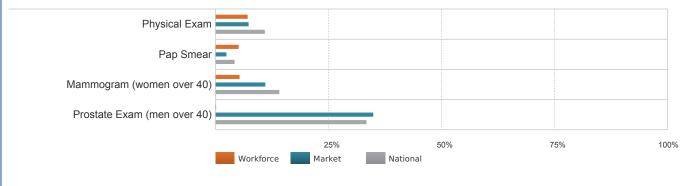
| NOT CHECKED IN THE LAST YEAR | Group | Market | National |
|------------------------------|-------|--------|----------|
| Blood Pressure | 19.6% | 3.6% | 10.6% |
| Cholesterol | 4.8% | 9.2% | 25.4% |
| Glucose | 4.8% | 10.2% | 25.2% |

NOT CHECKED IN LAST YEAR GRAPH



| NEVER CHECKED | Group | Market | National |
|-----------------------------|-----------------|--------|----------|
| Physical Exam | 7.1% | 7.3% | 10.9% |
| Pap Smear | 5.1% | 2.4% | 4.2% |
| Mammogram (women over 40) | 5.3% | 11.0% | 14.1% |
| Prostate Exam (men over 40) | Not Enough Data | 34.9% | 33.4% |

NEVER CHECKED GRAPH



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METABOLIC SYNDROME

Metabolic syndrome is not a disease itself, but is a complex set of health risks that may lead to cardiovascular disease, stroke or diabetes. Metabolic syndrome is of importance, because the collective impact of certain conditions or disease states together impacts health more significantly than when these conditions are experienced separately. Although the exact cause of the syndrome is unknown, current research suggests that the condition may be caused by poor lifestyle choices such as inactivity, poor nutrition, and overeating.

Blood Pressure: Current Systolic >= 130 OR Current Diastolic >= 85) OR Current "Have you ever had High Blood Pressure?" = Yes

Triglycerides: Current Triglycerides > 150

Glucose: Current Fasting Glucose > 100

Waist Circumference or BMI: Male: Current Waist > 40 Female: Current Waist > 35

HDL: Male: Current HDL < 40 Female: Current HDL < 50

If you meet 3 or more of these criteria, or if you meet at least 2 of these criteria and your current BMI > 30 (and you have no current Waist reading), then you are at risk for Metabolic Syndrome.

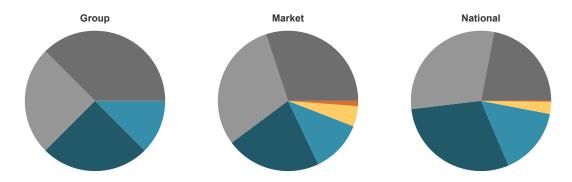
| THREE OR MORE CONDITIONS | Group | Market | National |
|------------------------------|-------|--------|----------|
| Three or more conditions met | 12.5% | 17.9% | 18.7% |







| QUALIFYING CONDITIONS | Group | Market | National |
|-----------------------|-------|--------|----------|
| No Conditions | 37.5% | 30.1% | 22.0% |
| One Condition | 25.0% | 30.1% | 29.9% |
| Two Conditions | 25.0% | 21.9% | 29.5% |
| Three Conditions | 12.5% | 12.0% | 15.6% |
| Four Conditions | 0.0% | 4.7% | 2.8% |
| Five Conditions | 0.0% | 1.2% | 0.3% |





Our specialty is you.

Employee Health Profile

Group Health Profile

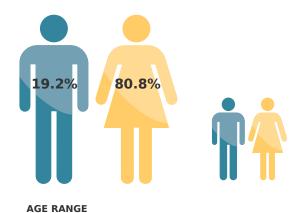
parameters: Group: St. Luke's Desloge Outpatient Center

Group: St. Luke's Hospital

The Group Health Profile is a health "snapshot" of your population or workforce based on information provided to us through our confidential Personal Health Profile. The information contained in the Group Health Profile is intended to provide you an aggregate overview of your group's health characteristics. For comparative purposes, your information is contrasted with other data collected across your local area and the United States.

Number of Respondents: 4443

Gender and Age



| Younger than 20 | 0. |
|-----------------|----|
| 20-29 | 2. |

| 30-39 | 4.3% | 17.2% |
|-----------------|------|-------|
| 40-49 | 4.4% | 17.3% |
| Greater than 50 | 8.1% | 32.2% |
| Average Age | 46 | 44 |

Key Health Risks

| LESS HEALTHY | Percentage Points Worse* |
|--------------------------------------|---------------------------|
| Increased Risk HDL Level | 12.8 |
| Glucose Screening Level Above Normal | 8.0 |
| | |
| MORE HEALTHY | Percentage Points Better* |
| No Primary Physician | 6.4 |
| | |
| Depression Symptom | 5.8 |
| Depression Symptom High LDL Level | 5.8 5.7 |
| 7 1 | |

*Compared to National Results

0.0% 14.1% Page: 2 of 9 Report: Health Profile Report Date: May 3, 2013, 8:36 am



MODIFIABLE LIFESTYLES

Modifiable lifestyle characteristics indicate the percentage of your population that represents or participates in unhealthy lifestyle choices. By changing these characteristics, you may significantly reduce the incidence of health related claims through the promotion of good health.

| ТОВАССО | Group | Market | National |
|-------------------|-------|--------|----------|
| Smoke Cigarettes | 9.7% | 11.2% | 16.0% |
| Smokeless Tobacco | 0.9% | 1.4% | 3.3% |

_ _ _

Smokeless Tobacco:

Workforce

Smoke Cigarettes:

| Workforce | Market | National |
|-----------|--------|----------|

| EXERCISE | Group | Market | National |
|--------------|-------|--------|----------|
| Never/Rarely | 13.2% | 15.8% | 18.3% |
| Sometimes | 50.0% | 49.1% | 51.4% |
| Frequently | 36.8% | 35.1% | 30.3% |
| | | | |
| | | | |

| WEAR SEATBELTS | Group | Market | National |
|----------------|-------|--------|----------|
| Never/Rarely | 1.9% | 2.1% | 3.5% |
| Sometimes | 3.8% | 4.5% | 7.6% |
| Frequently | 94.4% | 93.4% | 88.9% |
| | | | |
| | | | |

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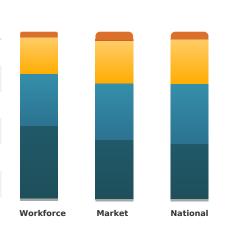


Our specialty is you.

BODY COMPOSITION

Body composition is an estimate of the distribution of fat and muscle throughout the body. People who have a healthy body composition generally have a reduced risk of many chronic diseases and conditions including cancer, coronary heart disease, diabetes, and high blood pressure.

| BODY MASS INDEX | Group | Market | National |
|------------------------|-------|--------|----------|
| Severly Obese | 3.6% | 5.7% | 4.6% |
| Obese | 21.6% | 24.9% | 26.3% |
| Overweight | 30.6% | 33.6% | 35.6% |
| Desirable | 42.8% | 34.6% | 32.3% |
| Underweight | 1.4% | 1.3% | 1.3% |
| Total Overweight/Obese | 55.8% | 64.1% | 66.5% |



| BODY FAT PERCENTAGE | Group | Market | National |
|---------------------|---------|--------|----------|
| Worse Than Average | No Data | 67.9% | 43.2% |



| WAIST CIRCUMFERENCE | Group | Market | National |
|---------------------|-------|--------|----------|
| Increased Risk | 31.3% | 41.8% | 41.1% |



Body Mass Index (BMI) Norms

| Underweight | <18.6 |
|----------------|-----------|
| Desirable | 18.6-24.9 |
| Overweight | 25.0-29.9 |
| Obese | 30.0-39.9 |
| Severely Obese | >=40.0 |

Waist Circumference Norms

| | Men | Women |
|----------------|------|-------|
| Desirable | <40 | <35 |
| Increased Risk | >=40 | >=35 |

Body Fat Percentage by Age Norms

| _ | | - | | | | | | | | |
|-----------|-----------|-----------|-------------------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| | 20-29 | | 20-29 30-39 40-49 | | 50-59 | | 60+ | | | |
| | Men | Women | Men | Women | Men | Women | Men | Women | Men | Women |
| Poor | >22.4 | >27.7 | >24.2 | >29.3 | >26.1 | >32.1 | >27.5 | >35.6 | >28.5 | >36.6 |
| Fair | 17.5-22.4 | 23.8-27.7 | 20.6-24.2 | 25.0-29.3 | 22.6-26.1 | 28.2-32.1 | 24.2-27.5 | 31.7-35.6 | 25.1-28.5 | 32.6-36.6 |
| Average | 14.2-17.4 | 20.7-23.7 | 17.6-20.5 | 21.7-24.9 | 19.7-22.5 | 25.0-28.1 | 21.4-24.1 | 28.6-31.6 | 22.1-25.0 | 29.4-32.5 |
| Good | 9.5-14.1 | 17.2-20.6 | 14.0-17.5 | 18.1-21.6 | 16.4-19.6 | 21.4-24.9 | 18.1-21.3 | 25.1-28.5 | 18.5-22.0 | 25.2-29.3 |
| Excellent | <=9.4 | <=17.1 | <=13.9 | <=18.0 | <=16.3 | <=21.3 | <=17.9 | <=25.0 | <=18.4 | <=25.1 |

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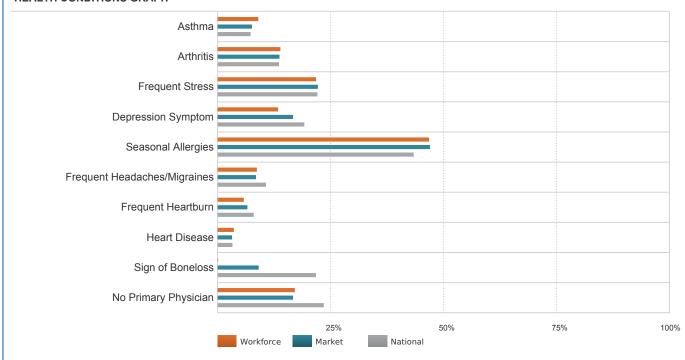


HEALTH CONDITIONS

Health Conditions is a listing of specific health conditions present in your group that can lead to increased health claims. Each condition represents an opportunity to reduce claims by proactively treating or managing each health condition before it results in serious disease or illness.

| HEALTH CONDITIONS | Group | Market | National |
|------------------------------|---------|--------|----------|
| Asthma | 9.0% | 7.6% | 7.3% |
| Arthritis | 13.9% | 13.7% | 13.6% |
| Frequent Stress | 21.8% | 22.2% | 22.1% |
| Depression Symptom | 13.4% | 16.7% | 19.2% |
| Seasonal Allergies | 46.8% | 47.0% | 43.4% |
| Frequent Headaches/Migraines | 8.7% | 8.5% | 10.7% |
| Frequent Heartburn | 5.8% | 6.6% | 8.0% |
| Heart Disease | 3.6% | 3.2% | 3.3% |
| Sign of Boneloss | No Data | 9.1% | 21.8% |
| No Primary Physician | 17.1% | 16.7% | 23.5% |

HEALTH CONDITIONS GRAPH



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DIABETES

Diabetes is a chronic disease in which the body does not generate or appropriately use insulin, a hormone that is created in the pancreas. The presence of diabetes causes blood glucose (blood sugar) levels to rise dangerously high and may lead to dangerous complications. Of the 25.8 million Americans currently suffering from diabetes, 7 million of them are unaware of their condition.

DIABETESGroupMarketNationalHave Diabetes5.4%4.5%5.0%Of These with Type 2 Diabetes86.7%88.3%80.1%

Have Diabetes:

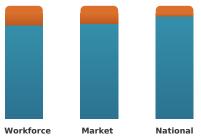


Of These with Type 2 Diabetes:



| GLUCOSE SCREENING | Group | Market | National |
|--------------------------------|-------|--------|----------|
| Above Normal Screening Level | 17.6% | 16.4% | 9.6% |
| Normal Glucose Screening Level | 82.4% | 83.6% | 90.3% |

Glucose Screening Level:



Blood Glucose Norms

| | Glucose (Fasting) | Glucose (Non-Fasting) |
|--------------|-------------------|-----------------------|
| Normal | <100 | <140 |
| Above Normal | >=100 | >=140 |

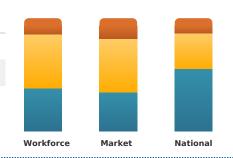
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BLOOD PRESSURE PROFILE

Elevated blood pressure results indicate an increased risk of heart disease and strongly suggest you take preventative measures as a means to enhance population health and reduce the incidence of related healthcare claims.

| SCREENING RESULTS | Group | Market | National |
|-------------------|-------|--------|----------|
| Hypertension | 14.8% | 18.5% | 13.6% |
| Pre-hypertension | 47.6% | 47.6% | 31.4% |
| Normal | 37.6% | 33.9% | 55.0% |



| SELF REPORTED | Group | Market | National |
|--------------------------|--------|--------|----------|
| Have High Dland Dunner | 20.40/ | 25.20/ | 24.40/ |
| Have High Blood Pressure | 26.4% | 25.3% | 24.1% |
| Of These on Medication | 19.3% | 17.1% | 66.0% |

Have High Blood Pressure:



Of These on Medication:



Blood Pressure Norms

| | Systolic | Diastolic |
|----------------------|----------|-----------|
| Normal | <120 | <80 |
| Pre-hypertension | 120-139 | 80-89 |
| Hypertension Stage 1 | 140-159 | 90-99 |
| Hypertension Stage 2 | >=160 | >=100 |

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LIPID PROFILE

The lipid profile is a group of tests that are often ordered together to determine risk of coronary heart disease. They are tests that have been shown to be good indicators of whether someone is likely to have a heart attack or stroke caused by blockage of blood vessels or hardening of the arteries.

Total Cholesterol: A measure of LDL cholesterol, HDL cholesterol, and other lipid components

HDL: Protects against heart disease by taking "bad" cholesterol out of the blood and keeps it from building up in arteries

LDL: Can build up on the walls of arteries and increase chances of getting heart disease

Triglycerides: Chemical form in which most fat exists in food and the body

| TOTAL CHOLESTEROL | Group | Market | National | | | |
|-------------------|--------------------|--------|----------|-----------|--------|----------|
| High | 5.8% | 6.3% | 11.1% | | | |
| Borderline High | 24.0% | 24.6% | 28.4% | | | |
| Desirable | 70.2% | 69.1% | 60.5% | Workforce | Market | National |
| HDL | Group | Market | National | | | |
| Increased Risk | 36.9% | 35.8% | 24.1% | | | |
| Moderate | 29.5% | 31.9% | 49.7% | | | |
| Desirable | 33.6% | 32.3% | 26.2% | | | |
| | | | | Workforce | Market | National |
| LDL | Group | Market | National | | | |
| High | 4.6% | 5.3% | 10.3% | | | |
| Borderline High | 51.1% | 52.1% | 23.0% | | | |
| Desirable | 44.3% | 42.5% | 66.7% | Workforce | Market | National |
| TRIGLYCERIDES | | Market | National | | | |
| I WOL I OLIVIDLO | Group | Market | National | | | |
| High | Group 11.7% | 12.0% | 12.7% | | | |
| | | | | | | |
| High | 11.7% | 12.0% | 12.7% | | | |

Lipid Norms

| | Total Cholesterol | LDL | Triglycerides |
|-----------------|-------------------|---------|---------------|
| Desirable | <200 | <100 | <150 |
| Borderline High | 200-239 | 100-159 | 150-199 |
| High | >=240 | >=160 | >=200 |

HDL Norms

| | Men | Women |
|----------------|-------|-------|
| Desirable | >=60 | >=60 |
| Moderate | 40-59 | 50-59 |
| Increased Risk | <40 | <=50 |

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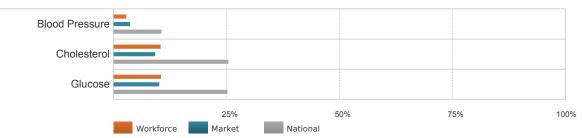


SCREENING HISTORY

Early detection is key to the prevention and treatment of illness and disease, and there is no better way to foster good health than by participating in routine health screenings and physical examinations. The screening profile details the percentage of individuals who have not participated in a listed screening event as recommended by medical experts.

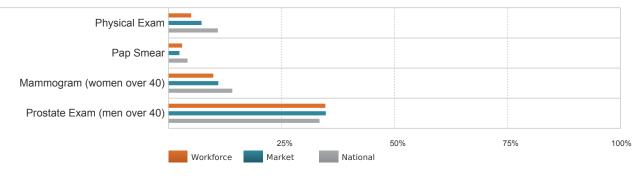
| NOT CHECKED IN THE LAST YEAR | Group | Market | National |
|------------------------------|-------|--------|----------|
| Blood Pressure | 2.8% | 3.6% | 10.6% |
| Cholesterol | 10.4% | 9.2% | 25.4% |
| Glucose | 10.5% | 10.1% | 25.2% |

NOT CHECKED IN LAST YEAR GRAPH



| NEVER CHECKED | Group | Market | National |
|-----------------------------|-------|--------|----------|
| Physical Exam | 5.0% | 7.3% | 10.9% |
| Pap Smear | 3.0% | 2.4% | 4.2% |
| Mammogram (women over 40) | 9.9% | 11.0% | 14.1% |
| Prostate Exam (men over 40) | 34.7% | 34.8% | 33.4% |

NEVER CHECKED GRAPH



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METABOLIC SYNDROME

Metabolic syndrome is not a disease itself, but is a complex set of health risks that may lead to cardiovascular disease, stroke or diabetes. Metabolic syndrome is of importance, because the collective impact of certain conditions or disease states together impacts health more significantly than when these conditions are experienced separately. Although the exact cause of the syndrome is unknown, current research suggests that the condition may be caused by poor lifestyle choices such as inactivity, poor nutrition, and overeating.

Blood Pressure: Current Systolic >= 130 OR Current Diastolic >= 85) OR Current "Have you ever had High Blood Pressure?" = Yes

Triglycerides: Current Triglycerides > 150

Glucose: Current Fasting Glucose > 100

Waist Circumference or BMI: Male: Current Waist > 40 Female: Current Waist > 35

HDL: Male: Current HDL < 40 Female: Current HDL < 50

If you meet 3 or more of these criteria, or if you meet at least 2 of these criteria and your current BMI > 30 (and you have no current Waist reading), then you are at risk for Metabolic Syndrome.

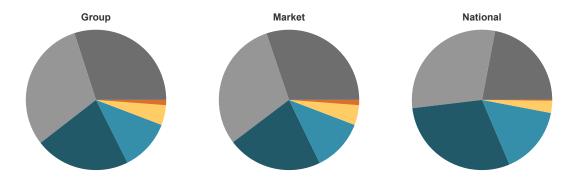
| THREE OR MORE CONDITIONS | Group | Market | National |
|------------------------------|-------|--------|----------|
| Three or more conditions met | 17.6% | 17.9% | 18.7% |







| QUALIFYING CONDITIONS | Group | Market | National |
|-----------------------|-------|--------|----------|
| No Conditions | 30.0% | 30.2% | 22.0% |
| One Condition | 30.5% | 30.1% | 29.9% |
| Two Conditions | 21.9% | 21.9% | 29.5% |
| Three Conditions | 11.8% | 12.0% | 15.6% |
| Four Conditions | 4.6% | 4.6% | 2.8% |
| Five Conditions | 1.2% | 1.2% | 0.3% |





Appendix G:
Passport to Wellness
Workforce Health Profile

Group Health Profile

parameters: Group

Group: <NA>

Group: <NA> Minors

Group: Aegis

Group: Aegis Health Group

Group: AHM Financial Group

Group: Allsup Inc

Group: Amdocs

Group: Ameren UE

Group: American Airlines

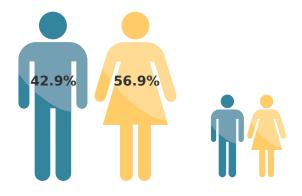
...

The Group Health Profile is a health "snapshot" of your population or workforce based on information provided to us through our confidential Personal Health Profile. The information contained in the Group Health Profile is intended to provide you an aggregate overview of your group's health characteristics. For comparative purposes, your information is contrasted with other data collected across your local area and the United States.

Number of Respondents: 18386

Gender and Age

AGE RANGE



| Younger than 20 | 0.0% | 0.1% |
|-----------------|-------|-------|
| 20-29 | 2.5% | 4.0% |
| 30-39 | 9.2% | 12.2% |
| 40-49 | 10.6% | 13.4% |
| Greater than 50 | 20.6% | 27.2% |
| Average Age | 48 | 48 |

Key Health Risks

No Primary Physician

| LESS HEALTHY | Percentage Points Worse* |
|---------------------------------------|---------------------------|
| Worse Than Average Body Fat | 24.7 |
| Increased Risk HDL Level | 10.8 |
| Blood Pressure Screening Hypertension | 7.9 |
| Glucose Screening Level Above Normal | 5.9 |
| MORE HEALTHY | Percentage Points Better* |
| Elevated PSA | 11.6 |

*Compared to National Results

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MODIFIABLE LIFESTYLES

Modifiable lifestyle characteristics indicate the percentage of your population that represents or participates in unhealthy lifestyle choices. By changing these characteristics, you may significantly reduce the incidence of health related claims through the promotion of good health.

| TOBACCO | Group | Market | National |
|-------------------|-------|--------|----------|
| Smoke Cigarettes | 11.5% | 11.2% | 16.0% |
| Smokeless Tobacco | 1.6% | 1.4% | 3.3% |

Smoke Cigarettes:

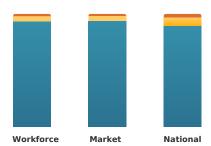


Smokeless Tobacco:



| EXERCISE | Group | Market | National | |
|--------------|-------|--------|----------|----------|
| Never/Rarely | 16.6% | 15.8% | 18.3% | |
| Sometimes | 48.9% | 49.1% | 51.4% | |
| Frequently | 34.6% | 35.1% | 30.3% | |
| | | | | |
| | | | | Workford |

| WEAR SEATBELTS | Group | Market | National |
|----------------|-------|--------|----------|
| Never/Rarely | 2.1% | 2.1% | 3.5% |
| Sometimes | 4.8% | 4.5% | 7.6% |
| Frequently | 93.1% | 93.4% | 88.9% |



National

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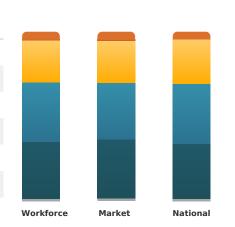


Our specialty is you.

BODY COMPOSITION

Body composition is an estimate of the distribution of fat and muscle throughout the body. People who have a healthy body composition generally have a reduced risk of many chronic diseases and conditions including cancer, coronary heart disease, diabetes, and high blood pressure.

| BODY MASS INDEX | Group | Market | National |
|------------------------|-------|--------|----------|
| Severly Obese | 5.2% | 5.6% | 4.6% |
| Obese | 25.0% | 24.8% | 26.3% |
| Overweight | 34.9% | 33.5% | 35.6% |
| Desirable | 33.7% | 34.7% | 32.3% |
| Underweight | 1.2% | 1.3% | 1.3% |
| Total Overweight/Obese | 65.1% | 64.0% | 66.5% |



| BODY FAT PERCENTAGE | Group | Market | National |
|---------------------|-------|--------|----------|
| Worse Than Average | 67.9% | 67.9% | 43.2% |



| WAIST CIRCUMFERENCE | Group | Market | National |
|---------------------|-------|--------|----------|
| Increased Risk | 40.8% | 41.8% | 41.1% |



Body Mass Index (BMI) Norms

| Underweight | <18.6 |
|----------------|-----------|
| Desirable | 18.6-24.9 |
| Overweight | 25.0-29.9 |
| Obese | 30.0-39.9 |
| Severely Obese | >=40.0 |

Waist Circumference Norms

| | Men | Women |
|----------------|------|-------|
| Desirable | <40 | <35 |
| Increased Risk | >=40 | >=35 |

Body Fat Percentage by Age Norms

| | 20 | -29 | 30 | -39 | 40 | -49 | 50 | -59 | 60 | 0+ |
|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| | Men | Women |
| Poor | >22.4 | >27.7 | >24.2 | >29.3 | >26.1 | >32.1 | >27.5 | >35.6 | >28.5 | >36.6 |
| Fair | 17.5-22.4 | 23.8-27.7 | 20.6-24.2 | 25.0-29.3 | 22.6-26.1 | 28.2-32.1 | 24.2-27.5 | 31.7-35.6 | 25.1-28.5 | 32.6-36.6 |
| Average | 14.2-17.4 | 20.7-23.7 | 17.6-20.5 | 21.7-24.9 | 19.7-22.5 | 25.0-28.1 | 21.4-24.1 | 28.6-31.6 | 22.1-25.0 | 29.4-32.5 |
| Good | 9.5-14.1 | 17.2-20.6 | 14.0-17.5 | 18.1-21.6 | 16.4-19.6 | 21.4-24.9 | 18.1-21.3 | 25.1-28.5 | 18.5-22.0 | 25.2-29.3 |
| Excellent | <=9.4 | <=17.1 | <=13.9 | <=18.0 | <=16.3 | <=21.3 | <=17.9 | <=25.0 | <=18.4 | <=25.1 |

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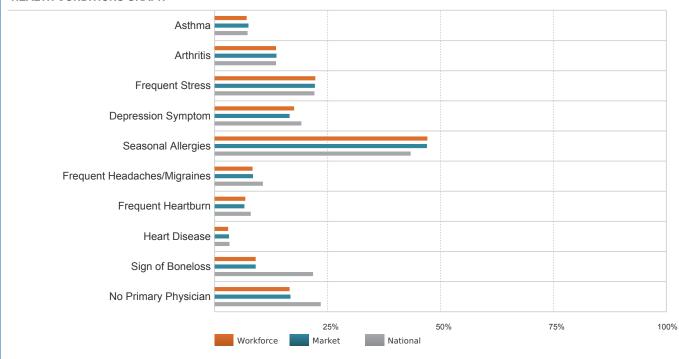


HEALTH CONDITIONS

Health Conditions is a listing of specific health conditions present in your group that can lead to increased health claims. Each condition represents an opportunity to reduce claims by proactively treating or managing each health condition before it results in serious disease or illness.

| HEALTH CONDITIONS | Group | Market | National |
|------------------------------|-------|--------|----------|
| Asthma | 7.1% | 7.5% | 7.3% |
| Arthritis | 13.6% | 13.7% | 13.6% |
| Frequent Stress | 22.3% | 22.2% | 22.1% |
| Depression Symptom | 17.6% | 16.6% | 19.2% |
| Seasonal Allergies | 47.1% | 47.0% | 43.4% |
| Frequent Headaches/Migraines | 8.4% | 8.5% | 10.7% |
| Frequent Heartburn | 6.8% | 6.6% | 8.0% |
| Heart Disease | 3.0% | 3.2% | 3.3% |
| Sign of Boneloss | 9.1% | 9.1% | 21.8% |
| No Primary Physician | 16.6% | 16.8% | 23.5% |

HEALTH CONDITIONS GRAPH



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DIABETES

Diabetes is a chronic disease in which the body does not generate or appropriately use insulin, a hormone that is created in the pancreas. The presence of diabetes causes blood glucose (blood sugar) levels to rise dangerously high and may lead to dangerous complications. Of the 25.8 million Americans currently suffering from diabetes, 7 million of them are unaware of their condition.

DIABETESGroupMarketNationalHave Diabetes4.2%4.5%5.0%Of These with Type 2 Diabetes88.9%88.3%80.1%

Have Diabetes:

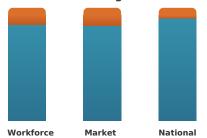


Of These with Type 2 Diabetes:



| GLUCOSE SCREENING | Group | Market | National |
|--------------------------------|-------|--------|----------|
| Above Normal Screening Level | 15.5% | 16.5% | 9.6% |
| Normal Glucose Screening Level | 84.5% | 83.5% | 90.3% |

Glucose Screening Level:



Blood Glucose Norms

| | | Glucose (Fasting) | Glucose (Non-Fasting) |
|--|--------------|-------------------|-----------------------|
| | Normal | <100 | <140 |
| | Above Normal | >=100 | >=140 |

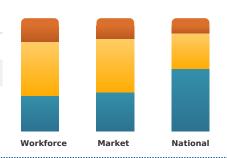
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BLOOD PRESSURE PROFILE

Elevated blood pressure results indicate an increased risk of heart disease and strongly suggest you take preventative measures as a means to enhance population health and reduce the incidence of related healthcare claims.

| SCREENING RESULTS | Group | Market | National |
|-------------------|-------|--------|----------|
| Hypertension | 21.5% | 18.5% | 13.6% |
| Pre-hypertension | 47.7% | 47.7% | 31.4% |
| Normal | 30.8% | 33.9% | 55.0% |



| SELF REPORTED | Group | Market | National | |
|--------------------------|-------|--------|----------|--|
| Have High Blood Pressure | 25.0% | 25.3% | 24.1% | |
| Of These on Medication | 16.4% | 17.0% | 66.0% | |

Have High Blood Pressure:



Of These on Medication:



Blood Pressure Norms

| | Systolic | Diastolic |
|----------------------|----------|-----------|
| Normal | <120 | <80 |
| Pre-hypertension | 120-139 | 80-89 |
| Hypertension Stage 1 | 140-159 | 90-99 |
| Hypertension Stage 2 | >=160 | >=100 |

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LIPID PROFILE

The lipid profile is a group of tests that are often ordered together to determine risk of coronary heart disease. They are tests that have been shown to be good indicators of whether someone is likely to have a heart attack or stroke caused by blockage of blood vessels or hardening of the arteries.

Total Cholesterol: A measure of LDL cholesterol, HDL cholesterol, and other lipid components

HDL: Protects against heart disease by taking "bad" cholesterol out of the blood and keeps it from building up in arteries

LDL: Can build up on the walls of arteries and increase chances of getting heart disease

Triglycerides: Chemical form in which most fat exists in food and the body

| TOTAL CHOLESTEROL | Group | Market | National | | | |
|---------------------|----------------|---------------------|-------------------|-----------|--------|----------|
| High | 6.8% | 6.4% | 11.1% | | | |
| Borderline High | 25.1% | 24.6% | 28.4% | | | |
| Desirable | 68.1% | 69.1% | 60.5% | Workforce | Market | National |
| HDL | Group | Market | National | | | |
| Increased Risk | 34.9% | 35.8% | 24.1% | | | |
| Moderate | 33.8% | 31.9% | 49.7% | | | |
| Desirable | 31.3% | 32.3% | 26.2% | | | |
| | | | | Workforce | Market | National |
| LDL | Group | Market | National | | | |
| High | 6.1% | 5.3% | 10.3% | | | |
| Borderline High | 53.2% | 52.2% | 23.0% | | | |
| Desirable | 40.7% | | | | | |
| _ | 40.7% | 42.5% | 66.7% | | | |
| | 40.7% | 42.5% | 66.7% | Workforce | Market | National |
| | Group | 42.5% Market | 66.7% National | Workforce | Market | National |
| TRIGLYCERIDES High | | | | Workforce | Market | National |
| TRIGLYCERIDES | Group | Market | National | Workforce | Market | National |
| TRIGLYCERIDES High | Group 12.5% | Market 12.1% | National 12.7% | Workforce | Market | National |

Lipid Norms

| | Total Cholesterol | LDL | Triglycerides |
|-----------------|-------------------|---------|---------------|
| Desirable | <200 | <100 | <150 |
| Borderline High | 200-239 | 100-159 | 150-199 |
| High | >=240 | >=160 | >=200 |

HDL Norms

| | Men | Women |
|----------------|-------|-------|
| Desirable | >=60 | >=60 |
| Moderate | 40-59 | 50-59 |
| Increased Risk | <40 | <=50 |

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PSA (PROSTATE SPECIFIC ANTIGEN)

Prostate-specific antigen (PSA) is a substance produced by the prostate gland. Elevated PSA levels may indicate prostate cancer or a noncancerous condition such as prostatitis or an enlarged prostate.

| | | | | Elevated PSA Lev | el: |
|--------------|-------|--------------|-------|------------------|-----|
| PSA | Group | Group Market | | | |
| Elevated PSA | 1.7% | 1.7% | 13.3% | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | Workforce Mark | cet |

PSA Norms

| Normal | <4 |
|----------|-----|
| Elevated | >=4 |

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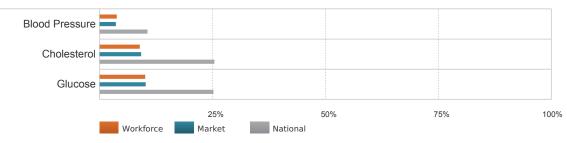


SCREENING HISTORY

Early detection is key to the prevention and treatment of illness and disease, and there is no better way to foster good health than by participating in routine health screenings and physical examinations. The screening profile details the percentage of individuals who have not participated in a listed screening event as recommended by medical experts.

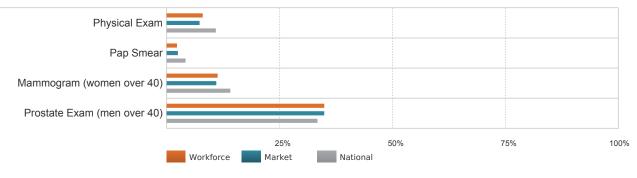
| NOT CHECKED IN THE LAST YEAR | Group | Market | National |
|------------------------------|-------|--------|----------|
| Blood Pressure | 3.8% | 3.6% | 10.6% |
| Cholesterol | 8.9% | 9.2% | 25.4% |
| Glucose | 10.1% | 10.2% | 25.2% |

NOT CHECKED IN LAST YEAR GRAPH



| NEVER CHECKED | Group | Market | National |
|-----------------------------|-------|--------|----------|
| Physical Exam | 8.0% | 7.3% | 10.9% |
| Pap Smear | 2.3% | 2.5% | 4.2% |
| Mammogram (women over 40) | 11.3% | 11.0% | 14.1% |
| Prostate Exam (men over 40) | 34.9% | 34.9% | 33.4% |

NEVER CHECKED GRAPH



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METABOLIC SYNDROME

Metabolic syndrome is not a disease itself, but is a complex set of health risks that may lead to cardiovascular disease, stroke or diabetes. Metabolic syndrome is of importance, because the collective impact of certain conditions or disease states together impacts health more significantly than when these conditions are experienced separately. Although the exact cause of the syndrome is unknown, current research suggests that the condition may be caused by poor lifestyle choices such as inactivity, poor nutrition, and overeating.

Blood Pressure: Current Systolic >= 130 OR Current Diastolic >= 85) OR Current "Have you ever had High Blood Pressure?" = Yes

Triglycerides: Current Triglycerides > 150

Glucose: Current Fasting Glucose > 100

Waist Circumference or BMI: Male: Current Waist > 40 Female: Current Waist > 35

HDL: Male: Current HDL < 40 Female: Current HDL < 50

If you meet 3 or more of these criteria, or if you meet at least 2 of these criteria and your current BMI > 30 (and you have no current Waist reading), then you are at risk for Metabolic Syndrome.

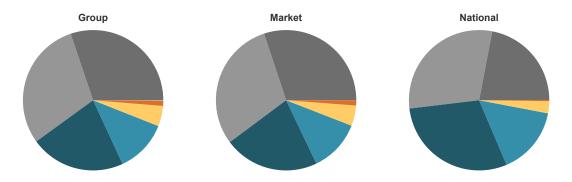
| THREE OR MORE CONDITIONS | Group | Market | National |
|------------------------------|-------|--------|----------|
| Three or more conditions met | 18.1% | 17.9% | 18.7% |







| QUALIFYING CONDITIONS | Group | Market | National |
|-----------------------|-------|--------|----------|
| No Conditions | 30.2% | 30.1% | 22.0% |
| One Condition | 29.8% | 30.1% | 29.9% |
| Two Conditions | 21.9% | 21.9% | 29.5% |
| Three Conditions | 12.1% | 12.0% | 15.6% |
| Four Conditions | 4.7% | 4.7% | 2.8% |
| Five Conditions | 1.2% | 1.2% | 0.3% |
| | | | |



Appendix H: St. Luke's Hospital Community Health Needs Assessment Advisory Task Force

Business Development Clinical Education Community Outreach Decision Support Finance Food & Nutrition Services Marketing & Communications **Nursing Services Social Services** St. Luke's Rehabilitation Hospital Strategic Planning With input and support from: Home Health Services **Nutrition Counseling Services Oncology Services Pharmacy Services Therapy Services**

St. Luke's Hospital

Community Health Needs Assessment Implementation Plan Highlights

Obesity and sedentary lifestyle

Offer tools to help combat rates of adults who are obese or overweight and encourage active lifestyles.

Sample strategies:

- · Increase awareness of free and low cost programming for nutrition, healthy eating habits education and fitness offerings. Work with physicians and departments to help inform patients about resources.
- · Implement Partnership for a Healthier America to impact nutrition for employees, patients and visitors.
- · Provide education and resources to the Chesterfield community through Get Active program with the City of Chesterfield.
- · Partner with school nurses to provide education related to school-aged children.

Partners: American Heart Association, Office on Women's Health, St. Luke's Medical Staff Physician Offices, City of Chesterfield Parks & Recreation, Suburban School Nurses, Dierberg's Culinary School, Local Businesses

Cancer screening and support services

Provide education and screenings to help identify cancers earlier; offer comprehensive education and support services to cancer patients.

Sample strategies:

- · Increase tobacco cessation program access by offering additional programs and provide information to smokers regarding their options for these programs and individual counseling.
- · Increase targeted communication to encourage eligible individuals to get preventive screenings for colon and breast cancer through education and community outreach activities.
- Increase awareness among physicians and clinicians about tobacco cessation/lung cancer screening programs for earlier identification of lung abnormalities.

Partners: American Cancer Society, Spirit of Women, Nicotine Anonymous, U.S. Department of Health and Human Services, Office of Women's Health, CDC Preventive Task Force, St. Louis Men's Group Against Cancer

Management of chronic conditions

Increase community education opportunities about chronic conditions and related risk factors. Reduce readmissions of hospitalized patients with heart failure, heart attack and pneumonia.

Sample strategies:

- · Increase heart health risk factor education through HeartCaring® patient education and partnership with clinicians.
- · Expand disease management programs and information for inpatients to connect with resources once they leave the hospital.
- · Provide ongoing educational opportunities for patients at classes and events. Pilot new classes such as Diabetes for the Newly Diagnosed and Healthy Weigh Program.

Partners: Local nursing homes, St. Luke's Medical Staff, WomenHeart®, American Heart Association