



STATE OF ILLINOIS HEALTH FACILITIES AND SERVICES REVIEW BOARD

525 WEST JEFFERSON ST, SPRINGFIELD, ILLINOIS 62761 • (217) 782-3516 FAX: (217) 785-4111

DOCKET NO: H-07	BOARD MEETING: March 12, 2024	PROJECT NO: 23-043	PROJECT COST: Original: \$0
FACILITY NAME: North Suburban Pain & Spine Center		CITY: Des Plaines	
TYPE OF PROJECT: Non-substantive			HSA: VII

PROJECT DESCRIPTION: The Applicant (North Suburban Pain & Spine Center, LLC) proposes to add general surgery and podiatry surgical services to its existing ambulatory surgical treatment center (ASTC) in Des Plaines. There is no cost to this project. The project completion date is March 31, 2024.

Information regarding this application can be found at this link: <https://hfsrb.illinois.gov/projects/project.23-043-north-suburban-pain-and-spine-institute.html>

EXECUTIVE SUMMARY

PROJECT DESCRIPTION:

- The Applicant (North Suburban Pain & Spine Center, LLC) proposes to add general surgery and podiatry surgical services to its existing ASTC in Des Plaines. There is no cost to this project. The project completion date is March 1, 2024.
- This ASTC was approved by the State Board in December 2018 (Permit #18-018). The facility is housed in 6,980 GSF of space (5,240 GSF clinical/1,740 GSF non-clinical), with two operating rooms (ORs) and eight recovery stations. The ASTC has been approved for neurosurgery, orthopedic surgery, and pain management surgical specialties.

WHY THE PROJECT IS BEFORE THE STATE BOARD:

- This project is before the State Board because the project adds a surgical specialty to a health care facility (ASTC) as defined by the Illinois Health Facilities Planning Act. [20 ILCS 3960/3]

PURPOSE OF THE PROJECT:

- The Applicant stated: *"Adding these services to the existing ambulatory surgery treatment center will improve utilization and address unmet patient needs at North Suburban Pain & Spine Center (NSPS). NSPS already provides services to patients focused on various musculoskeletal injuries, including Neurological, Orthopedic, and Pain Management. By allowing for Podiatric and General Surgery procedures it will help address a gap in available services for those visiting NSPS. Adding Podiatry and General Surgery to NSPS will also allow for better utilization of the facility and its surgical recovery areas."*
- The Table below outlines the utilization of the ASTC as well as patients by payor source for the years 2021 and 2022.

EXECUTIVE SUMMARY TABLE ONE Historical Utilization		
	2021	2022
Neurological		
Cases	16	78
Hours	42	200
Orthopedic		
Cases	9	51
Hours	18	72
Pain Management		
Cases	35	312
Hours	14	85
Total		
Cases	60	441
Hours	74	357
Patients by Payor Source		
Other Public		182
Insurance		251
Private Pay		8
Total		441

PUBLIC HEARING/COMMENT:

- A public hearing was offered in regard to the proposed project, but no public hearing was requested. In addition, no letters of support or opposition were received by the State Board Staff in regard to the proposed project.

SUMMARY:

- The State Board Staff reviewed the application for permit and additional information provided by the Applicant and note the following:
- The Applicant stated at the time of the approval of ASTC the ASTC would be at target occupancy within two years after project completion. That has not occurred. Additionally, the Applicant at the time of approval attested that the payor mix would include 30% Medicare, 10% Medicaid, and 1% charity care patients. No Medicare, Medicaid, or charity care patients have been cared for by this ASTC in 2021 and 2022.
- The Applicant addressed 15 criteria and was not compliant with the following:

Criteria	Reasons for Non-Compliance
77 Ill. Adm. Code 1110.120 – Projected Utilization	The Applicant supplied referral letters from three physicians (see Table Three) agreeing to refer 255 patients (see application pages 55-64). This equates to 433 hours by the second year of operation. The Applicant predicts the addition of surgical services, (433 hours + 441 hours (2022) = 874 hours) combined will not result in satisfactory utilization volume by the end of the second-year post-project. The additional 433 hours would not increase the facility's utilization to the State Board's target utilization. The Applicant does not meet the requirements of this criterion.
77 Ill. Adm. Code 1110.235(c)(2)(A) &(B) - Service to Residents of GSA	The Applicant must provide patient origin information by zip code for the prior 12 months. This information must verify that <u>at least 50%</u> of the facility's admissions were residents of the geographic service area (10-mile radii). The Applicant provided patient origin information by zip code or residence but 50% of the admissions were not within the 10-mile radii.
77 Ill. Adm. Code 1110.235(c)(3) - Service Demand-Establishment	By rule, the referrals to a proposed ASTC must be from IDPH licensed ASTCs or hospitals. The Applicant submitted three referral letters (see Table Three) attesting to the historical patient referrals for 1,102 surgeries/procedures in the past year (2022), and the approximate referral of patients for 255 procedures to the ASTC by the second year after project completion. The Applicant has not met the requirements of this criterion due to the historical referrals not culminating in 1,500 hours of utilization for each room.
77 Ill. Adm. Code 1110.235 (5) – Treatment Room Need Assessment	The Applicant supplied referral letters from three physicians (see Table Three) agreeing to refer 255 patients (see application pages 55-64). This equates to 433 hours by the second year of operation. The Applicant predicts the addition of surgical services, (433 hours + 441 hours (CY 2022) = 874 hours) would not increase the facility's utilization to the State Board's

Criteria	Reasons for Non-Compliance
	target utilization. The Applicant does not meet the requirements of this criterion.
77 Ill. Adm. Code 1110.235(c)(6) - Service Accessibility	The Applicant notes there are 17 ASTCs and eight acute care hospitals in the GSA. State Board staff notes five ASTCs and two hospitals provide General Surgery and six ASTCs and one hospital provides Podiatric surgical services. The significant presence of these two surgical services indicates there are no accessibility issues and the Applicant has not successfully addressed this criterion.
77 Ill. Adm. Code 1110.235(c)(7) – Unnecessary Duplication of Service/Maldistribution/Impact on Other Facilities	The Applicant notes there are 17 ASTCs and eight acute care hospitals in the GSA. State Board staff notes five ASTCs and two hospitals provide General Surgery and six ASTCs and one hospital provides Podiatric surgical services. The significant presence these two surgical services indicates there are no accessibility issues and the Applicant has not successfully addressed this criterion.

STATE BOARD STAFF REPORT
North Suburban Pain and Spine Center
Project #23-043

APPLICATION CHRONOLOGY	
Applicant	North Suburban Pain and Spine Center, LLC
Facility Name	North Suburban Pain and Spine Center
Location	9700 Golf Road, Des Plaines
Permit Holder	North Suburban Pain and Spine Center, LLC
Operating Entity/Licensee	North Suburban Pain and Spine Center, LLC
Owner of Site	General Property Management, LLC
Gross Square Feet	6,980 GSF
Application Received	October 16, 2023
Application Deemed Complete	October 18, 2023
Financial Commitment Date	N/A
Anticipated Completion Date	March 1, 2024
Review Period Ends	December 17, 2023
Review Period Extended by the State Board Staff?	No
Can the Applicant request a deferral?	Yes

I. Project Description

The Applicant (North Suburban Pain and Spine Center, LLC) proposes to add surgical specialties to an existing multi-specialty ASTC. The facility is located at 9700 Golf Road in Des Plaines. There is no cost associated with the project and the anticipated completion date is March 1, 2024.

II. Summary of Findings

- A. The State Board Staff finds the project is **not** in conformance with all relevant provisions of Part 1110.
- B. The State Board Staff finds the provisions of Part 1120 are not applicable to this project.

III. General Information

The Applicant is North Suburban Pain and Spine Center, LLC. The proposed project will add surgical specialties (Podiatry and General Surgery) to an existing multi-specialty ASTC located in Des Plaines. The facility current provides neurologic, orthopedic, and pain management surgical procedures. The ASTC comprises 6,980 GSF, has two ORs and seven recovery stations. North Suburban Pain and Spine Center LLC is a physician-owned limited liability company, founded in February 2018. Dr. Darrel Saldanha is co-Founder and CEO of the corporation and has majority ownership interest in the ASTC. A summary of the ownership interest is listed in Table One.

TABLE ONE	
Applicant Ownership Interest	
Name	Percent of Ownership
Dr. Darrell Saldanha	64.0%
Dr. Dalip Pelinkovac	6.0%
Dr. Sean Salehi	25.0%
Minority Owners	5.0%

IV. Health Service Area/Health Planning Area

The ASTC is located in Cook County in Health Service Area VII. This HSA includes DuPage and suburban Cook County. Per the October 2023 Inventory Update, there are 62 ASTCs in HSA-VII containing 177 ORs.

V. Project Description

North Suburban Pain and Spine Center, LLC is an existing multi-specialty ASTC in Des Plaines. The facility currently provides Orthopedic, Neurologic, and Pain Management surgical procedures. The applicant proposes to add General Surgery and Podiatry via this application. The ASTC contains 6,980 GSF (5,240 GSF clinical/1,740 GSF non-clinical) and is located in a medical office building, which includes physician offices. The ASTC contains two ORs and eight recovery rooms. There are no costs associated with this project and there are no estimated start-up costs or operating deficit.

VI. Purpose of the Project, Safety Net Impact Statement, Alternatives

- A) Criterion 1110.110(a) - Background of the Applicant
To demonstrate compliance with this criterion the Applicant must provide documentation of the following:
- 1) Any adverse action taken against the applicant, including corporate officers or directors, LLC members, partners, and owners of at least 5% of the proposed healthcare facility, or against any health care facility owned or operated by the applicant, directly or indirectly, within three years preceding the filing of the application.
 - 2) A listing of all health care facilities currently owned and/or operated by the Applicant in Illinois or elsewhere, including licensing, certification, and accreditation identification numbers, as applicable.

North Suburban Pain and Spine Center, LLC is the sole Applicant and owner of North Suburban Pain and Spine Center. North Suburban Pain and Spine Center LLC is a physician-owned limited liability company, founded in February 2018. The investor/physician-owner is Dr. Darrel Saldanha. Dr. Saldanha currently maintains 64%/majority ownership interest in the ASTC and has taken on physician-investors since establishing the ASTC in 2018 (see Page 3 of the report). The Applicant supplied proof of its Certificate of Good Standing and licensure/accreditation credentials will occur should the project be approved. A letter was

supplied, permitting the State Board and IDPH to verify any information contained in this application (see application page 40).

B) Criterion 1110.110(b) – Purpose of the Project

The Applicant is required to:

1. Document that the project will provide health services that improve the health care or wellbeing of the market-area population to be served.
2. Define the planning area or market area, or other area, per the applicant's definition.
3. Identify the existing problems or issues that need to be addressed, as applicable and appropriate for the project.
4. Cite the sources of the information provided as documentation.
5. Detail how the project will address or improve the previously referenced issues, as well as the population's health status and well-being.
6. Provide goals with quantified and measurable objectives, with specific timeframes that relate to achieving the stated goals as appropriate.

The Applicant stated the following:

“Adding these services to the existing ambulatory surgery treatment center will improve utilization and address unmet patient needs at North Suburban Pain & Spine Center (NSPS). NSPS already provides services to patients focused on various musculoskeletal injuries, including Neurological, Orthopedic, and Pain Management. By allowing for Podiatric and General Surgery procedures it will help address a gap in available services for those visiting NSPS. Adding Podiatry and General Surgery to NSPS will also allow for better utilization of the facility and its surgical recovery areas.”

C) Criterion 1110.110(c) – Safety Net Impact Statement

The project is classified as non-substantive and a Safety Net Impact Statement is not required. However, the Applicant did attest that the proposed project will not have an adverse effect on essential safety net services in the community, nor will it negatively impact the applicant's ability to cross-subsidize safety net services (see Table Two).

TABLE TWO	
Patient Base Payor Mix 2022	
North Suburban Pain and Spine Center, LLC	
Payor	Percentage
Private Insurance	91.0%
Workers Compensation	1.0%
Other Payors	8.0%
Source: Application, Page 91.	

D) Criterion 1110.110(d) - Alternatives to the Project

To demonstrate compliance with this criterion the Applicant must document that the proposed project is the most effective or least costly alternative for meeting the health care needs of the population to be served by the project.

The Applicant considered three alternatives (see application page 45).

1. Maintain Status Quo/Do Nothing

The applicant notes this alternative would have no capital costs but would perpetuate the inability to comprehensively treat its patient base, especially when in need of General Surgery and Podiatric surgical procedures. Following this alternative would result in the continuation of limited access to surgical services and procedures for patient seeking musculoskeletal surgical services. This option was rejected.

2. Utilization of Existing ASTCs/Hospitals

The Applicant notes the pursuit of this alternative will allow the practice to provide a broader range of services to its patient base but notes the resulting limited access to other ASTCs and hospitals, and scheduling inconsistencies that may cause patients to schedule multiple procedures at different ASTCs. The Applicant also notes that outsourcing surgical services to other ASTCs and hospitals can result in inconsistencies in quality of care, continuity of care, and positive overall outcomes. Due to the lingering concerns for quality care to its patient base, the Applicant rejected this alternative.

3. Project as Proposed

The Applicant choose this option in an effort to enhance the utilization at the ASTC and ensure quality care, with outcomes consistent with their level of patient care. The Applicant views this option as being the most cost-effective, and the best option to ensure consistent, quality patient care. There are no costs associated with this alternative.

VII. Size of the Project, Projected Utilization of the Project

A) Criterion 1110.120(a) – Size of the Project

To demonstrate compliance with this criterion, the Applicant must document that the proposed surgical rooms and recovery stations meet the State Board’s GSF Standard in Section 1110.Appendix B.

The Applicant proposes to add surgical specialties to an existing multi-specialty ASTC containing two ORs. There are no intentions to increase space or perform any construction/modernization, and the reported clinical spatial allocations (2,620 GSF/surgical suites with four recovery stations per suite) meets the state standard for size compliance and the requirements of the criterion.

B) Criterion 1110.120 (b) – Projected Utilization

To demonstrate compliance with this criterion, the Applicant must document that the proposed surgical/procedure rooms will be at target utilization of 1,500 hours per operating/procedure room by the second year after project completion (see Section 1110.Appendix B).

The State Board standard is 1,500 hours per OR. The Applicant reports substandard utilization data since its licensure in 2021, and reports that it has only recently completed its accreditation survey for deemed status with Medicare. The applicant states the addition of general surgery and podiatry to its repertoire of surgical services will increase utilization at the facility to satisfy the State Board’s utilization standard. The Applicant notes general surgical procedures to be approximately 84 minutes/1.4 hours and podiatric surgical procedures to run 113 minutes/1.88 hours. The Applicant supplied referral letters from three physicians (see Table Three) agreeing to refer 255 patients (see application pages 55-64). This equates to 433 hours by the second year of operation. The Applicant predicts the addition of surgical services, combined with the existing surgical case volume, will result in satisfactory utilization volume by the end of the second-year post-project. However, the additional 433 hours would not increase the facility’s utilization to the State Board’s target utilization.

TABLE THREE		
Projected Utilization per Physician		
North Suburban Pain and Spine Center		
Physician	Historical Volume	Anticipated Referrals/Hours
Dr. Barry Summer	377	85/119
Dr. Jonathan Hook	348	85/160
Dr. David Gelbmann	377	85/154

TABLE THREE Projected Utilization per Physician North Suburban Pain and Spine Center		
Physician	Historical Volume	Anticipated Referrals/Hours
TOTAL	1,102	255/433
Podiatry: .53 hrs. Neurosurgery: 3.54 hrs. Orthopedic Surgery: 1.4 hrs. Podiatry: 1.88 hrs. General Surgery: 1.4 hrs.		

VIII. Establish an Ambulatory Surgery Surgical Treatment Center

A) Criterion 1110.235(c)(2)(A) and (B) – Service to GSA Residents

To demonstrate compliance with this criterion, the Applicant must provide a list of zip codes that comprise the GSA. The Applicant must also provide patient origin information by zip code for the prior 12 months. This information must verify that at least 50% of the facility's admissions were residents of the geographic service area.

By rule, the Applicant must identify all zip codes within the GSA of the ASTC. The Applicant provided this information on pages 51-52 of the application, and the referral letters include a listing of historical patient origin information by zip code for 1,102 historical referrals. By rule, the Applicant must document that 50% of the proposed referrals (surgeries) originated from within the GSA. The Applicant identified 127 (11.5%), patients originating from within the GSA. The Applicant has not met the requirements of this criterion.

B) Criterion 1110.235(c)(3) - Service Demand – Establishment of an ASTC Facility

To demonstrate compliance with this criterion, the Applicant must provide physician referral letters that attest to the total number of treatments for each ASTC service that was referred to an existing IDPH-licensed ASTC or hospital located in the GSA during the 12-month period prior to the application. The referral letter must contain:

- 1. Patient origin by zip code of residence.*
- 2. Name and specialty of referring physician.*
- 3. Name and location of the recipient hospital or ASTC; and*
- 4. Number of referrals to other facilities for each proposed ASTC service for each of the latest two years.*
- 5. Estimated number of referrals to the proposed ASTC within 24 months after project completion.*
- 6. Physician notarized signature signed and dated; and*
- 7. An attestation that the patient referrals have not been used to support another pending or approved CON application for the subject services.*

By rule, the referrals to a proposed ASTC must be from IDPH licensed ASTCs or hospitals. The Applicant submitted three referral letters (see Table Three) attesting to the historical patient referrals for 1,102

surgeries/procedures in the past year (2022), and the approximate referral of patients for 255 procedures to the ASTC by the second year after project completion. The Applicant has not met the requirements of this criterion due to the historical referrals not culminating in 1,500 hours of utilization for each room.

C) Criterion 1110.235(c)(5) - Treatment Room Need Assessment

To document compliance with this criterion, the Applicant must provide the projected patient volume or hours to justify the number of ORs requested. The Applicant must document the average treatment time per procedure.

1. The Applicant supplied referral letters from three physicians (see Table Three) agreeing to refer 255 patients (see application pages 55-64). This equates to 433 hours by the second year of operation. The Applicant predicts the addition of surgical services, (433 hours + 441 hours (CY 2022) = 874 hours) would not increase the facility's utilization to the State Board's target utilization. The Applicant does not meet the requirements of this criterion.

2. The Applicant supplied an estimated time per procedure (1.4 hours/general surgery, 1.88 hours/podiatric surgery), which includes prep/clean-up. This time was gathered from historical procedures performed at facilities in the GSA in the past 12 months (2022), an average procedure time of 1.64 hours were calculated from these data, and combined with the number of projected procedures, it appears the Applicant can justify having two operating/procedure rooms.

D) Criterion 1110.235(c)(6) - Service Accessibility

To document compliance with this criterion the Applicant must document that the proposed ASTC services being established is necessary to improve access for residents of the GSA by documenting one of the following:

1. There are no other IDPH-licensed ASTCs within the identified GSA of the proposed project.

2. The other IDPH-licensed ASTC and hospital surgical/treatment rooms used for those ASTC services proposed by the project within the identified GSA are utilized at or above the utilization level specified in 77 Ill. Adm. Code 1100.

3. The ASTC services or specific types of procedures or operations that are components of an ASTC service are not currently available in the GSA or that existing underutilized services in the GSA have restrictive admission policies.

4. The proposed project is a cooperative venture sponsored by two or more persons, at least one of which operates an existing hospital. Documentation shall provide evidence that:

A) The existing hospital is currently providing outpatient services to the population of the subject GSA.

B) The existing hospital has sufficient historical workload to justify the number of surgical/treatment rooms at the existing hospital and at the proposed ASTC, based upon the treatment room utilization standard specified in 77 Ill. Adm. Code 1100.

C) The existing hospital agrees not to increase its surgical/treatment room capacity until the proposed project's surgical/treatment rooms are operating at or above the utilization rate specified in 77 Ill. Adm. Code 1100 for a period of at least 12 consecutive months; and

D) The proposed charges for comparable procedures at the ASTC will be lower than those of the existing hospital.

The State Board Staff note the following:

1. There are existing ASTCs and hospitals in the GSA that are under-utilized (see Table Four).

The Applicant notes there are 17 ASTCs and eight acute care hospitals in the GSA. State Board staff notes five ASTCs and two hospitals provide General Surgery and six ASTCs and one hospital provides Podiatric surgical services. The significant presence these two surgical services indicates there are no accessibility issues and the Applicant has not successfully addressed this criterion.

TABLE FOUR				
Hospitals and ASTCs within the GSA				
Hospital/Surg. Services	City/Distance (miles)	OR/Procedure Rooms	Total Hours	Met Standard?
Presence Holy Family Medical Ctr.	Des Plaines (1.5)	5/2	2,420	No
Advocate Lutheran General Hospital	Park Ridge (2.2)	26/8	54,635	Yes
Glenbrook Hospital	Glenview (5.7)	5/7	20,783	Yes
Presence Resurrection Medical Ctr.	Chicago (6.5)	14/4	12,964	No
Skokie Hospital	Skokie (6.8)	16/7	33,446	Yes
Northwest Community Hospital	Arlington Heights (7)	14/8	31,888	Yes
Alexian Brothers Medical Center	Elk Grove Village (10)	15/12	22,071	No
Northshore Evanston Hospital	Evanston (10)	15/9	45,056	Yes
TOTALS		167	223,263	
ASTC/Classification/Surg. Services	City/Distance	OR/Procedure Rooms	Total Hours	Utilization %
North Suburban Pain & Spine Institute (multi)	Des Plaines (1)	2/0	356	No
Golf Surgical Ctr. (multi) < >	Des Plaines (1.1)	6/2	2,667	No
Des Plaines Endoscopy (single)	Des Plaines (1.5)	0/2	0.6	No
Retina Surgery Center (single)	Niles (1.6)	1/0	35.5	No
Northwest Comm. Foot & Ankle (limited)	Des Plaines (1.6)	3/0	467	No
Illinois Sports Medicine & Orthopedic Surgery Ctr. (multi) <	Morton Grove (4.2)	4/1	5,777	No
Uropartners Surgery Center (limited)	Des Plaines (5.1)	3/0	2,921	No
The Glen Endoscopy Ctr. (single)	Glenview (6.7)	0/3	5,270	Yes
Northwest Endoscopy Ctr. (single)	Arlington Heights (6.8)	0/2	2,254	Yes
Northwest Community Day Surgery (multi) < >	Arlington Heights (7)	10/0	11,408	No
Ravine Way Surgery Center (multi) <	Glenview (7.1)	3/1	4,891	Yes

TABLE FOUR Hospitals and ASTCs within the GSA				
Hospital/Surg. Services	City/Distance (miles)	OR/Procedure Rooms	Total Hours	Met Standard?
Northwest Surgicare Healthsouth (multi)	Arlington Heights (7.1)	4/1	1,594	No
Greater Chicago Ctr. For Advanced Surgery (limited) <	Des Plaines (7.3)	2/1	210	No
Illinois Hand & Upper Extremity Ctr. (single)	Arlington Heights (7.4)	1/0	772	Yes
Lurie Children's Hospital ASTC* (multi) >	Northbrook (7.5)	4/0	4,251	No
Associated Surgical Ctr. (multi) < >	Arlington Heights (8.6)	3/0	16,038	Yes
North Shore Surgery Ctr. (multi) < >	Lincolnwood (10)	3/0	3,391	Yes
TOTALS		62	62,303	
Source: 2022 ASTC and Hospital Survey Information. * - Pediatrics only > = General Surgery < = Podiatry				

E) Criterion 1110.235(c)(7) - Unnecessary Duplication/Maldistribution / Impact on Other Providers

1. To demonstrate compliance with this criterion, the Applicant must provide a list of all Licensed hospitals and ASTCs within the proposed GSA and their historical utilization (within the 12-month period prior to application submission) for the existing surgical/treatment rooms.
2. To demonstrate compliance with this criterion the Applicant must document the ratio of surgical/treatment rooms to the population within the proposed GSA that exceeds one and one half-times the State average.
3. To demonstrate compliance with this criterion the Applicant must document that, within 24 months after project completion, the proposed project:
 - A) Will not lower the utilization of other area providers below the utilization standards specified in 77 Ill. Adm. Code 1100; and
 - B) Will not lower, to a further extent, the utilization of other GSA facilities that are currently (during the latest 12-month period) operating below the utilization standards.

The Applicant stated the following to address this criterion:

The Applicant identified a GSA extending 10 miles in all directions from the ASTC, and State Board Staff concurs with these findings. This GSA includes 44 zip codes. The population for this GSA is approximately 1,272,337. There are eight hospitals and 17 ASTCs in the GSA (see Table Four).

Unnecessary Duplication of Service

According to the applicant, the project will not result in an unnecessary duplication of service and notes any impact from the introduction of these surgical services (Podiatry/General Surgery) will be minimal. State Board Staff notes these services are prevalent in the GSA and affirms that offering general surgery and podiatry surgical services may negatively impact existing providers in the GSA.

Limited/Multi-Specialty ASTCs

There are 17 limited/multi-specialty ASTCs within the GSA. Of this number six (35%) are operating at the State Board's target occupancy; seven (41%) offer podiatric surgical services; and five (29%) provide General Surgery.

Hospitals

There are eight hospitals within the GSA. Of this number, five (62%) at the State Board's target occupancy; two (25%) provide general surgery; and none provide podiatric surgical services.

Maldistribution

The Applicant notes the room to population ratio does not indicate a surplus of surgical rooms in the GSA (see Table Five).

TABLE FIVE			
Room to Population Ratio			
	Population	Rooms	Rooms to Population
State	13,129,223	2,904	1:4,521
GSA	1,272,337	229	1:5,557

Reviewer Note: A surplus is defined as the ratio of operating/procedure rooms to the population within the GSA [GSA Ratio] to the State of Illinois ratio that is 1.5 times the GSA ratio.

Impact on Other Facilities

The Applicant states the proposed project will have minimal impact on providers within the GSA. However, there are existing providers in the GSA providing identical services that are operating below the State Board's standard (see Table Six).

The Applicant has not met this requirement because there are existing ASTCs, and hospitals currently underutilized in the GSA offering the two surgical services proposed.

F) Criterion 1110.235(c)(8) - Staffing

To demonstrate compliance with this criterion, the Applicant must provide documentation that relevant clinical and professional staffing needs will be met, and a medical director will be selected that is board certified.

The applicant supplied a curricula vita for its Medical Director, Dr. Darrel Saldhana (application, p. 72), and attests the proposed facility will operate with sufficient staffing levels required for licensure and the provision of safe and effective care. The Applicant notes additional staff will be recruited via job search sites and professional placement services, if necessary. Based upon the information provided in the application for permit, it appears the ASTC will be properly staffed.

G) Criterion 1110.235(c)(9) - Charge Commitment

To document compliance with this criterion the Applicant must provide the following:

- 1) A statement of all charges, except for any professional fee (physician charge).
- 2) A commitment that these charges will not be increased, at a minimum, for the first two years of operation unless a permit is first obtained pursuant to 77 Ill. Adm. Code 1130.310(a).

The Applicant supplied a statement of charges (application, p. 81-82) and attested that the identified charges will not increase for at least the first two years the Applicant is in operation as an ASTC.

H) Criterion 1110.235(c)(10) - Assurances

To demonstrate compliance with this criterion, the Applicant must attest that a peer review program will be implemented and the proposed ASTC will be at target occupancy two years after project completion.

The Applicant attests that North Suburban Pain and Spine Center, LLC will implement a peer review program to maintain quality patient care standards and meet or exceed the utilization standards specified in 77 IAC 1100, by the second year of operation (application, p. 86).

23-043 North Suburban Pain & Spine Center - Des Plaines

