



STATE OF ILLINOIS  
HEALTH FACILITIES AND SERVICES REVIEW BOARD

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

|  |  |                              |   |
|--|--|------------------------------|---|
| <b>DOCKET NO:</b><br>H-01                          | <b>BOARD MEETING:</b><br>June 24, 2025 | <b>PROJECT NO:</b><br>25-002 | <b>PROJECT COST:</b><br><br>Original: \$0 |
| <b>FACILITY NAME:</b><br>Advocate Trinity Hospital |  | <b>CITY:</b><br>Chicago      |   |
| <b>TYPE OF PROJECT:</b> Substantive                |  |                              | <b>HSA:</b> VI                            |

**PROJECT DESCRIPTION:** The Applicants (Advocate Health and Hospitals Corporation d/b/a Advocate Trinity Hospital, Advocate Aurora Health, Inc., and Advocate Health, Inc.) propose discontinuing a 205-bed acute care hospital at 2320 East 93rd Street, Chicago, Illinois. This project has no cost, and the expected completion date is June 25, 2029.

Information regarding this Application for a Permit can be found at this link:

<https://hfsrb.illinois.gov/project.25-002-advocate-trinity-hospital--discontinuation.html>

## EXECUTIVE SUMMARY

### PROJECT DESCRIPTION:

- The Applicants (Advocate Health and Hospitals Corporation d/b/a Advocate Trinity Hospital, Advocate Aurora Health, Inc., and Advocate Health, Inc.) propose discontinuing a 205-bed acute care hospital at 2320 East 93<sup>rd</sup> Street, Chicago, Illinois. This project has no cost, and the expected completion date is June 25, 2029.

### WHY THE PROJECT IS BEFORE THE STATE BOARD:

- The project is before the State Board because the project proposes to discontinue a health care facility under the jurisdiction of the State Board.

### PUBLIC HEARING/COMMENT:

- A public hearing was conducted on April 7, 2025, by the State Board. The State Board received approximately 70 letters of support. To date, no letters of opposition have been received by the State Board.

### CONCLUSIONS:

- There are nine hospitals in the A-03 Hospital Planning Area. There is a calculated excess of 660 medical-surgical beds, 18 intensive care beds, and 53 obstetric beds in this Hospital Planning Area.
- The Applicants state that the primary reasons for discontinuation are insufficient volume and demand to sustain a hospital of the current size in the A-03 Hospital Planning Area. The current hospital infrastructure is outdated and incapable of being efficiently modernized. According to the Applicants, the current Advocate Trinity Hospital building can no longer operate and withstand the extensive investment needed to continue providing high-level clinical care for residents of this service area. The current hospital building is at the end of its useful life and is no longer appropriate for continued investment. When built approximately 100 years ago, this building was never designed to accommodate today's advanced technology, patient volume, or modern care practices. According to the Applicants, over \$120M in facility investment is needed over the next 15 years to sustain the critical infrastructure on the campus. Given the advanced age of the building, numerous critical issues would remain unaddressed. Issues like patient privatization, bed and operating room size, IT connectivity, and the replacement of critical mechanical components would still exist.
- The proposed discontinuation will not create a calculated need for medical-surgical and obstetric beds in the A-03 Hospital Planning Area. However, discontinuing intensive care services will create **a need for six beds** in the A-03 Hospital Planning Area.

| Criterion                            | Non-Compliant   |
|--------------------------------------|---|
| Criterion 1110.290 - Discontinuation | Discontinuing intensive care services will create a calculated need for six intensive care beds in the A-03 Hospital Planning Area. |



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STATE BOARD STAFF REPORT

#25-002

Advocate Trinity Hospital

| APPLICATION SUMMARY/CHRONOLOGY                |  |
|---|--|
| Applicants                                    | Advocate Health and Hospitals Corporation d/b/a Advocate Trinity Hospital, Advocate Aurora Health, Inc., and Advocate Health, Inc. |
| Facility Name                                 | Advocate Trinity Hospital  |
| Location                                      | 2320 East 93 <sup>rd</sup> Street, Chicago, Illinois   |
| Application Received                          | January 24, 2025   |
| Application Deemed Complete                   | January 28, 2025   |
| Review Period Ends                            | May 28, 2025   |
| Permit Holder                                 | Advocate Health and Hospitals Corporation d/b/a Advocate Trinity Hospital, Advocate Aurora Health, Inc., and Advocate Health, Inc. |
| Operating Entity                              | Advocate Health and Hospitals Corporation d/b/a Advocate Trinity Hospital,   |
| Owner of the Site                             | Advocate Health and Hospitals Corporation d/b/a Advocate Trinity Hospital,   |
| Project Completion Date                       | June 25, 2029  |
| Expedited Review                              | No   |
| Can Applicants Request a Deferral?            | Yes  |
| Has the State Board extended the Application? | No   |

**I. The Proposed Project**

The Applicants (Advocate Health and Hospitals Corporation d/b/a Advocate Trinity Hospital, Advocate Aurora Health, Inc., and Advocate Health, Inc.) propose discontinuing a 205-bed acute care hospital at 2320 East 93<sup>rd</sup> Street, Chicago, Illinois. This project has no cost, and the expected completion date is June 25, 2029.

**II. Summary of Findings**

- A. The State Board Staff finds the proposed project is **not** in conformance with the provisions of Part 1110.
- B. Part 1120 does not apply to this project.

**III. General Information**

The Applicants are Advocate Health and Hospitals Corporation d/b/a Advocate Trinity Hospital, Advocate Aurora Health, Inc., and Advocate Health, Inc. **Advocate Health and Hospitals Corporation d/b/a Advocate Trinity Hospital** is the licensee and owner of the site. Advocate Aurora Health, Inc., a Delaware nonprofit corporation, owns and operates primarily not-for-profit healthcare facilities in Illinois and Wisconsin. **Advocate Aurora Health, Inc.** is the sole corporate member of Advocate Health Care Network, an Illinois

Not-for-profit corporation, and Aurora Health Care, Inc., a Wisconsin nonstock not-for-profit corporation. In December 2022, Advocate Aurora Health Inc. and Atrium Health, Inc., a North Carolina not-for-profit corporation, entered into a joint operating agreement under which they created **Advocate Health, Inc.**, a Delaware nonprofit corporation. Advocate Aurora Health, Inc. maintains its separate legal existence, and no sale, transfer, or other conveyance of assets or assumption of debt and liabilities occurred in connection with the formation of Advocate Health, Inc. This substantive project is subject to Part 1110. Part 1120 does not apply to this project. This expected completion date is June 25, 2029.

#### IV. Health Service Area

The Advocate Trinity Hospital is in the City of Chicago and Hospital Planning Area A-03. The A-03 Hospital Planning Area consists of City of Chicago Community Areas of Douglas, Oakland, Fuller Park, Grand Boulevard, Kenwood, Near South Side, Washington Park, Hyde Park, Woodlawn, South Shore, Chatham, Avalon Park, South Chicago, Burnside, Calumet Heights, Roseland, Pullman, South Deering, East Side, Garfield Ridge, Archer Heights, Brighton Park, New City, West Elsdon, Gage Park, Clearing, West Lawn, West Englewood, Englewood, Chicago Lawn and Greater Grand Crossing.

The A-03 Hospital Planning Area has a calculated excess of 660 medical-surgical beds, 18 intensive care beds, and 53 obstetric beds. Table One outlines the existing number of beds, the calculated need, and the current excess of beds for the three bed service categories being discontinued. Should the State Board approve this discontinuation, there will be an excess of 502 medical-surgical beds and 30 obstetric beds, and a need for six intensive care beds. Table One shows the effect of the discontinuation on the Inventory of Beds and Services.

| <b>TABLE ONE</b>                                 |         |                 |         |                 |         |        |        |
|--|---------|-----------------|---------|-----------------|---------|--------|--------|
| Beds in A-03 Hospital Planning Area              |         |                 |         |                 |         |        |        |
| Service  | Current | Calculated Need | Current | Trinity         | Current | Excess | Beds   |
| Category   | Beds    | Beds            | Excess* | Discontinuation | Beds    | Beds   | Needed |
| M/S  | 1,849   | 1,189           | 660     | -158            | 1,691   | 502    |        |
| ICU  | 278     | 260             | 18      | -24             | 254     |        | 6      |
| OB   | 112     | 59              | 53      | -23             | 89      | 30     |        |
| *Current Excess = Current beds – calculated need |         |                 |         |                 |         |        |        |

There are nine hospitals in the A-03 Hospital Planning Area. Six of the Hospitals are safety net hospitals.<sup>1</sup>

<sup>1</sup> A safety-net hospital (SNH) is defined as a hospital that provides a significant amount of care to patients with limited or no insurance, often serving as a provider of last resort. They are characterized by high percentages of Medicaid and uninsured patients, often leading to substantial uncompensated care costs. (Source CMS)

**TABLE TWO**  
Hospitals in the A-03 Hospital Planning Area

| Hospitals                            | Miles | MS Beds | %      | ICU Beds | %      | OB Beds | %     |
|--------------------------------------|-------|---------|--------|----------|--------|---------|-------|
| Advocate Trinity Hospital            | 0     | 158     | 51.30% | 23       | 35.10% | 24      | 25.0% |
| Holy Cross Hospital*                 | 6.3   | 204     | 25.80% | 20       | 24.40% | 0       | 0     |
| Insight Hospital & Medical Center*   | 9.2   | 289     | 10.00% | 30       | 3.30%  | 30**    | 0     |
| Jackson Park Hospital*               | 2.3   | 144     | 18.40% | 8        | 50.00% | 0       | 0     |
| Provident Hospital of Cook           | 6.1   | 79      | 23.90% | 6        | 18.80% | 0       | 0     |
| Roseland Community Hospital*         | 4.6   | 77      | 51.20% | 10       | 67.40% | 17      | 5.9%  |
| South Shore Hospital*                | 2.9   | 114     | 31.00% | 8        | 64.30% | 0       | 0     |
| St. Bernard Hospital *               | 3.9   | 104     | 39.60% | 10       | 44.80% | 0       | 0     |
| University of Chicago Medical Center | 3.5   | 570     | 74.60% | 158      | 55.10% | 42      | 62.0% |
| *Safety Net Hospital                 |       |         |        |          |        |         |       |
| **OB Beds Temporarily suspended.     |       |         |        |          |        |         |       |

The State Board is projecting a 4.43% decrease in the population in the A-03 Hospital Planning Area by 2030 and an increase of 28.3% in the over-65 population. The State Board estimates that Illinois will have 12,775,245 residents by 2030. This is a decrease from 12,785,745 in 2021, a .08% decrease. However, this decade, the over-65+ population in Illinois is expected to increase by 31%. Additionally, starting in 2021, the State Board is projecting an 8.2% decrease in the 15-44 age cohort by 2030 and a 13% decrease by 2035 in this planning area.

**TABLE THREE**  
Population Estimate for A-03 Hospital Planning Area and the  
State of Illinois  
IDPH State Demographer

|                   | <b>A-03 Hospital Planning Area</b> |                | <b>State of Illinois</b> |                  |
|-------------------|------------------------------------|----------------|--------------------------|------------------|
| <b>Year</b>       | <b>Total</b>                       | <b>65+</b>     | <b>Total</b>             | <b>+65</b>       |
| <b>2021 est.</b>  | 774,070                            | 106,320        | 12,785,745               | 2,060,629        |
| <b>2030 est.</b>  | <b>739,816</b>                     | <b>136,362</b> | <b>12,775,245</b>        | <b>2,695,534</b> |
| <b>Difference</b> | -34,254                            | 30,042         | 10,500                   | 634,905          |
| <b>%</b>          | -4.43%                             | +28.26%        | .08%                     | +31%             |

## V. Hospital

The table below outlines Advocate Trinity Hospital's utilization for 2019-2023.

**TABLE FOUR**  
Advocate Trinity Hospital  
Utilization  
2019 -2023

| Service                     | Beds |      | 2019        | 2020        | 2021        | 2022        | 2023        | Ave        | Occ.       |
|-----------------------------|------|------|-------------|-------------|-------------|-------------|-------------|------------|------------|
| Medical Surgical            | 158  | ADC  | 78.00       | 73.50       | 83.00       | 85.80       | 81.00       | 80.26      | 50.80%     |
|                             |      | ALOS | 6.60        | 7.00        | 7.80        | 8.20        | 8.30        | 7.58       |            |
| Intensive Care              | 24   | ADC  | 15.20       | 16.70       | 15.80       | 8.70        | 8.40        | 12.96      | 54.00%     |
|                             |      | ALOS | 1.80        | 2.10        | 1.90        | 1.60        | 2.30        | 1.94       |            |
| OB/GYN                      | 23   | ADC  | 4.80        | 2.50        | 5.10        | 4.60        | 5.70        | 4.54       | 25.00%     |
|                             |      | ALOS | 2.40        | 2.60        | 2.60        | 2.70        | 2.80        | 2.62       |            |
| Total Beds                  | 205  |      |             |             |             |             |             |            |            |
| <b>Surgery</b>              |      |      | <b>2019</b> | <b>2020</b> | <b>2021</b> | <b>2022</b> | <b>2023</b> | <b>Ave</b> | <b>Occ</b> |
| Rooms                       |      |      | 6           | 6           | 6           | 6           | 6           |            |            |
| Cases                       |      |      | 3,042       | 2,325       | 2,937       | 3,227       | 3,320       | 2,988      |            |
| Hours                       |      |      | 7,885       | 6,152       | 5,280       | 5,650       | 5,491       | 5,998      | 66.6%      |
| <b>Gastro</b>               |      |      |             |             |             |             |             |            |            |
| Rooms                       |      |      | 4           | 4           | 4           | 4           | 4           |            |            |
| Cases                       |      |      | 3,186       | 2,240       | 3,087       | 3,212       | 2,561       | 2,989      |            |
| Hours                       |      |      | 862         | 2,116       | 2,987       | 2,958       | 2,275       | 2,762      | 46.03%     |
| <b>Cardiac Cath</b>         |      |      |             |             |             |             |             |            |            |
| Labs                        |      |      | 2           | 2           | 2           | 2           | 2           |            |            |
| Procedures                  |      |      | 642         | 556         | 619         | 721         | 593         | 632        |            |
| <b>Emergency Department</b> |      |      |             |             |             |             |             |            |            |
| Stations                    |      |      | 27          | 27          | 27          | 27          | 27          |            |            |
| ED Visits                   |      |      | 41,320      | 32,905      | 30,269      | 27,563      | 26,476      | 33,187     | 61.45%     |
| Outpatient Visits to Campus |      |      | 77,467      | 57,725      | 92,023      | 83,431      | 86,491      | 78,199     |            |

## VI. Background of the Applicant and Purpose of the Project

- a) Criterion 1110.110 (a) - Background of Applicant
- b) Criterion 1110.110 (b) - Purpose of the Project

### A) Background of the Applicants

An applicant shall document the qualifications, background, character, and financial resources to adequately provide a proper service for the community and demonstrate that the project promotes the orderly and economic development of healthcare facilities in the State of Illinois that avoids unnecessary duplication of facilities or services. [20 ILCS 3960/2]

The Applicants provided a listing of all Illinois-licensed healthcare facilities they own. The Illinois Department of Public Health licenses Advocate Trinity Hospital, which has been accredited by the DNV Hospital Accreditation Program and given a three-star rating by the Medicare Compare website.

The Applicants attest there has been no “adverse action” (as that term is defined in Section 1130.140 of the Illinois Health Facilities and Services Review Board (HFSRB) rules) against any Illinois health care facility owned and/or operated by the Applicants, during the three years immediately before the filing of this application. The Applicants hereby authorize the HFSRB and the Illinois Department of Public Health to access information that may be required to verify any documentation or information submitted in response to the requirements of this subsection or to obtain any documentation or information that the HFSRB or the Illinois Department of Public Health finds pertinent to this subsection. The Applicants have demonstrated that they have the *qualifications, background, character, and financial resources to adequately provide a proper service for the community.*

**B) Purpose of the Project**

The applicant shall document that the project will provide health services that improve the health care or well-being of the market area population to be served. The applicant shall define the planning area, market area, or other area according to the applicant's definition.

This project will discontinue a 205-bed acute care hospital on the South Side of Chicago in Planning Area A-03.

**VII. Section 1110.290 Discontinuation – Review Criteria**

These criteria pertain to discontinuing categories of service and health care facilities.

**A) Information Requirements – Review Criterion**

The applicant shall provide at least the following information:

- 1) Identification of the categories of service and the number of beds, if any, that are to be discontinued.
- 2) Identification of all other clinical services that are to be discontinued.
- 3) The anticipated date of discontinuation for each identified service or the entire facility.
- 4) The anticipated use of the physical plant and equipment after discontinuation occurs.
- 5) The anticipated disposition and location of all medical records about the services being discontinued, and the length of time the documents will be retained.
- 6) For applications involving discontinuation of an entire facility, certification by an authorized representative that all questionnaires and data required by HFSRB or the Illinois Department of Public Health (IDPH) (e.g., annual questionnaires, capital expenditures surveys, etc.) will be provided through the date of discontinuation and that the required information will be submitted no later than 60 days following the date of discontinuation.

**1. Clinical Services**

Advocate Trinity Hospital has 205 authorized beds. The categories of service to be discontinued are:

- (1) Medical/Surgical (158 beds),
- (2) Intensive Care Unit (24 beds),
- (3) Obstetrics/Gynecology (23 beds), and
- (4) Cardiac Catheterization services (2 Labs).

Other clinical services that will be discontinued at the current hospital will be as follows:

- LDRP Rooms: 9 (included in 23 OB beds)
- C-Section Rooms: 2 rooms

- Normal Newborn Nursery: 18 Level 1 Beds
- 6 Operating Rooms
- Recovery Rooms: Stage 1, 7 stations; Stage 2, 7 stations.
- Procedure Rooms: 4 GI, 1 Cystoscopy.
- Emergency Service: 27 Stations
- Imaging:
  - o General Radiology/Fluoroscopy: 4 units
  - o Nuclear Medicine: 2 units
  - o Mammography: 3 units
  - o Ultrasound: 6 units
  - o Angiography: 2 units
  - o CT: 2 units
  - o MRI: 1 unit
- Laboratory • Pharmacy • Hemodialysis • Physical Therapy • Occupational Therapy

## **2. Plant and Land**

The physical plant will be demolished and returned to an open site for future use. The Applicants state they will collaborate with community leaders and stakeholders to determine an appropriate use for the site and land. If possible, the existing equipment will be evaluated for reuse at the replacement hospital or another facility. The remaining equipment will be traded, sold, donated, or discarded.

## **3. Medical Records**

Paper medical records are stored at an off-site storage facility. If needed, they can be requested from the off-site storage facility, which delivers the records to the requesting site. Electronic records are stored on the Epic system and will continue to be accessible to Advocate Trinity Hospital at the new replacement facility after discontinuing the existing facility.

### **B) Reasons for Discontinuation**

The applicant shall document that the discontinuation is justified by providing data that verifies that one or more of the following factors (and other factors, as applicable) exist concerning each service being discontinued:

- 1) Insufficient volume or demand for the service.
- 2) Lack of sufficient staff to adequately provide the service.
- 3) The facility or the service is not economically feasible, and continuation impairs the facility's financial viability.
- 4) The facility or the service does not comply with licensing or certification standards.

The Applicants state that the primary reasons for discontinuation are insufficient volume and demand to sustain a hospital of the current size in the A-03 Hospital Planning Area. The current hospital infrastructure is outdated and incapable of being efficiently modernized. According to the Applicants, the current Advocate Trinity Hospital building can no longer operate and withstand the extensive investment needed to continue providing high-level clinical care for residents of this service area. The current hospital building is at the end of its useful life and is no longer appropriate for continued investment. When built approximately 100 years ago, this building was never designed to accommodate today's



advanced technology, patient volume, or modern care practices. According to the Applicants, over \$120M in facility investment is needed over the next 15 years to sustain the critical infrastructure on the campus. Given the advanced age of the building, numerous critical issues would remain unaddressed. Issues like patient privatization, bed and operating room size, IT connectivity, and the replacement of critical mechanical components would still exist.

### C) Impact on Access – Review Criterion

The applicant shall document whether discontinuing each service or the entire facility will hurt access to care for residents of the facility's market area. For purposes of this Section, the facility's market area is the established radii outlined in 77 Ill. Adm. Code 1100.510(d). Factors that indicate an adverse impact upon access to service for the population of the facility's market area include, but are not limited to, the following:

- 1) The service will no longer exist within the established radii outlined in 77 Ill. Adm. Code 1100.510(d) of the applicant facility.
- 2) Discontinuing the service will create or increase a shortage of beds or services, as calculated in the Inventory of Health Care Facilities, which is described in 77 Ill Adm. Code 1100.70, which can be found on HFSRB's website.
- 3) Facilities or a shortage of other service categories determined by the provisions of 77 Ill. Adm. Code 1100 or other Sections of this Part.

Nine hospitals are in the A-03 Hospital Planning Area, which has a calculated excess of 660 medical-surgical beds, 18 intensive care beds, and 53 obstetric beds. The proposed discontinuation will not create a calculated need for medical-surgical and obstetric beds, but the discontinuation of intensive care services will **create a need for six intensive care beds** in the A-03 Hospital Planning Area.

**TABLE FIVE**  
Hospitals in the A-03 Hospital Planning Area

| Hospitals                            | Miles | MS Beds | %      | ICU Beds | %      | OB Beds | %     |
|--------------------------------------|-------|---------|--------|----------|--------|---------|-------|
| Advocate Trinity Hospital            | 0     | 158     | 51.30% | 23       | 35.10% | 24      | 25.0% |
| Holy Cross Hospital*                 | 6.3   | 204     | 25.80% | 20       | 24.40% | 0       | 0     |
| Insight Hospital & Medical Center*   | 9.2   | 289     | 10.00% | 30       | 3.30%  | 30**    | 0     |
| Jackson Park Hospital*               | 2.3   | 144     | 18.40% | 8        | 50.00% | 0       | 0     |
| Provident Hospital of Cook           | 6.1   | 79      | 23.90% | 6        | 18.80% | 0       | 0     |
| Roseland Community Hospital*         | 4.6   | 77      | 51.20% | 10       | 67.40% | 17      | 5.9%  |
| South Shore Hospital*                | 2.9   | 114     | 31.00% | 8        | 64.30% | 0       | 0     |
| St. Bernard Hospital *               | 3.9   | 104     | 39.60% | 10       | 44.80% | 0       | 0     |
| University of Chicago Medical Center | 3.5   | 570     | 74.60% | 158      | 55.10% | 42      | 62.0% |

\*Safety Net Hospital

\*\*OB Beds Temporarily suspended, approved October 2023 by the State Board.

## Obstetric Beds

The Applicants are proposing the discontinuation of obstetric services at the hospital. Historical utilization at Advocate Trinity Hospital would justify **six obstetric beds** at the State Board's target occupancy of 75%. ( $4.5 \text{ ADC} \div 75\% = 6 \text{ beds}$ ). The failure to add obstetrics services at Advocate Trinity Hospital in Chicago could negatively affect women's health and healthcare access. It could lead to increased travel distances for prenatal care and delivery, potentially impacting continuity of care and access to specialty services. It could also increase the risk of women arriving at hospitals without transferred medical records, potentially delaying or complicating their care. It could exacerbate healthcare disparities in the South Side of Chicago.

| Beds |            | 2019 | 2020 | 2021 | 2022 | 2023 | Ave  | Occ. |
|------|------------|------|------|------|------|------|------|------|
| 23   | ADC        | 4.80 | 2.50 | 5.10 | 4.60 | 5.70 | 4.54 | 20%  |
|      | ALOS       | 2.40 | 2.60 | 2.60 | 2.70 | 2.80 | 2.62 |      |
|      | Births     | 628  | 352  | 638  | 555  | 646  | 564  |      |
|      | C-Sections | 132  | 81   | 124  | 112  | 142  | 118  |      |

The Applicants believe that to preserve the best experience and quality of care for maternal & infant patients is to have obstetrics delivery services provided at Advocate Christ Medical Center, which has capacity, a dedicated obstetrical Emergency Department, the highest level neonatal intensive care unit, and delivers more than 4,000 babies per year. The Applicants state that while planned newborn deliveries will no longer occur at Advocate Trinity Hospital following discontinuation, gynecologic and outpatient obstetrics services will be available at the new hospital facility. Transportation assistance will be available to help Advocate Trinity patients give birth at Advocate Christ Medical Center. The Applicants state that all pre- and post-natal care will remain in the Advocate Trinity Service Area, but the delivery will shift to Advocate Christ Medical Center. According to the Applicants, Advocate Health Care's new Ambulatory Forward Care Model will improve access to care for expecting mothers within Advocate Trinity's service area.

State Board Staff notes that, should the State Board approve this project, 59 obstetric beds (OB) will be available in this Hospital Planning Area (17 OB beds at Roseland Community Hospital and 42 OB beds at UChicago Medicine). Insight Hospital and Medical Center has been approved for 30 Obstetric beds, but those beds have been suspended due to the lack of an obstetrician.

Table Six below shows the 2023 utilization and the approximate distance from Advocate Trinity Hospital to Advocate Christ Medical Center (9.9 miles).

**TABLE SIX****Advocate Christ Medical Center 2023 Utilization**

|                    | <b>Authorized<br/>Beds</b> | <b>Staffed<br/>Beds</b> | <b>Admits</b> | <b>Days</b> | <b>Ob<br/>Days</b> | <b>ALOS</b> | <b>ADC</b> | <b>Authorized<br/>Occ</b> | <b>Staffed<br/>Occ</b> |
|--------------------|----------------------------|-------------------------|---------------|-------------|--------------------|-------------|------------|---------------------------|------------------------|
| Medical Surgical   | 405                        | 475                     | 24,352        | 147,719     | 7,041              | 6.40        | 424.00     | 104.70%                   | 89.30%                 |
| Pediatric          | 45                         | 45                      | 3,278         | 10,683      | 2,585              | 4.00        | 36.40      | 80.80%                    | 80.80%                 |
| Intensive Care     | 170                        | 170                     | 5,953         | 42,505      | 108                | 7.20        | 116.70     | 68.70%                    | 68.70%                 |
| OB/GYN             | 56                         | 56                      | 4,894         | 12,987      | 1,445              | 2.90        | 39.50      | 70.60%                    | 70.60%                 |
| Neonatal           | 61                         | 61                      | 139           | 15,806      | 0                  | 113.70      | 43.30      | 71.00%                    | 71.00%                 |
| AMI <sup>(1)</sup> | 39                         | 21                      | 651           | 5,017       | 0                  | 7.70        | 13.70      | 35.20%                    | 65.50%                 |
| Rehab              | 37                         | 37                      | 764           | 9,763       | 0                  | 12.80       | 26.70      | 72.30%                    | 72.30%                 |
| Total              | 813                        | 865                     | 40,031        | 244,480     | 11,179             |             |            |                           |                        |

## 1. Acute Mental Illness Service Discontinued E-051-22

- D)** The applicant shall provide copies of notification letters sent to other resources or health care facilities that provide the same services as those proposed for discontinuation and located within the established radii outlined in 77 Ill. Adm.. Code 1100.510(d). The notification letter must include at least the anticipated date of discontinuation of the service and the total number of patients that received care, or the number of treatments provided (as applicable) during the latest 24-month period.

Ten hospitals and 11 ASTCs were notified of the Hospital's discontinuation. The State Board has not received any responses. The Applicants have met the requirements of this criterion. Table Seven identifies the facilities that received letters.

**TABLE SEVEN****HOSPITAL**

|   |                |       | Beds |     |    |
|---|----------------|-------|------|-----|----|
|   |                | Miles | M/S  | ICU | OB |
| Jackson Park Hospital & Medical Center    | Chicago        | 4.4   | 144  | 8   |    |
| Roseland Community Hospital               | Chicago        | 4.9   | 77   | 10  | 17 |
| St. Bernard Hospital                      | Chicago        | 7.4   | 104  | 10  |    |
| South Shore Hospital Corporation          | Chicago        | 2.3   | 114  | 8   |    |
| The University of Chicago Medical Center  | Chicago        | 8.5   | 570  | 162 | 42 |
| Provident Hospital of Cook County         | Chicago        | 8.6   | 79   | 6   |    |
| Insight Chicago                           | Chicago        | 11.2  | 289  | 30  | 30 |
| Holy Cross Hospital                       | Chicago        | 9.5   | 204  | 20  |    |
| Christ Medical Center                     | Oak Lawn       | 9.9   | 437  | 170 | 44 |
| OSF Little Company of Mary Medical Center | Evergreen Park | 7.9   | 228  | 29  | 17 |

**ASTC**

|  |                  |      |  |  |  |
|--|------------------|------|--|--|--|
| Chicago Children's Surgery Center      | Chicago          | 8.9  |  |  |  |
| Hyde Park Same Day Surgicenter         | Chicago          | 6.5  |  |  |  |
| Midwest Eye Center                     | Calumet City     | 11.7 |  |  |  |
| NANI Vascular South                    | Alsip            | 17.2 |  |  |  |
| Novamed Surgery Center of Oak Lawn     | Chicago          | 23.5 |  |  |  |
| Oak Lawn Endoscopy Center              | Oak Lawn         | 24.4 |  |  |  |
| Premier Cardiac Surgery Center         | Merrionette Park | 10.3 |  |  |  |
| South Loop Endoscopy & Wellness Center | Chicago          | 11.7 |  |  |  |
| Surgery Center of Illinois             | Oak Lawn         | 24.4 |  |  |  |
| Surgicore                              | Chicago          | 3.2  |  |  |  |
| Vascular Access Centers of Illinois    | Chicago          | 19.5 |  |  |  |

## 25-002 Advocate Trinity Hospital - Chicago

