

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-01	BOARD MEETING: May 9, 2024	PROJECT NO: 23-042	PROJECT COST:
FACILITY NAME:		CITY:	\$3,490,000
Well Care Ho	ome, NFP, INC.	Highland	
TYPE OF PROJECT:	Substantive		HSA: XI

PROJECT DESCRIPTION: The Applicant (Well Care Home, NFP, INC.) proposes to establish a 74-bed long-term care facility at 100 Faith Drive, Highland, Illinois at a cost of \$3,490,000. The expected completion date is September 30, 2024.

This project was deferred from the March 12, 2024, State Board Meeting. Additional information has been provided and is included at the end of this report along with the transcript from the March 12, 2024, State Board Meeting. The State Board Staff findings remain unchanged from the Original State Board Staff Report.

Information regarding this application can be found at this link: https://hfsrb.illinois.gov/projects/project.23-042-well-care-home-nfp.html

EXECUTIVE SUMMARY

PROJECT DESCRIPTION:

- The Applicant (Well Care Home, NFP, INC.) proposes to establish a 74-bed long-term care facility at 100 Faith Drive, Highland, Illinois in approximately 74,000 GSF of space at a cost of \$3,490,000. The expected completion date is September 30, 2024. Well Care Home, NFP, INC. purchased the facility at a cost of \$2,350,000.
- In September of 1999 the State Board approved a 76-bed long term care facility known as Faith Countryside Home (Permit #99-069) at a cost of \$12.5 million. As part of this project there were 36 assisted living apartments. The State Board has no jurisdiction of assisted living apartments.
- In June of 2021 Faith Countryside Home closed. The closure was the result of decreased hospital discharges and falling revenues as expenses increased for staffing and supplies as a result of the public health emergency. Faith Countryside Homes filed for bankruptcy protection in East St. Louis June 15, 2021, listing assets of \$1 million to \$10 million and liabilities of \$10 million to \$50 million.

WHY THE PROJECT IS BEFORE THE STATE BOARD:

• This project is before the State Board because the project proposes the establishment of a long-term facility.

PURPOSE OF THE PROJECT:

• The Applicant states the purpose of the project is to reopen a long-term care facility in Highland, Illinois.

PUBLIC HEARING/COMMENT:

• No public hearing was requested, and letters of support were received by the State Board. No opposition letters have been received by the State Board.

SUMMARY:

• The Applicant has purchased the closed facility at a cost of \$2,350,000. The Applicant engaged an Architect to survey the facility. That report is attached to the end of this report. Prior to closing Faith Countryside Home averaged 85% occupancy from 2015 thru 2020 (see Table Two below). The Applicant addressed a total of 18 criteria and have not met the following:

Sta	te Board Standards Not Met
Criteria	Reasons for Non-Compliance
1125.530 - Planning Area Need	The proposed facility will be located in the Madison County
	Long Term Care Planning Area and Health Service Area XI.
	There is currently a calculated excess of 365 LTC beds in the
	Madison County Planning Area.
1125.540 -Service to Planning Area Residents	No referral letters were provided, and the State Board Staff
	was unable to determine if 50% of the residents of the
	proposed nursing home will reside within the 17-mile GSA.
1125.570 - Service Accessibility	The Long-term care service currently exists in this planning
	area; therefore, the Applicant cannot meet condition number
	one. No evidence has been provided that the existing facilities
	have restrictive admissions policies; therefore, condition
	number two cannot be met. There is approximately 35 LTC
	facilities with 3,712 LTC beds within the 17-mile GSA. Two-

Sta	te Board Standards Not Met	
Criteria	Reasons for Non-Compliance	
	year average utilization of these 35 LTC facilities is 57.5%	
	therefore, condition number three cannot be met. No evidence	
	of medical care problems has been identified by the Applicant,	
	therefore condition four cannot be met.	
1125.580 - Unnecessary Duplication of Service	As shown in Table Three below, there is approximately 35	
	LTC facilities with 3,712 LTC beds within the 17-mile GSA.	
	Two-year average utilization of these 35 LTC facilities is	
	57.5%. There are 38 zip codes with approximately 241,450	
	residents residing in the 17-mile GSA. There are 3,712 LTC	
	Beds within this 17-mile GSA or 1 LTC Bed for every 65	
	residents in this GSA. There are approximately 88,532	
	nursing care beds in the State of Illinois. There are	
	approximately 12.62 million people in the State of Illinois or	
	1 LTC bed for every 143 residents. The ratio of beds within	
	this 17-mile GSA is 1.5 times the State of Illinois ratio. Based	
	upon this ratio there is a surplus of the long-term care beds in	
	this 17-mile GSA.	



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Well Care Home NFP, INC. STATE BOARD STAFF REPORT Project #23-042

APPLICATION SUMMARY				
Applicants	Well Care Home NFP, INC.			
Facility Name	Well Care Home NFP, INC			
Location	100 Faith Drive, Highland, Illinois			
Permit Holder	Well Care Home NFP, INC			
Operating Entity	Well Care Home NFP, INC			
Owner of Site	Well Care Home NFP, INC			
Application Received	September 29, 2023			
Application Deemed Complete	October 6, 2023			
Project Completion Date	September 30, 2025			
Review Period Extended by the State Board Staff?	No			
Can the Applicants request a deferral?	Yes			
Expedited Review?	Yes			

I. Project Description

The Applicant (Well Care Home NFP, INC.) proposes to establish a 74-bed long-term care facility at 100 Faith Drive, Highland, Illinois in approximately 74,000 GSF of space at a cost of \$3,490,000. The expected completion date is September 30, 2025. Well Care Home, INC. purchased the facility at a cost of \$2,350,000.

II. Summary of Findings

- **A.** State Board Staff finds the proposed project to **not** be in conformance with the provisions of 77 ILAC 1110 (Part 1110).
- **B.** State Board Staff finds the proposed project is in conformance with the provisions of 77 ILAC 1120 (Part 1120).

III. General Information

The Applicant (Well Care Home NFP, INC.) proposes to establish a 74-bed long-term care facility at 100 Faith Drive, Highland, Illinois in approximately 74,000 GSF of space at a cost of \$3,490,000. Well Care Home NFP, Inc is an Illinois not-for-profit corporation incorporated June 14, 2023. The corporation is owned by Dr. Ahsan Usman and Rabia and Ahad Usman. Dr. Usman is the CEO. Well Care Home NFP, Inc does not own any other health care facilities. The building housing the proposed long term care facility was purchased on June 14, 2023, by Well Care Home NFP, Inc. The **Geographical Service Area** for a project in Madison County is 17-miles. This is a substantive project which is subject to both a Part 1110 and a Part 1120 review.

IV. Project Sources and Uses of Funds

The Applicant proposes to fund the project with cash in the amount of \$3,490,000.

TABLE ONE PROJECT COST AND SOURCES OF FUNDS

Proposed Use of Funds	Amount
Modernization	\$ 1,140,000
Acquisition of Property	\$ 2,350,000
Total	\$ 3,490,000
Cash	\$ 3,490,000
Total	\$ 3,490,000

V. Background of the Applicant, Purpose of the Project, Alternatives to The Proposed Project

A) 1125.520 - Background of the Applicant

All applicants shall comply with the requirements of this Section, as follows:

a) An applicant must demonstrate that it is fit, willing and able, and has the qualifications, background, and character, to adequately provide a proper standard of LTC service for the community. [20 ILCS 3960/6] In evaluating the qualifications, background, and character of the applicant, HFSRB shall consider whether adverse actions have been taken against the applicant, or against any LTC facility owned or operated by the applicant, directly or indirectly, within three years preceding the filing of the application. An LTC facility is considered "owned or operated" by every person or entity that owns, directly or indirectly, an ownership interest. If any person or entity owns any option to acquire stock, the stock shall be considered to be owned by that person or entity. (See Section 1125.140 for the definition of "adverse action".)

Well Care Home NFP, Inc is an Illinois not-for-profit corporation incorporated June 14, 2023. The corporation is owned by Dr. Ahsan Usman and Rabia and Ahad Usman. Dr. Usman is the CEO. Well Care Home NFP, Inc does not own any other health care facilities. The building housing the proposed long term care facility was purchased on June 14, 2023, by Well Care Home NFP, Inc.

Dr. Ahsan Usman has been in a medical practice as a physician since 2003. Dr. Usman has been caring for patients for the last twenty years and has been medical director for nursing homes. Based upon the information provided the Applicant appears to be fit, willing and able, and has the qualifications, background, and character, to adequately provide a proper standard of LTC service for the community.

B) Section 1125.320 - Purpose of the Project

The purpose of the project is to reestablish a long-term care facility in Highland, Illinois.

C) Section 1125.330 – Alternatives to the Project

The Applicant did not consider any other alternatives to the proposed project but provided a narrative in which the Applicant stated the proposed reopening of the long-term care facility as possible long-term options will provide dialysis treatments, an onsite infusion center, and respiratory and ventilator management services at the proposed facility.

VI. General Long-Term Care

A) Section 1125.530 - Planning Area Need

The applicant shall document that the number of beds to be established or added is necessary to serve the planning area's population, based on the following:

a) Bed Need Determination

- *The number of beds to be established for general LTC is in conformance with the projected bed need specified and reflected in the latest updates to the HFSRB Inventory.*
- 2) The number of beds proposed shall meet or exceed the occupancy standard specified in Section 1125.210(c).

The proposed facility will be located in the Madison County Long Term Care Planning Area and Health Service Area XI. There is currently a calculated excess of 365 LTC beds in this planning area.

b) Service to Planning Area Residents

- 1) Applicants proposing to establish or add beds shall document that the primary purpose of the project will be to provide necessary LTC to the residents of the area in which the proposed project will be physically located (i.e., the planning or geographical service area, as applicable), for each category of service included in the project.
- 2) Applicants proposing to add beds to an existing general LTC service shall provide resident/patient origin information for all admissions for the last 12-month period, verifying that at least 50% of admissions were residents of the area. For all other projects, applicants shall document that at least 50% of the projected resident volume will be from residents of the area.
- 3) Applicants proposing to expand an existing general LTC service shall submit resident/patient origin information by zip code, based upon the resident's/patient's legal residence (other than an LTC facility).

The Applicant has stated that the proposed nursing home will be in the former 76-bed "Faith Countryside Home" and will serve the residents of Madison County. According to the Applicant the nursing home will provide care to the people of Highland where no one has to leave Highland and surrounding cities to receive long term care and rehabilitation. No referral letters have been provided and the State Board Staff was unable to determine if 50% of the admissions will come from the geographical service area.

B) Section 1125.540 - Service Demand – Establishment of General Long-Term Care

- a) The number of beds proposed to establish a new general long-term care service is necessary to accommodate the service demand experienced annually by the existing applicant facility over the latest two-year period, as evidenced by historical and projected referrals, or if the applicant proposes to establish a new LTC facility, the applicant shall submit projected referrals. The applicant shall document subsection (c) and subsection (d) or (e).
- b) If the applicant is not an existing facility and proposes to establish a new general LTC facility, the applicant shall submit the **number of annual projected referrals**, as required in subsection (d) or (e).
- c) Historical Referrals

If the applicant is an existing facility and is proposing to establish this category of service, the applicant shall document the number of referrals to other facilities, for each proposed category of service, for each of the latest two years. Documentation of the referrals shall include resident/patient origin by zip code; name and specialty of referring physician or identification of another referral source; and name and location of the recipient LTC facility.

d) Projected Referrals

An applicant proposing to establish a category of service or establish a new LTC facility shall submit the following:

- 1) Letters from referral sources (hospitals, physicians, social services, and others) that attest to total number of prospective residents (by zip code of residence) who have received care at existing LTC facilities located in the area during the 12-month period prior to submission of the application. Referral sources shall verify their projections and the methodology used.
- 2) An estimated number of prospective residents whom the referral sources will refer annually to the applicant's facility within a 24-month period after project completion. The anticipated number of referrals cannot exceed the referral sources documented historical LTC caseload. The percentage of project referrals used to justify the proposed expansion cannot exceed the historical percentage of applicant market share, within a 24-month period after project completion.
- 3) Each referral letter shall contain the referral source's Chief Executive Officer's notarized signature, the typed or printed name of the referral source, and the referral source's address; and
- 4) Verification by the referral sources that the prospective resident referrals have not been used to support another pending or approved Certificate of Need (CON) application for the subject services.

No referral letters were provided. Historical utilization data was provided to demonstrate the projected utilization of the proposed facility. Over a six-year period the former "Faith Countryside Home" facility averaged 86% occupancy prior to the announcement of closing in June of 2021. The not-for-profit facility filed for bankruptcy in June 2021 citing increased expenses and lower revenues because of the public health emergency.

TABLE TWOFaith Countryside Home (1)

		I ditti C	ound y stac	TIOIIIC		
Year	Medicaid	%	Other	%	Total	% Occupancy
2015	2,853	10.28%	22,108	79.70%	24,961	89.98%
2016	3,200	11.54%	22,038	79.44%	25,328	91.30%
2017	3,221	11.61%	22,659	81.68%	25,880	93.29%
2018	3,877	13.98%	19,859	71.59%	23,736	85.57%
2019	3,395	12.24%	16,484	59.42%	19,879	71.66%
2020	4,177	15.06%	17,672	63.71%	21,849	78.76%
Ave	3,454	12.45%	20,137	72.59%	23,606	85.10%

^{1.} Information taken from HFS Long Term Cost Reports

C) Section 1125.570 - Service Accessibility

The number of beds being established or added for each category of service is necessary to improve access for planning area residents.

a) Service Restrictions

The applicant shall document that at least one of the following factors exists in the planning area, as applicable:

1) The absence of the proposed service within the planning area.

- Access limitations due to payor status of patients/residents, including, but not limited to, individuals with LTC coverage through Medicare, Medicaid, managed care, or charity care
- 3) Restrictive admission policies of existing providers.
- 4) The area population and existing care system exhibit indicators of medical care problems, such as an average family income level below the State average poverty level, or designation by the Secretary of Health and Human Services as a Health Professional Shortage Area, a Medically Underserved Area, or a Medically Underserved Population.
- 5) For purposes of this Section 1125.570 only, all services within the established radii outlined in 77 Ill. Adm. Code 1100.510(d) meet or exceed the occupancy standard specified in Section 1125.210(c).

There is approximately 35 LTC facilities with 3,712 LTC beds within the 17-mile GSA. Two-year average utilization of these 35 LTC facilities is 57.5%. Average Medicaid occupancy in these 35 LTC facilities was approximately 66%.

The service currently exists in this planning area; therefore, the Applicant cannot meet condition number one. No evidence has been provided that the existing facilities have restrictive admissions policies; therefore, condition number two cannot be met. There is approximately 35 LTC facilities with 3,712 LTC beds within the 17-mile GSA. Two-year average utilization of these 35 LTC facilities is 57.5% therefore, condition number three cannot be met. No evidence of medical care problems has been identified by the Applicant, therefore condition four cannot be met.

TABLE THREE Facilities within the 17-mile GSA

	2-Year Av					Average 2021 and 2022 (2)		
FACNAME	CITY	Gen Beds	Star Rating ⁽¹⁾	Medicaid Days	Total Days	Medicaid Days % of Total Days	Bed Occupancy	
Alhambra Rehab & Healthcare	Alhambra	84	4	4,053	13,895	29.17%	45.32%	
Bria of Mascoutah	Mascoutah	55	3	11,157	14,696	75.92%	73.20%	
Autumn Meadows of Cahokia	Cahokia	150	2	23,233	29,486	78.79%	53.85%	
Aviston Countryside Manor	Trenton	97	1	10,089	21,023	47.99%	59.38%	
Breese Nursing Home	Breese	112	5	4,389	10,911	40.22%	26.69%	
Bria of Belleville	Belleville	140	1	29,583	36,781	80.43%	71.98%	
Bria of Cahokia	Cahokia	133	2	36,158	40,270	89.79%	82.95%	
Carlyle Healthcare & Sr. Living	Carlyle	109	1	12,536	21,906	57.23%	55.06%	
Caseyville Nursing & Rehab Ctr	Caseyville	150	1	25,903	31,150	83.16%	56.89%	
Cedar Ridge Health & Rehab Center	Lebanon	116	1	20,727	35,725	58.02%	84.38%	
Clinton Manor	New Baden	90	5	24,672	27,749	88.91%	84.47%	
Collinsville Rehab & Health Care Center	Collinsville	39	1	13,012	15,245	85.35%	107.09%	
Eden Village Care Center	Glen Carbon	128	4	8,788	21,481	40.91%	45.98%	
Edwardsville Nsg & Rehab.	Edwardsville	120	2	16,476	23,894	68.95%	54.55%	
Elmwood Nrsg. & Rehab Center	Maryville	104	1	21,650	27,943	77.48%	73.61%	

TABLE THREE
Facilities within the 17-mile GSA

2-Year A					Year Averag	Average 2021 and 2022 (2)		
FACNAME	CITY	Gen Beds	Star Rating (1)	Medicaid Days	Total Days	Medicaid Days % of Total Days	Bed Occupancy	
Fayette Co Hosp Nursing Home	Vandalia	85	1	7,316	12,301	59.47%	39.65%	
Granite Nsg. & Rehab Center	Granite City	86	1	18,862	24,191	77.97%	77.06%	
Greenville Nursing & Rehab	Greenville	90	3	10,069	18,328	54.94%	55.79%	
Helia Healthcare of Belleville	Belleville	122	1	12,165	15,284	79.59%	34.32%	
Staunton Health & Rehab Ctr.	Staunton	90	4	7,866	17,914	43.91%	54.53%	
Highland Health Care Center	Highland	128	1	15,858	27,369	57.94%	58.58%	
Hitz Memorial Home	Alhambra	67	2	3,733	14,825	25.18%	60.62%	
Bria of Alton	Alton	181	1	13,712	16,700	82.11%	25.28%	
Bria of Wood River	Wood River	106	3	18,154	21,412	84.78%	55.34%	
Lebanon Care Center	Lebanon	90	1	16,518	17,931	92.12%	54.58%	
Manor Court of Maryville	Maryville	132	2	15,246	33,112	46.04%	68.73%	
Mar-ka Nursing Home	Mascoutah	76	1	6,153	12,848	47.89%	46.31%	
Memorial Care Center	Belleville	82	5	0	13,006	0.00%	43.45%	
Mercy Rehab and Care Center	Belleville	120	1	13,601	21,471	63.35%	49.02%	
Meridian Village	Glen Carbon	70	5	2,606	20,880	12.48%	81.72%	
River Crossing of Edwardsville	Edwardsville	120	1	21,136	29,617	71.36%	67.62%	
St. Paul's Senior Community	Belleville	108	2	7,805	37,124	21.02%	94.17%	
Swansea Rehab & Healthcare Center	Swansea	94	1	14,331	15,332	93.47%	44.69%	
University Nursing & Rehab	Edwardsville	122	1	18,772	25,602	73.32%	57.49%	
Vandalia Rehab & Healthcare Center	Vandalia	116	1	10,377	11,751	88.31%	27.75%	
Total		3,712		496,699	779,143	63.75%	57.51%	

- 1. Star Rating taken from Medicare Nursing Home Compare Website.
- 2. Information taken from HFS Long Term Care Cost Reports.

D) Section 1125.580 - Unnecessary Duplication/Maldistribution

- a) The applicant shall document that the project will not result in an unnecessary duplication. The applicant shall provide the following information:
- 1) A list of all zip code areas that are located, in total or in part, within the established radii outlined in 77 Ill. Adm. Code 1100.510(d) of the project's site.
- 2) The total population of the identified zip code areas (based upon the most recent population numbers available for the State of Illinois); and
- 3) The names and locations of all existing or approved LTC facilities located within the established radii outlined in 77 Ill. Adm. Code 1100.510(d) of the project site that provide the categories of bed service that are proposed by the project.
- b) The applicant shall document that the project will not result in maldistribution of services. Maldistribution exists when the identified area (within the planning area) has an excess supply of facilities, beds and services characterized by such factors as, but not limited to:
 - 1) A ratio of beds to population that exceeds one and one-half times the State average.

- 2) Historical utilization (for the latest 12-month period prior to submission of the application) for existing facilities and services that is below the occupancy standard established pursuant to Section 1125.210(c); or
- 3) Insufficient population to provide the volume or caseload necessary to utilize the services proposed by the project at or above occupancy standards.
- c) The applicant shall document that, within 24 months after project completion, the proposed project:
 - 1) Will not lower the utilization of other area providers below the occupancy standards specified in Section 1125.210(c); and
 - Will not lower, to a further extent, the utilization of other area facilities that are currently (during the latest 12-month period) operating below the occupancy standards.

As shown in Table Three above, there is approximately 35 LTC facilities with 3,712 LTC beds within the 17-mile GSA. Two-year average utilization of these 35 LTC facilities is 57.5%.

There are 38 zip codes with approximately 241,450 residents residing in the 17-mile GSA. There are 3,712 LTC Beds within this 17-mile GSA or 1 LTC Bed for every 65 residents in this GSA. There are approximately 88,532 nursing care beds in the State of Illinois. There are approximately 12.62 million people in the State of Illinois or 1 LTC bed for every 143 residents. The ratio of beds within this 17-mile GSA is 1.5 times the State of Illinois ratio. Based upon this ratio there is a surplus of the long-term care beds in this 17-mile GSA.

TABLE FOURLTC Beds to Population

	Population	Beds	Ratio
State of Illinois	12,620,000	88,532	0.00704
17 Mile GSA	241,451	3,712	0.01537

E) Section 1125.590 - Staffing Availability

The applicant shall document that relevant clinical and professional staffing needs for the proposed project were considered and that staffing requirements of licensure, certification and applicable accrediting agencies can be met. In addition, the applicant shall document that necessary staffing is available by providing letters of interest from prospective staff members, completed applications for employment, or a narrative explanation of how the proposed staffing will be achieved.

The Applicant provided a narrative as required and stated the proposed facility will create 50-60 jobs in the Highland Park community and according to the Applicant the supply of health care workers will not be an issue as the number of health care workers are more than the number of nursing LTC facilities in the area. The medical director will be Dr. Ahsan Usman. According to the Applicant staff will be hired once state licensure has been approved. The Applicants have met the requirements of this criterion.

F) Section 1125.600 - Bed Capacity

The maximum bed capacity of a general LTC facility is 250 beds, unless the applicant documents that a larger facility would provide personalization of patient/resident care and documents provision of quality care based on the experience of the applicant and compliance with IDPH's licensure standards (77 Ill. Adm. Code: Chapter I, Subchapter c (Long-Term Care Facilities)) over a two-year period.

The proposed facility will have a total 74 long term care beds, 14-beds dedicated to memory care, 50 skilled care beds and 10 intermediate care beds. The Applicant has met the requirements of this criterion.

G) 1125.610 - Community Related Functions

The applicant shall document cooperation with and the receipt of the endorsement of community groups in the town or municipality where the facility is or is proposed to be located, such as, but not limited to, social, economic, or governmental organizations or other concerned parties or groups. Documentation shall consist of copies of all letters of support from those organizations.

The Applicant provided community support letters from the Mayor of the City of Highland, the Highland Chamber of Commerce, City of Highland City Manager, City of Highland Economic Development Coordinator, Property Owner Gayle A. Fry, Tisha Flowers, Marketing Director Well Care Home NFP Inc., Susan Hulvey, Chief Operating Officer Well Care Home NFP Inc. The Applicant has successfully addressed this criterion.

H) Section 1125.620 - Project Size – Review Criterion

The applicant shall document that the amount of physical space proposed for the project is necessary and not excessive. The proposed gross square footage (GSF) cannot exceed the GSF standards of Appendix A, unless the additional GSF can be justified by documenting one of the following:

- a) Additional space is needed due to the scope of services provided, justified by clinical or operational needs, as supported by published data or studies.
- b) The existing facility's physical configuration has constraints or impediments and requires an architectural design that results in a size exceeding the standards of Appendix A.
- c) The project involves the conversion of existing bed space that results in excess square footage.

The Applicant is proposing 74 LTC beds in 39,867 GSF of reviewable space or 539 DGSF per bed. The State Board Standard for LTC beds is 350-570 DGSF per Bed. The Applicant has met the requirement of this criterion.

I) Section 1125.630 - Zoning

The applicant shall document one of the following:

- a) The property to be utilized has been zoned for the type of facility to be developed.
- b) Zoning approval has been received; or
- c) A variance in zoning for the project is to be sought.

The Applicant provided documentation from the City of Highland which states that the site of the proposed project is properly zoned for the project. Application for Permit page 94.

J) Section 1125.640 - Assurances

- a) The applicant representative who signs the CON application shall submit a signed and dated statement attesting to the applicant's understanding that, by the second year of operation after the project completion, the applicant will achieve and maintain the occupancy standards specified in Section 1125.210(c) for each category of service involved in the proposal.
- b) For beds that have been approved based upon representations for continuum of care (Section 1125.560(a)) or defined population (Section 1125.560(b)), the facility shall provide assurance that it will maintain admissions limitations as specified in those Sections for the life of the facility. To eliminate or modify the admissions limitations, prior approval of HFSRB will be required.

The Applicant has provided the necessary assurance that the proposed 74-bed facility will be at target occupancy of 90% within two years after project completion. The Applicant has met this requirement.

VII. 77 IAC 1125.800 - Financial Viability and Economic Feasibility

A) Availability of Funds

B) Financial Viability

The Applicant is financing this project with cash of \$3,490,000. The Applicant provided Deposit Account Summary from Chase Bank for Well Care Home NFP, INC. indicating that \$600,000 was available to provide operating capital. Additionally, a personal financial statement was also provided for Dr. Usman. Based upon the information provided funds are available and the Applicant is financial viability. (See pages 96-111 of the Application for Permit)

TABLE FIVE

Amount Spent to Date			
Land + Building	\$2,350,000		
Carpet replaced with vinyl floor	\$200,000		
Sprinkler Repair	\$40,000		
Fire alarm System Repair	\$20,000		
Fire Extinguishers Tagged	\$5,000		
Elevators Repairs	\$10,000		
Back-up Generator	\$15,000		
Plumbing repairs	\$30,000		
Rooms repairs	\$89,000		
Kitchen updates	\$40,000		
Exterior building repairs	\$29,000		
Dialysis Center Plumbing	\$28,000		
Electricity Bill Paid	\$34,000		
Total	\$2,890,000		

C) Reasonableness of Debt Financing

D) Terms of Debt Financing

There is no debt associated with this project.

E) Reasonableness of Project Costs

<u>Modernization costs</u> are \$1,140,000 or \$28.58 per GSF. The State Board Standard is \$201.61 per GSF. This cost appears reasonable when compared to the State Board Standard.

<u>Acquisition of Building and Property</u> is \$2,350,000. The State Board does not have a standard for this cost.

TABLE SIXProjected Operating Profit and Loss

Year	2024	2025	2026	2027	2028
Revenue	\$4,560,150	\$5,236,884	\$5,636,887	\$5,913,900	\$6,199,738
Cost of Goods	\$2,828,000	\$3,184,000	\$3,360,000	\$3,456,000	\$3,552,000
Gross Profit	\$1,732,150	\$2,052,884	\$2,276,887	\$2,457,900	\$2,647,738
Salaries	\$1,023,528	\$1,083,650	\$1,107,838	\$1,132,586	\$1,157,906
Marketing	\$91,203	\$104,738	\$112,738	\$118,278	\$123,995
Admin	\$60,000	\$60,000	\$60,000	\$60,000	\$60,000
Operations	\$300,000	\$300,000	\$300,000	\$300,000	\$300,000
Other	\$24,000	\$24,000	\$24,000	\$24,000	\$24,000
Housekeeping	\$91,203	\$104,738	\$112,738	\$118,278	\$123,995
Total Operating Expenses	\$1,589,934	\$1,677,126	\$1,717,314	\$1,753,142	\$1,789,896
Depreciation	\$68,750	\$68,750	\$68,750	\$68,750	\$68,750
Interest Expense	\$0	\$0	\$0	\$0	\$0
Operating Profit	\$73,466	\$307,008	\$490,823	\$636,008	\$789,093

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

March 15, 2024

TRANSMITTED ELECTRONICALLY [au.ahsanusman@gmail.com]

Ahsan Usman, CEO Well Care Home NFP, Inc. 100 Faith Drive Highland, IL 62249

RE: NOTICE OF DEFERMENT

Proposed Project #23-042 Well Care Home NFP, Inc. <u>Permit Applicant(s)</u>: Well Care Home NFP, Inc.

Dear Mr. Usman:

This letter confirms the deferral of Project #23-042, Well Care Home, NFP, Inc., at the Illinois Health Facilities & Services Board (HFSRB) meeting that took place on March 12, 2024. Specifically, the above-referenced project has been deferred for hearing at the HFSRB open meeting scheduled for May 9, 2024. The purpose of this deferment is to allow the above-mentioned permit applicant to provide the additional information requested by HFSRB and its Staff.

As outlined in III. Admin. Code tit. 77, § 1130.640(b):

The applicant may defer consideration of a project by HFSRB. A deferral extends from the HFSRB meeting at which the project has been scheduled to the next scheduled HFSRB meeting, subject to a review period of up to 60 days for analyzing additional information. A request for deferral, specifying the reasons for the request, shall be submitted to HFSRB, as follows:

- 1) Written Request to be received by HFSRB staff no later than 5 business days prior to the scheduled HFSRB meeting; or
- Verbal Request by issuing a formal request to HFSRB during the consideration of the project at the HFSRB meeting.

Should you have any questions, contact HFSRB staff at (217) 782-3516 or via email at DPH.HFSRB@illinois.gov.

Sincerely,

Debra Savage, Chairwoman

Delia Savage

Illinois Health Facilities and Services Review Board

CC: John Kniery

April 08, 2024

Debra Savage
Chairwoman
Illinois Health Facilities and Services Review Board

Re: Amendment to CON Application

Proposed Project #23-042 Well Care Home NFP, INC Permit Applicant: Well Care Home NFP, INC 100 Faith Drive, Highland, Illinois 62249

Respected Chairwoman and Board Members,

Project #23-042 was heard by the board on 3/12/2024 but deferred the project hearing till 05/09/2024. The purpose of this deferment is to allow me to provide the additional information.

Skilled Nursing Facility and Assisted Living Facility at 100 Faith Drive, Highland, IL

SNF 74 Total Beds = 60 Beds nursing home + 14 Beds Memory Care:

Originally, I, as owner of the property located at 100 Faith Drive, Highland, IL in Madison county, applied for CON for a 74 beds existing facility which was built in 2004.

In April,2021, these 74 beds fell off the inventory due to the closure of the 74 beds nursing home. There are no new long term care facilities built since closure of the nursing home in Madison County. I am requesting to add back these 74 nursing home beds to the inventory. Request is not to build a new facility and add 74 beds to the inventory in Madison County. Request is just to add back these 74 beds which were part of the existing bed inventory in Madison County but fell off the inventory three years ago unfortunately.

74 Beds in the existing building are fully renovated, rehabbed and the building is ready to open. I have attached a certificate of occupancy issued on 09/13/2024 and copy has been provided to the board. So all the capital investment has been made, all the beds, furniture and equipment has been bought and the building is ready to open as a nursing home.

74 beds request consists of 60 skilled beds and 14 memory care. We have 18 residents on the waiting list and are ready to move in.

Assisted Living Facility:

Second Half of the existing building under the same roof is opened and operational as an Assisted Living Facility, 36 apartments. We had a ribbon Cutting ceremony by the city of Highland Mayor, Kevin Hemann on 4/4/24. We have 5 residents on the list to move in. We have scheduled an open house for AL on 4/24/24 and expect 250 to 300 people from the community to attend the open house including city administration and chamber of commerce and local hospitals CEO's/ staff.

Dialysis Den Built and Awaiting IDPH survey before 4/30/2024:

Being a Nephrologist, I have built a dialysis unit in the Building where we can provide dialysis services onsite for Nursing home residents and assisted living residents.

There are very few nursing homes across the country who provide dialysis service onsite. This will be the very first and the only nursing home facility providing dialysis within 30 miles radius. There are hundreds of dialysis patients needing nursing home placement but unfortunately there are no such facilities available. Patients get discharged from the hospitals and end up going to nursing homes where they do not have dialysis service. Dialysis patients are typically very sick and frail patients. They are kept dragging to the dialysis centers every other day regardless of the weather conditions outside and sickness inside their bodies.

Well Care Home nursing facility will be the only facility in the area which will be serving three adjoining counties and provide dialysis service onsite in miles and miles radius.

I have built a dialysis den onsite in the building. I will be able to provide dialysis to 24 residents per day with current build out. There is more room to add the dialysis chairs if needed. I have bought dialysis machines. IDPH survey is expected by or before 4/30/2024. Once home dialysis center is approved then we will be able to do home dialysis therapies for our assisted living residents. Home dialysis service will be expanded to skilled nursing home residents once we will be allowed to open 74 beds.

Website:: www.wchnursing.com

Breese Nursing Home 112 Beds Facility:

I am the sole owner of the Breese Nursing Home. I bought the 100% stocks of the caring first Inc. d/b/a Breese Nursing Home on 10/01/2023. I bought it for \$1,530,000 dollars. I paid one million dollars down payment and the seller is carrying a \$530,000 dollars loan which is payable in five years. No bank is involved and no other collaterals are involved. No monthly mortgage. I can pay off the loan within five years without a prepayment penalty. Interest rate is very minimal.

Breese Nursing Home is a 5 star rated nursing home. IDPH conducted an annual survey and passed us with Zero deficiencies, Average census of this facility was 35 residents till September. My team has doubled the census since October, 2023 without compromising the quality of residents' care. We are very proud about our success when we see happy residents and happy families. We provide resident focused care and very ambitious to help our residents,

Former Jackson County Nursing Home, Murphysboro, IL

I purchased the building in April, 2023 for \$250,000 dollars and paid in full. It is a huge building and shut down approximately ten years ago. I will be applying for CON once Highland Building CON is approved. If CON is approved given the huge need for skilled beds in Jackson County then I will complete the remaining rehabilitation of the building. This former shut down nursing home Building can be brought back to life and serve the community.

Due to my ignorance, I could not provide all these details and submitted as an addendum to the CON application. I apologize for causing this inconvenience inadvertently.

Please allow me to get CON application approved and allow these 74 beds added back to Madison county bed inventory (beds fell off the inventory 3 years ago) to serve the community and provide dialysis service onsite which is non-existent service in reality in the area. This will be the very first and the only long term care facility with dialysis service onsite in the area. There is a huge need for such a facility for dialysis residents.

Yours Truly,

Ahsan Usman, MD

CEO, Well Care Home NFP, INC

Absam USonan.

100 Faith Drive

Highland IL 62249 Cell: 314-560-9648

www.wchnursing.com



525-535 West Jefferson Street · Springfield, Illinois 62761-0001 · www.dph.illinois.gov

April 16, 2024

ELECTRONIC TRANSMISSION

Administrator Breese Nursing Home 1155 North First Street Breese, IL 62230

Reference:

Provider #: 145410/0036012 Annual Health Survey: December 22, 2023 Annual LSC Survey: January 5, 2024

Dear Administrator:

On December 22, 2023, an 'Annual Inspection' was conducted at Breese Nursing Home by staff of the Illinois Department of Public Health to determine compliance with federal certification requirements for nursing homes participating in the Medicare/Medicaid programs. As a result of that inspection and any required revisits, the Department is recommending to the Centers for Medicare and Medicaid Services and the Illinois Department of Healthcare & Family Services that the facility be certified for continuing participation in the Medicare (Title 18) and Medicaid (Title 19) programs.

If you have any questions concerning this notice, please contact my staff at (217) 782-5180. You may also telephone the Department's TTY number for the hearing impaired at 1-800 547-0466.

Sincerely,

Sheila A. Baker

Sheila A. Baker, JD, MBA, RN Deputy Director, Office of Health Care Regulation Illinois Department of Public Health

cc:

Illinois Department of Healthcare & Family Services Illinois Department on Aging EF1/LH



Page 5 MS. HARDY-WALLER: Yes. 2 MR. ROATE: Thank you. Chairwoman Savage. 3 CHAIRWOMAN SAVAGE: Yes. MR. ROATE: Thank you. That's 10 votes in the affirmative. Okay. So now we are going to CHAIRWOMAN SAVAGE: move onto public participation. Don Jones if you would 8 like to proceed. 9 MR. JONES: Thank you, Madam Chair. We have one individual who has registered to speak. That is 10 Christopher Conrad, and he is speaking regarding project 11 23-042. 12 13 MR. CONRAD: Good morning, Madam Chairwoman, again my name is Chris Conrad I'm speaking for the city of 14 15 Highland. I am here to speak on behalf of Well Care homes, project number 23-042. I know time is of the essence, so 16 17 I'll be brief. There is really three issues I would like the board to consider, as they're taking up a decision on 18 19 this application. The first thing is the proximity of where we're located 20 21 at. Highland is on the far southeastern corner of Madison 22 county. We're closer to the state border so it could be easy to shuffle the lines on a map and look at us from a 23 24 Madison county perspective. But we're literally only three



Page 6 miles from Clinton county lines, and we actually tend to draw much of our retail business from Clinton county. We 2 3 also employ many people from Clinton county and so we tend to be a desirable place for people to, from those areas, to come towards us which is -- we're a little bit closer in proximity -- where we're at as you're headed east on 70 away from the metropolitan area. 8 It gets rural very quickly, as you head east toward 9 Highland and the population tends to increase pretty quickly as you head east. The other issue is the project 10 type, and so Dr. Usman when he approached the city with 11 12 this project to have in-house dialysis out of the nursing home. Which is kind of unique for something that's in our 13 14 area. And kind of goes at hand with some other issues that 15 we're seeing in public health. Which is EMS services are struggling vitally in our 16 area, and to kind of let this board know effective May 1, 17 we're actually going from two ambulances down to one. So, 18 19 anything that can provide a little relief at the lower 20 level. EMS transfers and hauls they needs to do, if they 21 could keep some of the stuff they do in-house would be

- The last thing is economic viability, Madison county is
- 24 a kind of gated community, so this puts us in a unique

22

greatly appreciated.



- 1 position where we're essentially a non for profit electric
- 2 company. And so as -- the facility itself is roughly,
- 3 ironically as I was walking around while we were waiting
- 4 to start. Roughly the same size as this facility, as so
- 5 these are very energy intensive buildings and they use a
- 6 lot of electric. And so, one of the benefits to being in
- 7 Highland is our rates are consistently about 2/3 the
- 8 average of pretty much anywhere else in the state of
- 9 Illinois.
- 10 And so, just from an economically viable standpoint for
- 11 sustainability we think we can offer them some pretty nice
- 12 incentives to be within the city. Just by using our
- 13 utilities, so those were the three main points that I want
- 14 to bring up. Does anyone, anyone on the board have any
- 15 questions for me? Otherwise, I appreciate your time.
- 16 CHAIRWOMAN SAVAGE: Thank you so much. All right. So now,
- 17 the following 20 items listed in the items below on your
- 18 agenda have been approved that I have approved. So, please
- 19 let the record note these items as approved.
- Now, we'll begin with Permit renewal requests, we have
- 21 three items. We'll start with DeKalb County Nursing and
- 22 Rehab in DeKalb, Illinois; HSA-1 in Illinois. May I have a
- 23 motion to approve the seven-month permit renewal of
- 24 project 18-005. It is the third permit renewal request for



- 1 MR. ROATE: Thank you. Chairwoman Savage?
- 2 CHAIRWOMAN SAVAGE: Yes. Based on testimony
- 3 and staff report.
- 4 MR. ROATE: Thank you. That's 10 votes in the
- 5 affirmative.
- 6 CHAIRWOMAN SAVAGE: Okay. That permit is
- 7 approved. Thank you. Okay. Now up is H-06 Well Care Home
- 8 NFP in Highland, Illinois. Do I have a motion to approve
- 9 project 23-042 for the establishment of a long-term care
- 10 nursing home.
- 11 MS. HENDRICKSON: So moved.
- 12 Second.
- 13 CHAIRWOMAN SAVAGE: And then if you persons can,
- 14 please state your name, spell your name for the court
- 15 reporter, and then he'll swear you in
- 16 MR. USMAN: Ahsan Usman A-H-S-A-N. Last name is
- Usman, U-S-M-A-N.
- 18 MS. HULVEY: Susan Hulvey, S-U-S-A-N H-U-L-V-E-Y,
- 19 director of Operations for WellCare Homes.
- 20 MS. FLOWERS: Tisha Flowers, T-I-S-H-A F-L-O-W-E-
- 21 R-S, marketing Director for Well Care of Highland.
- 22 THE REPORTER: Mr. Usman, Ms. Hulvey and Ms.
- 23 Flowers, please raise your right hand.
- 24 (Whereupon:



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1	AHSAN USMAN
2	SUSAN HULVEY
3	TISHA FLOWERS
4	After being duly sworn, was examined and testified as
5	follows:)
6	CHAIRWOMAN SAVAGE: Okay. Mike or George, if you
7	could please read the state board staff report.
8	MR. CONSTANTINO: Thank you, Madam Chair. The
9	applicant proposes to establish a 74-bed long-term care
10	facility in Highland, Illinois. At approximately 74,000
11	gross square feet of space at a cost of approximately \$3.5
12	million. The applicant failed to meet planning area need.
13	There's a calculated excess of 143 long-term care beds in
14	this planning area, failed to provide referral letters,
15	and there are 35 long-term care facilities in a 17 mile
16	radius. You get 75.5 percent occupancy. We did receive
17	support letters. There was no opposition letters received
18	and there was no public hearing. Thank you, Madam Chair.
19	CHAIRWOMAN SAVAGE: Thank you, Mike. If you'd
20	like to proceed?
21	MR. USMAN: Yeah. first of all, I would like to
22	thank you respected chair and all the respected board
23	members for allowing us to come up in front of the board
24	and present our project. And again, my name is Ahsan



- 1 Usman. I'm one of the kidney specialists and I've been in
- 2 practice for 20 years. And the project that we are going
- 3 to present is in Highland, is an existing building. And it
- 4 is very large building that consists of assisted living
- 5 facility, which is 36 beds. In addition to that assisted
- 6 living, there is a portion of skilled nursing facility
- 7 under the same roof in the same building. And that
- 8 contains about 74 beds.
- 9 We have a I'm the CEO of the Well Care home. And I
- 10 bought this building back in June last year. It used to be
- 11 a skilled nursing facility and built at as a skilled
- 12 nursing facility about 20 years ago. And this is built
- 13 like state of the art, very beautiful nursing facility.
- 14 And unfortunately, under previous ownership, this nursing
- 15 home facility was shut down in approximately two years
- 16 ago.
- 17 And I bought it in June last year. And I have brought
- 18 that building back up to codes that are required by the
- 19 city and I got the occupancy permit already. And we
- 20 already got the license for the assisted living side from
- 21 the IDPH, which we already have. And we are allowed to
- 22 admit patients in the assisted living side. So this
- 23 building is up and running and operational. And now we are
- 24 here to request for the certificate of need for this



- 1 existing nursing facility.
- 2 We have a very strong and huge support from the city
- 3 and the community. And as you have all heard this morning
- 4 from Christopher Conrad, the city manager who came up as a
- 5 very first person who presented the city of Highland. He's
- 6 a city manager and city mayor, and all the city
- 7 administration is very welcoming and very motivated to get
- 8 this project approved. And we have huge community support
- 9 in the area. We have a lot of letters of support from the
- 10 community as well.
- And the, we are asking only like 60 skilled beds and 14
- memory care beds. So total we are asking 74 beds. And the
- 13 goal of my practice is being given my extensive history of
- 14 training and education, I understand the healthcare very
- 15 well. And I've been doing this for two decades. And my
- 16 goal is to have the facility, which is providing the
- 17 comprehensive care by providing the dialysis facility on
- 18 site.
- 19 There are other nursing home facilities, but there is
- 20 not even a single nursing home facility within 30 to 40
- 21 miles radius that provide dialysis. And that's what I do
- 22 for a living. That's what I'm trained for. The goal when I
- 23 bought that building was to have those skilled beds where
- 24 I can provide dialysis service. And it's not that I'm just





- 1 saying that I'm going to provide the dialysis service. I
- 2 actually already have built a dialysis unit in the
- 3 building. And the IDPH preliminary inspector has already
- 4 inspected and signed off on the dialysis unit that it is
- 5 meeting all the codes. And I have bought some dialysis
- 6 machines as well as we speak.
- 7 So I am coming with this service that is not existent
- 8 in the Madison County, and there are two or three other
- 9 counties that are joining to that area. And none of those
- 10 facilities provide dialysis on site. I have been
- 11 nephrologist and been in practice since 2011. And I can
- 12 see the dialysis patients are the most sickest patients
- 13 that we deal with. And when they are in the nursing home
- 14 and they are like very sick, elderly, and then they have
- 15 to be dragged out of the nursing home facility to go to
- 16 dialysis units every other day, three times a week.
- 17 And it is being done under extreme weather conditions.
- 18 Like they have to leave literally at 4:00 AM or 5:00 AM in
- 19 a day that is snowing outside and very extreme weathers.
- 20 And still they have no choice other than just they have to
- 21 go to dialysis units. So my intention when I bought that
- 22 building was to build something that will make the life of
- 23 the dialysis patients who require nursing facility very
- 24 easier on, on them.





- And that's, and then not only that, we, I have another sister facility 15 miles away from this nursing home 2 3 facility that is a Breeze nursing home. And we have, I and my team sitting here, we have worked hard in day and night to make that facility like five star rated, nursing home, five star. And we had annual IDPH survey in December two months ago. And we end up having that survey with zero 8 deficiency. So this is not, this project that we are 9 requesting to get this certificate of need is not our experimental facility. We have done this before and we 10 have proven ourself and we are going to prove it again. 11 12 That we going to serve the community with the good quality of care and providing them the dialysis service on site. 13 14 We are very big in physical therapy, wound care, 15 rehabilitation, all that I do with passion. And that's why we are in this community service. And at the end, I don't 16 want to keep going. I just in at the end, I would request 17 the board to approve the certificate of need that we can 18 19 serve better and provide more service line in the 20 community that does not exist as we speak. And it is for 21 the community and we are going to make a difference in 22 their lives. Thank you.
- 24 name is Susan. I am the director of operations for Well

23

MS. HULVEY: Good afternoon. As I said earlier, my



- 1 Care homes. I wanted to touch base on what Chris had said
- 2 earlier in the comments. We border three counties within a
- 3 15 mile radius, which was Vonn, Madison, and Clinton. You
- 4 add another five miles onto that and we also are touching
- 5 St. Clara County. So to be able to service all four
- 6 counties within a 25 mile radius is something that's
- 7 needed.
- 8 But something that is different about this home than
- 9 other homes. Our semi-private rooms, I don't know, I'm
- 10 sure most of you have been in a long-term care facility. A
- 11 lot of them have two beds with the, you know, the drape
- 12 that goes across. These rooms are set up, they're a little
- 13 bit larger and there's a three quarter wall. The beds are
- 14 end to end and there's probably about 10 foot 25th maybe
- in between the beds with a three quarter wall that goes
- 16 up.
- 17 And so when you walk into the room, it's more of a
- 18 private setting, even though you're, it sits semi-private
- 19 room 'cause there's someone else in there. You're not
- 20 being separated by a curtain. You're being separated by a
- 21 wall that goes three quarter and then there's a curtain
- 22 for anybody in case somebody's walking by that could be
- 23 pulled. So it really is different. I've worked in several
- 24 other nursing homes and this is the only one that I've





- 1 seen, especially in our area that provides that type of
- 2 setting.
- 3 The bathrooms, there's only, it's not a Jack; most
- 4 nursing homes, if you're lucky, are Jack and Jill
- bathrooms. You're going to share them with up to four
- 6 people. Each one of our rooms, whether it's private or
- 7 semi-private, has their own bathroom. So the most you're
- 8 going to be sharing with this one person, and that does
- 9 mean a difference to these people.
- 10 You know, it's bad enough if you have to wait for three
- 11 people to use the restroom and sometimes you can't. And
- there's only one other facility in town that is a nursing
- 13 home also. And the restrooms are one on a hall, so that
- 14 makes a big difference. We also have a memory care unit
- 15 there, and it is a, four by four square format with a
- 16 railing that the dementia and memory care residents can
- 17 continue. They, they're always wanting you to keep busy
- 18 and they may not know exactly where they're going, but
- 19 they, they can just keep going in a square and it really
- 20 occupies their time.
- 21 It's a safety issue. It is a secured unit and off the
- 22 secured unit is also an outside secured unit for them to
- 23 go out. There's a garden out there, there's some benches
- 24 where they can sit with their families and make a





- 1 difference. We also have a, a covered entry for
- 2 transportation and loved ones want to come and get their
- 3 family member for the day and take them out for different
- 4 things. So this truly is a different setting than a lot of
- 5 settings that I've seen and been around. And I know in
- 6 the, the four counties that I'm talking about, I, I truly
- 7 have not seen another one in this.
- 8 Also, doctor Usman had also mentioned that, you know,
- 9 we do have another facility in the, in the area. But
- 10 between the two, we can accomplish just about everything,
- 11 you know, from, from insurance, to private, to Medicaid to
- 12 Medicaid pending. And I did want to touch base on when
- 13 that facility closed. Originally last, it was 2020 in
- 14 April. I was actually there with another company when it
- 15 closed. And a different capacity. We had 84 residents
- 16 between the assisted living and the skilled facility. That
- 17 was very hard on the family, very hard on the residents.
- 18 It was, it was a very sad day. It was a great economic
- 19 impact for the community. Not just the town, but the
- 20 surrounding communities. And we've had residents, family
- 21 members for residents that were there that have contacted
- 22 us that want to come back. I think it would be a, a great
- 23 service to the area to be able to provide this type of
- 24 setting in a rural community so that their loved ones





- don't always have to drive to a bigger city to go and see
- 2 their loved ones that are actually in a long-term care
- 3 facility. Here I'll pass it to Tisha.
- 4 MS. FLOWERS: Members of the board. My name is
- 5 Tisha Flowers. I'm the marketing director for both
- 6 WellCare Home of Highland and Breeze Nursing. As Susan was
- 7 stating earlier, we were both there when the prior
- 8 facility closed. It was a very, very bad time. You know,
- 9 we had a need back then and we still have that same need
- 10 now. The other facility in Highland, Illinois is full
- 11 right now, so there isn't anywhere else they have to go
- 12 outside of their own community if residents are looking
- 13 for a place to stay.
- 14 So right now, as of today's date, I have 17 residents
- 15 that are on the waiting list. Families that have contacted
- 16 us, wanting to place their loved ones. Some of them were
- 17 there before. Some of them are brand new and our building
- 18 sells itself. It is absolutely stunning. It was gorgeous
- 19 before and it's even more so now. We do offer hospice care
- 20 as well. So we, we have the full realm of everything that
- 21 is offered and it's all under one roof at Highland.
- 22 So we have some residents whose loved one lives on the
- 23 assistant side, and some residents live on the long-term
- 24 care side, and they can come and go and visit each other.



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1	Over in Breeze at the sister facility, we were able to
2	double that census since we took over. So there is a huge
3	need in our area right now for nursing homes.
4	CHAIRWOMAN SAVAGE: Okay, so based on the
5	information you provided about your Breeze facility that
6	was not on your original application, that did not give
7	our state board staff sufficient time to look at that
8	facility. We're going to do a few things. So may I have a
9	motion to end this debate on this particular permit
10	applicant?
11	DR. TANKSLEY: So moved.
12	CHAIRWOMAN SAVAGE: And a second.
13	MR. BURNETT: Second,
14	CHAIRWOMAN SAVAGE: George, if you could call the
15	role.
16	MR. ROATE: Thank you, Madam Chair. Mr.
17	Budde:
18	MR. BUDDE: Yes.
19	MR. ROATE: Thank you. Mr. Burnett.
20	MR. BURNETT: Yes.
21	MR. ROATE: Thank you. Mr. Fox.
22	MR. FOX: Yes.
23	MR. ROATE: Thank you. Ms. Hendrickson.
24	MS. HENDRICKSON: Yes.



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1	MR. ROATE: Thank you. David Katz.
2	MR. KATZ: Yes.
3	MR. ROATE: Thank you. Gary Kaatz.
4	MR. KAATZ: Yes.
5	MR. ROATE: Thank you. Ms. Legrand.
6	MS. LEGRAND: Yes.
7	MR. ROATE: Thank you. Dr. Tanksley.
8	DR. TANKSLEY: Yes.
9	MR. ROATE: Thank you. Ms. Hardy-Waller.
10	MS. HARDY-WALLER: Yes.
11	MR. ROATE: Thank you. Chairwoman Savage?
12	CHAIRWOMAN SAVAGE: Yes.
13	MR. ROATE: Thank you. That's 10 votes in
14	the affirmative.
15	CHAIRWOMAN SAVAGE: Okay, so that motion is
16	approved. And now may I have a motion to amend our
17	original motion on this applicant to postpone this
18	applicant until the next meeting?
19	DR. TANKSLEY: So moved.
20	MS. HENDRICKSON: Second.
21	CHAIRWOMAN SAVAGE: George.
22	MR. ROATE: Thank you, Madam Chair. Mr.
23	Budde:
24	MR. BUDDE: Yes.



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1 CHAIRWOMAN SAVAGE: One moment. Okay. George, if
2 you could call the roll on that motion that we just had.
3 MR. ROATE: Thank you, Madam Chair. Motion to
4 amend:
5 MR. BUDDE: Yes.
6 MR. ROATE: Thank you. Mr. Burnett.
7 MR. BURNETT: Yes.
8 MR. ROATE: Thank you. Mr. Fox.
9 MR. FOX: Yes
10 MR. ROATE: Thank you. Ms. Hendrickson.
11 MS. HENDRICKSON: Yes.
12 MR. ROATE: Thank you. David Katz?
13 MR. KATZ: Yes.
MR. ROATE: Thank you. Gary Kaatz?
15 MR. KAATZ: Yes.
16 MR. ROATE: Thank you. Ms. LeGrand.
17 MS. LEGRAND: Yes.
MR. ROATE: Thank you. Dr. Tanksley.
19 DR. TANKSLEY: Yes.
MR. ROATE: Thank you. Ms. Hardy-Waller.
MS. HARDY-WALLEN: Yes.
MR. ROATE: Thank you. Chairman Savage.
23 CHAIRWOMAN SAVAGE: Yes.
MR. ROATE: Thank you. That's 10 votes 10



- 1 votes to amend.
- 2 CHAIRWOMAN SAVAGE: Thank you. One moment. And
- 3 may I have another motion to pass the amended motion --
- 4 pass the amended motion to postpone until the May 9th,
- 5 2024 meeting. May I have a motion for that?
- 6 MR. BURNETT: So moved.
- 7 MS. LEGRAND: Second.
- 8 CHAIRWOMAN SAVAGE: Okay, George, if you could
- 9 call the roll.
- 10 MR. ROATE: Thank you, Madam Chair. Motion
- 11 made by Mr. Burnett, seconded by Ms. LeGrand.
- MR. ROATE: Mr. Budde.
- MR. BUDDE: Yes.
- 14 MR. ROATE: Thank you. Mr. Burnett.
- MR. BURNETT: Yes.
- 16 MR. ROATE: Thank you. Mr. Fox.
- MR. FOX: Yes.
- 18 MR. ROATE: Thank you. Ms. Hendrickson?
- MS. HENDRICKSON: Yes.
- 20 MR. ROATE: Thank you Mr. Katz, David Katz?
- 21 MR. KATZ: Yes. With a short editorial
- 22 comment. That'd be great going forward to figure out how
- 23 to be efficient with this stuff. And I'm not, I'm not sure
- 24 actually when the fault lies with us or with whatever, but



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      it, it, you know, we've been at this for a half hour and
 2
      we're going to have to do it again. So
 3
                   MR. ROATE:
                              Thank you. Gary Kaatz?
                   MR. KAATZ:
                              Yes.
                   MR. ROATE: Thank you. Ms. LeGrand?
                   MS. LEGRAND: Yes.
 6
7
                   MR. ROATE: Thank you. Dr. Tanksley.
                   DR. TANKSLEY: Yes.
 8
                   MR. ROATE: Thank you. Ms. Hardy-Waller.
                  MS. HARDY-WALLER: Yes.
10
                  MR. ROATE: Thank you. Chairwoman Savage?
11
12
                  CHAIRWOMAN SAVAGE:
                                      Yes.
                  MR. ROATE: Thank you. That's 10 votes to
13
14
     defer --
             CHAIRWOMAN SAVAGE: To postpone. Yes. Yes, sir.
15
             MR. USMAN: I just have one comment that Breeze
16
17
     facility that I purchased, that was after I submitted the
     application.
18
19
             MS. DOMINGUEZ: There, there is a, a process by
     which you could amend that in essence when it's a
20
21
     substantive change. So I think moving forward, you know,
22
     just for everyone, if a substantive change happens after
     your application has been submitted, please feel free to
23
24
     give us a call so we can avoid that. I mean, no one wants
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- 1 to spend the whole day here and then only to have your
- 2 application deferred. So I think, you know, that's fair if
- 3 it changed afterwards, everyone on the board had different
- 4 information and so now we're hearing very substantive new
- 5 information, right? And so we need some time to review it.
- 6 I would suggest that when you leave here give Mike and
- 7 George a call so they, you can go ahead and get the new
- 8 information and submit it so that we can get that
- 9 processed and reviewed by the time that we get back to the
- 10 May 9th meeting.
- 11 CHAIRWOMAN SAVAGE: Okay. So another
- 12 announcement. We are going to move our rules item on the
- 13 agenda to the May 9th, 2024 meeting; just so everyone
- 14 knows. Okay. So now we are going to move on to H-07 North
- 15 Suburban Pain and Spine Center in Des Plaines, Illinois.
- 16 Do we have a motion to approve project 23-043 for the
- 17 expansion of two surgical specialties to the existing
- 18 surgery center.
- MR. BURNETT: So moved
- MS. LEGRAND: Second.
- 21 CHAIRWOMAN SAVAGE: Okay. Once you all are
- 22 seated, if you could new people, introduce yourselves.
- 23 Spell your name for the court reporter and he shall swear
- 24 you in.

