



STATE OF ILLINOIS HEALTH FACILITIES AND SERVICES REVIEW BOARD

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

BOARD MEETING: July 21, 2026	PROJECT NO: 26-014	PROJECT COST: Original: \$0
FACILITY NAME: St. Paul Senior Community	CITY: Belleville	
TYPE OF PROJECT: Substantive		HSA: XI

PROJECT DESCRIPTION: The Applicants, St Paul's Senior Community, LLC, and St Paul's Property, L.L.C., own and operate a 134-bed long-term care facility located at 1021 West E Street, Belleville, IL. The facility consists of 108 skilled care beds and 26 shelter care beds. The Applicants propose converting the 26 beds licensed for shelter care into 22 skilled nursing beds for a total of 130 long-term care beds at the facility. The expected completion date is approximately 90 days after project approval.

Information regarding this Application for Permit can be found at this link:
<https://hfsrb.illinois.gov/project.26-014-st-paul.html>

EXECUTIVE SUMMARY

PROJECT DESCRIPTION:

- The Applicants (St Paul's Senior Community, L.L.C., and St Paul's Property, L.L.C.) presently own and operate a 134-bed long-term care facility at 1021 West E Street, Belleville, Illinois. The facility consists of 108 skilled care beds and 26 shelter care beds¹. The Applicants propose converting the 26 shelter care beds to 22 skilled nursing beds for a total of 130 long-term care beds. There are no capital costs associated with this project, and no additional square footage will be added. The expected completion date is 90 days after State Board approval. The State Board does not have jurisdiction over shelter care beds.
- **St. Board Staff Notes:** The Applicants submitted a project cost and sources of funds statement that listed expenses for this project of \$95,744. These costs were not considered in the evaluation of this project because the Applicants will not capitalize these costs. The State Board has jurisdiction only over capital costs. (Source: Letter dated February 20, 2026, signed by Joseph Tutera – Manager)

BACKGROUND:

- In March 2013, the State Board approved the modernization of St. Paul's Senior Community, which included the construction of a new long-term care facility with 108 LTC beds and 26 shelter care beds on its current site, for \$28.8 million (Permit #13-003).
- In December 2019, St. Paul's Senior Community was purchased by Tutera Senior Living & Health Care. The facility is in Health Service Area XI and the St. Clair County Long-Term Care Planning Area.

WHY THE PROJECT IS BEFORE THE STATE BOARD:

- The project is before the State Board because the number of beds being requested exceeds the lesser of 10% or the 20-bed rule (20 ILCS 3960/5 (c)).

PUBLIC COMMENT:

- A public hearing was offered regarding this project, but none was requested. The State Board has received no letters of support or opposition to this project.

SUMMARY:

- When reviewing the expansion of an existing long-term care facility, the State Board does not consider the calculated bed need or excess in the planning area, service accessibility, unnecessary duplication of service, or maldistribution of service when considering St. Paul's Senior Community's request to convert 26 of its sheltered care beds to 22 skilled care beds.
- St. Paul Senior Community offers a continuum of care (independent living, assisted living, and long-term care). Residents often require higher levels of care as they get older. This conversion of shelter care beds to long-term care beds allows current residents to remain in familiar surroundings rather than moving elsewhere. The Illinois Department of Public Health rules state that facilities cannot keep residents who need skilled nursing care in sheltered care (assisted living) units. This conversion ensures residents receive the exact medical care they need while staying compliant with state regulations. Converting these beds maximizes the Applicants' ability to offer these services without disrupting a resident's community life. Additionally, the facility's 108 long-term care beds have been operating at over 90% utilization.

¹ In the continuum of long-term healthcare, sheltered care beds refer to designated residential beds within a facility that provides maintenance, oversight, and personal care, but does not provide routine, ongoing skilled nursing care. It is a licensed level of care designed for individuals who require a supervised, protective environment but remain medically stable. (77 Ill. Adm. Code 330 Sheltered Care Facilities)

- The 21 facilities owned and/or managed by Tutura had an average overall Medicare Star Rating of 2, which is below average. The State Board Staff notes that a low Medicare Star Rating (e.g., 1- or 2-star) does not prevent the State Board from approving the addition of 22 long-term care beds. The facilities are all licensed entities operating in good standing and have not been barred from participation in the Medicare or Medicaid programs. While the health inspection data for St. Paul's Senior Community reveal a pattern of operational and staffing deficiencies, the Applicants' proposed conversion of the shelter-care beds to long-term care beds will improve aging-in-place at the facility. By scaling back underutilized shelter-care capacity and expanding skilled-care capacity, the facility optimizes its occupancy rates. For a relatively minor cost, the project allows St. Paul's to adapt its existing structural footprint to capture the higher-acuity demand in the Metro East region.
- The Applicants addressed a total of nine criteria and have not met the following:

Non-Compliance	
Criteria	Explanation
Criterion 77 Ill. Adm. Code 1125.520-Background of the Applicant	The facility had an "AA" violation in 2024 and was fined \$50,000-see page 8-9 of this report. As defined in Section 1-128.5 of the Nursing Home Care Act, a "Type AA violation" means a violation of the Act or of the rules promulgated thereunder that creates a condition or occurrence relating to the operation and maintenance of a facility that proximately caused a resident's death.



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STATE BOARD STAFF REPORT #26-014 – St. Paul's Senior Community

APPLICATION/SUMMARY/CHRONOLOGY	
Applicants	St Paul's Senior Community, L.L.C. and St Paul's Property, L.L.C.
Facility Name	St Paul's Senior Community,
Location	1021 West E Street, Belleville, Illinois
Operating Entity/Licensee	St Paul's Senior Community, LLC
Owner of the Facility	St Paul's Senior Community, LLC
Application Received	March 23, 2026
Application Deemed Complete	April 20, 2026
Expedited Review?	No
Review Extended	No
Can Applicants Request Another Deferral?	Yes

I. Proposed Project

The Applicants (St Paul's Senior Community, LLC, and St Paul's Property, L.L.C.) presently own and operate a 134-bed long-term care facility located at 1021 West E Street, Belleville, IL 62220. The facility consists of 108 skilled care beds and 26 shelter care beds. The Applicants propose converting the 26 beds licensed for shelter care into 22 skilled nursing beds. The expected completion date is 90 days after State Board approval.

II. Summary of Findings

A. The State Board Staff finds the proposed project does **not** appear to be in conformance with the provisions of Part 1125 Subpart D.

B. The State Board Staff finds the provisions of Part 1125 Subpart F do not apply to this project.

III. General Information

St Paul's Senior Community, L.L.C., and St Paul's Property, L.L.C are the Applicants. St. Paul's Senior Community, L.L.C. is the operating entity licensee, and St. Paul's Property, L.L.C is the owner of the property. This is a substantive project subject to review under Part 1110 and Part 1120. The estimated project completion date is 90 days after approval. This would include the process and required notification for closure of the shelter care beds.

IV. Project Uses and Sources of Funds

The project cost is \$95,744 to be funded with cash for cosmetic improvements. The Applicants do not consider this a capital cost; therefore, this cost is not reviewable.

V. St. Clair County Long-Term Planning Area²

St. Paul Senior Community is in Health Service Area XI and the St. Clair County Long-Term Care Planning Area. According to the latest available inventory of healthcare services, there is an excess of 309 general nursing care beds in the Saint Clair County Long Term Care Planning Area. The population of St. Clair County is estimated to decrease by approximately 2.30% annually until 2031, from 248,820 to approximately 243,088 residents. The population aged 65 and over is projected to account for 21.7% of St. Clair County's population by 2031. Table One below lists the 2020 census, the 2026 estimate, and the 2031 population projection for the population 45 years and up. Table Two lists all long-term care facilities in the St. Clair County Long-Term Care Planning Area.

TABLE ONE						
Population Estimate and Projection St. Clair County						
Description	St. Clair County ⁽¹⁾					
	2020		2026		2031	
	Census	%	Estimate	%	Projection	%
Population by Age						
Total Population	257,400		248,820		243,088	
Age 45 - 54	31,433	12.21%	30,165	12.12%	30,752	12.65%
Age 55 - 64	36,251	14.08%	31,393	12.62%	28,238	11.62%
Age 65 - 74	25,712	9.99%	28,767	11.56%	28,879	11.88%
Age 75 - 84	11,740	4.56%	14,791	5.94%	18,201	7.49%
Age 85 and over	5,218	2.03%	4,795	1.93%	5,644	2.32%
Age 65 and over	42,670	16.58%	48,353	19.43%	52,724	21.69%
1. Information from Claritas						

² Bed need for a planning area is calculated by first determining the minimum and maximum utilization rates for the entire Health Service Area (HSA) in which the planning area is located. These rates are determined for three age groups: 0-64 years, 65-74 years, and 75 and over, by dividing the patient days for the age group by the HSA population for that age group. Minimum and maximum rates are set at 60% and 160% of the calculated HSA rate, respectively. Calculations are then made of the planning area's utilization rates for the three age groups. The calculated planning area rates are compared with the HSA's minimum and maximum rates. If the planning area rate is less than the minimum, the minimum rate applies; if the area rate exceeds the maximum, the maximum applies; otherwise, the area rate applies. For each age group, the rate is multiplied by the projected age-group population to calculate projected age-group patient days. The sum of these calculated patient days is first divided by 365 to determine the projected Average Daily Census, which is divided by 0.9 to adjust for the 90 percent target occupancy rate, to determine the projected number of beds needed for the planning area.

TABLE TWO ^{(1) (2)} Long-term care facilities in St. Clair County							
Facility	City	Beds	Star Rating	Total Days	Medicaid Days	Occupancy %	Medicaid % of Total Days
Autumn Meadows of Cahokia	Cahokia	150	1	32,084	25,463	58.60%	79.36%
Bria of Belleville	Belleville	140	1	34,699	94	67.90%	0.27%
Bria of Cahokia	Cahokia	133	1	38,380	35,426	79.06%	92.30%
Caseyville Nursing & Rehab Ctr.	Caseyville	150	1	32,583	29,687	59.51%	91.11%
Cedar Ridge Health and Rehab Ctr.	Lebanon	116	2	37,751	24,805	89.16%	65.71%
Evercare of Collinsville	Collinsville	94	1	28,688	26,867	83.61%	93.65%
Evercare of Swansea	Swansea	94	2	19,553	18,131	56.99%	92.73%
Freeburg Care Center	Freeburg	118	1	35,881	12,861	83.31%	35.84%
Helia Southbelt Healthcare	Belleville	156	1	38,632	30,111	67.85%	77.94%
Mascoutah Rehab and Nursing	Mascoutah	76	1	15,612	8,004	56.28%	51.27%
Memorial Care Center – Hospital	Belleville	82	5	21,879	6	73.10%	0.03%
Nexus at Mascoutah	Mascoutah	55	2	18,173	14,561	90.53%	80.12%
Nexus Pavilion at Belleville	Belleville	180	1	42,733	39,852	65.04%	93.26%
St Paul's Senior Community	Belleville	108	1	35,712	14,041	90.59%	39.32%
Evercare of Lebanon	Lebanon	90	2	26,454	20,990	80.53%	79.35%
		1,742	2	458,814	300,899	72.16%	65.58%

1. The number of days obtained from the 2024 IDPH LTC Survey Data.
2. Medicare Star Quality Rating taken from the Medicare Compare Website

VI. Long Term Care

Requirements for the Expansion of Long-Term Care Facility	
77 Ill. Adm. Code 1125.520	Background of the Applicant
77 Ill. Adm. Code 1125.320	Purpose of the Project
77 Ill. Adm. Code 1125.330	Alternatives to the Project
77 Ill. Adm. Code 1125.530(b)	Service to Planning Area Residents
77 Ill. Adm. Code 1125.550(a)(b)	Service Demand – Expansion of General Long-Term Care
77 Ill. Adm. Code 1125.590	Staffing Availability
77 Ill. Adm. Code 1125.600	Bed Capacity
77 Ill. Adm. Code 1125.620	Project Size
77 Ill. Adm. Code 1125.640	Assurances

A) **Background of the Applicants**

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 before 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 owned by that person or entity. (See Section 1125.140 for the definition of "adverse action".)

Tutera Senior Living & Health Care (Tutera), headquartered in Kansas City, Missouri, is a family-owned provider of senior living and healthcare services in Illinois. Tutera has owned and or managed Illinois facilities since 1990. Tutera currently owns or manages 29 facilities in Illinois. Tutera owns 19 long-term care facilities, with two others under receivership. The remaining facilities are assisted living facilities, over which the State Board has no jurisdiction.

The Applicants attest that the State Board can access any document necessary to verify the information submitted, including, but not limited to, official records of IDPH or other State agencies and records of nationally recognized accreditation organizations for the calendar year. The ownership of St. Paul's Senior Community is listed below.

Ownership	
Joseph C Tutera, Sr.	74%
Marian O Tutera	10%
Laura C Tutera-Tomlinson	4%
Hannah M Tutera	4%
Dominic F Tutera	4%
Joseph C Tutera, Jr.	4%
	100%

Source: Healthcare and Family Services

When addressing this criterion, Board Staff found that the requirement of being fit, willing, and able is addressed if the Applicant is a licensed provider of similar services in Illinois and those services provided by the Applicant are consistent with licensing and certification standards. The Board Staff looked at two sources to determine whether those services are

consistent with licensing and certification standards: Medicare's Care Compare website and IDPH complaints.

The Medicare Compare website assigns each nursing home a rating of between 1 and 5 stars in three categories: health inspections, staffing, and quality measures. The top 10 percent in each State receive a five-star rating; the middle 70 percent of facilities receive a two-, three-, or four-star rating, with an equal number (approximately 23.33 percent) in each rating category; and the bottom 20 percent receive a one-star rating.

In Illinois, nursing home violations are categorized by severity under the Nursing Home Care Act. Types "AA" and "A" are the most serious tiers, both resulting in automatic conditional licenses for at least six months. The Centers for Medicare & Medicaid Services (CMS) and the Department of Public Health identify insufficient staffing levels and poor infection control practices as the two most important and interconnected causes of serious deficiencies at long-term care facilities in Illinois.

Type AA Violations: Fatal Incidents

A Type AA violation is the most severe citation issued by the Illinois Department of Public Health (IDPH). These are cited when a facility's condition or occurrence proximately caused a resident's death. Failing to provide CPR according to an Advanced Directive or extreme neglect leading to a fatal fall. Fines can reach up to \$50,000 for a single occurrence.

Type A Violations: High Probability of Death or Serious Harm

A Type A violation is the next highest level and identifies dangerous conditions that have not necessarily resulted in death. These occur when there is a substantial probability that death or serious mental or physical harm will result, or if such serious harm has already occurred. Failure to monitor worsening medical conditions (like heart issues), improper resident transfers leading to broken limbs, or failure to prevent staff-on-resident abuse are examples. Facilities face fines typically up to \$12,500 per violation, though some recent reports show fines of \$25,000 for severe cases.

The Illinois Department of Public Health Division of Long-Term Care, as the State survey agency, conducts both recertification surveys (every 9-15 months) and complaint surveys (as often as needed) of all nursing homes in Illinois.

St Paul's Senior Community Violations- Summary

2025 Violations

The facility received multiple citations in 2025, primarily related to respiratory care, pain management, and incontinence care. The facility failed to provide ordered nebulizer treatments for 5 of 6 reviewed residents, resulting in one resident experiencing chest pain, shortness of breath, and dangerously low oxygen levels. The facility failed to assess and document pain levels for residents on as-needed pain medication; one resident reported being in pain without receiving a nursing assessment or relief. Residents were left in soiled clothing after bowel movements, and staff reportedly brought breakfast trays to residents

before cleaning them up. The facility failed to provide sufficient staffing to meet resident needs and failed to notify a family representative of a resident's pneumonia diagnosis.

2024 Violations

The most significant violation occurred in April 2024, leading to a \$50,000 fine and a Type AA citation. A single staff member attempted to transfer a resident who required a two-person assist. The resident fell, sustained bilateral femur (thigh) fractures, and died three days later. Federal regulators also imposed multiple fines during 2024, including \$83,317 in June and \$54,665 in April for various health citations. The facility failed to post daily nurse staffing information as required by federal law.

2023 Violations

Violations in 2023 focused on infection control and medication management. The facility failed to implement a program to monitor antibiotic use. The facility was cited for failing to ensure residents were free from significant medication errors. The facility failed to ensure food and drink were palatable and served at an appetizing temperature. A standard report in December 2023 resulted in a \$60,840 fine for six total deficiencies.

Table Three lists all long-term care facilities owned or managed by Tutura in Illinois, along with their star ratings and 2024 utilization. The facilities are all licensed entities operating in good standing and have not been barred from participation in the Medicare or Medicaid programs.

TABLE THREE ^{(1) (2)}
Long-term care facilities owned and or managed by Tutura in Illinois

Name of Facility	City	Beds	Star Rating (1)	Total Days	Medicaid Days	Occ. %	Medicaid %
Bethany Rehab Health Care Center	Dekalb	90	1	26,316	19,449	80.11%	73.91%
Carlinville Rehab and Health Care Center	Carlinville	98	1	27,658	16,879	77.32%	61.03%
Coulterville Rehab Health Care Center	Coulterville	75	4	25,421	11,289	92.86%	41.24%
Crystal Pines Rehab Health Care Center	Crystal Lake	114	1	29,314	20,153	70.45%	68.75%
Dixon Rehab Health Care Center	Dixon	97	2	28,956	17,092	81.79%	59.03%
El Paso Health Care Center	El Paso	123	1	36,416	32,702	81.11%	89.80%
Fair Oaks Rehab Health Care Center	South Beloit	78	4	21,801	11,809	76.58%	54.17%
Hillsboro Rehab Health Care Center	Hillsboro	121	1	31,548	20,620	71.43%	65.36%
Lakeland Rehab Health Care Center	Effingham	156	1	42,157	20,260	74.04%	48.06%
Mattoon Rehab Health Care Center	Mattoon	148	1	35,764	21,515	66.21%	60.16%
Metropolis Rehab Health Care Center	Metropolis	101	1	27,676	16,945	75.07%	61.23%
Moweaqua Rehab Health Care Center	Moweaqua	70	1	20,675	11,009	80.92%	53.25%
St Paul's Senior Community	Belleville	108	1	35,712	4,022	90.59%	11.26%
Batavia Rehab Health Care Center*	Batavia	63	2	11,582	8,816	50.37%	76.12%
Benton Rehab Health Care Center*	Benton	67	1	13,522	9,968	55.29%	73.72%
Cisne Rehab Health Care Center*	Cisne	35	2	7,632	4,552	59.74%	59.64%
Eastside Health Rehab Center*	Pittsfield	92	2	18,486	13,898	55.05%	75.18%
Flanagan Rehab Health Care Center*	Flanagan	43	3	10,632	7,844	67.74%	73.78%

TABLE THREE ^{(1) (2)}
Long-term care facilities owned and or managed by Tutura in Illinois

Name of Facility	City	Beds	Star Rating (1)	Total Days	Medicaid Days	Occ. %	Medicaid %
Fondulac Rehab Health Care Center*	East Peoria	98	1	23,756	18,204	66.41%	76.63%
Marigold Rehab Health Care Center*	Galesburg	172	1	28,445	19,856	45.31%	69.80%
Sunset Rehab Health Care Center*	Canton	115	1	30,149	24,671	71.83%	81.83%
Timbercreek Rehab Health Care Center *	Pekin	202	1	32,272	25,745	43.77%	79.78%
Total		2,266		565,890	357,298		

1. Star Rating: Medicare Compare Website
2. Utilization from the 2024 IDPH Annual Long Term Care Survey

*Following Petersen Health Care's financial restructuring and receivership proceedings, Tutura Senior Living & Health Care (operating via its management arm) assumed operational and management oversight for several former Petersen facilities in Illinois. Information on Petersen Health Care at the end of this report)

The State Board Staff notes that a low Medicare Star Rating (e.g., 1- or 2-star) does not prevent the State Board from approving the addition of 22 long-term care beds. The State Board Staff also notes that the health inspection score serves as a lagging three-year rolling indicator that does not capture real-time operational course corrections.

B) Purpose of the Project

The applicant shall document that the project will provide health services that improve the long-term nursing care or well-being of the population to be served in the market area. The applicant shall define the planning area, market area, or other area as the applicant deems appropriate.

a) The applicant shall address the purpose of the project, i.e., identify the issues or problems that the project is proposing to address or solve. Information to be provided should include, but is not limited to, identification of existing problems or issues that need to be addressed, as applicable and appropriate for the project. Examples of this information include:

The Applicants state that the purpose of the project is to convert 26 shelter care beds into 22 skilled care beds, bringing the total to 130 skilled care beds.

C) Alternatives to the Proposed Project

The applicant shall document that the proposed project is the most effective or least costly alternative for meeting the LTC needs of the population to be served.

- a) Alternative options should be addressed. Examples of alternative options include:
- 1) Proposing a project of greater or lesser scope and cost.
 - 2) Pursuing a joint venture or similar arrangement with one or more providers.
 - 3) Developing alternative settings to meet all or a portion of the project's intended purposes; and
 - 4) Utilizing other LTC resources that are available to serve all, or a portion of the population proposed to be served by the project.

The only alternatives considered were doing nothing or converting the shelter-care beds to skilled-care beds. The do-nothing alternative would not alleviate the over 90% utilization at the facility. Converting the shelter care beds to skilled care beds is the most cost-effective alternative available to the facility to alleviate the high utilization.

D) Service to Planning Area Residents

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.

The Applicants provided their referral history for the years 2024, 2025, and 2026 (48 days in total for 2026). The Applicants note that referrals from hospitals are all posted to a secure online portal. All area-wide LTC facilities are alerted to the contents of these hospital portals. Even if initially accepted, families still make the decision. Many referrals are not geographically convenient. In some cases, acceptance by both the long-term care or rehab facility and the family has been predetermined based on location and/or prior experience. The Applicants also receive referrals from home care agencies, independent living, and assisted living facilities. It appears, based on the information provided by the Applicants, that the proposed additional beds will serve the residents of the St. Clair County planning area.

Hospital Referral Sources

- Memorial Hospital-Belleville
- St. Elizabeths-O'Fallon
- Memorial Hospital Shiloh
- The Rehab Institute of Southern Illinois-O'Fallon
- Barnes-Jewish Christian-St. Louis, MO
- Missouri Baptist-St Louis, MO

Year	Referral History			
	Referred	Denied	Denied	Admitted
		No Beds	Other	
2024	2,712	500	289	364
2025	2,994	413	249	266
2026	404	87	39	22

E) 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 should document that the necessary staffing is available by providing letters of interest from prospective staff members, completed employment applications, or a narrative explaining how the proposed staffing will be achieved.

The Applicants provided a chart outlining the expected staffing requirements for the proposed expansion from 108 to 130 LTC beds. The Applicants believe they will have adequate staffing to meet the needs of the skilled nursing facility residents.

TABLE FOUR Staffing Plan		
Beds	108	130
Administrator	1 FTE	1 FTE
Director of Nursing	1 FTE	1 FTE
Asst. DON	1 FTE	1 FTE

TABLE FOUR		
Staffing Plan		
Beds	108	130
MDS Coordinator	1 FTE	1 FTE
Registered Nurse	2 FTE	2 FTE
Licensed Practical Nurse	12 FTE	13 FTE
Occupational Therapist	Contracted	
Physical Therapist	Contracted	
Speech/Hearing Therapist	Contracted	
Rehabilitation Aide	1 FTE	1 FTE
Certified Nursing Assistant	29 FTE	31 FTE
Social Services Director	1 FTE	1 FTE
Social Worker		
Scheduling Coordinator	1 FTE	1 FTE
Activity Director	1 FTE	1 FTE
Activity Assistant	2 FTE	2 FTE
Resident Services		
Office Staff		
Receptionist	1.5 FTE	1.5 FTE
Dietitian	Contracted	
Dietary Supervisor	1 FTE	1 FTE
Dietary Aide	9 FTE	9 FTE
Cook	3 FTE	3 FTE
Maintenance	3 FTE	3 FTE
Housekeeping	8 FTE	9 FTE
Pharmacist	Contracted	
Medical Director	Contracted	
Medical Record	1 FTE	1 FTE
Infection Control	1 FTE	1 FTE
Dentist		
Other: Social Service Assistant	1 FTE	1 FTE
Other: Adm. Coordinator	1 FTE	1 FTE
Other: Business Office	2 FTE	1 FTE
Other: Payroll	1 FTE	1 FTE

F) 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 two years.

The Applicants are proposing a general long-term care facility with 130 beds. The Applicants have met the requirements of this criterion.

H) Project Size

The applicant shall document that the proposed physical space 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 proposed expansion complies with this criterion, as the total project square footage is 90,433 square feet and the facility will comprise 130 beds, yielding an average of 695.6 square feet per bed, which is below the building gross square foot upper limit of 713 BGSF.

J) 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 assure 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 Applicants provided the necessary assurance that the proposed 130-bed long-term care facility will achieve and maintain a 90% occupancy rate.

VII. Financial Viability and Economic Feasibility

1125.800 - Estimated Total Project Cost

- A) All applicants shall address the requirements listed in this Section, as applicable. The applicant shall provide project cost information for each of the following components as applicable. When a project or any component of a project is to be accomplished by lease, donation, gift, or any other means, the fair market value or dollar value that would have been required for purchase, construction, or acquisition shall be included in the estimated total project cost.

Table Five below presents financial data for St. Paul's Senior Community Long-Term Care Facility.

TABLE FIVE ⁽¹⁾			
St. Paul's Senior Community			
Financial Information ⁽¹⁾			
Year	2024	2023	2022
Cash	\$22,308	-\$92,678	-\$38,134
Current Assets	\$1,195,799	\$669,240	\$1,430,026
Long Term Assets	\$14,648,207	\$15,467,451	\$14,975,342
Total Assets	\$15,844,006	\$16,136,691	\$16,405,368
Current Liabilities	\$7,980,694	\$7,732,576	\$7,104,733
Long Term Liabilities	\$14,666,580	\$14,175,124	\$13,993,630
Total Liabilities	\$22,647,274	\$21,907,700	\$21,098,363
Total Equity	-\$6,803,268	-\$5,771,009	-\$4,692,995
Total Revenue	\$14,571,996	\$13,971,799	\$12,524,188
Inpatient Care Revenue	\$8,695,847	\$7,872,933	\$6,318,850
Total Expenses	\$14,507,609	\$14,293,160	\$14,513,226
Net Income	\$64,387	-\$321,361	-\$1,989,038
Net Margin	0.44%	-2.30%	-15.88%

1. Information from HFS LTC Cost Reports.

Medicare

The Centers for Medicare & Medicaid Services created the Five-Star Quality Rating System. It provides a "snapshot" of a nursing home's quality to help families compare facilities. Ratings range from 1 star (much below average) to 5 stars (much above average).

The overall rating is derived from three critical areas:

- **Health Inspections:** This is the most heavily weighted component. It includes data from the three most recent annual inspections and investigations into complaints. Stars are awarded based on the number and severity of deficiencies found.
- **Staffing:** Measures the number of nursing hours provided to each resident per day by Registered Nurses (RNs), Licensed Practical Nurses (LPNs), and Certified Nursing Assistants (CNAs). It also accounts for staff turnover and resident needs.
- **Quality Measures:** Evaluates approximately 15 clinical indicators, including rates of falls, pressure ulcers, and unplanned hospitalizations, as well as successful transitions back home.

How the Overall Rating is Built

CMS follows a specific step-by-step process to calculate the final score:

- **Baseline:** Starts with the health inspection rating.
- **Staffing Adjustment:** Adds 1 star for high staffing (4–5 stars) or subtracts 1 star for very low staffing (1 star).
- **Quality Adjustment:** Adds 1 star for excellent quality measures (5 stars) or subtracts 1 star for poor ones (1 star).
- **Capping:** If a facility has a 1-star health inspection, its overall rating is capped at 2 stars, regardless of other scores. **Important Limitations**
- **State Comparisons:** Health inspection stars are ranked relative to other facilities in the same state, not nationally.
- **Snapshot Only:** Ratings cannot capture personal factors such as a facility's feel, food quality, or the ease of family visits.
- **New Facilities:** Some homes may be listed as too new to rate if they haven't undergone enough inspection cycles.

Petersen Health Care

At its peak before its restructuring and bankruptcy proceedings in 2024, Peoria-based Petersen Health Care owned and operated over 90 to nearly 100 facilities across Illinois, Missouri, and Iowa. Petersen Health Care filed for Chapter 11 bankruptcy protection in Delaware, owing over \$295 million to creditors. The filing followed years of pressures, including pandemic-related occupancy declines, severe nursing staff shortages, structural Medicaid reimbursement backlogs, and an October 2023 ransomware attack that crippled its billing systems. The portfolio was diverse, encompassing several types of senior care, including Skilled Nursing Facilities/Rehab Centers, Assisted Living Facilities (such as the Courtyard Estates network), Memory Care and Hospice facilities, and Specialized residential homes for individuals with intellectual and developmental disabilities.

Rather than reorganizing as a single entity, the bankruptcy court approved the systematic liquidation and sale of Petersen's portfolio of facilities to satisfy lenders. Skokie-based Cascade Capital Partners emerged as the primary bidder. The transactions officially finalized a massive \$99.5 million acquisition of a 55-facility portfolio by Cascade Capital Partners, transitioning those locations to new operational management. Beyond the primary Cascade transaction, smaller regional portfolios and individual facilities were auctioned to institutional lenders and local banks (such as Hickory Point Bank and the Bank of Farmington). For instance, the Courtyard Estates facilities in Canton, Sullivan, and Farmington were split into separate multi-million-dollar sales to distinct buyers. The legacy corporate footprint of Petersen Health Care has been effectively dismantled, leaving the entity with only a handful of independent living properties. In contrast, the vast majority of its former skilled nursing and assisted living facilities now operate under entirely new corporate umbrellas and regional operators.

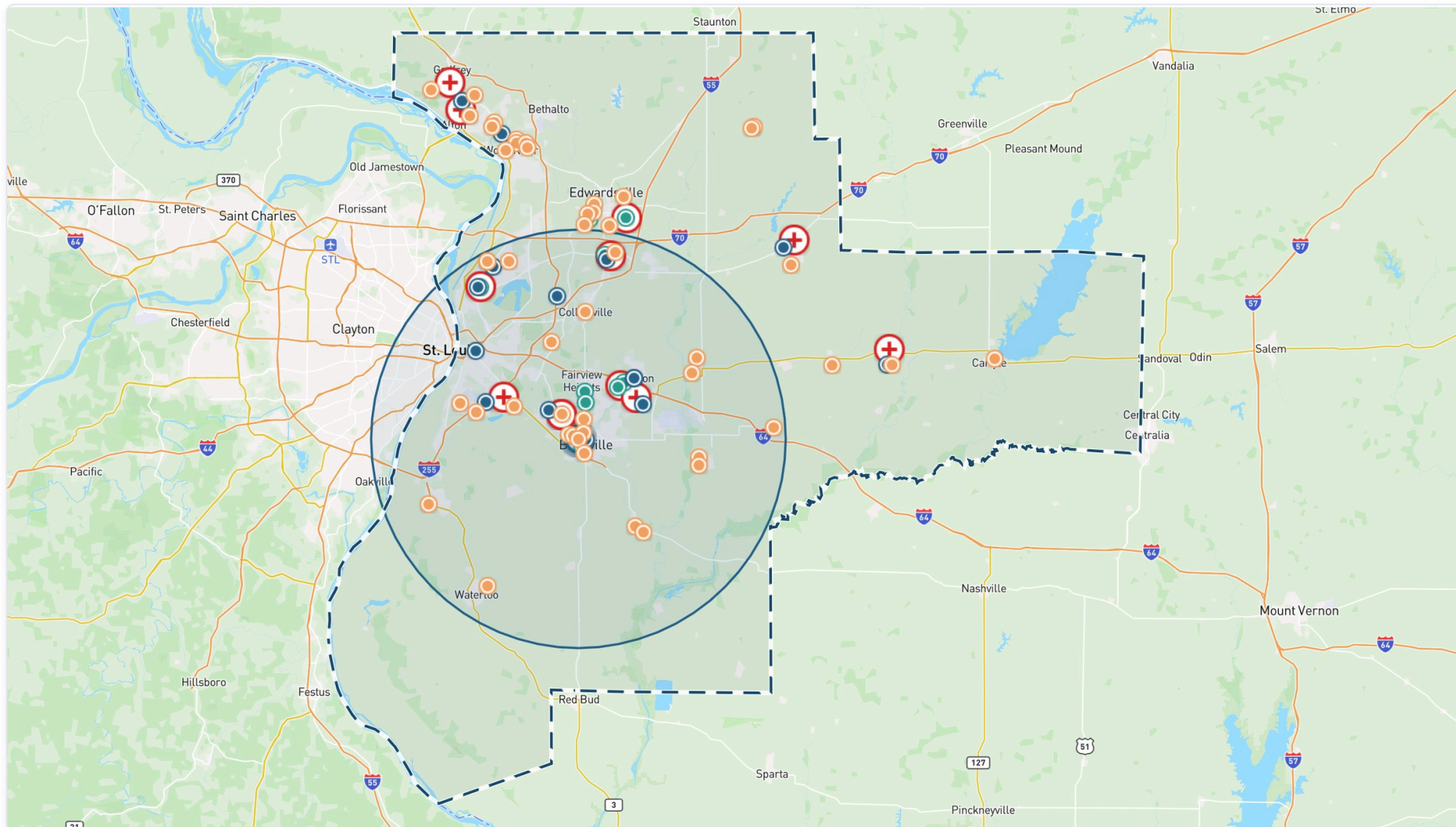


CON Radius & HPA Analysis Report

Geographic inventory of hospital, ASTC, ESRD, long-term care facilities — statutory radius and Health Planning Area shown together

St. Paul's Senior Community - Belleville Expand LTC facility

CENTER POINT	COUNTY	CLASSIFICATION	STATUTORY RADIUS	HPA	HSA
38.5202°N, 89.9952°W	St. Clair	Mid-size County (17-mile radius)	17 miles	F-01	11 - Metro East





Supply Comparison — Radius vs HPA

St. Clair County · Metro East

HSA 11 · Metro East | HPA F-01 | RADIUS 17 miles | DATA YEAR 2024

HOSPITALS

	RADIUS	HPA
Facilities	7	12
Total beds	1,065	1,404
M-S	732	968
ICU	70	93
OB / GYN	53	89
Pediatric	0	10
NICU	0	0
AMI	170	170
Rehab	40	74

ASTCS

	RADIUS	HPA
Facilities	7	4
Class C cases	3,779	1,617
Submissions on file	2	2

ESRD

	RADIUS	HPA
Facilities	11	13
Authorized stations	189	195
CMS-certified	189	195
In-center treatments	19,995	25,792
Year-end patients	589	597

LONG-TERM CARE

	RADIUS	HPA
Facilities	25	30
Licensed beds	2,347	2,196
Beds set-up	1,779	1,597
Beds occupied	1,481	1,365
Occupancy	83.2%	85.5%

Radius: totals from facilities within the 17-mile statutory radius around the center point. **HPA:** totals from every active facility whose Health Planning Area is F-01, regardless of distance. **Source:** 2024 HFSRB annual surveys.

Demographic Profile — Radius · HPA · Illinois · USA

St. Clair County · Metro East · ACS 2020–2024 5-year estimates

HSA 11 · Metro East

HPA F-01

RADIUS 17 miles

SOURCE ACS 5-year

STATUTORY RADIUS (17 MI)
Area-weighted tract interpolation

377,302 ± 5,396
Population **HIGH RELIABILITY**

HEALTH PLANNING AREA F-01
County sum + partial-county interpolation

586,697 ± 6,205
Population **HIGH RELIABILITY**

Benchmarks — Illinois: 12,694,798 · United States: 334,922,499 (official published ACS statewide / national aggregates, same vintage)

POPULATION & AGE				
	RADIUS	HPA	ILLINOIS	USA
Total population	377,302	586,697	12,694,798	334,922,499
Median age†	40.1	40.5	39.0	38.9
Under 18	22.8%	22.1%	21.8%	22.0%
Age 65+	17.7%	18.1%	17.0%	17.2%
Age 75+	6.9%	7.2%	7.0%	7.0%
Female	51.2%	51.1%	50.6%	50.5%

RACE & ETHNICITY				
	RADIUS	HPA	ILLINOIS	USA
White alone	66.8%	74.4%	61.0%	61.0%
Black alone	21.8%	15.8%	13.6%	12.2%
Asian alone	1.4%	1.2%	6.0%	6.0%
AIAN / NHPI / Other	2.3%	1.8%	8.6%	8.2%
Two or more races	7.8%	6.9%	10.9%	12.6%
Hispanic / Latino	5.4%	4.5%	18.8%	19.3%

INCOME & POVERTY				
	RADIUS	HPA	ILLINOIS	USA
Median household income†	\$81,211	\$82,027	\$83,390	\$80,734
Per-capita income	\$39,925	\$41,032	\$46,406	\$44,673
Below poverty	12.5%	11.6%	11.8%	12.5%
Age 65+ below poverty	11.7%	10.6%	11.3%	11.9%

HEALTH COVERAGE				
	RADIUS	HPA	ILLINOIS	USA
Uninsured (all ages)	5.0%	4.7%	6.9%	8.4%
Uninsured under 19	2.8%	2.6%	3.3%	5.5%
Uninsured 65+	0.3%	0.3%	0.9%	0.8%

DISABILITY & ACCESS				
	RADIUS	HPA	ILLINOIS	USA
With a disability	15.1%	15.1%	12.1%	13.3%
Disability, age 65+	33.3%	33.9%	31.5%	32.9%
Households w/o vehicle	7.0%	6.2%	11.0%	8.4%
Limited-English households	0.6%	0.6%	4.4%	4.3%

HOUSEHOLDS & EDUCATION				
	RADIUS	HPA	ILLINOIS	USA
Households	152,113	238,198	5,036,449	129,227,496
Avg. household size	2.44	2.41	2.46	2.53
Renter-occupied	29.6%	27.3%	32.9%	34.8%
Median home value†	\$200,713	\$201,585	\$263,300	\$332,700
High school grad+	93.6%	93.8%	90.5%	89.6%
Bachelor's+	32.1%	31.6%	37.8%	35.7%

Radius / HPA = ACS 2020–2024 5-year, area-weighted census-tract interpolation; **Illinois / USA** = exact published ACS aggregates. † Radius/HPA medians are weighted approximations (tract medians can't be re-summed); IL/USA medians are exact. Percentages recomputed from aggregated counts; scope reliability = combined population MOE (90% CI).



Facility Inventory

Hospitals and ambulatory surgical treatment centers within 17 miles of St. Clair County — 12 Hospitals, 9 ASTCs

COUNTY **St. Clair** | HSA **11·Metro East** | HPA **F-01** | RADIUS **17 miles** | DATA YEAR **2024**

#	TYPE	FACILITY NAME	CITY	DIST	M-S	ICU	OB	PED	NICU	AMI	REH	TOTAL
1	ASTC	Bel-Clair Ambulatory Surgical Treatment Center	Belleville	0.6	—	—	—	—	—	—	—	—
2	HOSP	Memorial Hospital Shiloh	Shiloh	2.4	264	26	17	—	—	—	—	307
3	HOSP	Protestant Memorial Medical Center, Inc. - DBA Memorial Hospital-Belleville	Belleville	2.4	—	—	—	—	—	—	—	0
4	ASTC	Eye Surgery Center, LLC	Swansea	3.0	—	—	—	—	—	—	—	—
5	ASTC	Metroeast Endoscopic Surgery Center	Fairview Heights	3.9	—	—	—	—	—	—	—	—
6	ASTC	Skin Cancer Surgery Center, LLC - DBA Dermatology & Skin Cancer Surgery Center	O'Fallon	5.3	—	—	—	—	—	—	—	—
7	HOSP	HSBS St Elizabeth's Hospital	O'Fallon	5.6	112	20	12	—	—	—	—	144
8	HOSP	The Rehabilitation Institute of Southern Illinois, LLC	Shiloh	5.8	—	—	—	—	—	—	40	40
9	ASTC	O'Fallon Surgical Center, LLC	O'Fallon	5.9	—	—	—	—	—	—	—	—
10	HOSP	Touchette Regional Hospital, Inc. - DBA Touchette Regional Hospital	Cahokia Heights	7.0	82	—	—	—	—	50	—	132
11	ASTC	Hope Clinic for Women, Ltd., The	Granite City	14.8	—	—	—	—	—	—	—	—
12	HOSP	American Healthcare Systems Illinois, LLC - DBA Gateway Regional Medical Center	Granite City	14.8	166	12	—	—	—	120	—	298
13	HOSP	Anderson Hospital	Maryville	15.2	108	12	24	—	—	—	—	144
14	ASTC	Eye Surgery Center of Maryville, LLC	Maryville	15.2	—	—	—	—	—	—	—	—
15	ASTC	Edwardsville Ambulatory Surg Ctr, LLC	Glen Carbon	18.0	—	—	—	—	—	—	—	—
16	ASTC	Anderson Surgery Center LLC	Edwardsville	18.5	—	—	—	—	—	—	—	—
17	HOSP	Anderson Rehabilitation Institute, LLC - DBA Anderson Rehabilitation Institute	Edwardsville	18.5	—	—	—	—	—	—	34	34
18	HOSP	St Joseph's Hospital	Highland	24.0	25	—	—	—	—	—	—	25
19	HOSP	St. Joseph's Hospital	Breese	26.5	40	—	6	6	—	—	—	52
20	HOSP	OSF Saint Anthony's Health Center	Alton	28.5	38	11	—	—	—	—	—	49
21	HOSP	Alton Memorial Hospital - DBA BJC Outpatient Center at Godfrey	Godfrey	30.9	133	12	30	4	—	—	—	179
Total — 12 Hospitals, 9 ASTCs					968	93	89	10	—	170	74	1,404



Bed Utilization Analysis

Authorized capacity compared to State Health Plan need formulas for the Health Planning Area and Health Service Area.

COUNTY **St. Clair** | HSA **11·Metro East** | HPA **F-01** | RADIUS **17 miles** | DATA YEAR **2024**

HEALTH PLANNING AREA · HPA F-01

Metro East

BED CATEGORY	AUTHORIZED	NEED	GAP	% OF NEED
Med-Surg/Pediatric	978	482	+496	202.9%
Obstetrics	89	44	+45	202.3%
Intensive Care Unit	93	86	+7	108.1%
Total	1,160	612	+548	189.5%

HEALTH SERVICE AREA · HSA 11

Metro East

BED CATEGORY	AUTHORIZED	NEED	GAP	% OF NEED
Rehabilitation	74	33	+41	224.2%
Acute Mental Illness	170	65	+105	261.5%
Total	244	98	+146	249.0%

Statutory radius: Per 77 Ill. Adm. Code 1100, radius follows county classification — 10 miles (Cook, DuPage, Kane, Lake, Will), 17 miles (mid-size), 21 miles (rural). **Gap analysis:** Positive values indicate surplus; parentheses indicate shortage. Need calculated per State Health Plan formulas. **Source:** 2024 Annual Hospital Survey responses submitted to HFSRB.

Surgical Volume Analysis

Combined hospital and ASTC operating-room volume within 17 miles of St. Clair County.

COUNTY **St. Clair** | HSA **11·Metro East** | HPA **F-01** | RADIUS **17 miles** | DATA YEAR **2024**

38,131
TOTAL SURGICAL CASES

9
HOSPITALS

4
ASTCS

32,735
HOSPITAL CASES

5,396
ASTC CASES

VOLUME BY SURGICAL SPECIALTY			
Within 17-mile radius of St. Clair County			
SURGICAL SPECIALTY	HOSPITALS	ASTCS	TOTAL CASES
General	9,008	5	9,013
Orthopedic	8,302	124	8,426
Ophthalmology	704	3,495	4,199
Urology	4,171	1	4,172
OB/GYN	3,875	7	3,882
Otolaryngology	1,431	475	1,906
Podiatry	1,376	78	1,454
Plastic Surgery	1,014	163	1,177
Cardiovascular	1,176	0	1,176
Gastroenterology	248	694	942
Neurosurgery	916	0	916
Oral/Maxillofacial	240	113	353
Thoracic	274	0	274
Pain Management	0	241	241
Total	32,735	5,396	38,131

TOP FACILITIES BY VOLUME			
Ranked by total surgical cases (2024)			
#	FACILITY	TYPE	CASES
1	Memorial Hospital Shiloh	HOSP	9,378
2	HSBS St Elizabeth's Hospital	HOSP	7,267
3	Anderson Hospital	HOSP	6,107
4	Alton Memorial Hospital - DBA BJC Outpatient Center at Godfrey	HOSP	4,802
5	O'Fallon Surgical Center, LLC	ASTC	3,085
6	OSF Saint Anthony's Health Center	HOSP	1,864
7	St. Joseph's Hospital	HOSP	1,247
8	Edwardsville Ambulatory Surg Ctr, LLC	ASTC	1,213
9	American Healthcare Systems Illinois, LLC - DBA Gateway Regional Medical Center	HOSP	930
10	St Joseph's Hospital	HOSP	849
11	Bel-Clair Ambulatory Surgical Treatment Center	ASTC	694
12	Anderson Surgery Center LLC	ASTC	404
13	Touchette Regional Hospital, Inc. - DBA Touchette Regional Hospital	HOSP	291

Hospital cases: combined inpatient and outpatient surgical cases from the 2024 Hospital Annual Survey. **ASTC cases:** Class C operating-room cases (general/regional anesthesia) from the 2024 ASTC Annual Survey.
Specialties: 14 standard surgical specialty categories tracked by HFSRB for both facility types.

ESRD Facility Inventory

Dialysis facilities within 17 miles of St. Clair County — 15 facilities.

COUNTY **St. Clair** | HSA **11·Metro East** | HPA **F-01** | RADIUS **17 miles** | DATA YEAR **2024**

15

ESRD FACILITIES

229

AUTHORIZED STATIONS

229

CMS-CERTIFIED

32,260

IN-CENTER TREATMENTS

688

YEAR-END PATIENTS

#	FACILITY NAME	CITY	DIST	AUTH STNS	CMS CERT	IN-CTR TX	EOY PTS
1	Metro-East Dialysis	Belleville	0.6	34	34	210	95
2	Fresenius Medical Care Belleville	BELLEVILLE	3.4	12	12	6,288	46
3	Shiloh Dialysis	Shiloh	6.0	16	16	210	62
4	O'Fallon Dialysis	O'Fallon	6.7	16	16	210	59
5	Fresenius Medical Care Regency Park	O'Fallon	6.7	20	20	9,081	59
6	Sauget Dialysis	SAUGET	8.2	22	22	180	45
7	DaVita Edgemont Dialysis	East St. Louis	11.1	12	12	210	46
8	DaVita Collinsville Dialysis	COLLINSVILLE	11.8	12	12	210	30
9	Maryville Dialysis	MARYVILLE	14.8	16	16	210	52
10	Fresenius Medical Care Madison County	GRANITE CITY	14.9	9	9	2,946	23
11	Granite City Dialysis	GRANITE CITY	15.7	20	20	240	72
12	Davita Northgrove Dialysis	HIGHLAND	22.9	12	12	210	18
13	Fresenius Medical Care Southwestern Illinois	East Alton	25.7	20	20	9,561	66
14	Fresenius Medical Care Breese	BREESE	26.0	8	8	2,494	15
15	Alton Dialysis	ALTON	29.2	—	—	—	—
Total — 15 facilities				229	229	32,260	688

Stations: authorized and CMS-certified counts are taken from the most recent measurement in the survey year (end-of-year preferred). **Treatments:** in-center treatments are the annual total; year-end patients is the 12/31 census. **Source:** 2024 ESRD Facility Annual Survey. **Suppressed columns:** set-up & staffed stations, isolation stations, nocturnal shift — no values reported across this result set.



Long-Term Care Facility Inventory

Nursing and long-term care facilities within 17 miles of St. Clair County — 47 facilities.

COUNTY **St. Clair** | HSA **11·Metro East** | HPA **F-01** | RADIUS **17 miles** | DATA YEAR **2024**

47

LTC FACILITIES

3,427

LICENSED BEDS

2,729

BEDS SET UP

2,276

BEDS OCCUPIED

83.4%

OCCUPANCY

2,281

RESIDENTS (12/31)

#	FACILITY NAME	CITY	DIST	LIC.	SET UP	OCC.	%	GEN. NURSING	ICF/DD	RESID.
1	ST PAUL'S SENIOR COMMUNITY	BELLEVILLE	0.0	108	108	100	92.6%	108	—	116
2	Nexus Pavilion at Belleville	BELLEVILLE	0.5	180	180	116	64.4%	180	—	112
3	Evercare of Swansea	SWANSEA	0.7	—	—	—	—	—	—	—
4	BRIA OF BELLEVILLE	BELLEVILLE	0.9	—	—	—	—	—	—	—
5	HELIA SOUTHBELT HEALTHCARE	BELLEVILLE	1.2	156	156	99	63.5%	156	—	99
6	EverVella of Swansea	SWANSEA	1.7	120	120	75	62.5%	120	—	75
7	MEMORIAL CARE CENTER	BELLEVILLE	2.4	82	—	57	69.5%	82	—	57
8	DAMMERT GERIATRIC CENTER	BELLEVILLE	5.9	57	57	46	80.7%	57	—	78
9	CASEYVILLE NURSING & REHAB CTR	CASEYVILLE	8.2	—	—	—	—	—	—	—
10	FREEBURG TERRACE	FREEBURG	8.5	16	16	16	100.0%	—	16	16
11	BRIA OF CAHOKIA	CAHOKIA	8.7	133	133	108	81.2%	133	—	108
12	FREEBURG CARE CENTER	FREEBURG	9.3	118	101	95	94.1%	118	—	95
13	Nexus at Mascoutah	MASCOUTAH	10.0	55	55	47	85.5%	55	—	47
14	Mascoutah Rehab and Nursing	MASCOUTAH	10.1	—	—	—	—	—	—	—
15	AUTUMN MEADOWS OF CAHOKIA	CAHOKIA	10.1	—	—	—	—	—	—	—
16	Evercare of Collinsville	COLLINSVILLE	10.4	98	90	69	76.7%	98	—	69
17	CEDAR RIDGE HEALTH & REHAB CTR	LEBANON	10.8	116	116	98	84.5%	116	—	0
18	Evercare of Lebanon	LEBANON	11.8	90	90	54	60.0%	90	—	54
19	Nexus at Columbia	COLUMBIA	13.4	—	—	—	—	—	—	—
20	OAK HILL	WATERLOO	14.1	144	144	124	86.1%	144	—	124
21	MANOR COURT OF MARYVILLE	MARYVILLE	15.5	132	132	118	89.4%	132	—	118
22	Evercare at Stearns	GRANITE CITY	15.6	109	109	105	96.3%	109	—	105
23	CLINTON MANOR LIVING CENTER	NEW BADEN	16.1	547	86	77	89.5%	37	510	50
24	GRANITE NSG & REHAB CENTER (Inactive)	GRANITE CITY	16.3	86	86	77	89.5%	86	—	77
25	Evercare of Granite City	GRANITE CITY	16.3	—	—	—	—	—	—	—
26	MERIDIAN VILLAGE CARE CENTER	GLEN CARBON	17.5	70	—	62	88.6%	70	—	62
27	EDEN VILLAGE CARE CENTER	GLEN CARBON	17.6	107	107	54	50.5%	107	—	54
28	EDWARDSVILLE TERRACE	EDWARDSVILLE	18.4	16	16	15	93.8%	—	16	15
Total — 47 facilities				3,427	2,729	2,276	83.4%	2877	550	2,281

#	FACILITY NAME	CITY	DIST	LIC.	SET UP	OCC.	%	GEN. NURSING	ICF/DD	RESID.
29	LA BELLA OF EDWARDSVILLE	EDWARDSVILLE	18.6	120	120	108	90.0%	120	—	108
30	EVERCARE AT UNIVERSITY	EDWARDSVILLE	19.2	—	—	—	—	—	—	—
31	EVERCARE OF EDWARDSVILLE	EDWARDSVILLE	20.1	122	110	97	88.2%	122	—	183
32	AVISTON COUNTRYSIDE MANOR	AVISTON	21.6	96	96	62	64.6%	96	—	62
33	HIGHLAND HEALTH CARE CENTER	HIGHLAND	22.5	128	102	79	77.5%	128	—	79
34	LINTON TERRACE	WOOD RIVER	24.1	4	4	4	100.0%	—	4	4
35	MADISON TERRACE	WOOD RIVER	24.3	4	4	4	100.0%	—	4	4
36	THELMA TERRACE	WOOD RIVER	24.5	—	—	—	—	—	—	—
37	BRIA OF WOODRIVER	WOOD RIVER	24.7	—	—	—	—	—	—	—
38	PERSHING TERRACE	WOOD RIVER	24.9	—	—	—	—	—	—	—
39	Evercare of Breese	BREESE	26.4	—	—	—	—	—	—	—
40	Nexus at Alton	ALTON	26.4	—	—	—	—	—	—	—
41	ABERDEEN TERRACE	ALTON	26.7	—	—	—	—	—	—	—
42	ALTON MEMORIAL REHAB & THERAPY	ALTON	27.8	—	—	—	—	—	—	—
43	HITZ MEMORIAL HOME	ALHAMBRA	29.0	67	56	45	80.4%	67	—	45
44	ALHAMBRA REHAB & HEALTHCARE	ALHAMBRA	29.2	57	54	40	74.1%	57	—	40
45	LA BELLA OF ALTON	ALTON	29.3	180	176	138	78.4%	180	—	138
46	BRIA OF GODFREY	GODFREY	30.9	—	—	—	—	—	—	—
47	CARLYLE HEALTHCARE & SR LIVING	CARLYLE	34.7	109	105	87	82.9%	109	—	87
Total — 47 facilities				3,427	2,729	2,276	83.4%	2877	550	2,281

Bed counts: licensed, set-up, and occupied beds are summed across all reported levels of care. Occupancy uses set-up beds as the denominator when available, otherwise licensed beds. **Source:** 2024 LTC Annual Survey. Em-dash indicates no submission on file. **Suppressed columns:** facility type, nursing-sheltered beds, skilled beds for residents under 22 — no values reported across this result set.