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**RECEIVED**

June 26, 2011

JUL 27 2011

Mr. Michael Constantino  
Illinois Department of Public Health  
525 West Jefferson Street  
Springfield, IL 62761

**HEALTH FACILITIES &  
SERVICES REVIEW BOARD**

RE: Mercy Crystal Lake Hospital and Medical Center, Inc ("Mercy" or the "Applicant") - Project #10-089 (the "Project")


Dear Mr. Constantino:

Enclosed are two copies of the application modification that we previously discussed with you, your fellow staff members, HFSRB General Counsel and Assistant General Counsel, the HFSRB Administrator and the Department (IDPH) Deputy Director. Note that it has been prepared in accordance with your direction that we provide a "clean and complete" modification to our original application.

In an effort to assist your review, we have enclosed a listing of each page of the modified application that has been updated from the version originally submitted. We have also marked the enclosed copies in yellow at each point of update or modification.

Thank you for your consideration and should you need any additional information, please do not hesitate to contact me.

Sincerely,

  
Richard H. Gruber, Vice President  
Mercy Health System Corporation

Enclosures

**Mercy Crystal Lake Hospital and Medical Center  
Application for Permit, 70-Bed Hospital, Crystal Lake, IL**

**Updates to Application**

Section	Page Number	Notes on Changes
Narrative Description	4	Beds, Project Costs, Square Footage
Project Costs and Sources of Funds	5	All
Related Project Costs	6	Start-Up Costs, Completion Date
Cost Space Requirements	7	All
Service Specific, Med/Surg, OB, Peds, ICU	18	Proposed Beds
Index of Attachments	55	Page numbers updated accordingly
Attachment 7, Project Costs, Square Footage Summary	71-72	All
Attachment 7, Project Costs and Sources of Funds	73-74	All
Attachment 7, Project Costs, Moveable Equipment	75-81	All
Attachment 8, Project Status/Completion Schedules	82-87	Architectural Drawings
Attachment 9, Cost Space Requirements	88-89	Square Footage Summary
Attachment 12, Purpose of the Project	97-98, 103	Items 1, 3, and 4 (p. 97-88); Item 5i (p. 103-105)
Attachment 13, Alternatives	123, 125	Modified Alternative D
Attachment 14, Size of Project	128	Proposed DGFSF (all)
Attachment 14, Size of Project	129-149	Space Summary and Detail
Attachment 15, Project Services Utilization	150	All
Attachment 20, Med/Surg, OB, Peds, ICU	153-156	Revised Bed Need (p. 153); Projected Occupancy (p. 154); Projected Physician Referrals (p. 155); Projected Utilization (p. 156)
Attachment 37, Clinic Areas Other	166	Additional impact statement; Revised Utilization (all)
Attachment 42, Economic Feasibility	171-172	Cost and Gross Square Feet by Dept/Service (all)
Attachment 42, Economic Feasibility	173	Projected Operating Costs; Effect on Capital Costs

**ILLINOIS HEALTH FACILITIES AND SERVICES REVIEW BOARD  
APPLICATION FOR PERMIT**

**SECTION I. IDENTIFICATION, GENERAL INFORMATION, AND CERTIFICATION**

**This Section must be completed for all projects.**

**Facility/Project Identification**

Facility Name: Mercy Crystal Lake Hospital and Medical Center, Inc.		
Street Address: SE Corner of State Rte 31 & Three Oaks Road		
City and Zip Code: Crystal Lake, IL 60014		
County: McHenry	Health Service Area: 8	Health Planning Area: A-10

**Applicant /Co-Applicant Identification**

**[Provide for each co-applicant [refer to Part 1130.220].**

Exact Legal Name: Mercy Crystal Lake Hospital and Medical Center, Inc.	
Address: 2000 Lake Avenue, Woodstock, IL 60098	
Name of Registered Agent: Herbert Franks	
Name of Chief Executive Officer: Javon R. Bea	
CEO Address: 1000 Mineral Point Avenue, Janesville, WI 53548	
Telephone Number: 608-756-6112	

**Type of Ownership of Applicant/Co-Applicant**

<input checked="" type="checkbox"/>	Non-profit Corporation	<input type="checkbox"/>	Partnership	<input type="checkbox"/>	Other
<input type="checkbox"/>	For-profit Corporation	<input type="checkbox"/>	Governmental		
<input type="checkbox"/>	Limited Liability Company	<input type="checkbox"/>	Sole Proprietorship		

- o Corporations and limited liability companies must provide an **Illinois certificate of good standing**.
- o Partnerships must provide the name of the state in which organized and the name and address of each partner specifying whether each is a general or limited partner.

**APPEND DOCUMENTATION AS ATTACHMENT 1 IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.**

**Primary Contact**

[Person to receive all correspondence or inquiries during the review period]

Name: Dan Colby
Title: Vice President
Company Name: Mercy Health System Corporation, Inc.
Address: 1000 Mineral Point Avenue, Janesville, WI 53548
Telephone Number: 608-756-6123
E-mail Address: dcolby@mhsjvl.org
Fax Number: 608-756-6236

**Additional Contact**

[Person who is also authorized to discuss the application for permit]

Name: Richard H. Gruber
Title: Vice President
Company Name: Mercy Health System Corporation, Inc.
Address: 1000 Mineral Point Avenue, Janesville, WI 53548
Telephone Number: 608-756-6112
E-mail Address: rgruber@mhsjvl.org
Fax Number: 608-756-6236

**ILLINOIS HEALTH FACILITIES AND SERVICES REVIEW BOARD  
APPLICATION FOR PERMIT****SECTION I. IDENTIFICATION, GENERAL INFORMATION, AND CERTIFICATION**

**This Section must be completed for all projects.**

**Applicant /Co-Applicant Identification**

**[Provide for each co-applicant [refer to Part 1130.220].**

Exact Legal Name: Mercy Alliance, Inc.
Address: 1000 Mineral Point Avenue, Janesville, IL 53548
Name of Registered Agent: Dan Colby
Name of Chief Executive Officer: Javon R. Bea
CEO Address: 1000 Mineral Point Avenue, Janesville, WI 53548
Telephone Number: 608-756-6123

**Post Permit Contact**

[Person to receive all correspondence subsequent to permit issuance-THIS PERSON MUST BE EMPLOYED BY THE LICENSED HEALTH CARE FACILITY AS DEFINED AT 20 ILCS 3960]

Name: Dan Colby
Title: Vice President
Company Name: Mercy Health System Corporation, Inc.
Address: 1000 Mineral Point Avenue, Janesville, WI 53548
Telephone Number: 608-756-6123
E-mail Address: dcolby@mhsjvl.org
Fax Number: 608-756-6236

**Site Ownership**

[Provide this information for each applicable site]

Exact Legal Name of Site Owner: Mercy Health System Corporation, Inc.
Address of Site Owner: 1000 Mineral Point Avenue, Janesville, WI 53548
Legal Description of Site: SE Corner of State Rte 31 & Three Oaks Road, Crystal Lake, IL 60014
Proof of ownership or control of the site is to be provided as Attachment 2. Examples of proof of ownership are property tax statement, tax assessor's documentation, deed, notarized statement of the corporation attesting to ownership, an option to lease, a letter of intent to lease or a lease.
APPEND DOCUMENTATION AS <u>ATTACHMENT-2</u> , IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

**Operating Identity/Licensee**

[Provide this information for each applicable facility, and insert after this page.]

Exact Legal Name: Mercy Crystal Lake Hospital and Medical, Inc.
Address: 2000 Lake Avenue, Woodstock, IL 60098
<input checked="" type="checkbox"/> Non-profit Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> For-profit Corporation <input type="checkbox"/> Governmental <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Other
<ul style="list-style-type: none"> <li>o Corporations and limited liability companies must provide an Illinois Certificate of Good Standing.</li> <li>o Partnerships must provide the name of the state in which organized and the name and address of each partner specifying whether each is a general or limited partner.</li> <li>o <b>Persons with 5 percent or greater interest in the licensee must be identified with the % of ownership.</b></li> </ul>
APPEND DOCUMENTATION AS <u>ATTACHMENT-3</u> , IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

**Organizational Relationships**

Provide (for each co-applicant) an organizational chart containing the name and relationship of any person or entity who is related (as defined in Part 1130.140). If the related person or entity is participating in the development or funding of the project, describe the interest and the amount and type of any financial contribution.

APPEND DOCUMENTATION AS ATTACHMENT-4, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

**Flood Plain Requirements**

[Refer to application instructions.]

Provide documentation that the project complies with the requirements of Illinois Executive Order #2005-5 pertaining to construction activities in special flood hazard areas. As part of the flood plain requirements please provide a map of the proposed project location showing any identified floodplain areas. Floodplain maps can be printed at [www.FEMA.gov](http://www.FEMA.gov) or [www.illinoisfloodmaps.org](http://www.illinoisfloodmaps.org). **This map must be in a readable format.** In addition please provide a statement attesting that the project complies with the requirements of Illinois Executive Order #2005-5 (<http://www.hfsrb.illinois.gov>).

APPEND DOCUMENTATION AS ATTACHMENT -5, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

**Historic Resources Preservation Act Requirements**

[Refer to application instructions.]

Provide documentation regarding compliance with the requirements of the Historic Resources Preservation Act.

APPEND DOCUMENTATION AS ATTACHMENT-6, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

**DESCRIPTION OF PROJECT****1. Project Classification**

[Check those applicable - refer to Part 1110.40 and Part 1120.20(b)]

Part 1110 Classification:

- Substantive  
 Non-substantive

Part 1120 Applicability or Classification:  
[Check one only.]

- Part 1120 Not Applicable  
 Category A Project  
 Category B Project  
 DHS or DVA Project

**2. Narrative Description**

Provide in the space below, a brief narrative description of the project. Explain **WHAT** is to be done in **State Board defined terms**, **NOT WHY** it is being done. If the project site does **NOT** have a street address, include a legal description of the site. Include the rationale regarding the project's classification as substantive or non-substantive.

The applicants, Mercy Alliance, Inc. and Mercy Crystal Lake Hospital and Medical Center, Inc., an Illinois corporation, is requesting the Illinois Health Facilities and Services Review Board approve the establishment of a 70-bed hospital with adjoining facilities for a multi-specialty physician clinic in Crystal Lake, Illinois. The clinic space will include physician offices, treatment rooms, and support space.

The breakdown of beds is as follows:

Medical/Surgical	56
Obstetric	10
ICU	4
Total beds:	70

The estimated value of the construction contract is:	\$67,406,857
Total project cost is estimated to be:	\$115,114,525

Hospital square footage:	162,538
Clinic square footage:	76,694

Total square footage of the entire project:	239,232
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There is no physical address for the project site as of this date. The site is a 16-acre plot located on the east side of Illinois State Route 31 between Three Oaks Road and Raymond Road. The subject property is legally described as follows:

The North 1464.54 feet of the West 580.14 feet of the Southeast Quarter of Section 10 (exception therefrom that part taken for State Route 31 and Three Oaks Road), all in Township 43 North, Range 8 East of the Third Principal Meridian in McHenry County, Illinois.

The Parcel contains approximately 16.71 acres.

The project is substantial because it proposes the establishment of a new facility.

**Project Costs and Sources of Funds**

Complete the following table listing all costs (refer to Part 1120.110) associated with the project. When a project or any component of a project is to be accomplished by lease, donation, gift, or other means, the fair market or dollar value (refer to Part 1130.140) of the component must be included in the estimated project cost. If the project contains non-reviewable components that are not related to the provision of health care, complete the second column of the table below. Note, the use and sources of funds must equal.

**Project Costs and Sources of Funds**

USE OF FUNDS	CLINICAL	NONCLINICAL	TOTAL
Preplanning Costs			
Site Survey and Soil Investigation	\$34,560	\$10,440	\$45,000
Site Preparation	\$3,302,400	\$997,600	\$4,300,000
Off Site Work	\$230,400	\$69,600	\$300,000
New Construction Contracts	\$50,102,479	\$17,304,378	\$67,406,857
Modernization Contracts			
Contingencies	\$3,861,266	\$1,384,350	\$5,245,616
Architectural/Engineering Fees	\$2,171,962	\$778,697	\$2,950,659
Consulting and Other Fees			
Movable or Other Equipment (not in construction contracts)	\$16,965,333	\$5,960,792	\$22,926,125
Bond Issuance Expense (project related)	\$5,516,978	\$1,912,257	\$7,429,235
Net Interest Expense During Construction (project related)	\$1,752,545	\$607,455	\$2,360,000
Fair Market Value of Leased Space or Equipment			
Other Costs To Be Capitalized	\$1,613,274	\$537,759	\$2,151,032
Acquisition of Building or Other Property (excluding land)			
<b>TOTAL USES OF FUNDS</b>	<b>\$85,551,197</b>	<b>\$29,563,328</b>	<b>\$115,114,525</b>
SOURCE OF FUNDS	CLINICAL	NONCLINICAL	TOTAL
Cash and Securities			\$25,114,525
Pledges			
Gifts and Bequests			
Bond Issues (project related)			\$90,000,000
Mortgages			
Leases (fair market value)			
Governmental Appropriations			
Grants			
Other Funds and Sources			
<b>TOTAL SOURCES OF FUNDS</b>			<b>\$115,114,525</b>
<b>NOTE: ITEMIZATION OF EACH LINE ITEM MUST BE PROVIDED AT ATTACHMENT-7, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.</b>			



**Related Project Costs**

Provide the following information, as applicable, with respect to any land related to the project that will be or has been acquired during the last two calendar years:

Land acquisition is related to project	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Purchase Price: \$	_____	
Fair Market Value: \$	_____	
The project involves the establishment of a new facility or a new category of service		
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, provide the dollar amount of all <b>non-capitalized</b> operating start-up costs (including operating deficits) through the first full fiscal year when the project achieves or exceeds the target utilization specified in Part 1100.		
Estimated start-up costs and operating deficit cost is <u>\$4,000,000</u>		

**Project Status and Completion Schedules**

Indicate the stage of the project's architectural drawings:	
<input type="checkbox"/> None or not applicable	<input checked="" type="checkbox"/> Preliminary
<input type="checkbox"/> Schematics	<input type="checkbox"/> Final Working
Anticipated project completion date (refer to Part 1130.140): <u>July 30, 2014</u>	
Indicate the following with respect to project expenditures or to obligation (refer to Part 1130.140):	
<input type="checkbox"/> Purchase orders, leases or contracts pertaining to the project have been executed.	
<input type="checkbox"/> Project obligation is contingent upon permit issuance. Provide a copy of the contingent "certification of obligation" document, highlighting any language related to CON Contingencies	
<input checked="" type="checkbox"/> Project obligation will occur after permit issuance.	
APPEND DOCUMENTATION AS <u>ATTACHMENT-B</u> , IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.	

**State Agency Submittals**

Are the following submittals up to date as applicable:
<input checked="" type="checkbox"/> Cancer Registry
<input checked="" type="checkbox"/> APORS
<input checked="" type="checkbox"/> All formal document requests such as IDPH Questionnaires and Annual Bed Reports been submitted
<input checked="" type="checkbox"/> All reports regarding outstanding permits
<b>Failure to be up to date with these requirements will result in the application for permit being deemed incomplete.</b>

**Cost Space Requirements**

Provide in the following format, the department/area **DGSF** or the building/area **BGSF** and cost. The type of gross square footage, either **DGSF** or **BGSF**, must be identified. The sum of the department costs **MUST** equal the total estimated project costs. Indicate if any space is being reallocated for a different purpose. Include outside wall measurements plus the department's or area's portion of the surrounding circulation space. **Explain the use of any vacated space.**

Dept. / Area	Cost	Gross Square Feet (DGSF)		Amount of Proposed Total Gross Square Feet That Is:			
		Existing	Proposed	New Const.	Modernized	As Is	Vacated Space
<b>REVIEWABLE</b>							
Medical Surgical	\$10,371,840		32,412	32,412			
OB/Nursery/LDR	\$2,651,215		8,247	8,247			
Intensive Care	\$1,035,090		2,385	2,385			
Diagnostic Radiology	\$3,940,200		9,900	9,900			
MRI	\$1,610,565		3,405	3,405			
All Other Clinical	\$14,027,533		35,386	35,386			
Total Clinical	\$33,636,443		91,735	91,735			
<b>NON-REVIEWABLE</b>							
Administrative Support	\$8,501,277		36,461	36,461			
Operational Support	\$3,134,717		14,411	14,411			
All Other Non-Clinical	\$4,830,042		19,931	19,931			
Total Non-clinical	\$16,466,036		70,803	70,803			
<b>OTHER</b>							
Physician Clinic	\$17,304,378		76,694	76,694			
Sitework/Landscaping	\$4,300,000						
Design/Estimating Contingency and Other Construction	\$43,407,688						
<b>TOTAL</b>	<b>\$115,114,525</b>		<b>239,232</b>	<b>239,232</b>			

APPEND DOCUMENTATION AS ATTACHMENT-9, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

**Facility Bed Capacity and Utilization**

Complete the following chart, as applicable. Complete a separate chart for each facility that is a part of the project and insert following this page. Provide the existing bed capacity and utilization data for the latest **Calendar Year for which the data are available**. **Include observation days in the patient day totals for each bed service**. Any bed capacity discrepancy from the Inventory will result in the application being deemed **incomplete**.

<b>FACILITY NAME:</b>		<b>CITY:</b>			
<b>REPORTING PERIOD DATES:</b>		<b>From:</b>		<b>to:</b>	
<b>Category of Service</b>	<b>Authorized Beds</b>	<b>Admissions</b>	<b>Patient Days</b>	<b>Bed Changes</b>	<b>Proposed Beds</b>
Medical/Surgical					
Obstetrics					
Pediatrics					
Intensive Care					
Comprehensive Physical Rehabilitation		<b>N/A</b>			
Acute/Chronic Mental Illness					
Neonatal Intensive Care					
General Long Term Care					
Specialized Long Term Care					
Long Term Acute Care					
Other ((identify))					
<b>TOTALS:</b>					

**CERTIFICATION**

The application must be signed by the authorized representative(s) of the applicant entity. The authorized representative(s) are:

- o in the case of a corporation, any two of its officers or members of its Board of Directors;
- o in the case of a limited liability company, any two of its managers or members (or the sole manager or member when two or more managers or members do not exist);
- o in the case of a partnership, two of its general partners (or the sole general partner, when two or more general partners do not exist);
- o in the case of estates and trusts, two of its beneficiaries (or the sole beneficiary when two or more beneficiaries do not exist); and
- o in the case of a sole proprietor, the individual that is the proprietor.

This Application for Permit is filed on the behalf of Mercy Alliance, Inc. and Mercy Crystal Lake Hospital and Medical Center, Inc. \*

in accordance with the requirements and procedures of the Illinois Health Facilities Planning Act. The undersigned certifies that he or she has the authority to execute and file this application for permit on behalf of the applicant entity. The undersigned further certifies that the data and information provided herein, and appended hereto, are complete and correct to the best of his or her knowledge and belief. The undersigned also certifies that the permit application fee required for this application is sent herewith or will be paid upon request.

On behalf of Mercy Alliance, Inc.

On behalf of Mercy Crystal Lake Hospital and Medical Center, Inc.

Dan Colby  
SIGNATURE

Richard H. Gruber  
SIGNATURE

PRINTED NAME Dan Colby

PRINTED NAME Richard H. Gruber

PRINTED TITLE Vice President

PRINTED TITLE Secretary

Notarization:  
Subscribed and sworn to before me  
this 27th day of December, 2010

Notarization:  
Subscribed and sworn to before me  
this 27th day of December, 2010

Robert J. [Signature]  
Signature of Notary

Robert J. [Signature]  
Signature of Notary

Seal

Seal

\*Insert EXACT legal name of the applicant

### SECTION III - BACKGROUND, PURPOSE OF THE PROJECT, AND ALTERNATIVES - INFORMATION REQUIREMENTS

This Section is applicable to all projects except those that are solely for discontinuation with no project costs.

#### Criterion 1110.230 - Background, Purpose of the Project, and Alternatives

READ THE REVIEW CRITERION and provide the following required information:

##### BACKGROUND OF APPLICANT

1. A listing of all health care facilities owned or operated by the applicant, including licensing, and certification if applicable.
2. A certified listing of any adverse action taken against any facility owned and/or operated by the applicant during the three years prior to the filing of the application.
3. Authorization permitting HFSRB and DPH access to any documents necessary to verify the information submitted, including, but not limited to: official records of DPH or other State agencies; the licensing or certification records of other states, when applicable; and the records of nationally recognized accreditation organizations. **Failure to provide such authorization shall constitute an abandonment or withdrawal of the application without any further action by HFSRB.**
4. If, during a given calendar year, an applicant submits more than one application for permit, the documentation provided with the prior applications may be utilized to fulfill the information requirements of this criterion. In such instances, the applicant shall attest the information has been previously provided, cite the project number of the prior application, and certify that no changes have occurred regarding the information that has been previously provided. The applicant is able to submit amendments to previously submitted information, as needed, to update and/or clarify data.

APPEND DOCUMENTATION AS ATTACHMENT-11, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM. EACH ITEM (1-4) MUST BE IDENTIFIED IN ATTACHMENT 11. D

##### PURPOSE OF PROJECT

1. Document that the project will provide health services that improve the health care or well-being of the market area population to be served.
2. Define the planning area or market area, or other, per the applicant's definition.
3. Identify the existing problems or issues that need to be addressed, as applicable and appropriate for the project. [See 1110.230(b) for examples of documentation.]
4. Cite the sources of the information provided as documentation.
5. Detail how the project will address or improve the previously referenced issues, as well as the population's health status and well-being.
6. Provide goals with quantified and measurable objectives, with specific timeframes that relate to achieving the stated goals as appropriate.

For projects involving modernization, describe the conditions being upgraded if any. For facility projects, include statements of age and condition and regulatory citations if any. For equipment being replaced, include repair and maintenance records.

**NOTE: Information regarding the "Purpose of the Project" will be included in the State Agency Report.**

APPEND DOCUMENTATION AS ATTACHMENT-12, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM. EACH ITEM (1-6) MUST BE IDENTIFIED IN ATTACHMENT 12.

**ALTERNATIVES**

- 1) Identify **ALL** of the alternatives to the proposed project:

Alternative options **must** include:

- A) Proposing a project of greater or lesser scope and cost;
  - B) Pursuing a joint venture or similar arrangement with one or more providers or entities to meet all or a portion of the project's intended purposes; developing alternative settings to meet all or a portion of the project's intended purposes;
  - C) Utilizing other health care resources that are available to serve all or a portion of the population proposed to be served by the project; and
  - D) Provide the reasons why the chosen alternative was selected.
- 2) Documentation shall consist of a comparison of the project to alternative options. The comparison shall address issues of total costs, patient access, quality and financial benefits in both the short term (within one to three years after project completion) and long term. This may vary by project or situation. **FOR EVERY ALTERNATIVE IDENTIFIED THE TOTAL PROJECT COST AND THE REASONS WHY THE ALTERNATIVE WAS REJECTED MUST BE PROVIDED.**
  - 3) The applicant shall provide empirical evidence, including quantified outcome data that verifies improved quality of care, as available.

**APPEND DOCUMENTATION AS ATTACHMENT-13, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.**

**SECTION IV - PROJECT SCOPE, UTILIZATION, AND UNFINISHED/SHELL SPACE**

**Criterion 1110.234 - Project Scope, Utilization, and Unfinished/Shell Space**

READ THE REVIEW CRITERION and provide the following information:

**SIZE OF PROJECT:**

1. Document that the amount of physical space proposed for the proposed project is necessary and not excessive. **This must be a narrative.**
2. If the gross square footage exceeds the BGSF/DGSF standards in Appendix B, justify the discrepancy 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 B;
  - c. The project involves the conversion of existing space that results in excess square footage.

Provide a narrative for any discrepancies from the State Standard. A table must be provided in the following format with Attachment 14.

SIZE OF PROJECT				
DEPARTMENT/SERVICE	PROPOSED BGSF/DGSF	STATE STANDARD	DIFFERENCE	MET STANDARD?

APPEND DOCUMENTATION AS ATTACHMENT-14. IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

**PROJECT SERVICES UTILIZATION:**

This criterion is applicable only to projects or portions of projects that involve services, functions or equipment for which HFSRB has established utilization standards or occupancy targets in 77 Ill. Adm. Code 1100.

Document that in the second year of operation, the annual utilization of the service or equipment shall meet or exceed the utilization standards specified in 1110.Appendix B. A narrative of the rationale that supports the projections must be provided.

A table must be provided in the following format with Attachment 15.

UTILIZATION					
	DEPT./ SERVICE	HISTORICAL UTILIZATION (PATIENT DAYS) (TREATMENTS) ETC.	PROJECTED UTILIZATION	STATE STANDARD	MET STANDARD?
YEAR 1					
YEAR 2					

APPEND DOCUMENTATION AS ATTACHMENT-15. IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

**UNFINISHED OR SHELL SPACE:**

Provide the following information:

1. Total gross square footage of the proposed shell space;
2. The anticipated use of the shell space, specifying the proposed GSF tot be allocated to each department, area or function;
3. Evidence that the shell space is being constructed due to
  - a. Requirements of governmental or certification agencies; or
  - b. Experienced increases in the historical occupancy or utilization of those areas proposed to occupy the shell space.
4. Provide:
  - a. Historical utilization for the area for the latest five-year period for which data are available; and
  - b. Based upon the average annual percentage increase for that period, projections of future utilization of the area through the anticipated date when the shell space will be placed into operation.

APPEND DOCUMENTATION AS ATTACHMENT-16, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

**ASSURANCES:**

Submit the following:

1. Verification that the applicant will submit to HFSRB a CON application to develop and utilize the shell space, regardless of the capital thresholds in effect at the time or the categories of service involved.
2. The estimated date by which the subsequent CON application (to develop and utilize the subject shell space) will be submitted; and
3. The anticipated date when the shell space will be completed and placed into operation.

APPEND DOCUMENTATION AS ATTACHMENT-17, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.



**SECTION VII - SERVICE SPECIFIC REVIEW CRITERIA**

This Section is applicable to all projects proposing establishment, expansion or modernization of categories of service that are subject to CON review, as provided in the Illinois Health Facilities Planning Act [20 ILCS 3960]. It is comprised of information requirements for each category of service, as well as charts for each service, indicating the review criteria that must be addressed for each action (establishment, expansion and modernization). After identifying the applicable review criteria for each category of service involved, read the criteria and provide the required information, AS APPLICABLE TO THE CRITERIA THAT MUST BE ADDRESSED:

**A. Criterion 1110.530 - Medical/Surgical, Obstetric, Pediatric and Intensive Care**

1. Applicants proposing to establish, expand and/or modernize Medical/Surgical, Obstetric, Pediatric and/or Intensive Care categories of service must submit the following information:
2. Indicate bed capacity changes by Service: Indicate # of beds changed by action(s):

Category of Service	# Existing Beds	# Proposed Beds
<input checked="" type="checkbox"/> Medical/Surgical		56
<input checked="" type="checkbox"/> Obstetric		10
<input type="checkbox"/> Pediatric		
<input checked="" type="checkbox"/> Intensive Care		4

3. READ the applicable review criteria outlined below and **submit the required documentation for the criteria:**

APPLICABLE REVIEW CRITERIA	Establish	Expand	Modernize
1110.530(b)(1) - Planning Area Need - 77 Ill. Adm. Code 1100 (formula calculation)	X		
1110.530(b)(2) - Planning Area Need - Service to Planning Area Residents	X	X	
1110.530(b)(3) - Planning Area Need - Service Demand - Establishment of Category of Service	X		
1110.530(b)(4) - Planning Area Need - Service Demand - Expansion of Existing Category of Service		X	
1110.530(b)(5) - Planning Area Need - Service Accessibility	X		
1110.530(c)(1) - Unnecessary Duplication of Services	X		
1110.530(c)(2) - Maldistribution	X	X	
1110.530(c)(3) - Impact of Project on Other Area Providers	X		
1110.530(d)(1) - Deteriorated Facilities			X

<b>APPLICABLE REVIEW CRITERIA</b>	<b>Establish</b>	<b>Expand</b>	<b>Modernize</b>
1110.530(d)(2) - Documentation			X
1110.530(d)(3) - Documentation Related to Cited Problems			X
1110.530(d)(4) - Occupancy			X
1110.530(e) - Staffing Availability	X	X	
1110.530(f) - Performance Requirements	X	X	X
1110.530(g) - Assurances	X	X	X

APPEND DOCUMENTATION AS ATTACHMENT-20, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

The following Sections DO NOT need to be addressed by the applicants or co-applicants responsible for funding or guaranteeing the funding of the project if the applicant has a bond rating of A- or better from Fitch's or Standard and Poor's rating agencies, or A3 or better from Moody's (the rating shall be affirmed within the latest 18 month period prior to the submittal of the application):

- Section 1120.120 Availability of Funds – Review Criteria
- Section 1120.130 Financial Viability – Review Criteria
- Section 1120.140 Economic Feasibility – Review Criteria, subsection (a)

VIII. - 1120.120 - Availability of Funds

## Not Applicable

The applicant shall document that financial resources shall be available and be equal to or exceed the estimated total project cost plus any related project costs by providing evidence of sufficient financial resources from the following sources, as applicable: Indicate the dollar amount to be provided from the following sources:

_____	a) Cash and Securities – statements (e.g., audited financial statements, letters from financial institutions, board resolutions) as to: <ol style="list-style-type: none"> <li>1) the amount of cash and securities available for the project, including the identification of any security, its value and availability of such funds; and</li> <li>2) interest to be earned on depreciation account funds or to be earned on any asset from the date of applicant's submission through project completion;</li> </ol>
_____	b) Pledges – for anticipated pledges, a summary of the anticipated pledges showing anticipated receipts and discounted value, estimated time table of gross receipts and related fundraising expenses, and a discussion of past fundraising experience.
_____	c) Gifts and Bequests – verification of the dollar amount, identification of any conditions of use, and the estimated time table of receipts;
_____	d) Debt – a statement of the estimated terms and conditions (including the debt time period, variable or permanent interest rates over the debt time period, and the anticipated repayment schedule) for any interim and for the permanent financing proposed to fund the project, including: <ol style="list-style-type: none"> <li>1) For general obligation bonds, proof of passage of the required referendum or evidence that the governmental unit has the authority to issue the bonds and evidence of the dollar amount of the issue, including any discounting anticipated;</li> <li>2) For revenue bonds, proof of the feasibility of securing the specified amount and interest rate;</li> <li>3) For mortgages, a letter from the prospective lender attesting to the expectation of making the loan in the amount and time indicated, including the anticipated interest rate and any conditions associated with the mortgage, such as, but not limited to, adjustable interest rates, balloon payments, etc.;</li> <li>4) For any lease, a copy of the lease, including all the terms and conditions, including any purchase options, any capital improvements to the property and provision of capital equipment;</li> <li>5) For any option to lease, a copy of the option, including all terms and conditions.</li> </ol>
_____	e) Governmental Appropriations – a copy of the appropriation Act or ordinance accompanied by a statement of funding availability from an official of the governmental unit. If funds are to be made available from subsequent fiscal years, a copy of a resolution or other action of the governmental unit attesting to this intent;
_____	f) Grants – a letter from the granting agency as to the availability of funds in terms of the amount and time of receipt;
_____	g) All Other Funds and Sources – verification of the amount and type of any other funds that will be used for the project.
_____	<b>TOTAL FUNDS AVAILABLE</b>

IX. 1120.130 - Financial Viability

**Not Applicable**

All the applicants and co-applicants shall be identified, specifying their roles in the project funding or guaranteeing the funding (sole responsibility or shared) and percentage of participation in that funding.

Financial Viability Waiver

The applicant is not required to submit financial viability ratios if:

1. All of the projects capital expenditures are completely funded through internal sources
2. The applicant's current debt financing or projected debt financing is insured or anticipated to be insured by MBIA (Municipal Bond Insurance Association Inc.) or equivalent
3. The applicant provides a third party surety bond or performance bond letter of credit from an A rated guarantor.

See Section 1120.130 Financial Waiver for information to be provided

APPEND DOCUMENTATION AS ATTACHMENT-40, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

The applicant or co-applicant that is responsible for funding or guaranteeing funding of the project shall provide viability ratios for the latest three years for which **audited financial statements** are available and for the **first full fiscal year at target utilization, but no more than two years following project completion**. When the applicant's facility does not have facility specific financial statements and the facility is a member of a health care system that has combined or consolidated financial statements, the system's viability ratios shall be provided. If the health care system includes one or more hospitals, the system's viability ratios shall be evaluated for conformance with the applicable hospital standards.

Provide Data for Projects Classified as:	Category A or Category B (last three years)			Category B (Projected)
Enter Historical and/or Projected Years:				
Current Ratio				
Net Margin Percentage				
Percent Debt to Total Capitalization				
Projected Debt Service Coverage				
Days Cash on Hand				
Cushion Ratio				

Provide the methodology and worksheets utilized in determining the ratios detailing the calculation and applicable line item amounts from the financial statements. Complete a separate table for each co-applicant and provide worksheets for each.

2. Variance

Applicants not in compliance with any of the viability ratios shall document that another organization, public or private, shall assume the legal responsibility to meet the debt obligations should the applicant default.

APPEND DOCUMENTATION AS ATTACHMENT 41, IN NUMERIC ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

**X. 1120.140 - Economic Feasibility**

This section is applicable to all projects subject to Part 1120.

<p><b>A. Reasonableness of Financing Arrangements</b></p> <p>The applicant shall document the reasonableness of financing arrangements by submitting a notarized statement signed by an authorized representative that attests to one of the following:</p> <ol style="list-style-type: none"> <li>1) That the total estimated project costs and related costs will be funded in total with cash and equivalents, including investment securities, unrestricted funds, received pledge receipts and funded depreciation; or</li> <li>2) That the total estimated project costs and related costs will be funded in total or in part by borrowing because:             <ol style="list-style-type: none"> <li>A) A portion or all of the cash and equivalents must be retained in the balance sheet asset accounts in order to maintain a current ratio of at least 2.0 times for hospitals and 1.5 times for all other facilities; or</li> <li>B) Borrowing is less costly than the liquidation of existing investments, and the existing investments being retained may be converted to cash or used to retire debt within a 60-day period.</li> </ol> </li> </ol> <p><b>B. Conditions of Debt Financing</b></p> <p>This criterion is applicable only to projects that involve debt financing. The applicant shall document that the conditions of debt financing are reasonable by submitting a notarized statement signed by an authorized representative that attests to the following, as applicable:</p> <ol style="list-style-type: none"> <li>1) That the selected form of debt financing for the project will be at the lowest net cost available;</li> <li>2) That the selected form of debt financing will not be at the lowest net cost available, but is more advantageous due to such terms as prepayment privileges, no required mortgage, access to additional indebtedness, term (years), financing costs and other factors;</li> <li>3) That the project involves (in total or in part) the leasing of equipment or facilities and that the expenses incurred with leasing a facility or equipment are less costly than constructing a new facility or purchasing new equipment.</li> </ol> <p><b>C. Reasonableness of Project and Related Costs</b></p> <p>Read the criterion and provide the following:</p> <ol style="list-style-type: none"> <li>1. Identify each department or area impacted by the proposed project and provide a cost and square footage allocation for new construction and/or modernization using the following format (insert after this page).</li> </ol>	<p><b>Not Applicable</b></p>																																																
<p><b>COST AND GROSS SQUARE FEET BY DEPARTMENT OR SERVICE</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Department (list below)</th> <th style="width: 10%;">A</th> <th style="width: 10%;">B</th> <th style="width: 10%;">C</th> <th style="width: 10%;">D</th> <th style="width: 10%;">E</th> <th style="width: 10%;">F</th> <th style="width: 10%;">G</th> <th style="width: 10%;">H</th> <th style="width: 10%;">Total Cost (G + H)</th> </tr> <tr> <td></td> <td colspan="2">Cost/Square Foot New Mod.</td> <td colspan="2">Gross Sq. Ft. New Circ.*</td> <td colspan="2">Gross Sq. Ft. Mod. Circ.*</td> <td>Const. \$ (A x C)</td> <td>Mod. \$ (B x E)</td> <td></td> </tr> </thead> <tbody> <tr> <td>Contingency</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td><b>TOTALS</b></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> <p style="font-size: small;">* Include the percentage (%) of space for circulation</p>										Department (list below)	A	B	C	D	E	F	G	H	Total Cost (G + H)		Cost/Square Foot New Mod.		Gross Sq. Ft. New Circ.*		Gross Sq. Ft. Mod. Circ.*		Const. \$ (A x C)	Mod. \$ (B x E)		Contingency										<b>TOTALS</b>									
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Contingency																																																	
<b>TOTALS</b>																																																	

**D. Projected Operating Costs**

The applicant shall provide the projected direct annual operating costs (in current dollars per equivalent patient day or unit of service) for the first full fiscal year at target utilization but no more than two years following project completion. Direct cost means the fully allocated costs of salaries, benefits and supplies for the service. **\$3,150 per patient day**

**E. Total Effect of the Project on Capital Costs**

The applicant shall provide the total projected annual capital costs (in current dollars per equivalent patient day) for the first full fiscal year at target utilization but no more than two years following project completion. **\$54 per patient day**

**APPEND DOCUMENTATION AS ATTACHMENT 42, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.**

**XI. Safety Net Impact Statement**

**SAFETY NET IMPACT STATEMENT that describes all of the following must be submitted for ALL SUBSTANTIVE AND DISCONTINUATION PROJECTS:**

1. The project's material impact, if any, on essential safety net services in the community, to the extent that it is feasible for an applicant to have such knowledge.
2. The project's impact on the ability of another provider or health care system to cross-subsidize safety net services, if reasonably known to the applicant.
3. How the discontinuation of a facility or service might impact the remaining safety net providers in a given community, if reasonably known by the applicant.

**Safety Net Impact Statements shall also include all of the following:**

1. For the 3 fiscal years prior to the application, a certification describing the amount of charity care provided by the applicant. The amount calculated by hospital applicants shall be in accordance with the reporting requirements for charity care reporting in the Illinois Community Benefits Act. Non-hospital applicants shall report charity care, at cost, in accordance with an appropriate methodology specified by the Board.
2. For the 3 fiscal years prior to the application, a certification of the amount of care provided to Medicaid patients. Hospital and non-hospital applicants shall provide Medicaid information in a manner consistent with the information reported each year to the Illinois Department of Public Health regarding "Inpatients and Outpatients Served by Payor Source" and "Inpatient and Outpatient Net Revenue by Payor Source" as required by the Board under Section 13 of this Act and published in the Annual Hospital Profile.
3. Any information the applicant believes is directly relevant to safety net services, including information regarding teaching, research, and any other service.

**A table in the following format must be provided as part of Attachment 43.**

Safety Net Information per PA 96-0031			
CHARITY CARE			
Charity (# of patients)	Year	Year	Year
Inpatient			
Outpatient			
Total			
Charity (cost in dollars)	Year	Year	Year
Inpatient			
Outpatient			
Total			
MEDICAID			
Medicaid (# of patients)	Year	Year	Year
Inpatient			
Outpatient			
Total			

Medicaid (revenue)			
Inpatient			
Outpatient			
Total			

APPEND DOCUMENTATION AS ATTACHMENT-43, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

**XII. Charity Care Information**

Charity Care information **MUST** be furnished for **ALL** projects.

1. All applicants and co-applicants shall indicate the amount of charity care for the latest three **audited** fiscal years, the cost of charity care and the ratio of that charity care cost to net patient revenue.
2. If the applicant owns or operates one or more facilities, the reporting shall be for each individual facility located in Illinois. If charity care costs are reported on a consolidated basis, the applicant shall provide documentation as to the cost of charity care; the ratio of that charity care to the net patient revenue for the consolidated financial statement; the allocation of charity care costs; and the ratio of charity care cost to net patient revenue for the facility under review.
3. If the applicant is not an existing facility, it shall submit the facility's projected patient mix by payer source, anticipated charity care expense and projected ratio of charity care to net patient revenue by the end of its second year of operation.

Charity care" means care provided by a health care facility for which the provider does not expect to receive payment from the patient or a third-party payer. (20 ILCS 3960/3) Charity Care must be provided at cost.

A table in the following format must be provided for all facilities as part of Attachment 44.

CHARITY CARE			
	Year	Year	Year
Net Patient Revenue			
Amount of Charity Care (charges)			
Cost of Charity Care			

APPEND DOCUMENTATION AS ATTACHMENT-44, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

After paginating the entire, completed application, indicate in the chart below, the page numbers for the attachments included as part of the project's application for permit:

<b>INDEX OF ATTACHMENTS</b>		
<b>ATTACHMENT NO.</b>		<b>PAGES</b>
1	Applicant/Coapplicant Identification including Certificate of Good Standing	56-58
2	Site Ownership	59-62
3	Persons with 5 percent or greater interest in the licensee must be identified with the % of ownership.	63-65
4	Organizational Relationships (Organizational Chart) Certificate of Good Standing Etc.	66
5	Flood Plain Requirements	67-69
6	Historic Preservation Act Requirements	70
7	Project and Sources of Funds Itemization	71-81
8	Obligation Document if required	82-87
9	Cost Space Requirements	88-89
10	Discontinuation	NA
11	Background of the Applicant	90-96
12	Purpose of the Project	97-122
13	Alternatives to the Project	123-127
14	Size of the Project	128-149
15	Project Service Utilization	150
16	Unfinished or Shell Space	151
17	Assurances for Unfinished/Shell Space	152
18	Master Design Project	NA
19	Mergers, Consolidations and Acquisitions	NA
	<b>Service Specific:</b>	
20	Medical Surgical Pediatrics, Obstetrics, ICU	153-161
21	Comprehensive Physical Rehabilitation	
22	Acute Mental Illness	
23	Neonatal Intensive Care	
24	Open Heart Surgery	
25	Cardiac Catheterization	
26	In-Center Hemodialysis	
27	Non-Hospital Based Ambulatory Surgery	
28	General Long Term Care	
29	Specialized Long Term Care	
30	Selected Organ Transplantation	
31	Kidney Transplantation	
32	Subacute Care Hospital Model	
33	Post Surgical Recovery Care Center	
34	Children's Community-Based Health Care Center	
35	Community-Based Residential Rehabilitation Center	
36	Long Term Acute Care Hospital	
37	Clinical Service Areas Other than Categories of Service	162-166
38	Freestanding Emergency Center Medical Services	
	<b>Financial and Economic Feasibility:</b>	
39	Availability of Funds	167
40	Financial Waiver	168
41	Financial Viability	168
42	Economic Feasibility	169-173
43	Safety Net Impact Statement	174
44	Charity Care Information	175

\*Appendices 1 and 2 can be found on pages 176-260 and 261-266, respectively.





To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

MERCY CRYSTAL LAKE HOSPITAL AND MEDICAL CENTER, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JUNE 27, 2003, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE GENERAL NOT FOR PROFIT CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.

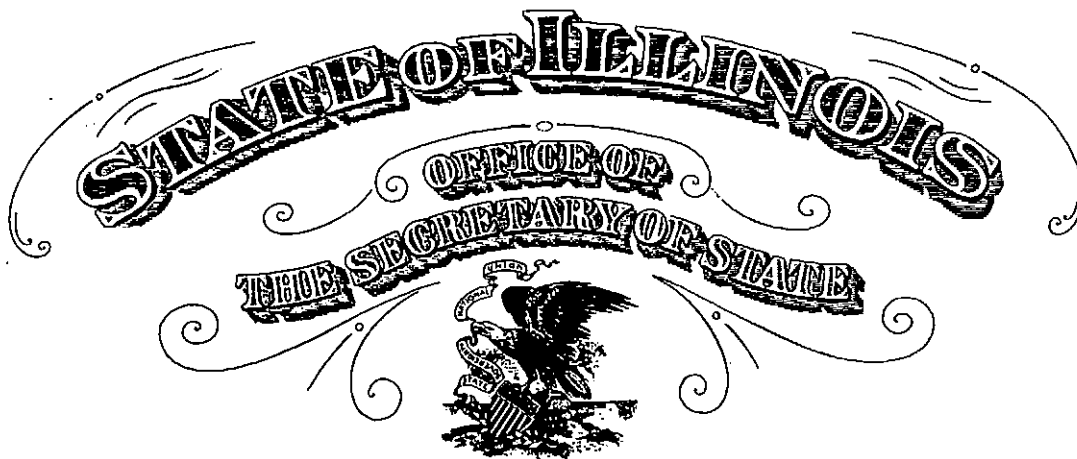
In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 22ND day of DECEMBER A.D. 2010



Jesse White

SECRETARY OF STATE

Authentication #: 1035801088  
Authenticate at: <http://www.cyberdriveillinois.com>



*To all to whom these Presents Shall Come, Greeting:*

*I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that*

MERCY ALLIANCE, INC., INCORPORATED IN WISCONSIN AND LICENSED TO CONDUCT AFFAIRS IN THIS STATE ON FEBRUARY 11, 2003, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE GENERAL NOT FOR PROFIT CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS A FOREIGN CORPORATION IN GOOD STANDING AND AUTHORIZED TO CONDUCT AFFAIRS IN THE STATE OF ILLINOIS.

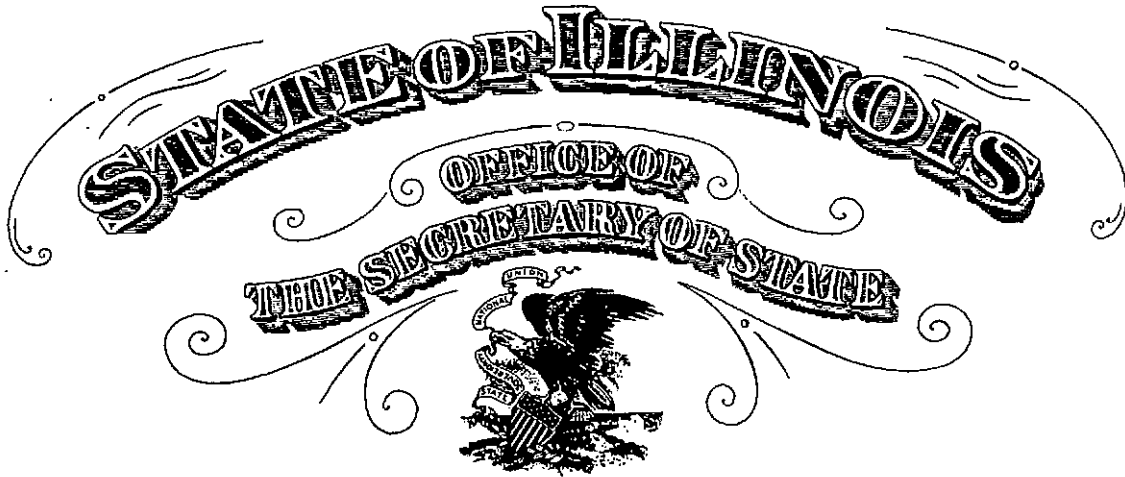


Authentication #: 0902202716  
Authenticate at: <http://www.cyberdriveillinois.com>

*In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 22ND day of JANUARY A.D. 2009 .*

*Jesse White*

SECRETARY OF STATE



**To all to whom these Presents Shall Come, Greeting:**

*I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that*

MERCY HEALTH SYSTEM CORPORATION, INCORPORATED IN WISCONSIN AND LICENSED TO CONDUCT AFFAIRS IN THIS STATE ON JANUARY 30, 1996, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE GENERAL NOT FOR PROFIT CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS A FOREIGN CORPORATION IN GOOD STANDING AND AUTHORIZED TO CONDUCT AFFAIRS IN THE STATE OF ILLINOIS.



Authentication #: 0902202610

Authenticate at: <http://www.cyberdriveillinois.com>

**In Testimony Whereof,** I hereto set  
my hand and cause to be affixed the Great Seal of  
the State of Illinois, this 22ND  
day of JANUARY A.D. 2009 .

*Jesse White*

SECRETARY OF STATE

**Attachment 1: Illinois Certificate of Good Standing**

6

MCHENRY COUNTY RECORDER  
PHYLLIS K. WALTERS

2004 R01 12155

12/21/2004 11:21AM


PAGES 6

RECORDING FEE 28.00  
COUNTY STAMP FEE 347.25  
STATE STAMP FEE 694.50

86000785 / 24128136 copy

**TRUSTEE'S DEED**  
(Illinois)

THE GRANTOR, **AMCORE INVESTMENT GROUP, N.A.**, formerly known as Amcore Bank National Association, Woodstock, not personally but as Trustee under a Trust Agreement dated August 31, 1989, and known as Trust No. 3167, of 225 West Jackson, Woodstock, IL 60098, the County of MCHENRY and State of ILLINOIS for and in consideration of TEN DOLLARS, and other good and valuable consideration in hand paid, CONVEY and QUIT CLAIM unto **MERCY HEALTH SYSTEM CORPORATION**, a corporation duly organized and existing under the laws of the State of Wisconsin which is duly qualified and authorized to do business in the State of Illinois, whose address is 100 Mineral Point Avenue, Janesville, Wisconsin 53347-5003 ("Grantee"),

STATE & COUNTY TAX	STATE OF ILLINOIS	# 0000025411	<b>REAL ESTATE TRANSFER TAX</b>
	 DEC. 20.04		0104175
	MC HENRY COUNTY		FP351022

Above Space for Recorder's Use Only

(Name and Address of Grantee)

and unto all and every successor and assign, the following described real cstate in the County of McHenry and State of Illinois, to wit:

SEE EXHIBIT A ATTACHED HERETO AND MADE A PART HEREOF

Permanent Real Estate Index Number(s): 19-10-400-004

Address of Real Estate: 4313 Three Oaks Road, Crystal Lake, Illinois

TC

04-73-6883

Attachment 2: Proof of Ownership

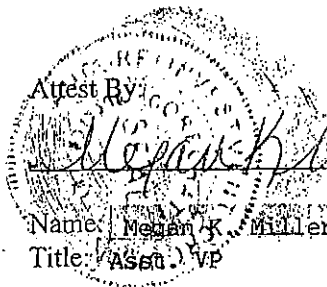
TO HAVE AND TO HOLD the said premises with the appurtenances for the uses and purposes herein.

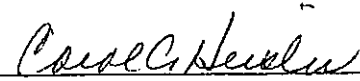
And the said Grantor hereby expressly waives and releases any and all right or benefit under and by virtue of any and all statutes of the State of Illinois, providing for the exemption of homesteads from sale on execution or otherwise.

This Trustee's Deed is being executed by the Grantor solely in its capacity as Trustee and not in its personal capacity and any recourse shall be from the Trust estate only.

In Witness Whereof, the Grantor aforesaid has hereunto set its hand and seal as of this 24th day of November, 2004.

**AMCORE INVESTMENT  
GROUP N.A.**, not personally but as  
Trustee as aforesaid

Attest By  
  
Name: Megan K. Miller  
Title: Asst. VP

  
Name: Carol A. Heisler  
Title: Trust Officer

This instrument was prepared by Patrick E. Brady, McGuire Woods LLP, 77 West Wacker Drive, Suite 4400, Chicago, IL 60601

MAIL TO:

Lisa Waggoner  
Four North Walkup Avenue  
Crystal Lake, IL 60014

SEND SUBSEQUENT TAX BILLS  
TO:

MERCY HEALTH SYSTEM CORPORATION  
P. O. Box 5003  
1800 MINERAL POINT BLVD  
JANESVILLE, IL 53547-5003

04-73-6884

Attachment 2: Proof of Ownership

State of Illinois, County of McHenry ss.

IMPRESS  
SEAL  
HERE

I, the undersigned, a Notary public in and for said County, in the State aforesaid, DO HEREBY CERTIFY that Carol Heisler & Megan Miller, personally known to me to be the person whose name is subscribed to the foregoing instrument, and to be the Trust Officer & Asst. VP of Amcore Investment Group, N.A., and appeared before me this day in person, and acknowledged that they signed, sealed and delivered the said instrument as their free and voluntary act and as the free and voluntary act of said as Trustee, for the uses and purposes therein set forth, including the release and waiver of the right of homestead.

Given under my hand and official seal, this 24th day of November, 2004.

Commission expires Feb. 10, 2007

Sarah A. Janeczko  
NOTARY PUBLIC



04-73-6885

Attachment 2: Proof of Ownership

**EXHIBIT A**

**LEGAL DESCRIPTION**

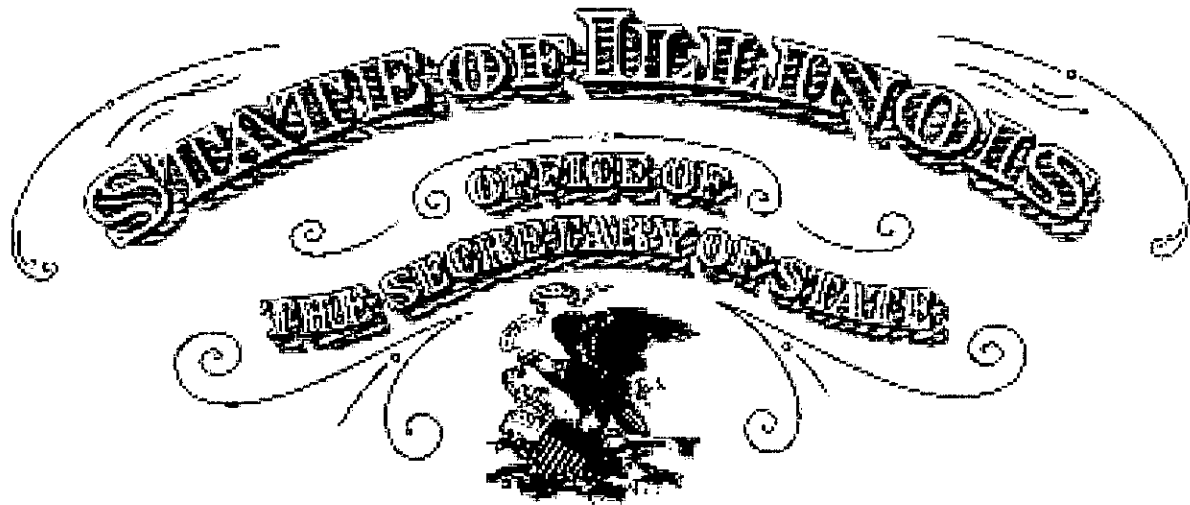
The East 333.00 feet of the West 1421.14 feet of the North 462.00 feet of the Southeast Quarter of Section 10 Township 43 North, Range of East of the Third Principal Meridian, lying West of the monument West line of Lots 1 through 311 in Monticello Subdivision Unit #1, according to the plat thereof recorded October 17, 1971 as Document #749688 in McHenry County, Illinois.

Property Address: 4313 Three Oaks Drive, Crystal Lake, Illinois

Permanent Index Number: 19-10-400-004

**04-73-6886**

**Attachment 2: Proof of Ownership**

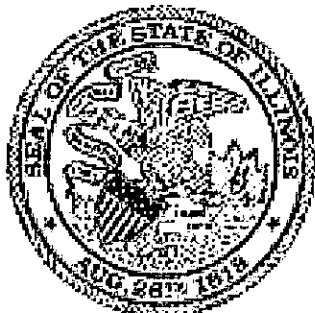


To all to whom these Presents Shall Come, Greeting:

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MERCY CRYSTAL LAKE HOSPITAL AND MEDICAL CENTER INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JUNE 27, 2003, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE GENERAL NOT FOR PROFIT CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.

In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 22ND day of DECEMBER A.D. 2010 .



Authorization #: 1035501088  
Authorization id: <http://www.cyberdriveillinois.com>

Jesse White

SECRETARY OF STATE





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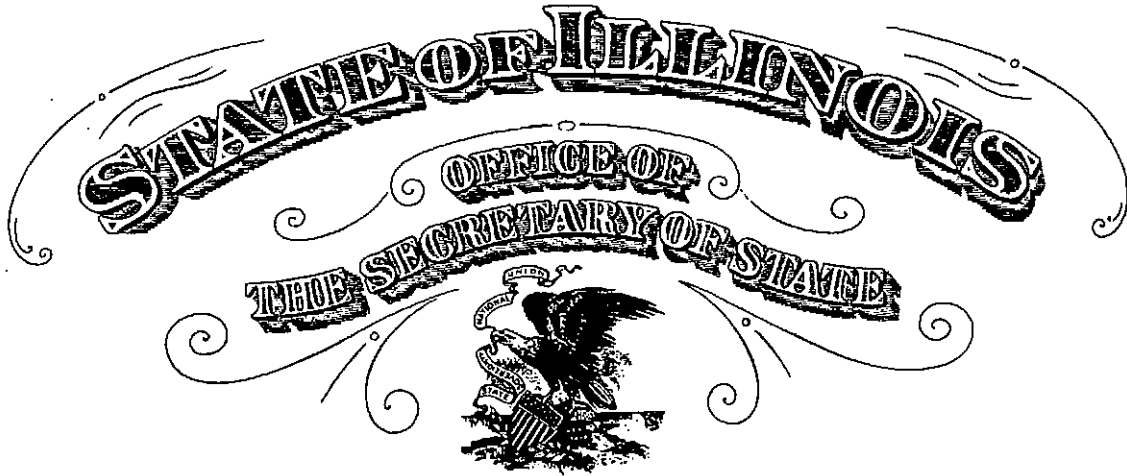
Authentication #: 0902202716  
Authenticate at: <http://www.cyberdriveillinois.com>

***In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 22ND day of JANUARY A.D. 2009 .***

*Jesse White*

SECRETARY OF STATE

File Number 5869-239-5



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MERCY HEALTH SYSTEM CORPORATION, INCORPORATED IN WISCONSIN AND LICENSED TO CONDUCT AFFAIRS IN THIS STATE ON JANUARY 30, 1996, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE GENERAL NOT FOR PROFIT CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS A FOREIGN CORPORATION IN GOOD STANDING AND AUTHORIZED TO CONDUCT AFFAIRS IN THE STATE OF ILLINOIS.



Authentication #: 0902202610

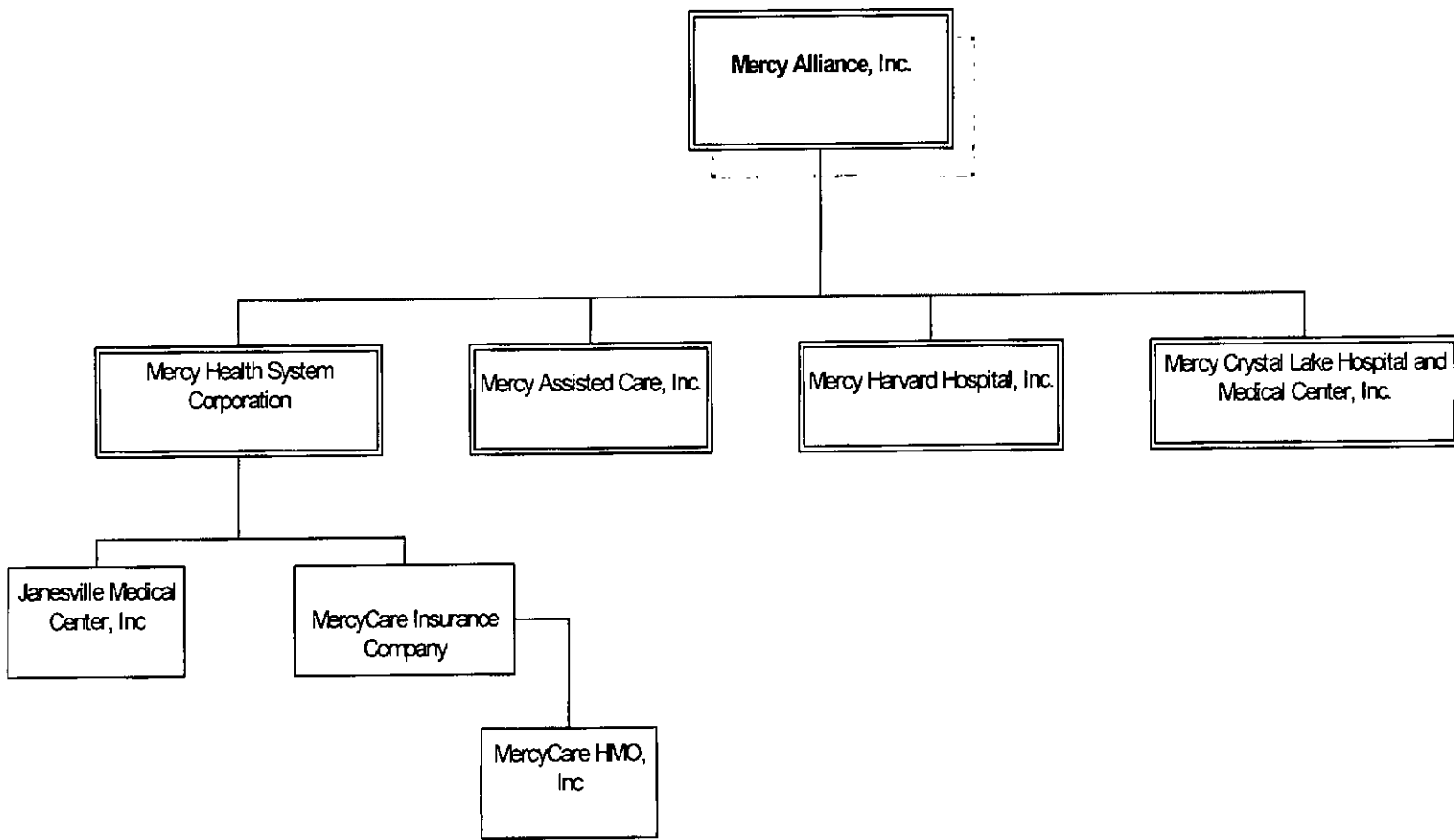
Authenticate at: <http://www.cyberdriveillinois.com>

***In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 22ND day of JANUARY A.D. 2009***

*Jesse White*

SECRETARY OF STATE

**Attachment 3: Illinois Certificate of Good Standing**



UNIVERSITY OF ILLINOIS  
AT URBANA - CHAMPAIGN

Institute of Natural Resource Sustainability

Illinois State Water Survey  
2204 Griffith Drive  
Champaign, IL 61820



Special Flood Hazard Area Determination  
pursuant to Governor's Executive Order 5 (2006)  
(supersedes Governor's Executive Order 4 (1979))

Requester: Paul Arndt, Administrative Fellow, Mercy Health Systems  
Address: 1000 Mineral Point Ave., P.O. Box 5003  
City, state, zip: Janesville, WI 53547-5003 Telephone: (608) 757-4020

Site description of determination:

Site address: SE corner IL 31 & Three Oaks Road  
City, state, zip: Crystal Lake, IL  
County: McHenry Sec $\frac{1}{4}$ : W 1/2 of SE 1/4 Section: 10 T. 43 N. R. 8 E. PM: 3rd  
Subject area: The N 1464.54 ft of the W 580.14 feet of the SE 1/4 Sec. 10, T. 43 N., R. 8 E., 3rd P.M., McHenry County (excepting road ROW).

The property described above IS NOT located in a Special Flood Hazard Area or a shaded Zone X floodzone.  
Floodway mapped: N/A Floodway on property: No  
Sources used: FEMA Flood Insurance Rate Map (FIRM, copy attached); City of Crystal Lake Zoning Map (1/2008).  
Community name: City of Crystal Lake, IL Community number: 170476  
Panel/map number: 17111C0335J Effective Date: November 16, 2006  
Flood zone: X [unshaded] Base flood elevation: N/A ft NGVD 1929

- N/A a. The community does not currently participate in the National Flood Insurance Program (NFIP). NFIP flood insurance is not available; certain State and Federal assistance may not be available.  
N/A b. Panel not printed: no Special Flood Hazard Area on the panel (panel designated all Zone C or unshaded X).  
N/A c. No map panels printed: no Special Flood Hazard Areas within the community (NSFHA).

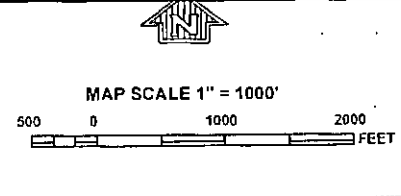
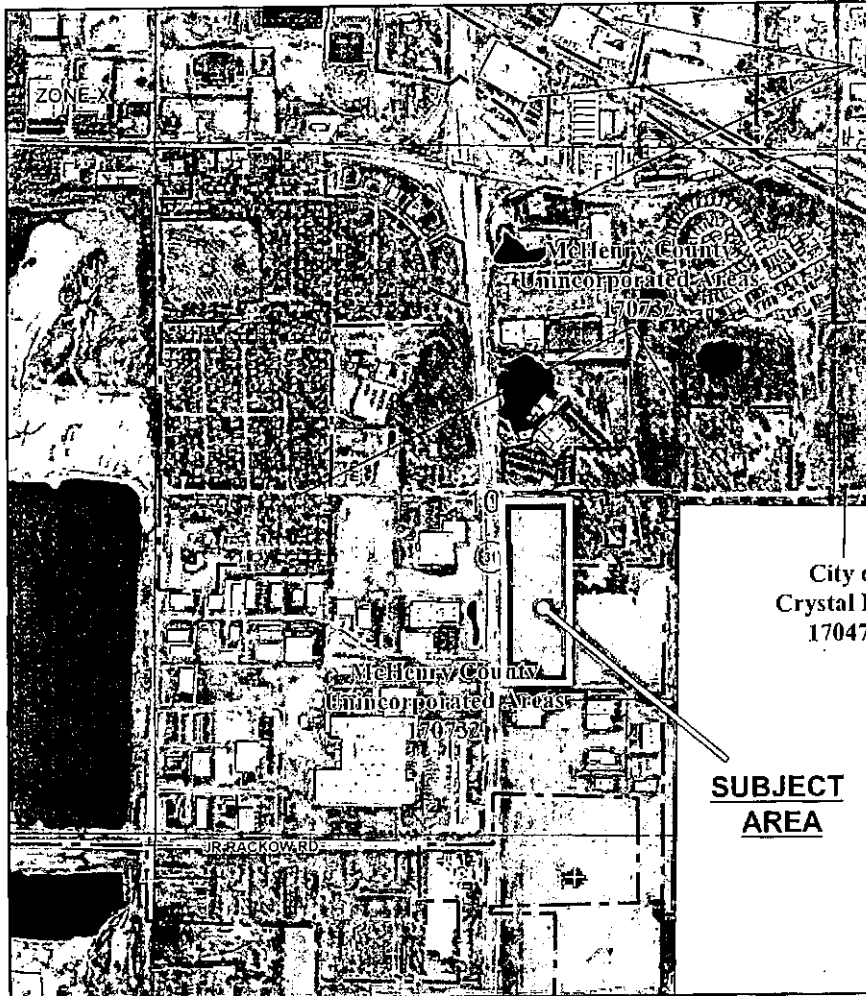
The primary structure on the property:

- N/A d. Is located in a Special Flood Hazard Area. Any activity on the property must meet State, Federal, and local floodplain development regulations. Federal law requires that a flood insurance policy be obtained as a condition of a federally-backed mortgage or loan that is secured by the building.  
N/A e. Is located in shaded Zone X or B (500-yr floodplain). Conditions may apply for local permits or Federal funding.  
X f. Is not located in a Special Flood Hazard Area or 500-year floodplain area shown on the effective FEMA map.  
N/A g. A determination of the building's exact location cannot be made on the current FEMA flood hazard map.  
N/A h. Exact structure location is not available or was not provided for this determination.

Note: This determination is based on the effective Federal Emergency Management Agency (FEMA) flood hazard reference for the subject area. This letter does not imply that the referenced property will be free from water damage. Property not in a Special Flood Hazard Area may be damaged by a flood greater than that illustrated on the FEMA map, by local drainage problems or runoff not illustrated on the source map, or by failure of flood control structures. This letter does not create liability on the part of the Illinois State Water Survey or employee thereof for any damage that results from reliance on this determination. This letter does not exempt the project from local stormwater management regulations.

Questions concerning this determination may be directed to Bill Saylor (217/333-0447) at the Illinois State Water Survey. Questions concerning requirements of Governor's Executive Order 5 (2006), or State floodplain regulations, may be directed to John Lentz (847/608-3100 x2022) at the Illinois Department of Natural Resources' Office of Water Resources.

William Saylor Title: ISWS Floodplain Information Specialist Date: 10/10/2008  
William Saylor, CFM IL-02-00107, Illinois State Water Survey



PANEL 0335J

**FIRM**  
FLOOD INSURANCE RATE MAP

**McHENRY COUNTY,  
ILLINOIS  
AND INCORPORATED AREAS**

PANEL 335 OF 365  
(SEE MAP INDEX FOR FIRM PANEL LAYOUT)

COMMUNITY	NUMBER	PANEL	SUFFIX
ALGONQUY, VILLAGE OF	170474	0335	J
CARY, VILLAGE OF	170475	0335	J
CRYSTAL LAKE, VILLAGE OF	170476	0335	J
LAKE IN THE HILLS, VILLAGE OF	170481	0335	J
McHENRY COUNTY DANWOOD HILLS, VILLAGE OF	170732	0335	J
	170731	0335	J

*Notice to User:* The Map Number shown below should be used when placing map orders; the Community Number shown above should be used on insurance applications for the subject community.

MAP NUMBER  
17111C0335J

EFFECTIVE DATE  
NOVEMBER 16, 2006

Federal Emergency Management Agency

City of  
Crystal Lake  
17047

**SUBJECT  
AREA**

This is an official copy of a portion of the above referenced flood map. It was extracted using F-MIT On-Line. This map does not reflect changes or amendments which may have been made subsequent to the date on the title block. For the latest product information about National Flood Insurance Program flood maps check the FEMA Flood Map Store at [www.msc.fema.gov](http://www.msc.fema.gov)

43/515/S 10/10/2003

## LEGEND

### SPECIAL FLOOD HAZARD AREAS (SFHAs) SUBJECT TO INUNDATION BY THE 1% ANNUAL CHANCE FLOOD

The 1% annual chance flood (100-year flood), also known as the base flood, is the flood that has a 1% chance of being equaled or exceeded in any given year. The Special Flood Hazard Area is the area subject to flooding by the 1% annual chance flood. Areas of Special Flood Hazard include Zones A, AE, AH, AO, AR, A99, V, and VE. The Base Flood Elevation is the water-surface elevation of the 1% annual chance flood.

- ZONE A** No Base Flood Elevations determined.
- ZONE AE** Base Flood Elevations determined.
- ZONE AH** Flood depths of 1 to 3 feet (usually areas of ponding); Base Flood Elevations determined.
- ZONE AO** Flood depths of 1 to 3 feet (usually sheet flow on sloping terrain); average depths determined. For areas of alluvial fan flooding, velocities also determined.
- ZONE AR** Special Flood Hazard Areas formerly protected from the 1% annual chance flood by a flood control system that was subsequently decertified. Zone AR indicates that the former flood control system is being restored to provide protection from the 1% annual chance or greater flood.
- ZONE A99** Area to be protected from 1% annual chance flood by a Federal flood protection system under construction; no Base Flood Elevations determined.
- ZONE V** Coastal flood zone with velocity hazard (wave action); no Base Flood Elevations determined.
- ZONE VE** Coastal flood zone with velocity hazard (wave action); Base Flood Elevations determined.

### FLOODWAY AREAS IN ZONE AE

The floodway is the channel of a stream plus any adjacent floodplain areas that must be kept free of encroachment so that the 1% annual chance flood can be carried without substantial increases in flood heights.

### OTHER FLOOD AREAS

**ZONE X** Areas of 0.2% annual chance flood; areas of 1% annual chance flood with average depths of less than 1 foot or with drainage areas less than 1 square mile; and areas protected by levees from 1% annual chance flood.




### OTHER AREAS

**ZONE X** Areas determined to be outside the 0.2% annual chance floodplain.  
**ZONE D** Areas in which flood hazards are undetermined, but possible.

### COASTAL BARRIER RESOURCES SYSTEM (CBRS) AREAS


















### OTHERWISE PROTECTED AREAS (OPAs)

CBRS areas and OPAs are normally located within or adjacent to Special Flood Hazard Areas.

-  1% annual chance floodplain boundary
-  0.2% annual chance floodplain boundary
-  Floodway boundary

## FLOOD INSURANCE RATE MAP

# McHENRY COUNTY, ILLINOIS AND INCORPORATED AREAS

-  Floodway boundary
-  Zone D boundary
-  CBRS and OPA boundary
-  Boundary defining Special Flood Hazard Areas of different Base Flood Elevations, flood depths or flood velocities.
-  Base Flood Elevation line and value; elevation in feet\*
-  Base Flood Elevation value where uniform within zone; elevation in feet\*
-  \*Referenced to the North American Vertical Datum of 1985
-  Cross section line
-  Transect line
-  Geographic coordinates referenced to the North American Datum of 1983 (NAD 83), Western Hemisphere
-  46° 02' 06" 03" 02' 12"
-  89° 00' N
-  MLLS10 X
-  ± M 1.5
-  1000-meter Universal Transverse Mercator grid values, zone 16
-  Bench mark (see elevation in feet on UTM section of the FIRM panel)
-  River Mile

MAP REPOSITORIES  
 Refer to listing of Map Repositories on Map Index.  
 EFFECTIVE DATE OF COUNTYWIDE  
 FLOOD INSURANCE RATE MAP  
 NOVEMBER 16, 2006  
 EFFECTIVE DATE(S) OF REVISION(S) TO THIS PANEL

For community map revision history prior to countywide mapping, refer to the Community Map History table located in the Flood Insurance Study report for this jurisdiction.  
 To determine if flood insurance is available in this community, contact your insurance agent or call the National Flood Insurance Program at 1-800-638-6870.



This is an official copy of a portion of the above referenced flood map. It was extracted using F-MIT OnLine. This map does not reflect changes or amendments which may have been made subsequent to the date on the title block. For the latest product information about National Flood Insurance Program flood maps, check the FEMA Flood Map Store at [www.msc.fema.gov](http://www.msc.fema.gov)



**Illinois Historic  
Preservation Agency**

1 Old State Capitol Plaza • Springfield, Illinois 62701-1912 • [www.illinois-history.gov](http://www.illinois-history.gov)

McHenry County  
Crystal Lake  
SSE of IL Highway 31 and Three Oaks Road, Section: 10-Township: 43N-Range: 9E  
CON - Medical Office with Attached Immediate Care and Ambulatory Surgical Center

PLEASE REFER TO: IHPA LOG #021020209

February 11, 2009

Don Colby  
Mercy Health System  
1000 Mineral Point Avenue  
P.O. Box 5001  
Jonestown, WI 53547-5000

Dear Mr. Colby:

The Illinois Historic Preservation Agency is required by the Illinois State Agency Historic Resources Preservation Act (20 ILCS 2410, as amended, 17 IAC 4100) to review all state funded, permitted or licensed undertakings for their effect on cultural resources. Pursuant to this, we have received information regarding the referenced project for our consent.

Our staff has reviewed the specifications under the state law and assessed the impact of the project as submitted by your office. We have determined, based on the available information, that no significant historic, architectural or archaeological resources are located within the proposed project area.

According to the information you have provided concerning your proposed project, apparently there is no federal involvement in your project. However, please note that the state law is less restrictive than the federal cultural resource laws concerning archaeology. If your project will use federal loans or grants, need federal agency permits, use federal property, or involve assistance from a federal agency, then your project must be reviewed under the National Historic Preservation Act of 1966, as amended. Please notify us immediately if such is the case.

This clearance remains in effect for two (2) years from date of issuance. It does not pertain to any discovery during construction, nor is it a clearance for purposes of the IL Human Skeletal Remains Protection Act (20 ILCS 2440).

Please retain this letter in your files as evidence of compliance with the Illinois State Agency Historic Resources Preservation Act.

Sincerely,

*Anne E. Haaker*

Anne E. Haaker  
Deputy State Historic  
Preservation Officer

REK

A relay/pamphlet for the speech/hearing impaired is available at 217-524-7128. It is not a voice or fax line.

Mercy Crystal Lake Hospital and Medical Center

July 20, 2010

Space Summary  
All Departments

SPACE REQUIREMENTS

Departmental Summary

Description	Total DGSF	\$/SF	\$	Comments
<b>IDPH Reviewable Areas</b>				
Med. / Surg. Nursing Unit	32,412	\$320	\$10,371,840	
ICU	2,385	\$434	\$1,035,090	
Obstetrics	4,760	\$320	\$1,523,200	
Newborn Nursery	1,513	\$315	\$476,595	
Labor-Delivery-Recovery	1,974	\$330	\$651,420	
Emergency	6,855	\$330	\$2,262,150	
Laboratory	2,881	\$398	\$1,146,638	
Imaging (Diagnostic Radiology)	9,900	\$398	\$3,940,200	
MRI	3,405	\$473	\$1,610,565	
Central Processing	1,260	\$406	\$511,560	
Surgical Suite	9,840	\$498	\$4,900,320	
Recovery	2,040	\$320	\$652,800	
Outpatient Surgery	4,593	\$320	\$1,469,760	
Dietary	3,780	\$473	\$1,787,940	
Pharmacy	840	\$291	\$244,440	
Respiratory Therapy	623	\$315	\$196,245	
Cardiac Rehabilitation	1,200	\$320	\$384,000	
PT/OT	1,474	\$320	\$471,680	
<b>IDPH Non-Reviewable Areas</b>				
Building Systems	10,503	\$250	\$2,625,750	
Administration	3,437	\$250	\$859,250	
Public Circulation	25,351	\$225	\$5,703,975	
Materials Management	4,150	\$220	\$913,000	
Building Support	5,455	\$215	\$1,172,825	
Employee Facilities	1,163	\$216	\$251,208	
Medical Library	750	\$224	\$168,000	
Housekeeping	726	\$220	\$159,720	
Laundry Holding	479	\$200	\$95,800	
Morgue	288	\$224	\$64,512	
Medical Records	4,373	\$224	\$979,552	
Dining	2,550	\$310	\$790,500	
Yard Storage	336	\$185	\$62,160	
Human Resources	832	\$220	\$183,040	
Marketing	1,360	\$220	\$299,200	
Meeting Rooms	1,121	\$220	\$246,620	
Ambulance Garage	982	\$157	\$154,174	
Canopies	6,947	\$250	\$1,736,750	
<b>Subtotal Hospital DGSF</b>	<b>162,638</b>	<b>\$308</b>	<b>\$50,102,479</b>	
<b>Clinic-All Departments</b>				
Building Systems	6,171	\$220	\$1,797,620	
Medical Records	7,832	\$224	\$1,754,368	
Waiting	6,329	\$230	\$1,455,670	
Public Circulation	10,327	\$210	\$2,168,670	
Physician Offices	44,035	\$230	\$10,128,050	
<b>Subtotal Clinic DGSF</b>	<b>76,694</b>	<b>226</b>	<b>\$17,304,378</b>	
<b>Total Hospital and Clinic DGSF</b>	<b>239,232</b>	<b>282</b>	<b>\$67,406,857</b>	
Sitework (Included in bldg \$/SF)	1		\$4,000,000	
Landscaping (Allowance)	1		\$300,000	
Subtotal			\$4,300,000	
<b>Subtotal with Allowances</b>			<b>\$71,706,857</b>	



Mercy Crystal Lake Hospital and  
Medical Center

July 20, 2010

Space Summary  
All Departments

**SPACE REQUIREMENTS**

Design and Estimating Contingency	10%	\$7,170,686
<b>Total Estimated Construction Cost</b>		
A/E Design Services	4%	\$2,950,659
FFE	32%	\$25,388,569
Telecommunications	5.0%	\$3,943,877
Project Soft Cost	5.0%	\$3,943,877
Bond Issuance Expense		\$7,429,235
<b>Total Estimated Project Cost</b>		

## Project Costs and Sources of Funds

1. Site Survey and Soil Investigation	
Site Survey	\$ 22,500
Geotechnical	\$ 22,500
Total	\$ 45,000
2. Site Preparation	
Site Demolition And Clearing	\$ 62,000
Grading	\$ 681,000
Erosion and Sediment Control	\$ 12,000
Flexible Pavement	\$ 727,000
Rigid Pavement	\$ 194,000
Paving Specialties	\$ 17,000
Walks Curbs & Gutters	\$ 285,000
Landscaping and Irrigation	\$ 400,000
Cast in place Concrete (Retaining walls, ramps, etc.)	\$ 152,000
Utility Services	
Water Distribution	\$ 236,000
Sanitary Sewerage System	\$ 82,000
Storm Drainage Systems	\$ 652,000
Electrical	\$ 800,000
Total	\$ 4,300,000
3. Off Site Work	
Traffic Signals (Route 31 & Three Oaks)	\$ 300,000
4. Moveable and Other Equipment (Attached Sheet)	\$22,926,125
5. Bond Issuance Expense	
Bond Counsel	\$ 180,000
Borrower's Counsel	\$ 120,000
Underwriter's Counsel	\$ 140,000
Letter of Credit Provider's Counsel	\$ 80,000
Official Statement Printing	\$ 50,000
Auditor	\$ 40,000
Rating Agency Fee	\$ 46,957
Miscellaneous	\$ 20,000
Underwriter's Discount	\$ 322,611
Letter of Credit Costs	\$ 219,130
Debt Service Reserve Fund	\$ 3,326,087
	\$ 7,429,235

## Project Costs and Sources of Funds

6. Net Interest Expense During Construction	
Interest Expense	\$ 3,300,000
Project Fund Interest Earnings	\$ (890,000)
Bond Service Reserve Fund Interest Earnings	<u>\$ (50,000)</u>
	\$ 2,360,000
7. Other Costs to be Capitalized	
Outlot Development (Sands Road Extension)	
Demolition and Clearing	\$ 33,710
Earthwork and erosion control	\$ 497,000
Utilities	
Sanitary	\$ 190,000
Water	\$ 155,000
Storm	\$ 462,000
Utility Layout	\$ 30,000
Concrete Work	\$ 32,000
Paving	\$ 160,000
Streetlights	\$ 25,000
Landscaping	\$ 35,000
Bury Overhead Power Lines Underground	\$ 250,000
Builders Risk Insurance	\$ 110,000
Commissioning	\$ 100,000
Construction Testing	<u>\$ 71,322</u>
Total	\$ 2,151,032

**Project Costs and Sources of Funds**  
**Moveable or Other Equipment**

<b>Description</b>	<b>Quantity</b>	<b>Unit Price</b>	<b>Total Cost</b>	
<b>Medical/Surgical Nursing Units</b>				
Beds	56	\$9,500	\$532,000	
Overbed Tables	56	\$500	\$28,000	
Patient Recliner	56	\$3,000	\$168,000	
Patient Lift	10	\$3,000	\$30,000	
Pyxis/Med Prep	3	\$47,000	\$141,000	
Patient use equip & Storage	3	\$20,000	\$60,000	
Other Dept-Spec Furniture Alloc	32,412	\$18.00	\$583,416	
Computers/Telecomm Equip Alloc	32,412	\$20.00	\$648,240	
Misc	56	\$4,000	\$224,000	
				\$2,414,656
<b>Intensive Care Unit</b>				
Beds	4	\$26,000	\$104,000	
Overbed Tables	4	\$500	\$2,000	
Patient Recliner and MD Stool	4	\$3,000	\$12,000	
Patient Lift	2	\$8,000	\$16,000	
Pyxis/Med Prep	1	\$47,000	\$47,000	
Refrigerators/Storage/Major Equip	1	\$20,000	\$20,000	
Telemetry	4	\$7,800	\$31,200	
Other Dept-Spec Furniture Alloc	2,385	\$19.65	\$46,865	
Computers/Telecomm Equip Alloc	2,385	\$20.00	\$47,700	
Misc	4	\$17,500	\$70,000	
				\$396,765
<b>Labor/Delivery/Recovery Unit</b>				
Beds	2	\$20,000	\$40,000	
Overbed Tables	2	\$1,200	\$2,400	
Patient Recliner and MD Stool	2	\$3,000	\$6,000	
Patient Lift	1	\$8,000	\$8,000	
Pyxis/Med Prep	1	\$47,000	\$47,000	
Refrigerators/Storage/Major Equip	2	\$20,000	\$40,000	
Other Dept-Spec Furniture Alloc	1,974	\$19.65	\$38,789	
Computers/Telecomm Equip Alloc	1,974	\$20.00	\$39,480	
Misc	2	\$25,000	\$50,000	
				\$271,669
<b>Obstetrics</b>				
Beds	10	\$11,000	\$110,000	
Overbed Tables	10	\$500	\$5,000	
Patient Recliner and MD Stool	10	\$3,000	\$30,000	
Patient Lift	2	\$8,000	\$16,000	
Pyxis/Med Prep	2	\$47,000	\$94,000	
Refrigerators/Storage/Major Equip	2	\$20,000	\$40,000	
Other Dept-Spec Furniture Alloc	4,760	\$19.65	\$93,534	
Computers/Telecomm Equip Alloc	4,760	\$20.0	\$95,200	
Misc	10	\$10,000	\$100,000	

**Attachment 7: Project Costs and Sources of Funds**

**Project Costs and Sources of Funds**  
**Moveable or Other Equipment**

Description	Quantity	Unit Price	Total Cost
			\$583,734
<b>Newborn Nursery</b>			
Cribs	10	\$1,200	\$12,000
Family Recliners	10	\$2,000	\$20,000
Refrigerators/Storage/Major Equip	2	\$20,000	\$40,000
Pyxis/Med Prep	1	\$47,000	\$47,000
Other Dept-Spec Furniture Alloc	1,513	\$17.69	\$26,765
Computers/Telecomm Equip Alloc	1,513	\$20.00	\$30,260
Misc	10	\$15,000	\$150,000
			\$326,025
<b>Emergency</b>			
Carts	10	\$7,000	\$70,000
Exam Lights	10	\$1,500	\$15,000
Exam Lights - Trauma	2	\$12,000	\$24,000
Refrigerators/Storage/Major Equip	10	\$5,000	\$50,000
Patient Monitoring	10	\$20,000	\$200,000
Trauma Equipment	2	\$5,000	\$10,000
Pyxis/Med Prep	2	\$47,000	\$94,000
Mobile Equip	10	\$15,000	\$150,000
Other Dept-Spec Furniture Alloc	6,855	\$15.72	\$107,761
Computers/Telecomm Equip Alloc	6,855	\$20.00	\$137,100
			\$857,861
<b>Surgical Suite</b>			
Table	4	\$60,000	\$240,000
Light	4	\$30,000	\$120,000
Technology Boom	8	\$53,000	\$424,000
Anesthesia Machine	4	\$60,000	\$240,000
Video Integration	4	\$100,000	\$400,000
Carts, Tables, Storage	4	\$75,000	\$300,000
Instruments	4	\$125,000	\$500,000
Scrub Sinks	4	\$16,000	\$64,000
Other Dept-Spec Furniture Alloc	9,840	\$4.00	\$39,360
Computers/Telecomm Equip Alloc	9,840	\$20.00	\$196,800
Misc	4	\$100,000	\$400,000
			\$2,924,160
<b>Endoscopy</b>			
Carts, Tables, Storage	2	\$7,000	\$14,000
Procedure Equipment	2	\$75,000	\$150,000
Decontamination	1	\$35,000	\$35,000
Clean Processing	2	\$45,000	\$90,000
Scopes	8	\$25,000	\$200,000
Pyxis/Med Prep	2	\$47,000	\$94,000
Misc	1	\$75,000	\$75,000

**Attachment 7: Project Costs and Sources of Funds**

**Project Costs and Sources of Funds**  
**Moveable or Other Equipment**

Description	Quantity	Unit Price	Total Cost
			\$658,000
<b>Outpatient Surgery</b>			
Carts	4	\$7,000	\$28,000
Patient Recliner	15	\$3,000	\$45,000
Patient Monitoring	15	\$11,000	\$165,000
Pyxis/Med Prep	2	\$47,000	\$94,000
Nutrition	1	\$15,000	\$15,000
Clean Supply	2	\$30,000	\$60,000
Other Dept-Spec Furniture Alloc	4,593	\$12.00	\$55,116
Computers/Telecomm Equip Alloc	4,593	\$20.00	\$91,860
Misc	15	\$5,000	\$75,000
			\$628,976
<b>Recovery</b>			
Carts	8	\$7,000	\$56,000
Patient Monitoring	8	\$11,000	\$88,000
Pyxis/Med Prep	1	\$47,000	\$47,000
Nutrition	1	\$20,000	\$20,000
Clean Supply	1	\$15,000	\$15,000
Other Dept-Spec Furniture Alloc	2,040	\$4.00	\$8,160
Computers/Telecomm Equip Alloc	2,040	\$20.00	\$40,800
Misc	6	\$5,000	\$30,000
			\$304,960
<b>Diagnostic Imaging</b>			
Gen Radiography	2	\$300,000	\$600,000
Radiography/Fluoroscopy	1	\$650,000	\$650,000
Ultrasound	2	\$240,000	\$480,000
Nuclear Med	1	\$650,000	\$650,000
Portable Rad	2	\$210,000	\$420,000
Pacs	1	\$100,000	\$100,000
Clean Supply	3	\$15,000	\$45,000
Patient Monitoring	6	\$12,000	\$72,000
Pyxis/Med Prep	1	\$47,000	\$47,000
Misc	9	\$25,000	\$225,000
MRI & Injector	1	\$1,500,000	\$1,500,000
CT	1	\$1,200,000	\$1,200,000
Other Dept-Spec Furniture Alloc	9,900	\$8.00	\$79,200
Computers/Telecomm Equip Alloc	9,900	\$20.00	\$198,000
			\$6,266,200
<b>Inpatient Dialysis</b>			
Stations	2	\$13,200	\$26,400
Water Filtration	2	\$26,770	\$53,540
Carts	2	\$5,000	\$10,000

**Attachment 7: Project Costs and Sources of Funds**

**Project Costs and Sources of Funds**  
**Moveable or Other Equipment**

Description	Quantity	Unit Price	Total Cost	
Misc	1	\$2,000	\$2,000	
				\$91,940
<b>PT/OT</b>				
Treatment Table	2	\$5,000	\$10,000	
Parallel Bars	1	\$6,000	\$6,000	
Treadmill	1	\$10,000	\$10,000	
Misc	1	\$75,000	\$75,000	
Other Dept-Spec Furniture Alloc	1,474	\$8.00	\$11,792	
Computers/Telecomm Equip Alloc	1,474	\$20.00	\$29,480	
				\$142,272
<b>Laboratory</b>				
Chemistry	1	\$130,000	\$130,000	
Hematology	1	\$115,000	\$115,000	
Urinalysis	1	\$26,000	\$26,000	
Coagulation	1	\$43,000	\$43,000	
Blood Bank	1	\$28,000	\$28,000	
Microbiology	1	\$10,000	\$10,000	
Refrigerators/Freezers	3	\$45,000	\$135,000	
Interface/Printers	1	\$84,000	\$84,000	
Misc	1	\$100,000	\$100,000	
Body Cooler/Hold	1	\$30,000	\$30,000	
Other Dept-Spec Furniture Alloc	2,881	\$12.00	\$34,572	
Computers/Telecomm Equip Alloc	2,881	\$20.00	\$57,620	
				\$793,192
<b>Pharmacy</b>				
Dispensers	1	\$100,000	\$100,000	
Hoods/IV Prep	3	\$40,000	\$120,000	
Refrigerators/Freezers	2	\$35,000	\$70,000	
Other Dept-Spec Furniture Alloc	840	\$12.00	\$10,080	
Computers/Telecomm Equip Alloc	840	\$20.00	\$16,800	
Misc	1	\$90,000	\$90,000	
				\$406,880
<b>Respiratory Therapy</b>				
Ventilators	8	\$26,000	\$208,000	
Supply Storage	1	\$30,000	\$30,000	
Other Dept-Spec Furniture Alloc	623	\$4.00	\$2,492	
Computers/Telecomm Equip Alloc	623	\$20.00	\$12,460	
Misc	1	\$30,000	\$30,000	
				\$282,952
<b>Dietary</b>				
Prep	1	\$240,000	\$240,000	
Cooking (oven & grills)	1	\$345,000	\$345,000	

**Attachment 7: Project Costs and Sources of Funds**

**Project Costs and Sources of Funds**  
**Moveable or Other Equipment**

Description	Quantity	Unit Price	Total Cost	
Refrigerators/Freezers	1	\$210,000	\$210,000	
Dishwashing	2	\$125,000	\$250,000	
Other Dept-Spec Furniture Alloc	3,780	\$8.00	\$30,240	
Computers/Telecomm Equip Alloc	3,780	\$20.00	\$75,600	
Misc	1	\$250,000	\$250,000	\$1,400,840
<b>Central Sterile Processing</b>				
Sterilizer	2	\$100,000	\$200,000	
Wash/Decontamination	2	\$30,000	\$60,000	
Case Carts	24	\$4,000	\$96,000	
Assembly	1	\$50,000	\$50,000	
Instrumentation	1	\$125,000	\$125,000	
Other Dept-Spec Furniture Alloc	1,260	\$4.00	\$5,040	
Computers/Telecomm Equip Alloc	1,260	\$20.00	\$25,200	
Misc	1	\$75,000	\$75,000	\$636,240
<b>Administration</b>				
AV & Screens	1	\$7,800	\$7,800	
Refrigerators & Misc	1	\$5,000	\$5,000	
Staff Offices Allocation	3,437	\$10.20	\$35,057	
Computers/Telecomm Equip Alloc	3,437	\$20.00	\$68,740	\$116,597
<b>Building Support</b>				
Staff Task Chairs/Workstations	5,455	\$4.00	\$21,820	
Computers/Telecomm Equip Alloc	5,455	\$20.00	\$109,100	\$130,920
<b>Medical Library</b>				
Tables & Chairs	1	\$12,000	\$12,000	
Staff Furniture/Workstations Alloc	750	\$8.00	\$6,000	
Computers/Telecomm Equip Alloc	750	\$20.00	\$15,000	\$33,000
<b>Meeting Rooms</b>				
AV & Screens	1	\$30,000	\$30,000	
Conference Tables/Chairs	1,121	\$16.00	\$17,936	
Computers/Telecomm Equip Alloc	1,121	\$20.00	\$22,420	\$70,356
<b>Family Support</b>				
Refrigerators & Misc	1	\$25,000	\$25,000	
Lounge Furniture Alloc	8,246	\$8.00	\$65,968	
Computers/Telecomm Equip Alloc	8,246	\$20.00	\$164,920	\$255,888
<b>Housekeeping</b>				
Cleaning Equipment	1	\$45,000	\$45,000	
Computers/Telecomm Equip Alloc	726	\$20.00	\$14,520	

**Attachment 7: Project Costs and Sources of Funds**

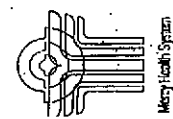
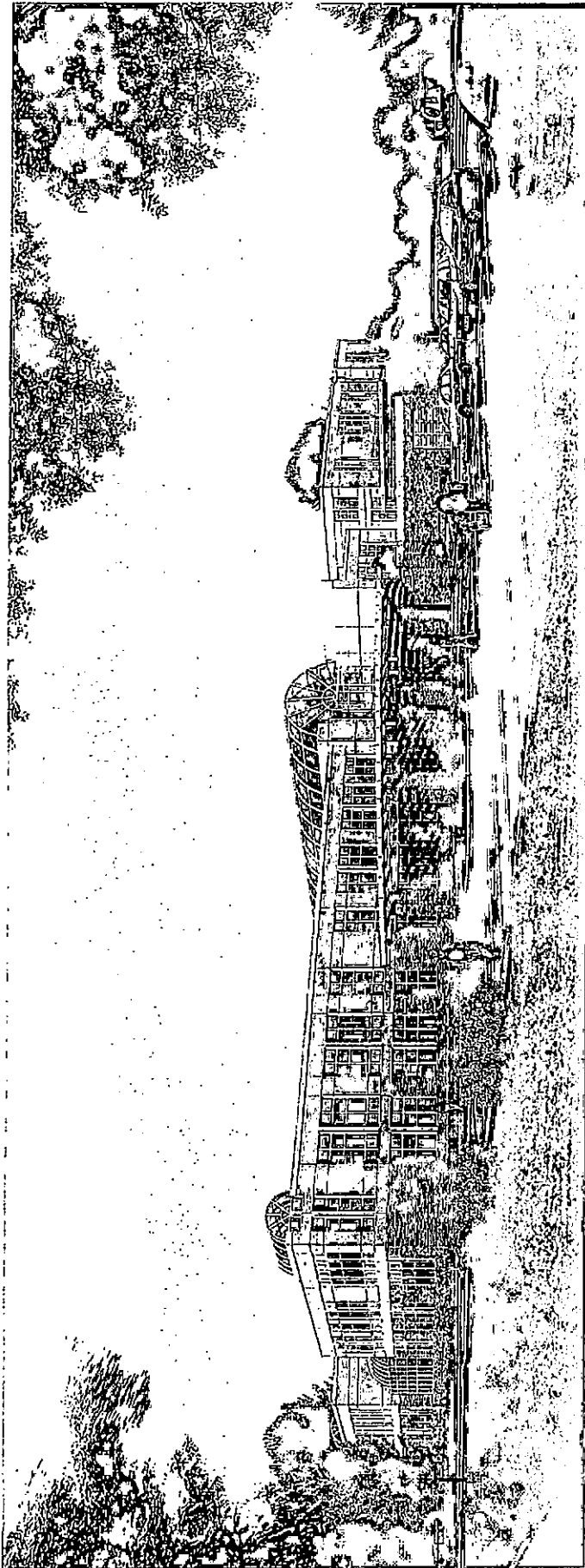


**Project Costs and Sources of Funds  
Moveable or Other Equipment**

Description	Quantity	Unit Price	Total Cost	
				\$59,520
Information Systems				
Data Center		\$934,189.00	\$934,189	
				\$934,189
Gift Shop				
Equipment	1	\$15,000	\$15,000	
Computers/Telecomm Equip Alloc	751	\$3.93	\$2,951	
				\$17,951
Chapel				
Area Allocation	469	\$15.00	\$7,035	
Computers/Telecomm Equip Alloc	469	\$20.00	\$9,380	
				\$16,415
Materials Management/Dock				
Equipment	1	\$45,000	\$45,000	
Staff Furniture/Workstations Alloc	4,150	\$4.00	\$16,600	
Computers/Telecomm Equip Alloc	4,150	\$20.00	\$83,000	
				\$144,600
Building Systems				
Staff Furniture/Workstations Alloc	15,506	\$1.00	\$15,506	
Computers/Telecomm Equip Alloc	15,506	\$20.00	\$310,120	
				\$325,626
Medical Records				
Equipment	1	\$15,000	\$15,000	
Staff Furniture/Workstations Alloc	5,500	\$10.00	\$55,000	
Computers/Telecomm Equip Alloc	5,500	\$20.00	\$110,000	
				\$180,000
Yard Storage				
Staff Furniture/Workstations Alloc	336	\$4.00	\$1,344	
Computers/Telecomm Equip Alloc	336	\$20.00	\$6,720	
Misc	1	\$25,000	\$25,000	
				\$33,064
Human Resources				
Staff Furniture/Workstations Alloc	832	\$8.00	\$6,656	
Computers/Telecomm Equip Alloc	832	\$20.00	\$16,640	
				\$23,296
Marketing				
Staff Furniture/Workstations Alloc	1,360	\$8.00	\$10,880	
Computers/Telecomm Equip Alloc	1,360	\$20.00	\$27,200	
				\$38,080
Laundry Holding				
Staff Furniture/Workstations Alloc	479	\$4.00	\$1,916	
Computers/Telecomm Equip Alloc	479	\$20.00	\$9,580	
				\$11,496
Dining				
Dining Chairs/Tables	1	\$20.00	\$66,020	
				\$66,020
Public Circulation				

**Project Costs and Sources of Funds**  
**Moveable or Other Equipment**

<b>Description</b>	<b>Quantity</b>	<b>Unit Price</b>	<b>Total Cost</b>	
Seating	40,195	\$1.97	\$79,184	
Computers/Telecomm Equip Alloc	40,195	\$20.00	\$803,900	\$883,084
Employee Facilities				
Lounge and Conference	1,163	\$7.86	\$9,141	
Computers/Telecomm Equip Alloc	1163	\$20.00	\$23,260	\$32,401
Canopies				
Computers/Telecomm Equip Alloc	6,947	\$20.00	\$138,940	\$138,940
Ambulance Garage				
Staff Furniture/Workstations Alloc	982	\$7.86	\$7,719	
Computers/Telecomm Equip Alloc	982	\$20.00	\$19,640	\$27,359
<b>TOTAL</b>			\$22,926,125	\$22,926,125

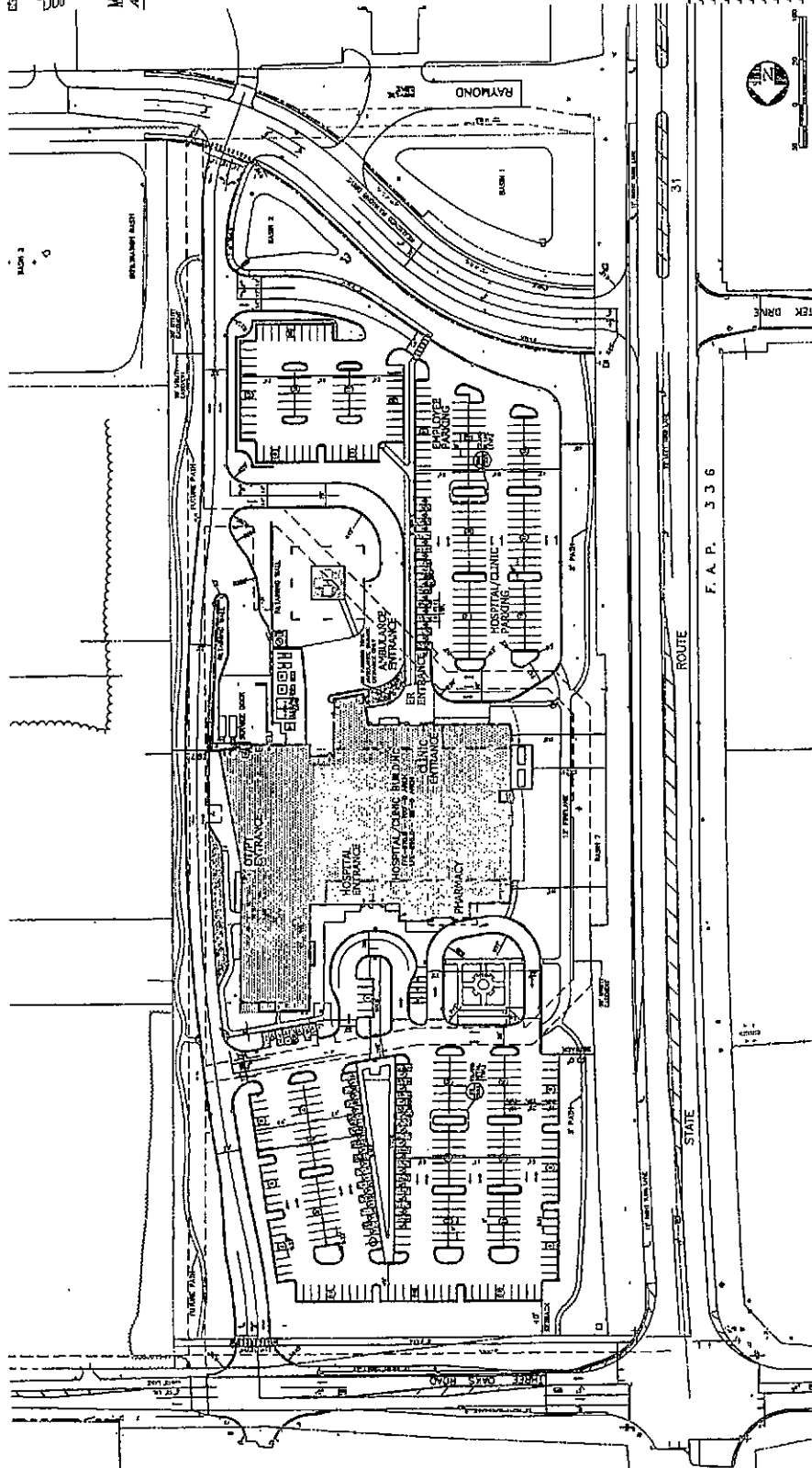


MERCY  
CRYSTAL LAKE  
CRYSTAL LAKE, ILLINOIS

South-west Perspective



July 1, 2004



**CONSTRUCTION NOT FOR REVISION HISTORY - THIS SHEET**

1/1/2014

**LEGEND**

- 10' CONC. DRIVE
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- 970' CONC. DRIVE
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- 990' CONC. DRIVE
- 1000' CONC. DRIVE

**LAYOUT NOTES**

- 1. ALL DIMENSIONS TO FACE UNLESS OTHERWISE NOTED.
- 2. ALL DIMENSIONS TO FACE UNLESS OTHERWISE NOTED.
- 3. ALL DIMENSIONS TO FACE UNLESS OTHERWISE NOTED.

**SITE STATISTICS**

AREA	AREA (SQ. FT.)	AREA (ACRES)
TOTAL	284,033.00	6.52
IMPAVED	84,000.00	1.91
PARKING AREA	380,000.00	8.67
LANDSCAPED AREA	1,420,000.00	32.49
TOTAL CONCRETE	25,000.00	.57
TOTAL ASPHALT	11,000.00	.25

**PARKING STALL SUMMARY**

PARKING TYPE	STALLS	AREA (SQ. FT.)	AREA (ACRES)
STANDARD	68	72	1.63
COMPACT	83	218	4.95
TOTAL	151	290	6.58


STANDARD STALLS: 6'x12'  
COMPACT STALLS: 8'x14'


**OVERALL SITE LAYOUT PLAN**

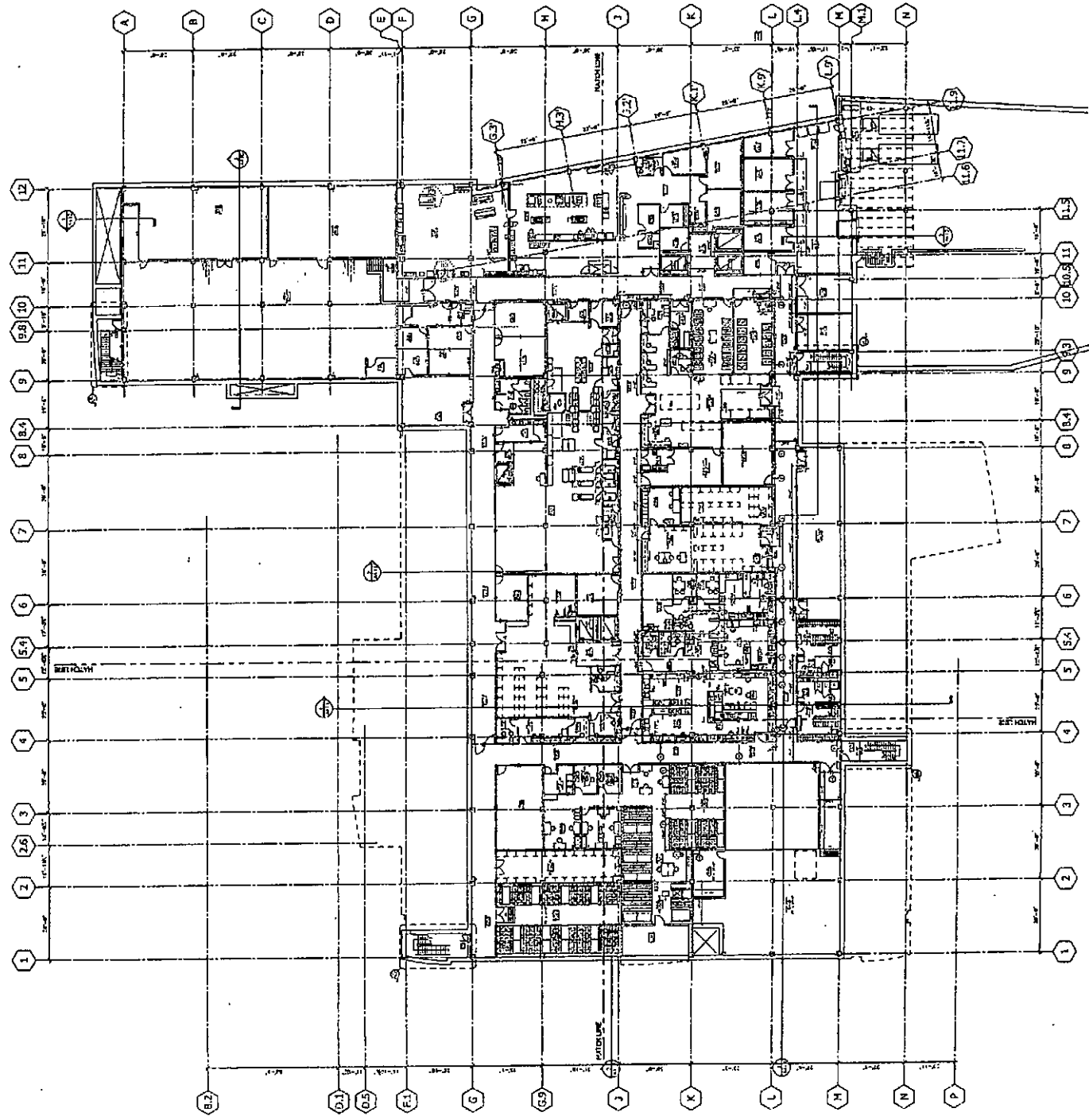
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DRAWN BY: J. B. BROWN  
CHECKED BY: J. B. BROWN  
DATE: 11/21/2009

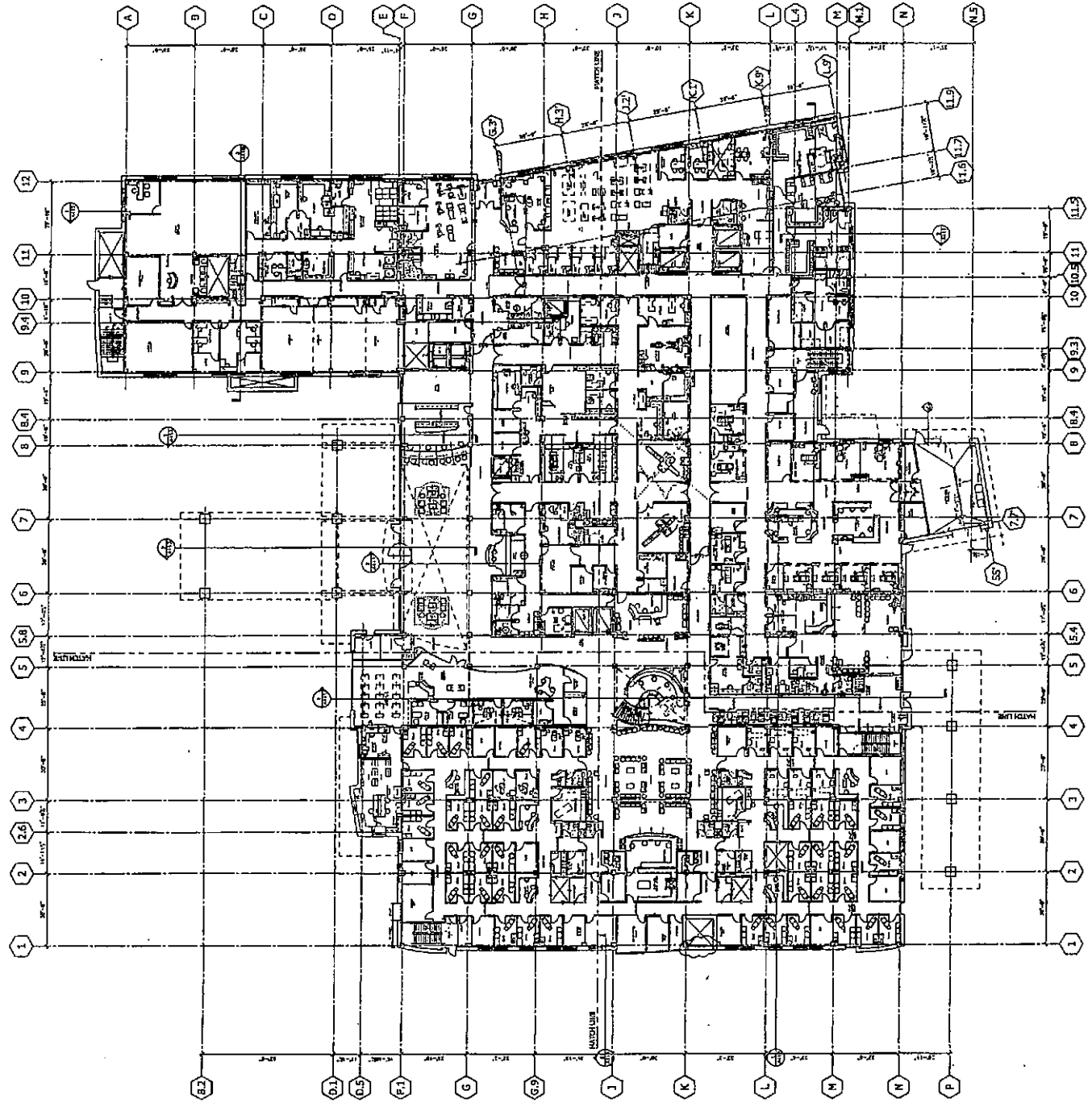
**FINAL PUD SUBMITTAL**

**C300**

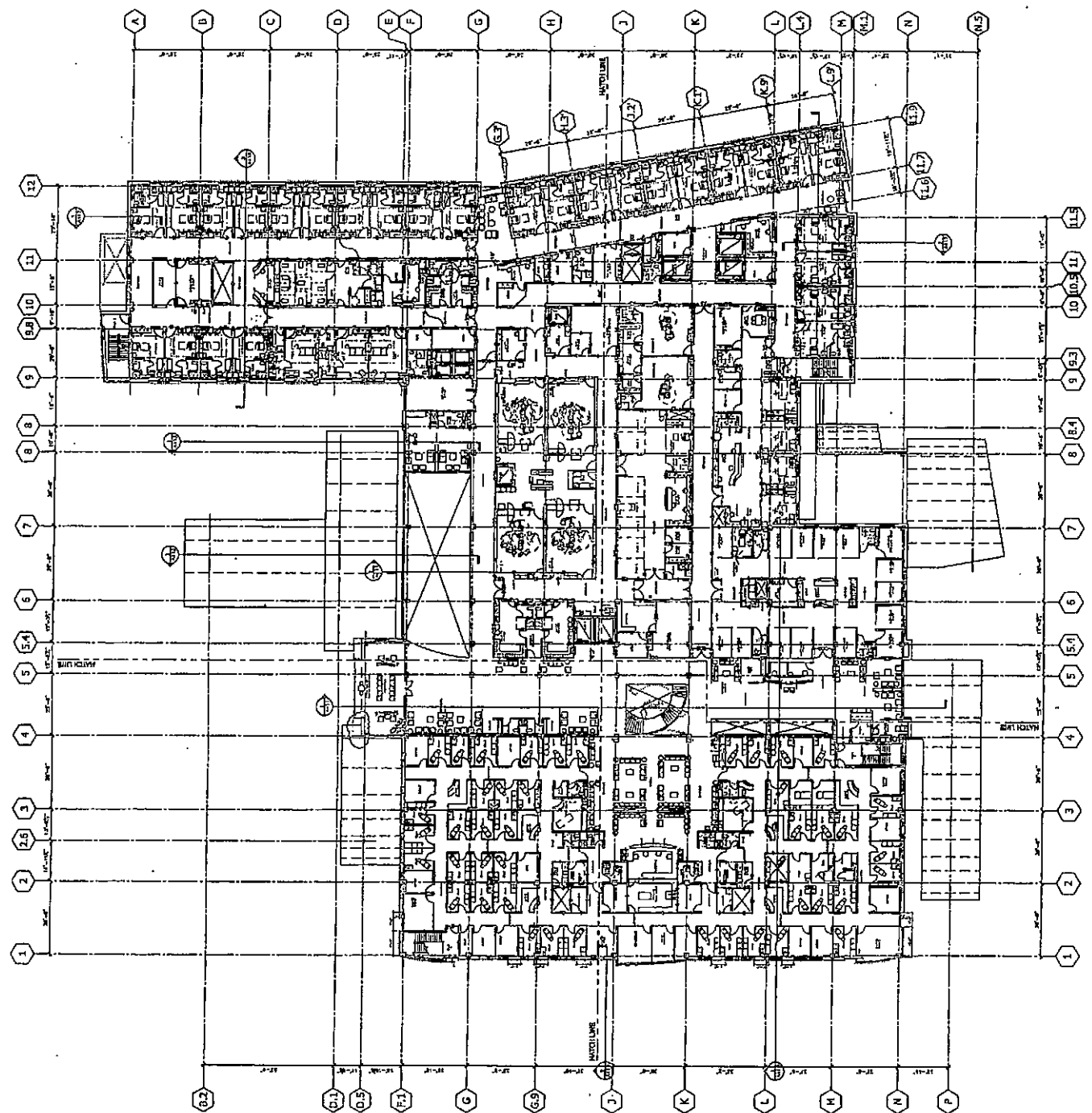
  
 REVISION HISTORY - THIS SHEET  
 NO. 1  
 APPROVED BY: [Signature]  
 DATE: 1/16/15  
 PROJECT: 1505-1342-00  
 SHEET: 17/16 - 1 of 17  
 DATE: MARCH 21, 2015

LOWER LEVEL  
 OVERALL FLOOR PLAN  
  
 1505-1342-00  
 17/16 - 1 of 17  
 MARCH 21, 2015  
 FINAL PUD SUBMITTAL  
 A 700





Attachment 8: Project Status and Completion Schedules



Attachment 8: Project Status and Completion Schedules





Mercy Crystal Lake Hospital and  
Medical Center

July 20, 2010

**Space Summary**  
All Departments

**SPACE REQUIREMENTS**

**Departmental Summary**

Description	Total DGSF	\$/SF	\$	Comments
<b>IDPH Reviewable Areas</b>				
Med. / Surg. Nursing Unit	32,412	\$320	\$10,371,840	
ICU	2,385	\$434	\$1,035,090	
Obstetrics	4,760	\$320	\$1,523,200	
Newborn Nursery	1,513	\$315	\$476,595	
Labor-Delivery-Recovery	1,974	\$330	\$651,420	
Emergency	6,655	\$330	\$2,282,150	
Laboratory	2,661	\$398	\$1,146,638	
Imaging (Diagnostic Radiology)	9,900	\$398	\$3,940,200	
MRI	3,405	\$473	\$1,610,565	
Central Processing	1,260	\$406	\$511,580	
Surgical Suite	9,840	\$498	\$4,900,320	
Recovery	2,040	\$320	\$652,800	
Outpatient Surgery	4,593	\$320	\$1,469,760	
Dietary	3,780	\$473	\$1,787,840	
Pharmacy	840	\$291	\$244,440	
Respiratory Therapy	623	\$315	\$196,245	
Cardiac Rehabilitation	1,200	\$320	\$384,000	
PT/OT	1,474	\$320	\$471,680	
<b>IDPH Non-Reviewable Areas</b>				
Building Systems	10,503	\$250	\$2,625,750	
Administration	3,437	\$250	\$859,250	
Public Circulation	25,351	\$225	\$5,703,975	
Materials Management	4,150	\$220	\$913,000	
Building Support	5,455	\$215	\$1,172,825	
Employee Facilities	1,163	\$216	\$251,208	
Medical Library	750	\$224	\$168,000	
Housekeeping	726	\$220	\$159,720	
Laundry Holding	479	\$200	\$95,800	
Morgue	288	\$224	\$64,512	
Medical Records	4,373	\$224	\$979,652	
Dining	2,550	\$310	\$790,500	
Yard Storage	336	\$185	\$62,160	
Human Resources	832	\$220	\$183,040	
Marketing	1,360	\$220	\$299,200	
Meeting Rooms	1,121	\$220	\$246,620	
Ambulance Garage	982	\$157	\$154,174	
Canopies	6,947	\$250	\$1,736,750	
<b>Subtotal Hospital DGSF</b>	<b>162,538</b>	<b>\$308</b>	<b>\$50,102,479</b>	
<b>Clinic-All Departments</b>				
Building Systems	8,171	\$220	\$1,797,620	
Medical Records	7,832	\$224	\$1,754,368	
Waiting	6,329	\$230	\$1,455,670	
Public Circulation	10,327	\$210	\$2,168,670	
Physician Offices	44,035	\$230	\$10,128,050	
<b>Subtotal Clinic DGSF</b>	<b>78,694</b>	<b>\$226</b>	<b>\$17,304,378</b>	
<b>Total Hospital and Clinic DGSF</b>	<b>239,232</b>	<b>\$282</b>	<b>\$67,406,857</b>	
Sitework (Included in bldg \$/SF)	1		\$4,000,000	
Landscaping (Allowance)	1		\$300,000	
<b>Subtotal</b>			<b>\$4,300,000</b>	
<b>Subtotal with Allowances</b>			<b>\$71,706,857</b>	

**Attachment 9: Cost Space Requirements**

Mercy Crystal Lake Hospital and  
Medical Center

July 20, 2010

Space Summary  
All Departments

**SPACE REQUIREMENTS**

Design and Estimating Contingency      10%      \$7,170,686

**Total Estimated Construction Cost      \$78,877,643**

A/E Design Services      4%      \$2,950,659  
FFE      32%      \$25,398,569  
Telecommunications      5.0%      \$3,943,877  
Project Soft Cost      5.0%      \$3,943,877  
Bond Issuance Expanso           \$7,429,235

**Total Estimated Project Cost      \$116,114,526**

## Background of Applicant

1. A listing of all health care facilities owned or operated by the applicant is included on the following page.
2. No adverse actions have been taken against any facility owned or operated by the applicant during the last three years.
3. Authorization is included at the end of this attachment 11.
4. MAI/MHSC has not submitted any other applications for permit during this calendar year, so this criterion does not apply.

The following details the certifications and accreditations held by MAI hospitals, ambulatory medical centers/clinics, and ancillary services:

- MHSC, which includes Mercy Hospital and Trauma Center (Janesville, WI), Mercy Walworth Hospital and Medical Center (Lake Geneva, WI) and all MHSC ambulatory medical centers/clinics are accredited by the Joint Commission (organization number 7644), effective 11/19/08 (valid for up to 39 months).
- Mercy Harvard Hospital (Harvard, IL) is accredited by the Joint Commission (organization number 4762), effective 10/1/08 (valid for up to 39 months).
- MHSC laboratory facilities at Mercy Hospital and Trauma Center and all MHSC ambulatory medical centers/clinics are accredited by the Joint Commission (organization number 7644), effective 4/23/10 (valid for up to 25 months).

The following table lists all MAI facilities, including their license number and employer identification numbers.

Facility	City	Leased vs. Owned	Licensing/Employer ID Numbers
<b>Hospitals and LTC Facilities</b>			
Mercy Hospital and Trauma Center 1000 Mineral Point Avenue Janesville, WI 53548	Janesville	Owned	LIC # 162 EIN 39-0816848
Mercy Walworth Hospital and Medical Center (includes retail pharmacy) N2950 State Road 67 Lake Geneva, WI 53147	Lake Geneva	Owned	LIC # 311 EIN 39-0816848
Mercy Harvard Hospital 901 Grant Street Harvard, IL 60033	Harvard	Owned	LIC # 0004911 EIN 31-1551871
Mercy Manor Transition Center 1000 Mineral Point Avenue Janesville, WI 53548	Janesville	Owned (Subacute Care)	LIC # 5007 EIN 39-0816848
Mercy Harvard Care Center 901 Hayes Street Harvard, IL 60033	Harvard	Owned (LTC)	LIC # 0004911 EIN 31-1551871
Mercy Assisted Care 903 Mineral Point Avenue Janesville, WI 53548	Janesville	Owned Home Care Hospice	LIC # 99 LIC # 544 Hospice EIN 39-1035110
<b>Ambulatory Care, Medical Office Buildings</b>			
Mercy Algonquin Medical Center The Prairie Professional Center 2401 Harnish Drive, Suite 101 Algonquin, IL 60102	Algonquin	Leased	LIC # 162 EIN 39-0816848
Mercy Bariatric Wellness Center 250 E. Center Drive, Suite 201 Vernon Hills, IL 60061	Vernon Hills	Leased	LIC # 162 EIN 39-0816848
Mercy Barrington Medical Center 500 West Highway 22 Barrington, IL 60010	Barrington	Owned	LIC # 162 EIN 39-0816848
Mercy Behavioral Health Clinic-Janesville 903 Mineral Point Avenue Janesville, WI 53548	Janesville	Owned	LIC # 162 EIN 39-0816848

<b>Facility</b>	<b>City</b>	<b>Leased vs. Owned</b>	<b>Licensing/Employer ID Numbers</b>
Mercy Behavioral Health Clinic-Walworth N2846 State Road 67 Williams Bay, WI 53191	Williams Bay	Owned	LIC # 162 EIN 39-0816848
Mercy Beloit Medical Center 2825 Prairie Avenue Beloit, WI 53511	Beloit	Owned	LIC # 162 EIN 39-0816848
Mercy Brodhead Medical Center 2310 First Center Avenue Brodhead, WI 53520	Brodhead	Owned	LIC # 162 EIN 39-0816848
Mercy Center for Corrective Eye Surgery 5400 W. Elm Street, Suite 120 McHenry, IL 60050	McHenry	Leased	LIC # 162 EIN 39-0816848
Mercy Center for Corrective Eye Surgery 8780 W. Golf Road, Ste. 304 Niles, IL 60714	Niles	Leased	LIC # 162 EIN 39-0816848
Mercy Clinic East (includes retail pharmacy) 3524 East Milwaukee Street Janesville, WI 53546	Janesville	Owned	LIC # 162 EIN 39-0816848
Mercy Clinic South 849 Kellogg Avenue Janesville, WI 53546	Janesville	Owned	LIC # 162 EIN 39-0816848
Mercy Clinic West (includes retail pharmacy) 1000 Mineral Point Avenue Janesville, WI 53548	Janesville	Owned	LIC # 162 EIN 39-0816848
Mercy Crystal Lake Chiropractic and Rehab Center 330 W. Terra Cotta Road (Rte 176) Crystal Lake, IL 60014	Crystal Lake	Leased	LIC # 162 EIN 39-0816848
Mercy Crystal Lake Medical Center - East 390 Congress Parkway Crystal Lake, IL 60014	Crystal Lake	Leased	LIC # 162 EIN 39-0816848
Mercy Crystal Lake Medical Center - West 350 Congress Parkway Crystal Lake, IL 60014	Crystal Lake	Leased	LIC # 162 EIN 39-0816848
Mercy Crystal Lake Medical Center - South 415 Congress Parkway Crystal Lake, IL 60014	Crystal Lake	Leased	LIC # 162 EIN 39-0816848
Mercy Crystal Lake OB/GYN 750 E. Terra Cotta, Ste. B Crystal Lake, IL 60014	Crystal Lake	Leased	LIC # 162 EIN 39-0816848
Mercy Delavan Medical Center 1038 E. Geneva St. Delavan, WI 53115	Delavan	Owned	LIC # 162 EIN 39-0816848
Mercy Edgerton Medical Center 217 N. Main Street Edgerton, WI 53534	Edgerton	Owned	LIC # 162 EIN 39-0816848
Mercy Evansville Medical Center 300 Union Street Evansville, WI 53536	Evansville	Owned	LIC # 162 EIN 39-0816848
Mercy Harvard Clinic South 348 S. Division Harvard, IL 60033	Harvard	Owned	LIC # 162 EIN 39-0816848

Facility	City	Leased vs. Owned	Licensing/Employer ID Numbers
Mercy Harvard Hospital Clinic 1001 Grant Street Harvard, IL 60033	Harvard	Owned	LIC # 162 EIN 39-0816848
Mercy Harvard Rehabilitation and Fitness Center 1000 Hayes Harvard, IL 60033	Harvard	Owned	LIC # 162 EIN 39-0816848
Mercy Health Mall (includes retail pharmacy, optical, and medical equipment/supplies) 1010 North Washington Janesville, WI 53548	Janesville	Owned	LIC # 162 EIN 39-0816848
Mercy Lake Geneva Medical Center 350 Peller Road Lake Geneva, WI 53147	Lake Geneva	Owned	LIC # 162 EIN 39-0816848
Mercy Lakeside Orthopaedics 352 Peller Road Lake Geneva, WI 53147	Lake Geneva	Owned	LIC # 162 EIN 39-0816848
Mercy Mall Clinic 1010 North Washington Janesville, WI 53548	Janesville	Owned	LIC # 162 EIN 39-0816848
Mercy McHenry Internal Medicine Center 633 Ridgeview Drive McHenry, IL 60050	McHenry	Leased	LIC # 162 EIN 39-0816848
Mercy McHenry Medical Center 3922 Mercy Drive McHenry, IL 60050	McHenry	Owned	LIC # 162 EIN 39-0816848
Mercy Milton Medical Center (includes retail pharmacy) 725 South Janesville Street Milton, WI 53563	Milton	Leased	LIC # 162 EIN 39-0816848
Mercy Northwest Women's Group 47 West Acorn Lane Lake in the Hills, IL 60156-4804	Lake in the Hills	Leased	LIC # 162 EIN 39-0816848
Mercy Regional Cancer Center 1000 Mineral Point Avenue Janesville, WI 53548	Janesville	Owned	LIC # 162 EIN 39-0816848
Mercy Regional Dialysis Center 903 Mineral Point Avenue Janesville, WI 53548	Janesville	Owned	LIC # 162 EIN 39-0816848
Mercy Regional Lung Center 903 Mineral Point Avenue Janesville, WI 53548	Janesville	Owned	LIC # 162 EIN 39-0816848
Mercy Richmond Medical Center 9715 Prairie Ridge Richmond, IL 60071	Richmond	Owned	LIC # 162 EIN 39-0816848
Mercy Sharon Medical Center 118 Plain Street Sharon, WI 53585	Sharon	Leased	LIC # 162 EIN 39-0816848

**Attachment 11: Background of Applicant**

<b>Facility</b>	<b>City</b>	<b>Leased vs. Owned</b>	<b>Licensing/Employer ID Numbers</b>
Mercy Sports Medicine and Rehabilitation Center 557 North Washington Janesville, WI 53548	Janesville	Owned	LIC # 162 EIN 39-0816848
Mercy Terrace 510 N. Terrace Street Janesville, WI 53548	Janesville	Owned	LIC # 162 EIN 39-0816848
Mercy Whitewater Medical Center 507 West Main Street Whitewater, WI 53190	Whitewater	Owned	LIC # 162 EIN 39-0816848
Mercy Whitewater Sports Medicine & Rehabilitation Center 519 West Main Street Whitewater, WI 53190	Whitewater	Owned	LIC # 162 EIN 39-0816848
Mercy Woodstock Medical Center (includes retail pharmacy) 2000 Lake Avenue Woodstock, IL 60098	Woodstock	Owned	LIC # 162 EIN 39-0816848
<b>Other Services</b>			
House of Mercy Homeless Shelter 320 Lincoln Street Janesville, WI 53548	Janesville	Owned (Community service)	EIN 39-0816848
Mercy Options-Cooperative Childcare Institute 20 East Court Street Janesville, WI 53548	Janesville	Leased	LIC # 162 EIN 39-0816848

**Attachment 11: Background of Applicant**

## CONFIRMATION OF NO ADVERSE ACTIONS

There have been no adverse actions taken against any facility owned or operated by Mercy Alliance, Inc. or Mercy Crystal Lake Hospital and Medical Center (the applicants) during the three years prior to filing the application.

Dated: December 27, 2010



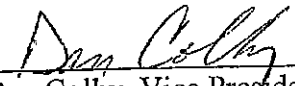
MERCY ALLIANCE, INC.  
MERCY CRYSTAL LAKE HOSPITAL AND MEDICAL CENTER, INC.

AUTHORIZATION TO ACCESS DOCUMENTS

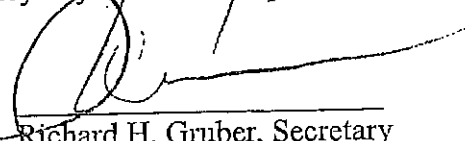
This document is an authorization submitted by Mercy Alliance, Inc. and Mercy Crystal Lake Hospital and Medical Center, Inc. (together referred to as the "Applicants") to allow the Illinois Health Services Review Board and the Illinois Department of Public Health (DPH) to have access to any documents necessary to verify information submitted in connection the Applicants' application for a Certificate of Need to build a hospital in Crystal Lake, Illinois. The authorization includes, but is not limited to: official records of DPH or other State agencies; the licensing or certification records of other states, when applicable; and the records of nationally recognized accreditation organizations. This authorization is submitted pursuant to Title 77, section 1110.230 of the Illinois Administrative Code.

Dated this 23<sup>rd</sup> day of December 2010.

Mercy Alliance, Inc

By:   
Dan Colby, Vice President

Mercy Crystal Lake Hospital and Medical Center, Inc.

By:   
Richard H. Gruber, Secretary

## **Purpose of the Project**

### **1. 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 proposes to modify its original application from a proposal to establish a 128-bed hospital and multi-specialty physician clinic in Crystal Lake, IL, to a 70-bed hospital at the same location to improve the health care and well-being of the market area population, and, in particular, those residents within the communities of Crystal Lake, Algonquin, Lake in the Hills and Cary. This project is proposed to solve the need for patients to have a more centralized means of receiving healthcare. It is focused on the expanding population base of the area who are disadvantaged due to the existing problems and issues identified in Item 3 below. As modified, the applicant proposes to establish 70-bed hospital which will contain 56 medical/surgical, 10 obstetric, and 4 intensive care beds. The applicant will also construct a clinic connected to the hospital to house physician offices. The hospital will contain 162,538 gross square feet and the clinic will contain 76,694 gross square feet. The total estimated project cost is \$115,114,525. This represents a savings of \$84,229,908 from the original proposal.

### **2. Define the planning area or marketing area, or other, per the applicant's definition.**

The planning/market area for this project is approximately a 30-minute drive time radius from the proposed project site in Crystal Lake, IL. Please see the map at the end of this section. The drive-time radius calculations were determined utilizing MapQuest and an adjustment factor of 1.15 as prescribed by the HFSRB (in 77 Ill. Adm. Code 1100.510) for projects located within McHenry County (see service area map at end of section). The majority of patients referred for inpatient services by MHS physicians originate from within this service area, accounting for 83% of patients from 7/1/09–6/30/10.

### **3. Identify the existing problems or issues that need to be addressed, as applicable and appropriate for the project.**

The applicant has identified the following existing problems or issues that need to be addressed:

- A shortage of primary and specialty trained physicians that results in a limitation of access to services;
- Lack of available emergency services due to frequent bypass conditions at the two existing facilities;
- A maldistribution of hospital beds that results in limited access to services;
- Excessive traffic congestion that results in current and future excessive travel times to the other facilities;
- This project will allow for cost savings through improved efficiencies, improve patient care quality, and increase access to care;
- Continued population growth in the market area resulting in increased demands for services;
- Inadequate health services to the growing geriatric population;
- Insufficient access to care for the indigent population in the market area; and
- Advantages of a 70-bed hospital as proposed in this modification.

### **4. Sources of information:**

Map Quest – drive time estimates to establish planning/market area

Nielsen Claritas, Inc. New York, N.Y.; U.S. 2000 Census reports

McHenry County Healthy Community Study, Executive Summary Priorities and Report of Findings, November 6, 2006

McHenry County Healthy Community Study: Community Analysis Report, November 6, 2006

CDC, National Center for Health Statistics, *Vital and Health Statistics*, Series 13

<https://healthcarereportcard.illinois.gov/hospitals/view/101210>

<https://healthcarereportcard.illinois.gov/hospitals/view/101241>

Northwest Herald newspaper, May 10 and 11, 2007

Gewalt Hamilton Associates, Inc., June 27, 2003 and December 27, 2010

Thomson Reuters Healthcare – MarketPlanner Plus and Market Expert physician demand ratios

National Institute of Standards and Technology, November 10, 2007

**5. Detail how the project will address or improve the previously referenced issues, as well as the population's health status and well-being.**

The applicant plans to address the identified issues, and initiate efforts to improve the population's health status and well-being, as identified below:

a. A shortage of specialty trained physicians that results in limited access to services

The applicant believes that the shortage of specialty physicians is one of the primary reasons that residents of McHenry County are leaving the county in order to seek medical care. According to physician manpower ratios from Thomson Reuters, McHenry County has a deficit of 49.9 physicians as of March 2010.<sup>1</sup> This includes an estimate of a 29.4 FTE shortage in the area of primary care physicians and the balance in specialty care. This is consistent with the national experience. Both the Council on Graduate Medical Education and the American Medical Association recognize a current physician shortage in the U.S. that will worsen over the next several years. The operational model utilized by the applicant has been implemented effectively to recruit and retain needed physicians.

Without an adequate physician supply, residents of the county must seek care from physicians in other locations. These physicians, in turn, will utilize inpatient facilities in areas closer to their offices; i.e., outside of McHenry County. Accordingly, the applicant believes the access problem stems from an undersupply of physicians in the community. The applicant intends to address this access problem through the recruitment of 45 physicians into McHenry County at the Crystal Lake location. This is the rationale for the medical office building adjoining the hospital facility in the Project.

The applicant believes that its model of employed physician partners will not only address the McHenry County access problem, but also provide sufficient utilization of the proposed hospital. Specifically, the Mercy Crystal Lake Hospital and Medical Center will be a part of a fully integrated health care delivery system. This system is based on the Mayo Clinic model, where hospital and physician offices are part of the same entity under one roof. An integrated system functions differently than other health care models. The fully integrated model improves patient care, as patients have all the benefits of a multi-specialty clinic, as well as access to diagnostic services, emergency services, surgery suites, and other hospital-based services. Such integrated services will greatly benefit emergency room patients if they require attention by a pediatrician, cardiologist, ear nose and throat specialist, orthopedic surgeon, or other specialists who are present on-site in the clinic at the time the patient is seen in the emergency room. The reality of medicine is that physicians direct hospital admissions. The logical extension of the 45-physician, multi-specialty clinic operation, OB services, and the proposed emergency department is the availability of

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<sup>1</sup> Thomson Reuters Healthcare – MarketPlanner Plus, Market Expert physician demand ratios

hospital beds. In addition to the physician partners located at the Mercy Crystal Lake Medical Center, patients will have access to over 300 other physicians in the Mercy Alliance system.

Mercy Alliance, through its affiliates, employs a broad base of physicians, podiatrists, allied health professionals, and nurses. Moreover, Mercy Crystal Lake will operate an open medical staff model so it is not necessary for a doctor, a dentist, or a podiatrist to be employed at the hospital or clinic in order to obtain privileges at Mercy Crystal Lake Hospital. Thus, patients will be able to see their family doctor, be referred to a medical or surgical specialist, have all necessary diagnostic tests performed and, if necessary, outpatient or inpatient surgery and hospitalization and rehabilitation care, all at the site, by the same organization with common patient electronic medical records.

**b. Lack of available emergency services due to bypass conditions at the two existing facilities**

The two hospital facilities serving the northeast and center of the county have had the unfortunate distinction of having the highest bypass rates of any hospital in all the collar counties. Centegra Hospital McHenry reported 39.8 hours of BYPASS from 1/1/09–12/31/09. Hours reported to the IDPH come from the facility.<sup>2</sup> Centegra Hospital Woodstock reported 25.45 hours of BYPASS from 1/1/09–12/31/09.<sup>3</sup> This is not a new phenomenon as documented through a Northwest Herald newspaper article published on May 10, 2007 and again on May 11, 2007. The article reports that "McHenry County's two trauma-level hospitals have spent more time on bypass (a circumstance where everyone except new walk-in or severely traumatized emergency patients are directed to other hospitals) than any other hospitals in Chicago's collar counties over the past three years."<sup>4</sup> The ability to provide access to critical emergency care services is at the heart of basic community health needs.

The addition of a fully staffed and operational emergency department located in the heart of the most densely populated area of McHenry County will offer easier and timelier access to EMS personnel serving that region. Additionally, the 24-hour emergency department will be available to provide services during those times when other local emergency departments are on bypass.

**c. A maldistribution of hospital beds that results in a limitation for access to services**

The applicant believes that the location chosen for the project will positively impact a maldistribution of hospital beds in the market area. Maldistribution is typified by the lack of a sufficient population concentration in an area to support the proposed project. Said in the positive, the applicant must demonstrate that the population concentration in the area is in fact sufficient to support the proposed project. The dot density map shown on p. 114 depicts the concentration of persons within the planning/market area of the project. It should be noted that the greatest concentration of population is in the McHenry County/Crystal Lake region where the applicant's project is proposed to be constructed. Existing facilities are also noted on the attachment to demonstrate that they are physically located in areas of lesser population concentration. The applicant believes that locating its project in the heart of the area of greatest population will improve access.

As previously noted, the population of McHenry County is growing rapidly. Facilities located in the county are at or near the State's target utilization rates. Moreover, data indicates that the county

<sup>2</sup> <https://healthcarereportcard.illinois.gov/hospitals/view/101210>

<sup>3</sup> <https://healthcarereportcard.illinois.gov/hospitals/view/101241>

<sup>4</sup> Northwest Herald newspaper, May 10 and 11, 2007

currently has a shortage of 49.9 physicians. As a result, it follows that residents are seeking care outside of the community. From 7/1/09–6/30/10, 53% of McHenry County residents received inpatient care outside the county (and 22% at hospitals outside the defined service area). During the same period, 70% of residents from the immediate service area (Crystal Lake, Algonquin, Lake in the Hills, and Cary) received inpatient care outside the county (and 21% at hospitals outside the defined service area). Accordingly, the population growth in McHenry County will continue to drive the need for additional facilities. The applicant's model for care, its intention to recruit 45 physicians to the Crystal Lake facility in McHenry County to address the physician undersupply and the construction of the Project will support the community's growing need for care in the community—not in other counties and planning areas.

d. Excessive traffic congestion that results in current and future excessive travel times of other facilities

As indicated in Item 3f below, McHenry County's population continues to increase at among the highest percentage rates of any county in Illinois. Projections indicate that this growth pattern will continue into the future. In spite of this growth, there has been no funding or advanced planning done to relieve the growing traffic congestion on either U.S. Highway 14 or Illinois 31. These two highways constitute the major thoroughfares in the most densely populated area of the applicant's planning/market area. In a traffic study commissioned by the applicant in 2003, peak travel times between the applicant site and the two nearest hospitals in the region demonstrated the traffic congestion associated with these two thoroughfares. The same traffic study was updated for purposes of this application, and its findings demonstrate the continued congestion in the region. It is important to note that, with the expected continued population growth within the region, the study reports future travel times that meet or exceed the States norm of 30 minutes between services.<sup>5</sup>

Construction of the Mercy Crystal Lake Hospital and Medical Center at the center of the most densely populated area of McHenry County will significantly reduce travel time for the areas EMS personnel to emergency services. While this does not specifically reduce traffic congestion, per se, it does significantly reduce the need to travel to emergency departments in other facilities in the region from that portion of the County that is most densely populated and thus most statistically likely to require such services.

e. This project will allow for cost savings through improved efficiencies, improved patient care quality, and increased access to care

With the signing into law of the Patient Protection and Affordable Care Act (H R. 3590) and Health Care and Education Reconciliation Act (H.R. 4872), a new era in health care has begun. The new law constitutes the largest change to America's health care system since the creation of Medicare and Medicaid. The law adopts several key delivery system reforms to better align provider incentives to improve care coordination and quality and to reduce costs. The challenge to all health care organizations will be to successfully navigate this changing landscape.

The applicant believes that its model of employed physician partners will address the McHenry County access problem as identified, allow for cost savings through improved efficiencies, and improve patient care quality. Specifically, the Mercy Crystal Lake Hospital and Medical Center will be part of a fully integrated health care delivery system. This system is based on the Mayo Clinic model, where hospital and doctor offices are part of the same entity under one roof. An integrated system functions differently than other health care models. The fully integrated model improves

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<sup>5</sup> Gewalt Hamilton Associates, Inc., June 27, 2003 and December 27, 2010

patient care, as patients will have all the benefits of a multi-specialty clinic, as well as the needed access to diagnostic services, an emergency room, surgery suites, and other hospital-based services. This will greatly benefit emergency room patients if they require attention by a pediatrician, cardiologist, ear nose and throat specialist, orthopedic surgeon, or other specialists who are present on-site in the clinic at the time the patient is seen in the emergency room.

The reality of medicine is that physicians direct hospital admissions. The logical extension of the 45-physician, multi-specialty clinic operation, OB services, and the proposed emergency department is the availability of hospital beds. In addition to the physicians located at the Mercy Crystal Lake Medical Center, the patients will have access to over 300 other physicians in the Mercy Alliance system, as well as to other specialists who provide tertiary care at other hospitals.

Mercy Alliance, through its affiliates, employs a broad base of physicians, podiatrists, allied health professionals, and nurses. Moreover, Mercy Crystal Lake will operate under an open-staff medical staff model so it is not necessary for a doctor, a dentist, or a podiatrist to be employed at the hospital or clinic in order to obtain privileges at Mercy Crystal Lake Hospital. Thus, patients will be able to see their family doctor, be referred to a medical or surgical specialist, have all necessary diagnostic tests performed and, if necessary, outpatient or inpatient surgery and hospitalization rehabilitation care, all at the site, by the same organization with common patient electronic medical records. All of this results in more cost-effective delivery of health care services.

Mercy's commitment to patient care quality is best exemplified in its recognition by the U.S. Department of Commerce who honored Mercy with the Malcolm Baldrige National Quality Award. The award is the United States' highest Presidential honor for quality and organizational performance excellence, and was personally presented by President George W. Bush in April 2007.<sup>6</sup> Mercy Health System is unique in receiving the honor in that its entire vertically integrated health system has been recognized for organizational excellence. This means that all entities across the entire System are receiving this recognition as a vertically integrated organization achieving the highest standards of quality and organizational excellence.

f. Continued population growth in the market area resulting in increased demands for services

The McHenry County Healthy Community Study, commissioned by a variety of organizations in 2006, determined that access to health care was a primary priority. Their study identified barriers to care that included cost, transportation, language or other personal or cultural reasons. They found that one of eight McHenry County households had a member who did not seek care during the two years preceding the study because of cost., and that one of five single parents did not seek care. They also reported that services in McHenry County tend to be concentrated in a few places, mostly Woodstock. They reported that those who use services see a need for more locations throughout the County.<sup>7</sup>

According to the same report, the 2005 Census estimate found that the population of McHenry County stood at 303,990, an increase of 16.9% from the decennial Census in 2000 and a 65.9% increase since the 1990 Census.<sup>8</sup> Nielsen Claritas, Inc. has estimated that the 2010 population in McHenry County stood at 341,297 and is expected to grow to 371,106 by 2015.<sup>9</sup> This projected 8.7% growth further exacerbates the findings from the McHenry County Health Communities study

<sup>6</sup> Corporate Report Wisconsin, June 1, 2008

<sup>7</sup> McHenry County Healthy Community Study, Executive Summary Priorities and Report of Findings, November 6, 2006, p. 9

<sup>8</sup> McHenry county Healthy Community Study: Community "Analysis Report, November 6, 2006, p. 17

<sup>9</sup> Nielsen Claritas, Inc. New York, NY; U.S. 2000 Census reports.

findings. These statistics demonstrate that McHenry County's population is growing at one of the fastest rates of any county in Illinois.

As referenced in 5(a), data indicates that there is a need for an additional 49.9 physicians to serve its current population. It is the applicant's intent to address this need for physicians and to provide an inpatient facility to treat what will be the resulting need for hospital services. If this need is addressed, the need for the facility will exist as the physicians will reduce the outmigration of services from McHenry County. Accordingly, the population growth and service use factors indicate that the county can support the Project, particularly because the applicant is meeting the need for physicians.

With respect to individuals receiving treatment at the new facility, Attachment 15 shows the calculated utilization of the facility by the 45 physicians at the Crystal Lake site, from the other employed physicians of the applicant, and through the emergency department. Calculations are based on the applicant's historical experience at its hospital facility in Janesville, Wisconsin, where the same integrated health delivery model is employed.

#### g. Inadequate health services to the growing geriatric population

According to Nielsen Claritas, Inc., using U.S. Census 2000 data adjusted for annual estimates, the population of residents in McHenry County age 65 and above stands at 36,605. Nielsen Claritas projects that that population will total an estimated 45,435 by 2015, or a 24.0% increase. Additionally, the target service area for geriatric services identified for this application (McHenry County, plus Barrington, Carpentersville, Dundee, and Elgin) shows an Age 65+ population growth of 48.7% in the decade between 2000 and 2010 and projects a further growth of 24.0% in the next five years.<sup>10</sup> This is clearly the fastest growing demographic in McHenry County and speaks to the need for additional geriatric care and geriatric specialists.<sup>11</sup> Based on research completed by the applicant, it was determined there is only one limited geriatric center in the planning/market area.

Moreover, as the baby boomer generation matures, this segment will continue to grow in both numbers and needs. It is the intent of the applicant to establish a geriatric specialty clinic as a part of its overall operations at Mercy Crystal Lake.

Geriatrics is a sub-specialty of medicine that focuses on health care of the elderly. It aims to promote health and to prevent and treat diseases and disabilities in older adults. Geriatrics is separated from internal medicine as a distinct entity in the same way that neonatology is separated from pediatrics.

Geriatrics differs from adult medicine in many respects. The body of an elderly person is substantially different physiologically from that of an adult. Old age is the period of manifestation of decline of the various organ systems in the body. This varies according to various reserves in the organs, as smokers, for example, consume their respiratory system reserve early and rapidly.

Geriatric physicians are able to differentiate between disease and aging effects; e.g., renal impairment may be a part of aging but renal failure is not. Also, urinary incontinence is not part of normal aging, but it is a disease that may occur at any age and is frequently treatable. Geriatricians aim to treat the disease and to decrease the effects of aging on the body. Years of training and experience, above and beyond basic medical training, go into recognizing the difference between what is normal aging and what is in fact pathological.

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<sup>10</sup> Nielsen Claritas, Inc. New York, N.Y.; U.S. 2000 Census reports

<sup>11</sup> Nielsen Claritas, Inc. New York, N.Y.; U.S. 2000 Census reports

With all of that in mind, Mercy is committed to establishing a geriatric specialty clinic to serve this growing segment of the McHenry County population. Using the experience gained from a similar geriatric specialty clinic operated by Mercy in Wisconsin, it is our intent to bring the most comprehensive geriatric services to McHenry County as is possible.

#### h. Insufficient access to care for the indigent population in the market area

The 2005 American Community Survey results, published in the latest McHenry County Healthy Community Study: Community Analysis Report, poverty rates for the entire population and proportions of county children in poverty have increased from the 2000 Census (3.8%) to the 2005 ACS estimate (6.3%). The study findings also detail that poverty rates differ considerably by ethnicity. Reported rates for McHenry County blacks (6.6%) and Hispanics (12.5%) are much higher than those for whites and non-Hispanics. Poverty thresholds for 2005, as defined by the federal government, were \$19,971 for a family of four with two children and \$9,973 for a single individual. Crystal Lake is the home community for most of the ethnic families in McHenry County.

The study also found that the number of persons receiving Medicaid in McHenry County stood at 5.2% of the total population in 2005. The applicant believes that both those individuals at or below the threshold for poverty and those receiving Medicaid have increased as a result of the recession. In the area of Medicaid recipients, this would be consistent with the trend of growth that has occurred since 1990 to 2005. The trend that was reported in the Healthy Community Study shows an escalation of Medicaid recipients from 2.2% of the population in 1990 to 5.2% in May 2006.<sup>12</sup>

The applicant is committed to provide health care services to all patients regardless of their ability to pay. Mercy will meet this goal by operating an emergency department that will provide services to all patients, including the poor, by implementing a charity care program to provide reduced fee and free services to qualifying patients, and by participating in governmental payment programs, including Medicare and Medicaid. Mercy will measure this goal by dollar volume of services rendered and numbers of patients served.

Further, Mercy will reach out to community-based organizations in an effort to collaborate in the provision of care to the indigent. Mercy has a reputation and track record in this respect of successful collaborations. Examples of successful collaborations in programs serving the indigent include our efforts with HealthNet of Janesville, a free primary care clinic, and our physician services arrangements with Beloit Area Community Health Center, a private, not-for-profit Federally Chartered Health Center. We are committed to replicating these efforts in the planning/market area identified for this project.

#### i. Advantages of a 70-bed hospital as proposed in this modification

Establishment of Additional Hospitals: This criterion sets forth a minimum of 100 beds for the establishment of new hospitals located within a Metropolitan Statistical Area ("MSA"). This review criterion originally required that hospitals be constructed with a minimum of 250 Med/Surg beds, which was reduced to the current level in the early 1980s.

The reduction in the criterion over time recognizes that changes in the delivery of health care have resulted in smaller facilities being able to treat the same patient volume. Specifically, environmental factors such as a dramatically declining average length of stay, private rooms

<sup>12</sup> McHenry County Healthy Community Study: Community Analysis Report, November 6, 2006, pages 90, 91, 94

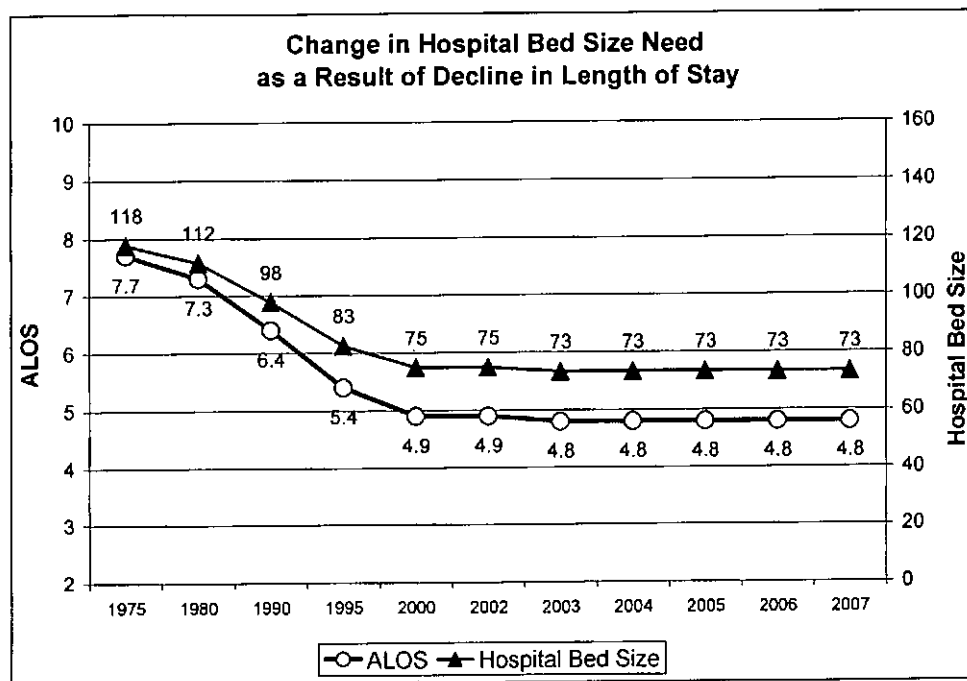


versus semi-private rooms, and increased financial viability of smaller hospitals have resulted in the fact that the same number of patients can be served adequately by smaller facilities with fewer beds.

The average length of stay for hospital inpatients have declined dramatically over the past 35 years due primarily to:

- The advancement of technology and increase in outpatient procedures;
- Medicare's implementation of prospective reimbursement systems based upon diagnosis related groups, or DRGs, in October 1983; and
- Pressures of managed care reimbursements.

As a result, a 70-bed hospital constructed in 2011 could adequately treat the same number of patients as a 100-bed hospital constructed in 1980. The following graph, using data from the CDC for noninstitutional, non-federal, short-stay hospitals, demonstrates this point:



As the chart indicates, due solely to the decline in average length of stay, fewer beds are required to treat the same patient volume than were required in 1975.<sup>13</sup> Because of this data, the appropriateness of the 100-bed rule would seem to be called into question.

Given these clear trends, the project is being submitted with a total of 70 beds which roughly corresponds to the ratio of beds derived from the CDC data cited above when compared to the State's review criterion developed in the early 1980s and a continued decline in average length of stay through the opening of this facility in 2014.

<sup>13</sup> CDC, National Center for Health Statistics, *Vital and Health Statistics*, Series 13

Conversely, the average number of beds per thousand population in both Illinois and the nation as a whole is 2.6. In McHenry County the number of beds per thousand population is 1.0. This statistic also relates to the bed need inventory numbers for McHenry County that currently show a need for 83 additional medical/surgical beds and the anticipated adjustments to that number based upon new census data. The bed size of 70 proposed in this modification with 56 med/surg beds is well within the stated inventory need in either case.

Further support for the size of hospital proposed in this modification comes from industry trends from 2001 to present. According to the American Hospital Association, 58 new hospitals have been established nationwide since 2001. Of that total, 41 were established with 100 beds or less. In fact, according to the American Hospital Association, the majority of hospitals (e.g., non-replacement hospitals) built since 1981 have fewer than 100 beds. This modification to our original application proposes a facility consistent with that trend.

As it relates to the allocation of additional beds, it is noted that, as proposed in this modification, the utilization requirements for ICU beds is met as all six facilities identified within 45 minutes travel time are experiencing high utilization for ICU beds.

With respect to OB beds, the Inventory of Health Care Facilities and Services and Need Determination shows a need for 23 additional OB beds in the A-10 planning area. Accordingly, there is a documented need for the 10 OB beds contained within the Project. The successful completion of the Project will help alleviate this need.

As noted in the first SAR associated with this project, the average utilization of med/surg beds for the existing providers impacted by this project is 84%. This is only 1% less than the targeted utilization rate established by the state. As population growth continues and the population ages as established elsewhere in this modification, it is only logical to assume that the existing facilities will meet the utilization targets established by the State in the near term and confirm the need for an additional facility, without that facility negatively impacting those existing facilities.

Unit size: The May 2011 Update to the Inventory of Health Care Facilities and Services and Need Determination showed a calculated need for 83 medical/surgical, 27 obstetric, and 8 intensive care beds for the A-10 planning area. This project proposes 56 medical/surgical, 10 obstetric, and 4 intensive care beds. These numbers are well within the documented need.

**6. Provide goals with quantified and measurable objectives, with specific time frames that related to achieving the states goals as appropriate**

The applicant has identified the following goals and measures:

Physician Shortage

Project goal: reduce shortage of physicians in project area. Mercy will attain and measure this goal as follows: Mercy will develop and implement a physician recruitment plan designed to reduce the identified physician shortage by 85% within three years of the opening of the Mercy Crystal Lake Hospital.

Maldistribution of Beds

Project goal: Better distribution of hospital beds. Mercy will attain this goal by building the Mercy Crystal Lake Hospital in the largest community in McHenry County to provide more direct access

to hospital care for citizens of Crystal Lake and its surrounding area. The measurement of the goal will be construction of the hospital and placement of its beds into service.

#### Traffic Congestion

Project goal: Eliminate excessive or dangerous drive times to hospitals for patients and emergency vehicles. Mercy will attain this goal by constructing the Mercy Crystal Lake Hospital in the largest community in McHenry County. Mercy will measure this goal by traffic studies of patient and emergency vehicle drive times each of the first three years following the opening of the hospital.

#### Population Growth

Project goal: Meet the needs for physician and hospital care for the growing McHenry County population. Mercy will meet and measure this goal by creating and implementing the physician recruitment plan described above and by continuing to offer services at the epicenter of McHenry County's population and diversity.

#### Aging Population

Project goal: Meet the health care needs of an aging population. Mercy will meet this goal by recruiting two or more physicians with expertise in geriatric medicine and by implementing programs to serve an elderly population. Mercy will measure this goal by including in the physician recruitment program described above physicians with expertise in geriatric medicine, and by implementing programs designed specifically to meet the health care needs of the elderly.

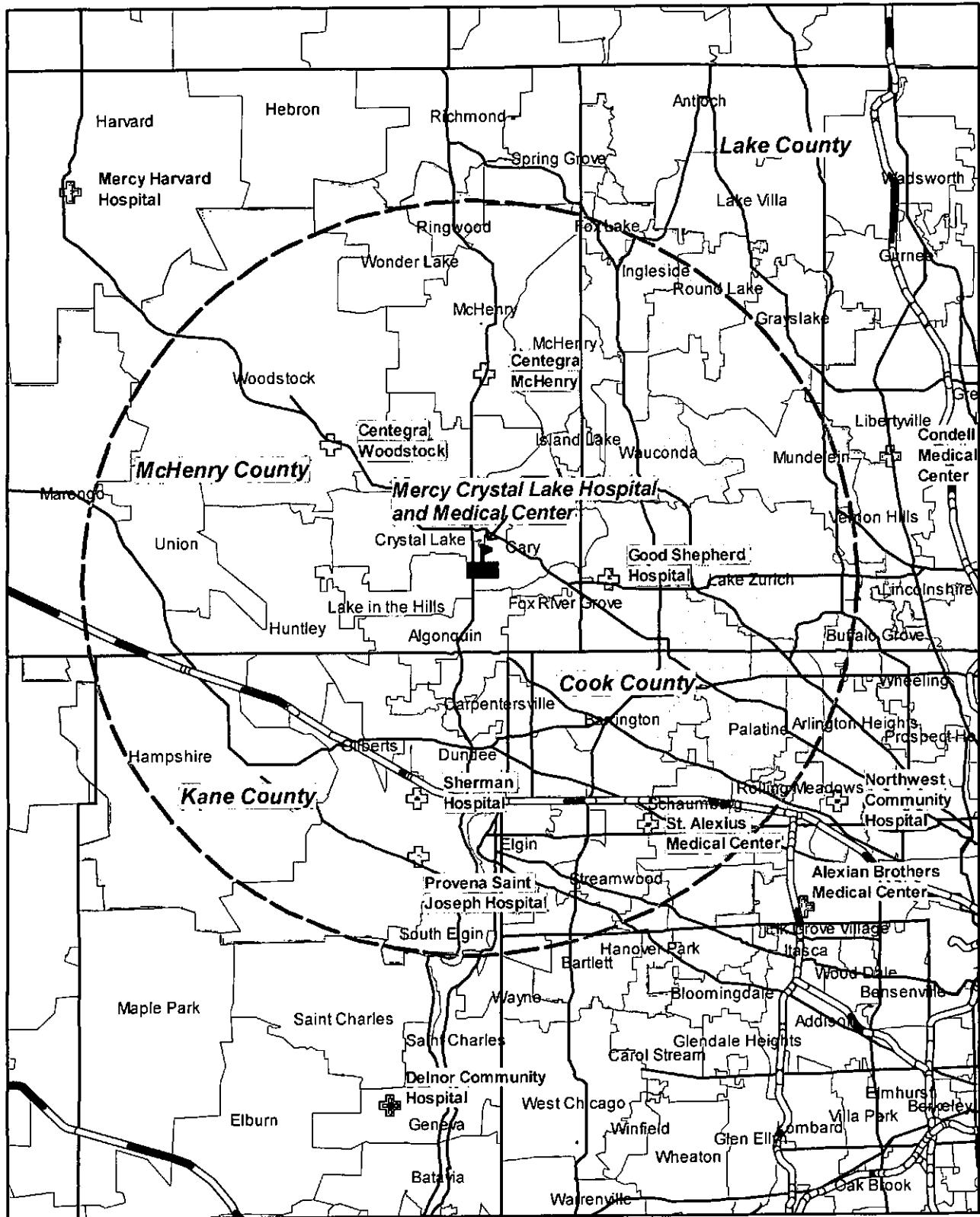
#### Wellness

Project goal: Improve the health of the community. Mercy will meet this goal by conducting a biannual health needs assessment that will seek input from local public health agencies, churches, schools, and social service agencies and implementing a wellness plan to address identified needs. Mercy will measure this goal by analyzing the success of the wellness programs.

#### Serve the Poor

Project goal: To provide health care services to all patients regardless of their ability to pay. Mercy will meet this goal by operating an emergency department that will provide services to all patients, including the poor; by implementing a charity care program to provide reduced fee and free services to qualifying patients; and by participating in governmental payment programs, including Medicare and Medicaid. Mercy will measure this goal by dollar volume of services rendered and numbers of patients served and will report to the State the continuously rising level of charity care provided.

## Mercy Crystal Lake Hospital and Medical Center Geographical Service Area



**Physician Need Analysis by Specialty and County  
March 2010**

*Physician Surplus/(Deficit)*

<u>Specialty</u>	<u>Rock County</u>	<u>Walworth County</u>	<u>McHenry County</u>
<b>Primary Care:</b>			
Family Medicine	5.2	(6.0)	(41.5)
Internal Medicine	(4.7)	(4.0)	10.1
Obstetrics and Gynecology	(5.0)	(0.4)	(4.9)
Pediatrics	(4.7)	(0.4)	6.8
PC TOTAL	(9.2)	(10.7)	(29.4)
<b>Specialty Care:</b>			
Allergy/Immunology	0.4	0.5	(1.6)
Cardiac/Thoracic Surgery	(0.1)	(1.5)	1.1
Cardiology	(2.6)	0.6	(3.0)
Dermatology	(2.4)	0.7	(7.9)
Endocrinology	(0.7)	(1.4)	(0.7)
Gastroenterology	(2.1)	1.6	(4.1)
General Surgery	0.4	(3.4)	(5.7)
Hematology/Oncology	1.3	1.3	2.5
Infectious Disease	(1.1)	(1.5)	(3.3)
Nephrology	0.0	(0.5)	2.0
Neurology	1.0	(0.1)	1.7
Neurosurgery	(0.6)	(0.6)	(3.3)
Ophthalmology	0.2	(0.7)	(0.9)
Orthopedic Surgery	(3.3)	(0.3)	6.0
Otolaryngology	(1.0)	1.1	(1.4)
Physical Med and Rehab	(1.4)	0.6	(2.0)
Plastic Surgery	(1.1)	0.5	(0.4)
Psychiatry	1.2	(0.9)	(1.8)
Pulmonology	1.5	(0.3)	2.9
Rheumatology	0.7	(0.5)	1.5
Urology	(1.6)	0.9	(2.2)
SC TOTAL	(11.3)	(3.8)	(20.5)
<b>SURPLUS/(DEFICIT) TOTAL</b>	<b>(20.5)</b>	<b>(14.5)</b>	<b>(49.9)</b>

Sources: Thomson Healthcare (demand)--MarketPlanner Plus ratios 2009  
Market Expert ratios 2009 (national, population-based model)  
Mercy Health System Planning Department (supply)

## County trauma units lead collar counties in 'bypass' time

Author(s): REGAN FOSTER - rfooster@nwherald.com Date: May 11, 2007 Section: News

) McHenry County's two trauma-level hospitals have spent more time on bypass - a circumstance where everyone except new walk-in or severely traumatized emergency patients are directed to partner hospitals - than any others in Chicago's collar counties over the past three years. Although hospitals generally spend less than 1 percent of their time on bypass, Centegra's Northern Illinois Medical Center and Memorial Medical Center consistently have spent between 3 and 5 percent of their time, respectively, on the status since March 2004, Illinois Department of Public Health numbers show. The Department of Public Health has been monitoring more than 200 hospitals across the state for the past 37 months.

So far this year, Memorial Medical Center in Woodstock, and McHenry's NIMC, rank 12th and 14th in Illinois, respectively, for time spent on bypass, state numbers show. Between Jan. 1 and April 30, Memorial accumulatively has been spent 6 days and 24 minutes - about 5 percent of the time - on bypass. NIMC has been on bypass for 4 days, 17 hours and 21 minutes, about 4 percent of the time.

Centegra spokeswoman Melissa Matussek pointed out that bypass is universal for trauma centers across the United States and that it tends to spike during flu season and because of summer injuries.

"I wouldn't even call it an issue, it just happens," she said. "We all have the same goal, to take care of the patients and make sure [they] get the best possible care."

The average bypass time for the state's hospitals last year was 0.7 percent.

Advocate Good Shepherd, a Lake Barrington-based level II trauma center, ranks 34th in the state so far this year after spending 14 hours, 10 minutes, or 0.5 percent of its time, on bypass.

All three regional hospitals fall in the same Emergency Medical Services region: Alexian Brothers Medical Center in Elk Grove Village; Delnor Community Hospital in Geneva; Advocate Health System's Lutheran General Hospital in Park Ridge; Resurrection Health Care Holy Family Medical Center in Des Plaines; Northwest Community Hospital in Des Plaines; Provena Health's Mercy Medical Center in Aurora; St. Joseph Hospital in Joliet, Rush-Copley Medical Center in Aurora; Sherman Hospital in Elgin; and St. Alexius Medical Center in Hoffman Estates.

While there are no standards as to how much time on bypass is too much, Melaine Arnold, Illinois Department of Public Health spokeswoman, said there were limitations as to how many hospitals may be on bypass at one time.

"You cannot have more than three hospitals in a geographic area on bypass at one time," she said. "There are guidelines, but those more or less are up to each region."

The frequency of bypass in McHenry County's trauma hospitals has raised questions about whether a new hospital might ease some of the strain on local emergency departments. Two competing health-care networks already have introduced proposals to build new facilities in northern Illinois.

### Bypass criteria

In order for a hospital to go on bypass, it must meet strict state criteria.

For level I and level II trauma centers, the state guidelines require that either the hospital CT scan is not working or all the operating rooms are in use and at least one trauma-case operation is required. Memorial Medical Center, NIMC and Good Shepherd are level II trauma centers, meaning, among other things, that they can provide trauma surgery within 30 minutes of a priority patient's arrival.

Other hospitals may go on bypass if there is a shortage of critical or monitored beds, if there is an internal disaster, or if there is a shortage of staffing.

"All hospitals want to ensure patient safety, first and foremost," said Mike Deering, Advocate Good Shepherd's spokesman. "We will take

all patients here and we deal with them."

Going onto **bypass** is not an easy choice, and it's one that requires a group decision, said Cindy Amore, Emergency Medical Services coordinator for McHenry County.

"[Hospital executives] will take a look to see what the potential is to take care of patients," she said.

When a **hospital** goes onto **bypass** status, it lets other **hospitals** and rescue squads in its region know.

"Whether its three, four in the morning or three in the afternoon, they notify us," said Battalion Chief Joseph Arizzi of the Wauconda Fire Department.

Arizzi's department transports patients to NIMC, Good Shepherd and Condell Medical Center in Libertyville. While Arizzi couldn't remember a single instance when all three **hospitals** were on **bypass** at the same time, he said the area's ever-increasing population had increased the frequency of **bypass**.

A need for new?

Barbara Bortner, vice president of communications for Wisconsin-based Mercy Health System, said her agency predicted four years ago that the current **hospitals** in the county would not be able to handle the increasing medical needs of the growing population.

Her company hopes to build a 128-bed **hospital** and medical office building at Route 31 and Three Oaks Road in Crystal Lake.

"The current issue demonstrates the need for another **hospital** in eastern McHenry County to provide the needed services to relieve this growing medical crisis," Bortner said. "Mercy has renewed its effort to build an overdue **hospital** in Crystal Lake."

However, Centegra's Matussek said the Illinois Health Facilities Planning Board, which would grant any certificate of need for a new **hospital**, would pursue the most efficient means of meeting the area's increased demand.

While she didn't classify it as an expansion, Matussek said her company was looking at ways to enhance its emergency care.

Centegra hopes to build a health-care campus on the northern edge of Huntley. Matussek said the company worked closely with organizations such as Woodstock's Family Health Partnership Clinic to give health-

care alternatives to patients who might not otherwise have them.

"We're looking to enhance the different ways people receive care throughout the county," Matussek said. "People who are coming to the emergency departments as doctors' offices can go to centers with a lower level of care.

"Sometimes you need to change with the times and change with your population. ... What we do, what the state is doing, and what all other **hospitals** do is [try] to provide the best care to the patients."

Advocate, for its part, is seeking a certificate of need to build a 144-bed, acute-care **hospital** at Route 120 and Wilson Road near Round Lake.

If a new **hospital** was necessary in the area, Matussek said, Centegra could add on to one of its facilities at less cost than a new **hospital** being built.

Amore said there would be both positives and negatives to any new **hospital** in the area. As a negative, she pointed to the increased drain a new **hospital** would cause on an already shallow pool of health-care workers.

"It's hard to predict whether [available workers] would have an impact on putting another **hospital** into an already condensed space," Amore said. "In the end, you're still only working with a pot with so many people in it, and you're just shifting resources from point A to point B.

"It could be a double-edged sword."

But Battalion Chief Arizzi said the new **hospital** only would improve rescue services.

"If the **hospital** [in Round Lake] is approved, we would have like a three-minute [estimated time of arrival]," Arizzi said. "Our transport times would be cut down immensely.

"If another was built in Crystal Lake, that would do nothing but benefit the fire service. It's just another option to transport if, by chance, all the **hospitals** are overloaded."

The Illinois Administrative Code sets specific criteria for when a **hospital** may go onto **bypass** status, where patients are sent to partner medical centers.

Level I and II trauma centers

· All staffed operating suites are in use or implemented with on-call teams, and at least one procedure is an operative trauma case.

· The CT scan is not working.

**All hospitals**

· The number of critical or monitored beds available in the hospital.

· Whether an internal disaster, such as a power failure, had occurred.

· The number of staff available after the hospital attempted to call in more caregivers.

· The approved regional protocols for bypass and diversion.

Source, Illinois Administrative Code

Time on bypass (Jan. 1-April 30, 2007)

Hospital percentage of time Accumulated time state rank\*

Centegra Memorial

Medical Center

(Level II trauma center)

5.06 percent 6 days, 24 minutes 12

Centegra NIMC

(Level II trauma center)

3.97 percent 4 days, 17 hours, 21 minutes 14

Advocate Lutheran

General Hospital

(Level I trauma center)

0.90 percent 1 day, 1 hour, 35 minutes 28

Advocate Good

Shepherd Hospital

(Level II trauma center)

0.50 percent 14 hours, 10 minutes 34

Mercy Harvard Hospital

(not a trauma center)

0 percent 0 minutes 45\*\*

\* Higher ranking indicates more time spent on bypass

\*\* Mercy is tied with 161 other hospitals in Illinois

Source: Illinois Department of Public Health

Note: This article was printed on May 10 and 11, 2007.



## MCHENRY WESTERN LAKE COUNTY EMS SYSTEM

### BYPASS/HOSPITAL DIVERSION

#### POLICY

It shall be the policy of the McHenry Western Lake County EMS System to provide prehospital care to patients and to transport them to the closest hospital facility. Bypass of the closest hospital facility may be appropriate when special circumstances exist. In this situation, the following guidelines and procedures **MUST** be followed:

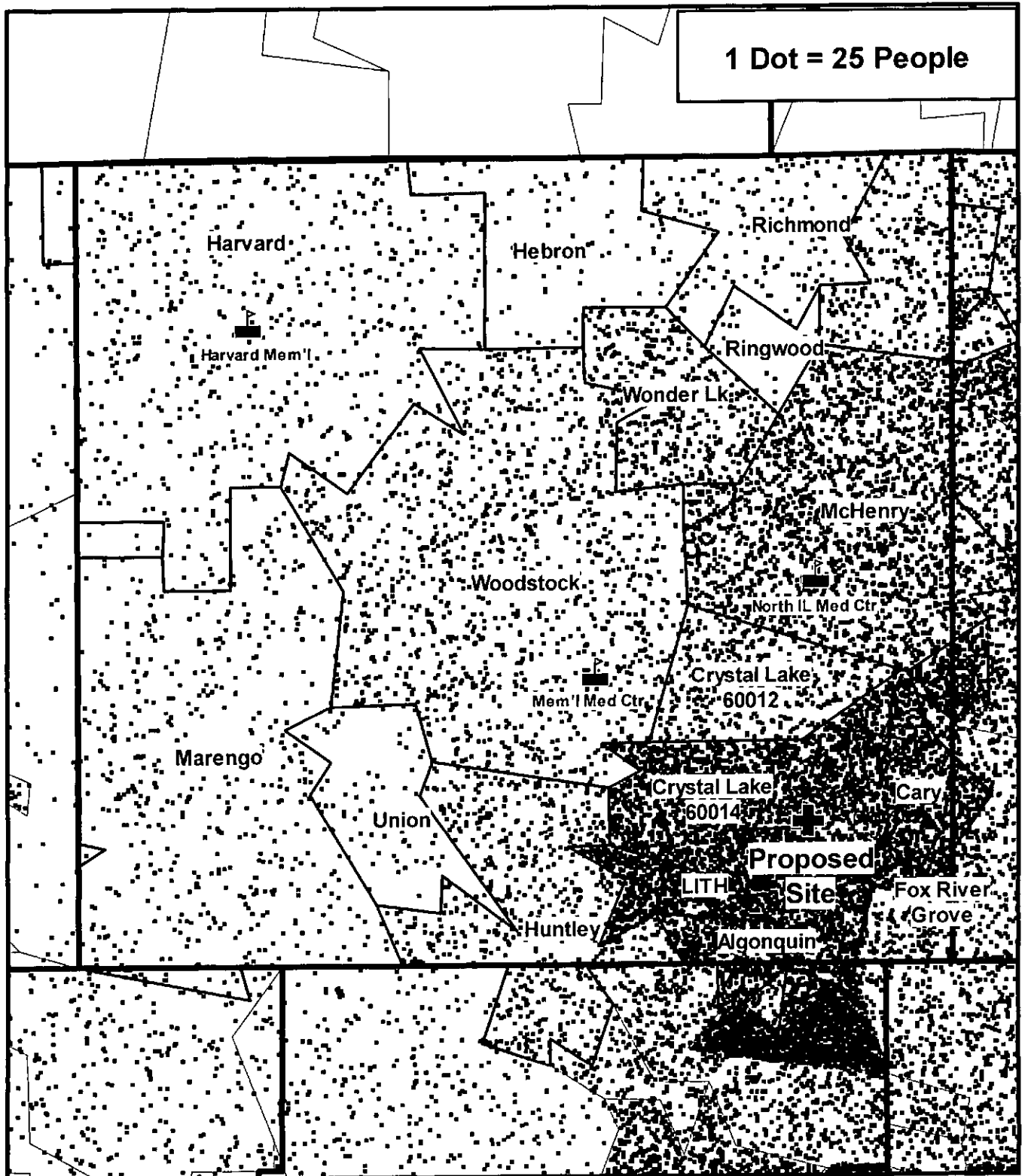
#### GUIDELINES AND PROCEDURE

1. Ambulances may bypass the closest facility when the patient would significantly benefit transport to another facility farther away and when the patient's condition is such that transport to the farther facility will not significantly increase his/her morbidity or mortality or where the guidelines of the Regional Trauma Plan are in effect. The decision to bypass the closest facility must be made through communication with the base hospital at the discretion of the ED physician in charge of the EMS run.
2. During capacity census at an EMS System Hospital, the EMS Coordinator/Designee may alert area EMS providers to the **lack of available critical care monitored beds or capacity census**. (No bed space available for inpatient admissions including flex holding areas and the ED). The ED will continue to accept reports from EMS providers, but may divert the transport to a more distant hospital, in an effort to provide appropriate medical management of the patient.
3. The decision to initiate Bypass/Ambulance Diversion will be made by the EMS Medical Director, ED Medical Director, Chief Nursing Officer, and ED Manager. Bypass will be initiated only under the following conditions:
  - a. General Bypass:
    - 1) No monitored beds available for inpatients within the facility and ED
    - 2) All potential staff to provide care for holding areas has been exhausted.
    - 3) An internal disaster exists, but not limited to a power failure, fire or flood.
  - b. Trauma Bypass:
    - 1) No available OR suites exist, all suites are staffed with "on call" teams and one team is treating a trauma.
    - 2) CT scan not available
4. The EMS System Coordinator will be notified of a decision to initiate Bypass/Ambulance Diversion. In turn, the EMS Coordinator will notify area EMS agencies and area hospitals of the need for ambulance diversion.
  - a. In accordance with IDPH regulations, Bypass may **NOT** be honored if three or more hospitals in geographic area are also under Bypass conditions and EMS transport time to the nearest facility exceeds 15 minutes.
  - b. EMS agencies will be asked to establish early radio contact with medical control to determine the most appropriate transport destination for the patient.
5. In the event of a system-wide crisis, i.e., mass casualty situation or other disaster event; the Resource Hospital will evaluate the scope of service required to effectively manage the patient care needs, as identified by the responding agency. The Medical section of the McHenry County Disaster Plan will be implemented as indicated.
  - a. If the nature of the crisis event is such that system resources cannot effectively provide the services required, the Resource Hospital will notify the Region IX RHCC Hospital for support as defined by the Region IX Disaster Plan.

6. Bypass will be canceled when the following conditions exist:
  - a. General Bypass:
    - 1) Monitored inpatient beds are available for patient admission
    - 2) Additional staffing has been obtained to staff holding areas, creating admitting bed space.
    - 3) An internal disaster has been resolved.
  - b. Trauma Bypass:
    - 1) OR suites are available.
    - 2) CT has been restored for patient use.
  - c. The EMS Coordinator will notify area EMS agencies and area hospitals of the cancellation of Bypass/Ambulance Diversion status.

BYPASS  
IMPL: 8/95; REV: 2/10

# Population Density in McHenry County 2010 Population Estimate



Source: Nielsen Claritas, Inc., New York, NY; U.S. Census 2000

## Memorandum

To: Mr. Rich Gruber  
Mercy Health System

From: Daniel P. Brinkman, P.E., PTOE

Date: December 27, 2010

Subject: Driving Time Study  
McHenry County, Illinois

850 Forest Edge Drive, Vernon Hills, IL 60061  
Tel. 847.478.9700 ■ Fax 847.478.9701

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### PART 1. PROJECT OVERVIEW

Per your request, GEWALT HAMILTON ASSOCIATES, INC. (GHA) has conducted updated driving time surveys in McHenry County, Illinois. The intent of this effort is to update similar drive time data that was conducted by GHA in June of 2003. Our study findings are discussed below. *Exhibits* referenced in the text are conveniently located at the end of this document.

### PART 2. TRAVEL TIMES SURVEY RESULTS

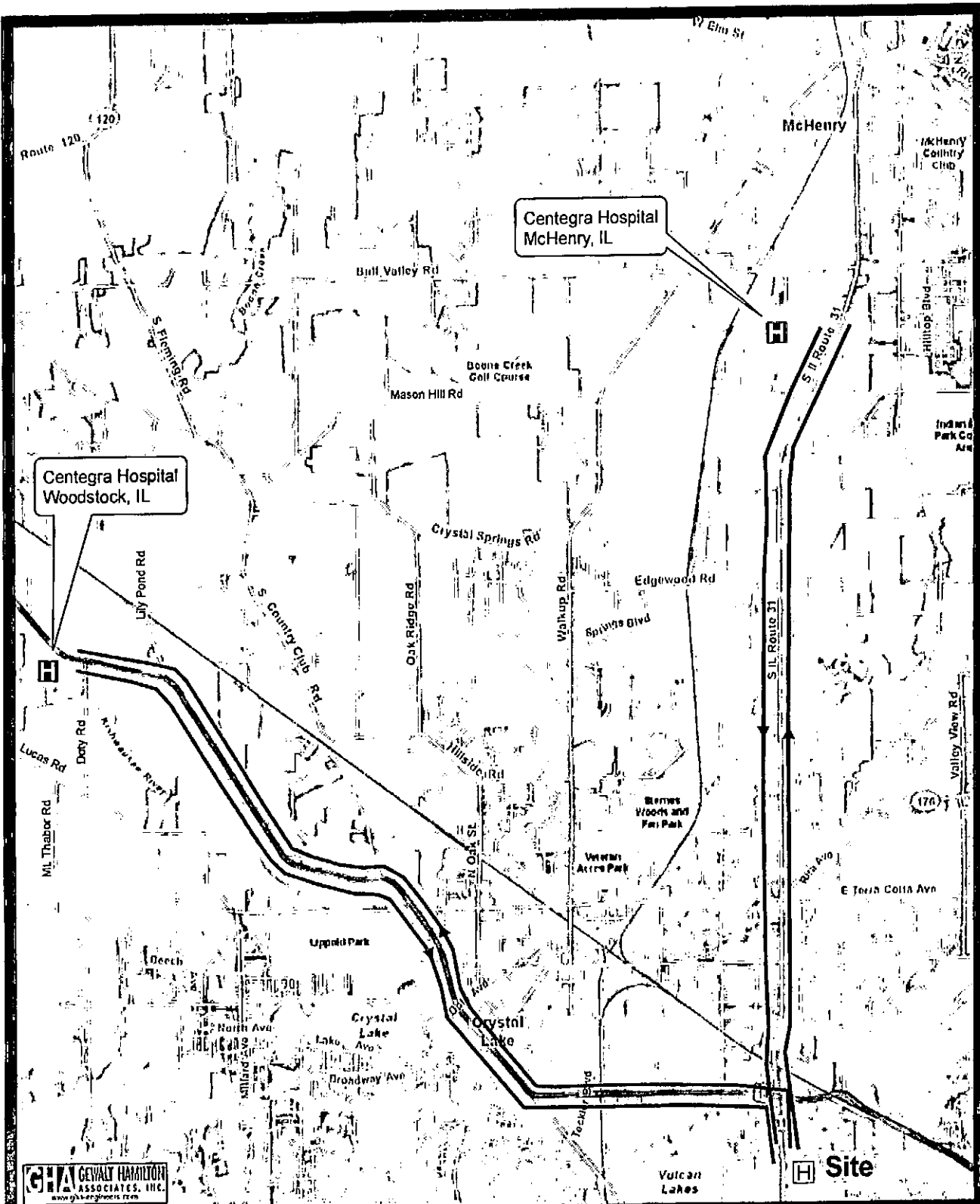
*Exhibit 1* illustrates the location of two existing medical facilities surveyed for travel times: Centegra Hospital – Woodstock located at the intersection of US Rte 14 and Doty Road in the City of Woodstock and Centegra Hospital McHenry located along IL 31 just south of Bull Valley Road in the City of McHenry. *Exhibit 1* also indicates routes driven for the time trial runs.

*Exhibit 1* also illustrates the location of a potential Mercy Health hospital site located along IL 31 just south of Three Oaks Road. Travel times were recorded from the site to the two existing medical facilities. The surveys were conducted during the weekday morning (7 AM to 9 AM), midday (11:00 AM to 1:00 PM), and evening (4 PM to 6 PM) peak periods on Wednesday December 22, 2010. These times were chosen to ensure that the prevalent and non-prevalent travel patterns on the road system will be accounted for. No unusual delays occurred during the travel runs such as extreme foul weather (e.g. heavy snowfall or rain), road construction, or emergency vehicle activity that would adversely affect the volumes or travel patterns.

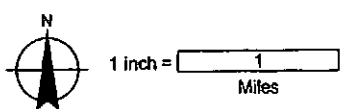
*Exhibits 2a* and *2b* summarize the results of the driving time surveys for travel runs made by GHA staff to and from the site and to each of the medical facilities. As shown in *Exhibit 2a*, the peak travel time round trip from the site to the medical facility in Woodstock and then back to the site was recorded during the weekday evening peak period at 55 minutes. *Exhibit 2b* indicated that the peak travel time to and from the site to the medical facility in McHenry was also recorded during the weekday evening peak period at 29 minutes.

It is important to note that the travel times shown in *Exhibits 2a* and *2b* were recorded at a starting roll or in other words, the stop watch was started as the drivers were ready to travel forward. In reality, an ambulance crew will require an additional few minutes (3 to 4 minutes) to pick-up and/or drop-off the patient at the hospital thereby increasing travel times. As such, adjusted travel times for existing conditions when considering the ambulance crew are as high as 1 hour and 3 minutes for the Woodstock facility and 37 minutes for the McHenry facility.

3413.910 Mercy CL Drive Time 122710.doc



**GHA** GEVALLY HAMILTON ASSOCIATES, INC.  
www.gha-engineers.com



**Exhibit 1**

Proposed Project Location Map

## Exhibit 2a

### Mercy Drive Time Study

Proposed Site to Centegra Hospital - Woodstock, Woodstock, IL

Trip		Start Time	Stop Time	Total	Round Trip	
<b>Wednesday December 22, 2010 7AM-9AM</b>						
1	To Hospital	7:00:00	7:20:43	0:20:43	0:36:44	Peak Travel Time  Round Trip: 36 min
	From Hospital	7:21:00	7:37:01	0:16:01		
2	To Hospital	7:38:00	7:55:52	0:17:52	0:33:54	
	From Hospital	7:57:00	8:13:02	0:16:02		
3	To Hospital	8:14:00	8:30:51	0:16:51	0:32:50	
	From Hospital	8:33:00	8:48:59	0:15:59		

<b>Wednesday December 22, 2010 11AM-1PM</b>						
4	To Hospital	11:00:00	11:20:25	0:20:25	0:37:41	Peak Travel Time  Round Trip: 44 min
	From Hospital	11:22:00	11:39:16	0:17:16		
5	To Hospital	11:41:00	12:00:23	0:19:23	0:40:25	
	From Hospital	12:01:00	12:22:02	0:21:02		
6	To Hospital	12:23:00	12:43:27	0:20:27	0:44:39	
	From Hospital	12:44:00	13:08:12	0:24:12		

<b>Wednesday December 22, 2010 4PM-6PM</b>						
7	To Hospital	4:00:00	4:20:08	0:20:08	0:48:31	Peak Travel Time  Round Trip: 55 min
	From Hospital	4:21:00	4:49:23	0:28:23		
8	To Hospital	4:51:00	5:12:58	0:21:58	0:54:57	
	From Hospital	5:14:00	5:46:59	0:32:59		



## Exhibit 2b

### Mercy Drive Time Study Proposed Site to Centegra Hospital - McHenry, McHenry, IL

Trip		Start Time	Stop Time	Total	Round Trip
<b>Wednesday December 22, 2010 7AM-9AM</b>					
1	To Hospital	7:00:00	7:14:52	0:14:52	0:28:30
	From Hospital	7:16:00	7:29:38	0:13:38	
2	To Hospital	7:30:00	7:43:39	0:13:39	0:27:06
	From Hospital	7:44:00	7:57:27	0:13:27	
3	To Hospital	7:59:00	8:10:51	0:11:51	0:23:39
	From Hospital	8:12:00	8:23:48	0:11:48	
4	To Hospital	8:25:00	8:35:23	0:10:23	0:21:23
	From Hospital	8:36:00	8:47:00	0:11:00	

Peak Travel Time

Round Trip: 28 min

<b>Wednesday December 22, 2010 11AM-1PM</b>					
5	To Hospital	11:00:00	11:12:34	0:12:34	0:25:18
	From Hospital	11:13:00	11:25:44	0:12:44	
6	To Hospital	11:28:00	11:41:57	0:13:57	0:27:36
	From Hospital	11:43:00	11:56:39	0:13:39	
7	To Hospital	11:59:00	12:10:32	0:11:32	0:23:54
	From Hospital	12:11:00	12:23:22	0:12:22	
8	To Hospital	12:24:00	12:35:46	0:11:46	0:26:10
	From Hospital	12:37:00	12:51:24	0:14:24	

Peak Travel Time

Round Trip: 27 min

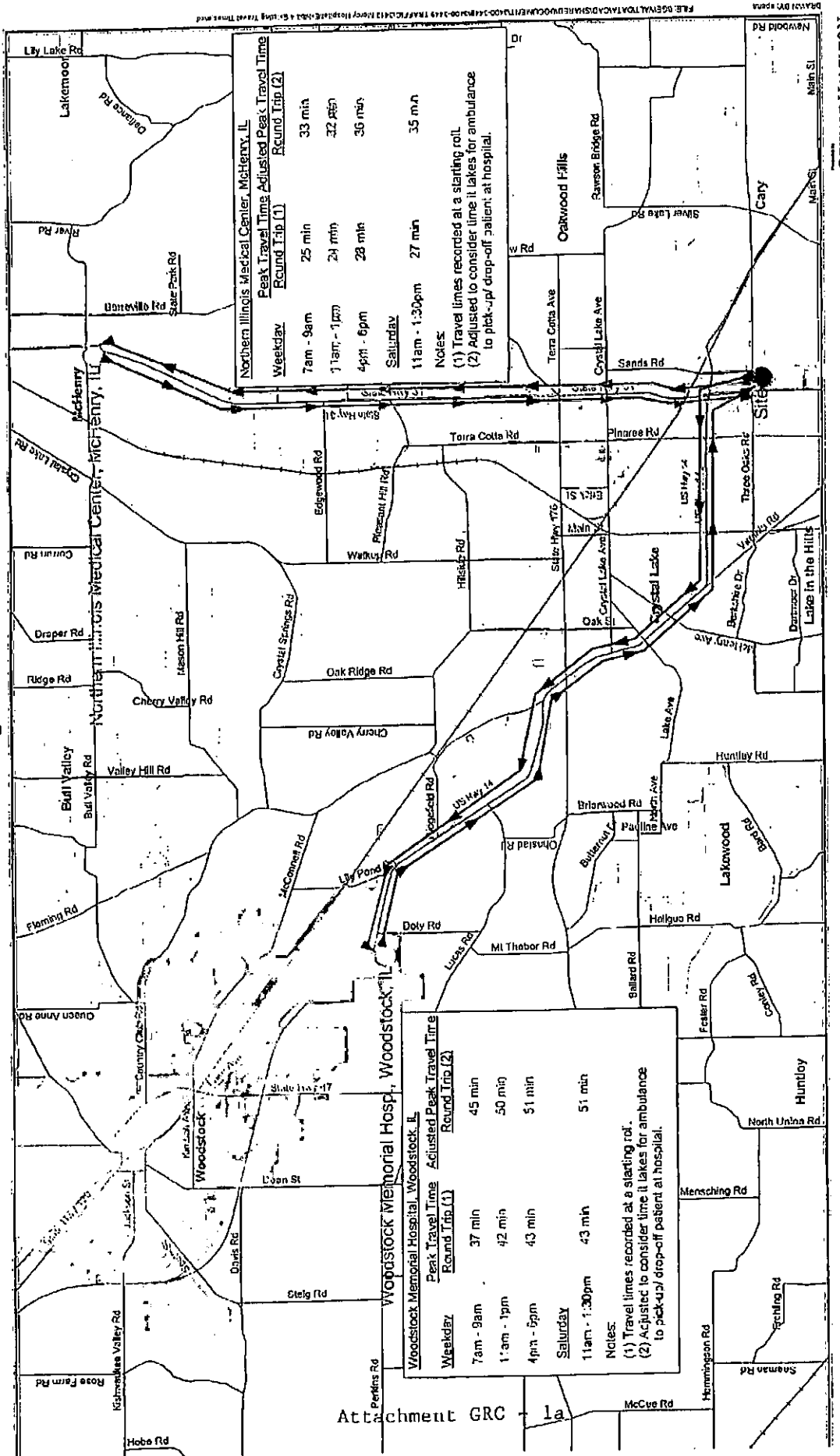
<b>Wednesday December 22, 2010 4PM-6PM</b>					
9	To Hospital	4:00:00	4:15:05	0:15:05	0:19:23
	From Hospital	4:16:00	4:20:18	0:04:18	
10	To Hospital	4:21:00	4:34:35	0:13:35	0:27:07
	From Hospital	4:36:00	4:49:32	0:13:32	
11	To Hospital	4:51:00	5:06:07	0:15:07	0:29:41
	From Hospital	5:07:00	5:21:34	0:14:34	
12	To Hospital	5:24:00	5:36:39	0:12:39	0:25:44
	From Hospital	5:38:00	5:51:05	0:13:05	

Peak Travel Time

Round Trip: 29 min

**GHA** GEWALT HAMILTON  
ASSOCIATES, INC.

# Exhibit 4: Existing Travel Times



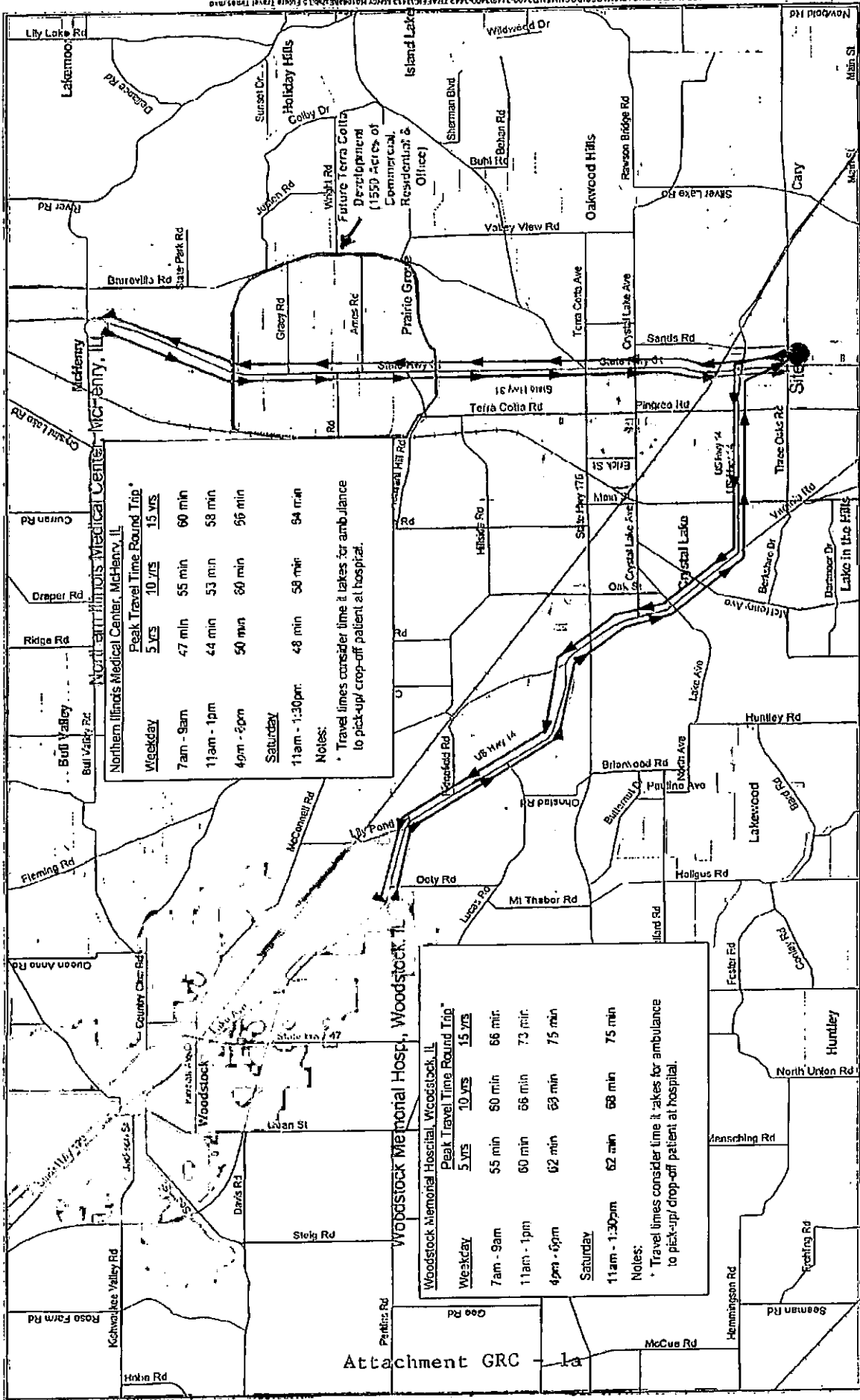
**GEWALT HAMILTON ASSOCIATES, INC.**  
 140 Royal Ridge Drive, Woodstock, IL 60091  
 Tel: 815/741-7170 Fax: 815/741-8771  
 www.gewalt-hamilton.com  
 DATE: 6/27/2010 3413.990

1 inch equals 1 mile

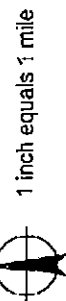




# Exhibit 5: Future Travel Times



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 DATE: 6/27/2003 3:13.900



# Presidential Award for Excellence Honors Five U.S. Organizations

For Immediate Release: November 20, 2007

<http://www.addthis.com/bookmark.php?v=250&pub=usnistgov>

<http://www.addthis.com/bookmark.php?v=250&pub=usnistgov> Contact: Michael E. Newman  
301-975-3025

## *Two Nonprofits Recognized in First Year of Category*

WASHINGTON, D.C.—President George W. Bush and Commerce Secretary Carlos M. Gutierrez today announced that five organizations are the recipients of the 2007 Malcolm Baldrige National Quality Award, the nation's highest Presidential honor for organizational performance excellence. For the first time in the history of the Baldrige Award, nonprofit organizations have been selected.

The 2007 Baldrige Award recipients—listed with their category—are:

PRO-TEC Coating Co., Leipsic, Ohio (small business)

Mercy Health System, Janesville, Wisc. (health care)

Sharp HealthCare, San Diego, Calif. (health care)

City of Coral Springs, Coral Springs, Fla. (nonprofit)

U.S. Army Armament Research, Development and Engineering Center (ARDEC), Picatinny Arsenal, N.J. (nonprofit)

“I am pleased to join President Bush in congratulating the five outstanding organizations that have been named to receive this year's Baldrige Award,” said Secretary Gutierrez. “The organizations we recognize today have given us superb examples of innovation, excellence and world-class performance. They serve as role models for organizations of all kinds striving to improve effectiveness and increase value to their customers.”

With these new recipients, the program celebrates its 20th anniversary. Along with recognizing the achievements of the award recipients, a key measure of the Baldrige National Quality Program's impact has been the widespread use of its *Criteria for Performance Excellence*, the guide designed to help organizations of all types improve their operations. Since 1987, about 10 million copies of the Baldrige criteria have been distributed. Downloads currently number about 1 million annually. Additionally, more than 40 U.S. states and more than 45 countries worldwide have implemented programs based on the Baldrige criteria.

The 2007 Baldrige Award recipients were selected from a field of 84 applicants. All of the applicants were evaluated rigorously by an independent board of examiners in seven areas: leadership; strategic planning; customer and market focus; measurement, analysis and knowledge management; workforce focus; process management; and results. The evaluation process for the 2007 Baldrige Award recipients included about 1,000 hours of review and an on-site visit by teams of examiners to clarify questions and verify information in the applications.

The 2007 Baldrige Award recipients are expected to be presented with their awards in a ceremony in Washington, D.C., early next year.

Named after Malcolm Baldrige, the 26th Secretary of Commerce, the Baldrige Award was established by Congress in 1987 to enhance the competitiveness and performance of U.S. businesses. Originally, three types of organizations were eligible: manufacturers, service companies and small businesses. This was expanded in 1999 to include education and health care organizations, and again in 2007 to include nonprofit organizations (including charities, trade and professional associations, and government agencies). The award promotes excellence in organizational performance, recognizes the achievements and results of U.S. organizations, and publicizes successful performance strategies. The award is not given for specific products or services. Since 1988, 72 organizations have received Baldrige Awards.

The Baldrige program is managed by the National Institute of Standards and Technology (NIST) in conjunction with the private sector.

As a nonregulatory agency of the Commerce Department, NIST promotes U.S. innovation and industrial competitiveness by advancing measurement science, standards and technology in ways that enhance economic security and improve our quality of life.

## Alternatives

1) Identify ALL of the alternatives to the proposed project:

- A) Do nothing.
- B) Pursuing a Joint Venture with another Healthcare Facility
- C) Utilizing other health care resources that are available to serve all or a portion of the population proposed to be served by the project
- D) Construct a 128-bed hospital at an estimated project cost of \$199,344,433.

2) Comparison of Options:

A) Do nothing.

Doing nothing would leave the patient population with a de-centralized healthcare delivery structure, which would result in:

- A continued gap in patient access to care
- No improvement in the quality of care
- No improvement in operational efficiencies or patient throughput
- Decreased patient satisfaction

Furthermore, these inefficiencies result in higher costs in the delivery of care for both the patients and the providers. One way at looking at the high cost of health care is to view the corresponding cost of Health Insurance. Costs for health insurance premiums are higher in the Crystal Lake market area than any other area of the McHenry County market.<sup>14</sup> The applicant believes that competition will positively impact costs by making all providers become cost competitive.

- Total Cost: No cost to the applicant
- Patient access: Patient access to care will continue to decline
- Quality: No opportunity for the Applicant to impact hospital quality
- Financial benefits: None

Therefore, this option is rejected as we believe these findings hold true for both the short and long term.

B) Pursuing a Joint Venture with another Healthcare Facility

Mercy Health System formally and informally approached Centegra Health System about a joint venture to provide a hospital and multi-specialty physicians clinic in Crystal Lake. To date, Centegra Health System has not responded to any of our requests. No other healthcare provider in the proposed market area has expressed any desire to pursue a joint venture with Mercy Health System.

- Total Cost: None to the Applicant
- Patient access: Improved if Joint Venture is agreed to
- Quality: Improved if Joint Venture is agreed to
- Financial benefits: Substantial if Joint Venture is agreed to

Therefore, this option is rejected as we believe these findings hold true for both the short and long term.

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<sup>14</sup> Crain's Chicago Business, Health Care Market Facts 2009, June 29, 2009

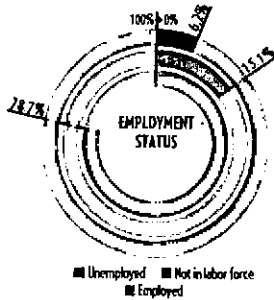


# {HEALTH CARE}

MARKET FACTS 2009

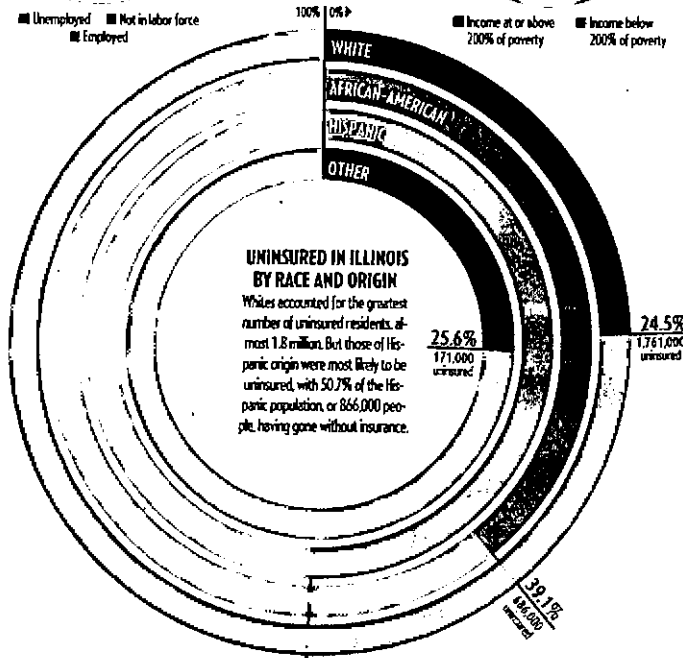
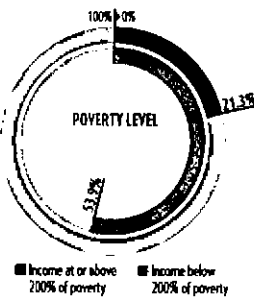


## ▶ WHO'S UNINSURED?



**30.8%**

of Minnors residents under the age of 65 went without insurance for all or part of 2007 and 2008. That amounts to 3,485,000 people. Nearly three-quarters were without coverage for six months or longer.



### UNINSURED BY AGE

Those who reported being uninsured in a March 2009 survey.



Sources: Families USA, Aetna Outreach & Behavioral Center

### CHILDREN GOING WITHOUT

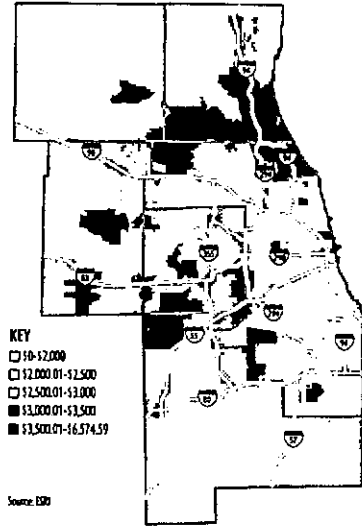
Of Illinois' 3.4 million children under 18 years of age, 235,939, or 7%, went without health insurance in 2007.



## ▶ PRICE OF INSURANCE

Personal spending on health insurance varies widely across the metro area.

**AVERAGE 2009 HOUSEHOLD SPENDING**  
By ZIP code

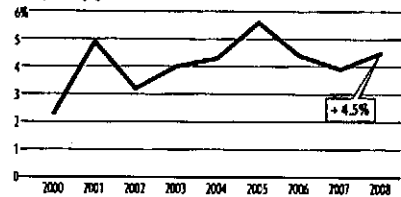


## ▶ CLIMBING HEALTH CARE COSTS

The Consumer Price Index's medical component, which measures costs for medical services, has grown an average of 4.1% annually.

**MEDICAL COMPONENT OF THE CONSUMER PRICE INDEX**

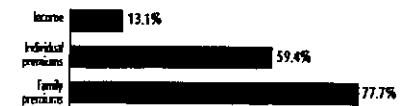
Annual percentage growth since 2000



## ▶ GROWING BURDEN ON WORKERS

The portion paid by Illinois workers for family health insurance premiums has risen six times more quickly than gains in median income since 2000.

**CHANGE IN PREMIUMS VS. MEDIAN INCOME 2000-07**



## {EXPRESS FACTS}

Sources: Metropolitan Chicago Healthcare Council, Illinois State Medical Society

**\$405.3 MILLION**

Estimated sales taxes generated by Chicago-area hospitals from operations and construction activities in 2008.

**26,570 DOCTORS**

held active medical licenses in the Chicago area as of May.

SEE MORE [CHICAGOBUSINESS.COM](http://CHICAGOBUSINESS.COM)  
Search health insurance costs by ZIP code.

### C) Utilization of Existing Healthcare Services

We have reviewed the option of utilizing existing health care services within McHenry County/Crystal Lake market.

- Total Cost: No change in costs to the Applicant
- Patient access: Continued decline in patient access
- Quality: No opportunity for Applicant to impact hospital quality
- Financial benefits: None

After careful study and consideration, we rejected this option for the following reasons:

It fails to address or resolve any of the following currently existing conditions:

- A shortage of primary and specialty trained physicians that results in a limitation of access to services;
- Lack of available emergency services due to frequent by-pass conditions at the two existing facilities;
- A mal-distribution of hospital bed that results in a limitation for access to services;
- Excessive traffic congestion that results in current and future excessive travel times to the other facilities;
- Continued population growth in the market area resulting in increased demands for services;
- Inadequate health services to the growing geriatric population; and
- Insufficient access to care for the indigent population in the market area.

### D) Construct a 128-Bed Hospital

This option was rejected on the basis of cost and it exceeds the current bed need inventory. The project is \$84,000,000 more expensive than the 70-bed proposal. It also has a significantly greater impact on other facilities than does the 70-bed proposal.

### 3) Empirical evidence, including quantified outcome data that verifies improved quality of care:

At the center of the Applicant's background and qualifications is the fact that it is a vertically integrated health delivery system employing more than 300 physician employee partners. As a part of this strategy of employing physician partners it is our experience that through the use of incentives based upon achieving quality outcomes, physicians are more engaged in the overall process of quality improvement. Multiple studies have been conducted to determine that physician involvement is key to hospital quality improvement. Issue Brief No. 127 dated October 2009 and authored by Allison Liebhaber, Debra A. Draper, and Genna R. Cohen provides arguments to support this strategy. An abstract of that study appears below.

#### **Issue Brief No. 127 October 2009**

*Published by The Center for Health System Change*

In recent years, such reports as the Institute of Medicine's *Crossing the Quality Chasm* have brought quality of care issues to the forefront. The dissonance between costs and outcomes has also heightened awareness about the need to improve health care quality, including the quality of care provided in the nation's hospitals. The United States spends about \$2.4 trillion on health care

annually—nearly a third of which is for hospital care.<sup>1</sup> Yet, health outcomes in the U.S. are comparatively worse than those of many other developed countries that have lower spending.<sup>2</sup>

Although hospitals have long engaged in quality improvement (QI) activities, they continue to face escalating demands to participate in a wide range of quality improvement and reporting programs. Moreover, hospitals' financial and reputational interests are increasingly at stake to demonstrate high quality and to improve when weaknesses are identified.

The Joint Commission, for example, requires hospitals seeking accreditation, which is often required by payers for reimbursement, to demonstrate compliance with the National Patient Safety Goals—a set of standards focusing on the reduction of hospital-acquired infections and other patient safety issues. Additionally, the Centers for Medicare and Medicaid Services (CMS) collects data on a core set of quality measures from hospitals as part of its Reporting Hospital Quality Data for Annual Payment Update program. Hospitals that do not participate in the program or fail to meet CMS reporting requirements receive a 2-percentage-point reduction in their annual payment update. More recently, CMS also began disallowing payment to hospitals for so-called never events—medical errors such as foreign bodies left in surgical patients and preventable post-operative deaths.<sup>3</sup>

Given the increasing pressures on hospitals to improve the quality of patient care, the need to engage physicians in hospital quality improvement initiatives is critical. Physicians are the key decision makers related to the care a hospitalized patient receives and are integral to hospitals' QI projects, ranging from improving hand-washing hygiene to reducing ventilator-associated pneumonia. Yet, hospitals' attempts to engage physicians in improving patient care come at a time when physicians face growing reimbursement and time pressures. Hospitals are using a variety of strategies to address these challenges and ensure physician involvement in QI, according to an HSC study examining physician involvement in hospital QI activities in four communities: Detroit, Memphis, Minneapolis-St. Paul and Seattle (see Data Source). These strategies include: employing physicians; using credible data to encourage physician involvement; demonstrating visible commitment to quality improvement through hospital leadership; identifying and nurturing physician champions; and communicating the importance of physicians' contributions.

### Employment Engages Physicians

While there is wide acknowledgment that physician involvement is critical for hospital QI initiatives, hospitals face a major challenge in securing physicians' time to participate. Even some of the more straightforward activities associated with hospital quality improvement, such as attending meetings or reviewing proposed changes in hospital processes, are difficult for a physician with a large patient load. As one physician respondent lamented, "These things are terribly time consuming... and your patient responsibilities never go away." Nearly all respondents commented that the trade-offs for physicians—sacrificing either personal or billable time—are difficult to resolve.

Many hospitals have historically relied on the voluntary medical staff model to solicit physician participation—a model that is generally premised on a loose affiliation between hospitals and community-based physicians. However, as more services shift to outpatient settings and physicians confront quality-of-life issues and financial stresses, physicians increasingly feel less obligated to perform such functions as participating on hospital committees in exchange for hospital privileges. As a result, engaging loosely affiliated physicians in hospital QI projects can be particularly challenging because of competing priorities. Moreover, while respondents often described medical staff bylaws as encouraging physicians to "be good citizens" and participate in QI activities, bylaws often lack the specificity or accountability that clearly outline physicians' responsibilities.

Hospital employment of physicians is becoming more prevalent, often as part of a larger set of alignment strategies, such as securing emergency call coverage and initiating new service lines to attract more patients. For physicians, employment may be attractive because it eliminates the administrative burden of a private practice, secures a predictable income, offers relief from high malpractice premiums and allows for a better work-life balance. Typically, quality improvement is not the main reason driving tighter alignment of physicians and hospitals, but employment can create incentives for physician involvement in QI activities as one chief medical officer (CMO) described by "achieving economic alignment around the shared quality agenda."

To ensure alignment, hospital executives reported increasing use of formal job descriptions and contractual arrangements that detail physician responsibilities to the hospital related to QI participation and increased accountability for results.

Employment of physicians can lessen competing pressures on physicians' time to participate in QI activities. Other benefits include increased physician accessibility and visibility, as well as a pool of potential champions to help garner support and engagement of physician peers.

1. Centers for Medicare and Medicaid Services (CMS), *National Health Expenditure Projections, 2008-2018*, Washington, D.C.
2. Kaiser Family Foundation, *Health Care Spending in the United States and OECD Countries (Snapshots: Health Care Costs)*, Menlo Park, Calif. (January 2007).
3. CMS, *Eliminating Serious, Preventable, and Costly Medical Errors—Never Events*, News Release, Washington, D.C. (July 31, 2008).
4. NSQIP is a nationally validated, risk-adjusted, outcomes-based program to measure and improve the quality of surgical care. The program employs a prospective, peer-controlled, validated database to quantify 30-day risk-adjusted surgical outcomes, which allows comparison of outcomes among all hospitals in the program.
5. The University Health System Consortium is an alliance of 103 academic medical centers and 210 affiliated hospitals. The consortium offers databases that provide comparative data in clinical, operational, faculty practice management, financial, patient safety and supply chain areas.
6. Child Health Corporation of America is a business alliance of 38 children's hospitals. The alliance provides a range of programs and services, including group purchasing and supply chain management; pediatric data management; performance improvement and patient safety initiatives; and Web-based training programs and strategic planning.

Center for Studying Health System Change

600 Maryland Avenue, SW, Suite 550  
Washington, DC 20024-2512



SIZE OF PROJECT			See Attachment 14 for detail	
Department/Service	Proposed BGSF/DGSF	State Standard	Difference	Met Standard?
<b>ACUTE CARE</b>				
Medical-Surgical, Pediatric, Obstetric & Long-Term Acute Care Service	56 Med-Surg beds at 32,412 sq. ft. 579 dgsf/bed	500-660 dgsf/bed	In range	Yes
	10 OB beds at 4,760 sq. ft. 476 dgsf/bed	500-660 dgsf/bed	(24 sq. ft.)	Yes
Newborn Nursery (includes Level I, Level II, and Level II+ with extended neonatal capabilities)	10 OB beds at 1,513 sq. ft. 151 dgsf/OB bed	160/OB + LDRP bed	(9 sq. ft.)	Yes
Labor Delivery Recovery (LDR)	2 rooms at 1,974 sq. ft. 987 dgsf/bedr	1120-1600 dgsf/room	(462 sq. ft.)	Yes
<b>CRITICAL CARE</b>				
Intensive Care Service	4 beds at 2,385 sq. ft. 596 dgsf/bed	600-685 dgsf/bed	(4 sq. ft.)	Yes
<b>DIAGNOSTIC AND TREATMENT</b>				
Diagnostic/Interventional Radiology (Excludes portables & mobile equipment/Utilization)				
• General Radiology	2 units at 1,408 sq. ft. 704 dgsf/unit	1,300 dgsf/unit	(596 sq. ft.)	Yes
• Fluoroscopy/Tomography/ Other X-ray Procedures	1 units at 792 sq. ft. 792 dgsf/unit	1,300 dgsf/unit	(509 sq. ft.)	Yes
• Mammography	2 units at 885 sq. ft. 443 dgsf/unit	900 dgsf/unit	(457 sq. ft.)	Yes
• Ultrasound	1 unit at 884 sq. ft. 884 dgsf/unit	900 dgsf/unit	(16 sq. ft.)	Yes
• CT Scan	1 unit at 1,775 sq. ft. 1,775 dgsf/unit	1,800 dgsf/unit	(25 sq. ft.)	Yes
• MRI	1 unit at 1,775 sq. ft. 1,775 dgsf/unit	1,800 dgsf/unit	(25 sq. ft.)	Yes
• Nuclear Medicine	1 unit at 1,088 sq. ft. 1,088 dgsf/unit	1,600 dgsf/unit	(512 sq. ft.)	Yes
Emergency Department	10 stations at 6,855 sq. ft. 686 dgsf/station	900 dgsf/treatment station	(214 sq. ft.)	Yes
Surgical Operating Suite (Class C)	4 rooms at 2,300 sq. ft. 2,538 dgsf/room	2,750 dgsf/operating room	(213 sq. ft.)	Yes
Surgical Procedure Suite (Class B)	2 rooms at 1,950 sq. ft. 975 dgsf/room	1,100 dgsf/procedure room	(125 sq. ft.)	Yes
Post-Anesthesia Recovery Phase I	12 stations at 2040 sq. ft. 170 dgsf/station	180 dgsf/recovery station	(10 sq. ft.)	Yes
Post-Anesthesia Recovery Phase II	15 stations at 4,593 306 dgsf/station	400 dgsf/recovery station	(94 sq. ft.)	Yes

Mercy Crystal Lake Hospital and  
Medical Center

July 20, 2010

Space Summary  
All Departments

SPACE REQUIREMENTS

Departmental Summary

Description	Total DGFSF	\$/SF	\$	Comments
<b>IDPH Reviewable Areas</b>				
Med. / Surg. Nursing Unit	32,412	\$320	\$10,371,840	
ICU	2,385	\$434	\$1,035,090	
Obstetrics	4,760	\$320	\$1,523,200	
Newborn Nursery	1,513	\$315	\$476,595	
Labor-Delivery-Recovery	1,974	\$330	\$651,420	
Emergency	6,855	\$330	\$2,262,150	
Laboratory	2,881	\$398	\$1,146,638	
Imaging (Diagnostic Radiology)	9,900	\$398	\$3,940,200	
MRI	3,405	\$473	\$1,610,565	
Central Processing	1,260	\$406	\$511,560	
Surgical Suite	9,840	\$498	\$4,900,320	
Recovery	2,040	\$320	\$652,800	
Outpatient Surgery	4,593	\$320	\$1,469,760	
Dietary	3,780	\$473	\$1,787,940	
Pharmacy	840	\$291	\$244,440	
Respiratory Therapy	623	\$315	\$196,245	
Cardiac Rehabilitation	1,200	\$320	\$384,000	
PT/OT	1,474	\$320	\$471,680	
<b>IDPH Non-Reviewable Areas</b>				
Building Systems	10,503	\$250	\$2,625,750	
Administration	3,437	\$250	\$859,250	
Public Circulation	25,351	\$225	\$5,703,975	
Materials Management	4,150	\$220	\$913,000	
Building Support	5,455	\$215	\$1,172,825	
Employee Facilities	1,163	\$216	\$251,208	
Medical Library	750	\$224	\$168,000	
Housekeeping	726	\$220	\$159,720	
Laundry Holding	479	\$200	\$95,800	
Morgue	288	\$224	\$64,512	
Medical Records	4,373	\$224	\$979,552	
Dining	2,550	\$310	\$790,500	
Yard Storage	336	\$185	\$62,160	
Human Resources	832	\$220	\$183,040	
Marketing	1,360	\$220	\$299,200	
Meeting Rooms	1,121	\$220	\$246,620	
Ambulance Garage	982	\$157	\$154,174	
Canopies	6,047	\$250	\$1,738,750	
<b>Subtotal Hospital DGFSF</b>	<b>182,538</b>	<b>\$308</b>	<b>\$50,102,479</b>	
<b>Clinic-All Departments</b>				
Building Systems	8,171	\$220	\$1,797,620	
Medical Records	7,832	\$224	\$1,754,368	
Waiting	6,329	\$230	\$1,455,670	
Public Circulation	10,327	\$210	\$2,168,670	
Physician Offices	44,035	\$230	\$10,128,050	
<b>Subtotal Clinic DGFSF</b>	<b>76,694</b>	<b>226</b>	<b>\$17,304,378</b>	
<b>Total Hospital and Clinic DGFSF</b>	<b>239,232</b>	<b>282</b>	<b>\$67,406,867</b>	
Sitework (Included in bldg \$/SF)	1		\$4,000,000	
Landscaping (Allowance)	1		\$300,000	
<b>Subtotal</b>			<b>\$4,300,000</b>	
<b>Subtotal with Allowances</b>			<b>\$71,706,867</b>	

Mercy Crystal Lake Hospital and  
Medical Center

July 20, 2010

Space Summary  
All Departments

**SPACE REQUIREMENTS**

Design and Estimating Contingency	10%	\$7,170,686
<b>Total Estimated Construction Cost</b>		<b>\$78,877,643</b>
AVE Design Services	4%	\$2,950,659
FFE	32%	\$25,398,569
Telecommunications	5.0%	\$3,943,877
Project Soft Cost	5.0%	\$3,943,877
Bond Issuance Expense		\$7,429,235
<b>Total Estimated Project Cost</b>		<b>\$115,114,525</b>

**Mercy Crystal Lake Hospital and  
Medical Center**

July 20, 2010

**Nursing Units**

**SPACE REQUIREMENTS**

**Medical / Surgical Nursing Unit - Patient Rooms**

Room Name			Total NSF	Required by:	Comments
1 Patient Room	54 @	260	14,040	IDPH, AIA	Handwashing in ea. Rm.; 1 Seclusion rm
2 Patient Toilet/Shower	55 @	60	3,300	IDPH, AIA	
3 Psych. Holding Room	1 @	260	260	IDPH	
4 Isolation Patient Rm	1 @	200	200	IDPH, AIA	
5 Isolation Anta Rm	1 @	60	60	IDPH, AIA	Handwash, gowns, clean/soiled storage
6 Isolation Toilet Shower	1 @	60	60	IDPH, AIA	

**Subtotal Med / Surg. Nursing Unit Patient Rooms 17,920**

**Medical / Surgical Nursing Unit - Staff Areas**

Room Name			Total NSF	Required by:	Comments
1 Nurse Station	1 @	160	160	IDPH, AIA	4 nurses @ 40 sf ea.
2 Office	1 @	120	120	IDPH	
3 Dictation	2 @	15	30	AIA	
4 Handwashing	1 @	25	25	IDPH, AIA	
5 Charting	4 @	15	60	IDPH, AIA	
6 Staff toilet	2 @	65	130	AIA	
7 Staff Lounge	1 @	180	180	IDPH, AIA	
8 Staff Locker	1 @	80	80	IDPH, AIA	
9 Multipurpose	1 @	120	120	IDPH, AIA	Conference/Report/Education
10 Clean Utility/Clean Linens	1 @	120	120	IDPH, AIA	
11 Soiled Utility	1 @	120	120	IDPH, AIA	
12 Medications	1 @	60	60	IDPH, AIA	
13 Nourishment	1 @	60	60	IDPH, AIA	Ice Machine
14 Equipment Storage	1 @	240	240	IDPH, AIA	
15 Stretcher/Wheelchair	4 @	30	120	IDPH, AIA	
16 Crash Cart	1 @	30	30	IDPH, AIA	
17 Housekeeping	1 @	50	50	IDPH, AIA	

**Subtotal Med / Surg. Staff Areas 1,705**

**Subtotal Med. / Surg. Nursing Unit (NSF) 19,625**

**ICU Unit - Patient Rooms**

Room Name			Total NSF	Required by:	Comments
1 Patient Room (ICU)	4 @	225	900	IDPH, AIA	
2 Patient Toilet	4 @	30	120	IDPH, AIA	
3 Family Waiting	1 @	120	120	IDPH, AIA	
4 Public Toilet	1 @	64	64	IDPH, AIA	ADA
5 Phones	1 @	15	15	IDPH	

**Subtotal ICU Unit - Patient Rooms 1,219**

**Mercy Crystal Lake Hospital and  
Medical Center**

July 20, 2010

**ICU Unit - Staff Areas**

Room Name			Total NSF	Required by:	Comments
1 Nurse Station/Charting	1 @	160	160	IDPH,AIA	4 nurses @ 40 sf ea.
2 Handwashing	2 @	30	60	IDPH,AIA	locate outside LDRPs
3 Nurse Closet	1 @	30	30	IDPH,AIA	
4 Clean Work	1 @	120	120	IDPH,AIA	Adjacent to Unit
5 Soiled Utility	1 @	120	120	IDPH,AIA	Adjacent to Unit
6 Medications	1 @	30	30	IDPH,AIA	
7 Clean Linen	1 @	30	30	IDPH,AIA	Alcove for Linen Cart
8 Nourishment	1 @	30	30	IDPH,AIA	
9 Emergency Equipment	1 @	30	30	IDPH,AIA	
10 Equipment Storage	1 @	80	80	IDPH,AIA	

**Subtotal ICU Unit - Staff Areas** 690

**Subtotal ICU Nursing Unit (NSF)** 1,909

**Obstetrics/ICU Unit - Patient Rooms**

Room Name			Total NSF	Required by:	Comments
1 Patient Room (OB/ICU)	6 @	360	2,160	IDPH,AIA	LDRP
2 Patient Toilet/Shower (OB/IC)	6 @	80	480	IDPH,AIA	LDRP
3 Isolation Room	1 @	80	80	AIA	Adjacent to Nursery

**Subtotal Obstetrics/ICU Unit Patient Rooms** 2,720

**Obstetrics/ICU Unit - Staff Areas**

Room Name			Total NSF	Required by:	Comments
1 Nurse Station/Charting	1 @	160	160	IDPH, AIA	4 nurses @ 40 sf ea.
2 Nursery	1 @	1,905	1,905	IDPH, AIA	
3 Scrub Sink Alcoves	2 @	30	60	IDPH, AIA	
4 Workroom	1 @	120	120	IDPH, AIA	
5 Exam/Treatment	1 @	120	120	IDPH, AIA	
8 Formula Storage/Work	1 @	65	65	IDPH, AIA	
7 Physician Lockers	1 @	25	25		Located in Emergency
8 On-call Room	1 @	120	120		Located in Emergency
9 On-call Toilet/Sh.	1 @	65	65		Located in Emergency
10 Lounge/Staff Toilet	1 @	200	200	IDPH	
11 Clean Utility/Clean Linens	3 @	120	360	IDPH, AIA	
12 Soiled Utility	2 @	120	240	IDPH, AIA	Adjacent to Nursery
13 Medications	1 @	60	60	IDPH, AIA	
14 Nourishment	1 @	60	60	IDPH, AIA	
15 Storage	1 @	240	240	IDPH, AIA	
16 Stretcher/Wheelchair	1 @	30	30	IDPH	
17 Crash Cart	3 @	30	90	none	
18 Housekeeping	1 @	40	40	IDPH, AIA	

**Subtotal Obstetrics/ICU Unit - Staff Areas** 3,960

**Subtotal Obstetrics/ICU Unit (NSF)** 6,680

**Subtotal Nursing Units (NSF)** 26,305

**Total Department Gross Square Feet (DGSF) @ 1.65** 43,403

IDPH Illinois Department of Public Health (77 ILL. ADM. CODE 250 Section 250.2440 - General Hospital Standards)

AIA AIA Guidelines for Design and Construction of Hospitals and Health Care Facilities - 2001 Edition

Mercy Crystal Lake Hospital and  
Medical Center

July 20, 2010

**Surgical Suite**

**SPACE REQUIREMENTS**

**Reception Zone**

Room Name		Total NSF	Required by:	Comments
1 Reception	1 @ 180	180	none	15 patient rooms x 2 = 30 seats; 30 seats x 15 SF/seat = 450 SF
2 Waiting	1 @ 1385	1,385	none	
3 Consult	1 @ 120	120	none	

**Subtotal Reception Zone** 1,685

**Prep / Phase II Recovery Zone**

Room Name		Total NSF	Required by:	Comments
1 Prep/Phase II Recovery	15 @ 120	1,800	IDPH, AIA	
2 Handwashing	4 @ 5	20	IDPH, AIA	
3 Isolation	1 @ 120	120	none	
4 Patient Toilet	5 @ 60	300	IDPH, AIA	
5 Nurse Station	1 @ 120	120	IDPH, AIA	
6 Staff Toilet	1 @ 65	65	AIA	
7 Dictation	1 @ 60	60	none	
8 Clean Utility	1 @ 80	80	IDPH	
9 Soiled Utility	1 @ 100	100	IDPH	
10 Nourishment	1 @ 60	60	none	
11 Medications	1 @ 60	60	IDPH	
12 Linen Alcove	1 @ 20	20	none	
13 Patient Lockers	1 @ 25	25	none	

**Subtotal Prep / Phase II Recovery Zone** 2,830

**Phase I Recovery (PACU) Zone**

Room Name		Total NSF	Required by:	Comments
1 Phase I Recovery - PACU	12 @ 80	960	IDPH, AIA	
2 Handwashing	1 @ 5	5	IDPH, AIA	
3 Patient Toilet	4 @ 60	240	IDPH, AIA	
4 Nurse Station - PACU	1 @ 120	120	IDPH, AIA	
5 Clean Utility - PACU	1 @ 80	80	IDPH	
6 Soiled Utility - PACU	1 @ 100	100	IDPH	

**Subtotal Phase I Recovery (PACU) Zone** 1,505

**Procedure Zone**

Room Name		Total NSF	Required by:	Comments
1 Operating Rooms	4 @ 480	1,920	IDPH, AIA	
2 Procedure Rooms	2 @ 360	720	IDPH, AIA	
3 Stretcher Alcove	1 @ 80	80	IDPH, AIA	
4 Sub Sterile	2 @ 150	300	IDPH, AIA	
5 Scrub Alcove	2 @ 60	120	IDPH, AIA	
6 Equipment Storage	1 @ 480	480	IDPH, AIA	
7 Control Station	1 @ 200	200	IDPH, AIA	
8 Supervisor Office	1 @ 80	80	IDPH, AIA	
9 Medications	1 @ 60	60	IDPH, AIA	
10 Soiled Utility	1 @ 120	120	IDPH, AIA	
11 Clean Utility	1 @ 120	120	IDPH, AIA	
12 Anesthesia Work	1 @ 180	180	IDPH, AIA	
13 Dictation	1 @ 60	60	IDPH, AIA	
14 Cart Storage (X-ray)	1 @ 40	40	IDPH, AIA	

**Mercy Crystal Lake Hospital and  
Medical Center**

July 20, 2010

**Subtotal Procedure Zone** 4,480

**Support Zone**

Room Name		Total NSF	Required by:	Comments	
1 Housekeeping Closet	1 @	60	60	IDPH, AIA	
2 Women's Lockers	1 @	225	225	AIA	Includes Toilet & Shower
3 Men's Lockers	1 @	225	225	AIA	Includes Toilet & Shower
4 Staff Lounge	1 @	240	240	IDPH, AIA	Shared with ER, Imaging and Lab
5 Medical Gas Tank Room	1 @	120	120	IDPH, AIA	Can be located outside department
6 Dumbwaiter	1 @	20	20	none	
7 Crash Cart	1 @	10	10	AIA	

**Subtotal Support Zone** 900

**Subtotal Surgical Suite (NSF)** 11,400

**Total Department Gross Square Feet (DGSF) @ 1.46** 16,530

IDPH Illinois Department of Public Health (77 ILL. ADM. CODE 250 Section 250.2440 - General Hospital Standards)

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**Mercy Crystal Lake Hospital and  
Medical Center**

July 20, 2010

**Emergency / Urgent Care**

**SPACE REQUIREMENTS**

**Reception Zone**

Room Name			Total NSF	Required by:	Comments
1 Reception	1 @	120	120	IDPH, AIA	9 patient rooms x 3 = 27 seats; 27 seats x 15 SF/seat = 405 SF
2 Waiting	1 @	405	405	IDPH, AIA	
3 Quiet Room	1 @	160	160	none	
4 Toilet	2 @	65	130	IDPH, AIA	Accessible

**Subtotal Reception Zone** 815

**Patient Zone**

Room Name			Total NSF	Required by:	Comments
1 Exam/Treatment Rooms	5 @	120	600	IDPH, AIA	1 per 4 Treatment Rooms (AIA)
2 Handwashing	3 @	25	75	IDPH, AIA	
3 Observation Room w/ Toilet	2 @	200	400	IDPH, AIA	On exterior with windows; seclusion room
4 Holding Room/Area	1 @	80	80	IDPH	Adjacent to treatment rooms
5 Isolation Room	1 @	150	150	AIA	2 patient cubicles; scrub sink
6 Trauma Room	2 @	250	500	AIA	
7 Cast Room	1 @	180	180	AIA	Scrub sink
8 Patient Toilet	1 @	65	65	IDPH, AIA	Unisex; Accessible.

**Subtotal Patient Zone** 2,050

**Staff / Support Zone**

Room Name			Total NSF	Required by:	Comments
1 Nurse Station	1 @	200	200	IDPH, AIA	4 nurses x 50 s.f. per nurse = 200 s.f.
2 Communications Center	1 @	40	40	AIA	Shared w/ Imaging
3 Triage/Consult	2 @	108	216	AIA	
4 Physician Office	2 @	100	200	none	Recommended by AIA
5 Clean Utility	1 @	120	120	IDPH, AIA	
6 Soiled Utility	1 @	120	120	IDPH, AIA	Alcove or room
7 Medications	1 @	60	60	IDPH, AIA	
8 Nourishment	1 @	60	60	none	Access to staff toilets and lockers
9 Clean Linen Alcove	1 @	40	40	IDPH, AIA	
10 Crash Cart	1 @	10	10	IDPH, AIA	Access to staff toilets and lockers
11 Equipment Storage	1 @	200	200	IDPH, AIA	
12 EMT Storage	1 @	100	100	none	Access to staff toilets and lockers
13 Housekeeping	1 @	60	60	AIA	
14 Decontamination	1 @	100	100	AIA	Access to staff toilets and lockers
15 Staff Lockers	1 @	120	120	AIA	
16 Security Station	1 @	25	25	none	Access to staff toilets and lockers
17 Wheelchair/Stretcher	1 @	60	60	IDPH, AIA	
18 Staff Lounge	0 @	180	0	AIA	Access to staff toilets and lockers

**Subtotal Staff / Support Zone** 1,426

**Subtotal Emergency / Urgent Care (NSF)** 4,291

**Total Department Gross Square Feet (DGSF) @ 1.60** 6,866

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**Mercy Crystal Lake Hospital and  
Medical Center**

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**Imaging**

**SPACE REQUIREMENTS**

**Reception Zone**

Room Name			Total NSF	Required by:	Comments
1 Reception	1 @	180	180	AIA	Shared w/ other ancillary depts
2 Waiting	1 @	300	300	AIA	Seating for 20, shared with Lab.
<b>Subtotal Reception Zone</b>			<b>480</b>		

**Procedure zone**

Room Name			Total NSF	Required by:	Comments
1 Gowned Waiting	1 @	150	150	IDPH, AIA	
2 Patient Dressing/Toilet	1 @	75	75	IDPH, AIA	Handicap Accessible.
3 Patient Holding	1 @	80	80	AIA	
4 General Radiography	2 @	200	400	IDPH, AIA	
5 Fluoroscopy	1 @	200	200	none	Adjacent to Patient Toilet.
6 MRI Procedure	1 @	1,200	1,200		
7 Control	1 @	80	80		
8 Cryogen Storage	1 @	120	120		
9 Stretcher	1 @	30	30		
10 CT Scan	1 @	240	240	AIA if provided	
11 CT Scan Control	1 @	100	100	AIA if provided	
12 CT Scan Equipment	1 @	60	60	AIA if provided	
13 CT Film Processing	1 @	60	60	AIA if provided	
14 Nuclear Medicine	1 @	320	320		
15 Hot Lab	1 @	40	40		
16 Injection	1 @	40	40		
17 Mammography	2 @	140	280	none	
18 Education	1 @	126	126	none	
19 Ultrasound	1 @	140	140	none	Adjacent to Patient Toilet.
20 Cardiac/Echo Stress	2 @	144	288		
21 Echo	2 @	108	216		
22 Echo/Stress Read	1 @	108	108		
23 Holter	1 @	108	108		
24 Bone Densometry	1 @	126	126	none	
25 Patient Toilet	3 @	60	180	IDPH, AIA	Unisex; Accessible.
<b>Subtotal Procedure Zone</b>			<b>4,767</b>		

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**Work Zone**

Room Name			Total NSF	Required by:	Comments
1 PACS	1 @	80	80	IDPH, AIA	
2 Quality Control	1 @	80	80	AIA	
3 Active Film Storage	0 @	0	0	IDPH, AIA	
4 Inactive Film Storage	0 @	0	0	AIA	
5 Reading/Viewing	1 @	120	120	AIA	
6 Storage	1 @	80	80	IDPH	
7 Clean Utility	1 @	120	120	AIA	
8 Soiled Utility	1 @	80	80	AIA	
9 Medications	1 @	45	45	AIA	
10 Office	2 @	108	216		
11 Staff Toilet	1 @	60	60	AIA	Shared w/ Emergency
12 Staff Lounge	1 @	120	120	AIA	Shared w/ Emergency
13 Mobile Technology Storage	1 @	80	80	none	
14 Housekeeping	0 @	60	0	AIA	Shared w/ Emergency
<b>Subtotal Work Zone</b>			<b>1,081</b>		
<b>Subtotal Imaging (NSF)</b>			<b>6,328</b>		
<b>Total Department Gross Square Feet (DGSF) @ 1.</b>			<b>1.55</b>		<b>9,808</b>

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**Mercy Crystal Lake Hospital and  
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**Laboratory/Morgue**

**SPACE REQUIREMENTS**

**Lab Reception Zone**

Room Name			Total NSF	Required by:	Comments
1 Reception	0 @	0	0	none	Shared w/ Imaging
2 Waiting	0 @	0	0	none	Shared w/ Imaging
<b>Subtotal Lab Reception Zone</b>			<b>0</b>		

**Lab Work Zone**

Room Name			Total NSF	Required by:	Comments
1 Laboratory	1 @	1,200	1,200	IDPH, AIA	
2 DI Water Treatment	1 @	25	25	IDPH, AIA	
3 Phlebotomy	2 @	80	160	IDPH, AIA	
4 Phlebotomy Work	1 @	60	60	IDPH, AIA	
5 Specimen Toilet	1 @	65	65	IDPH, AIA	Handicap Accessible.
6 Blood Bank	1 @	50	50	IDPH, AIA	
7 Office	1 @	120	120	IDPH, AIA	
8 Employee Lounge	0 @	0	0	IDPH, AIA	Shared with Imaging
9 Employee Locker	0 @	0	0	IDPH, AIA	Shared with Imaging
10 Staff Toilet	0 @	0	0	IDPH, AIA	Shared with Imaging
11 Frozen Section	1 @	120	120	IDPH, AIA	Located in Surgical Suite
12 Handwashing	3 @	10	30	IDPH, AIA	Adjacent to lab and specimen collection
<b>Subtotal Lab Work Zone</b>			<b>1,830</b>		

**Morgue**

Room Name			Total NSF	Required by:	Comments
1 Morgue Holding	1 @	240	240	IDPH, AIA	
<b>Subtotal Morgue</b>			<b>240</b>		

**Subtotal Laboratory/Morgue (NSF) 2,070**

**Total Department Gross Square Feet (DGSF) @ 1. 3,105**

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**Rehabilitation Therapy**

**SPACE REQUIREMENTS**

**PT/OT Reception Zone**

Room Name			Total NSF	Required by:	Comments
1 Reception	1 @	48	48	AIA	
2 Waiting	12 @	20	240	IDPH, AIA	
<b>Subtotal PT/OT Reception Zone</b>			<b>288</b>		

**PT/OT Patient Zone**

Room Name			Total NSF	Required by:	Comments
1 Patient Toilet	1 @	65	65	AIA	
2 Men's Shower/Changing	1 @	110	110	IDPH, AIA	
3 Women's Shower/Changing	1 @	110	110	IDPH, AIA	
4 ADL Area	1 @	230	230	AIA	
5 ADL Bath	1 @	96	96	AIA	
6 Treatment Cubicles	2 @	90	180	IDPH, AIA	5 to 6 enclosed
7 Gym	1 @	300	300	IDPH, AIA	
8 Gym Storage	1 @	120	120	none	
9 Handwashing	2 @	5	10	AIA	
<b>Subtotal PT/OT Patient Zone</b>			<b>1,221</b>		

**PT/OT Staff Zone**

Room Name			Total NSF	Required by:	Comments
1 Office	1 @	100	100	IDPH, AIA	
2 Therapist Charting Station	7 @	15	105	AIA	
3 Soiled Utility	1 @	72	72	IDPH, AIA	
4 Clean Utility	1 @	48	48	IDPH, AIA	
5 Linen	1 @	75	75	IDPH, AIA	
6 Staff Toilet	1 @	65	65	AIA	
7 Housekeeping	1 @	0	0	AIA	Share with adjacent department
8 Wheelchair/Stretchers	1 @	40	40	IDPH, AIA	
<b>Subtotal PT/OT Staff Zone</b>			<b>605</b>		

**Cardiac Rehab**

Room Name			Total NSF	Required by:	Comments
1 Patient Toilet	2 @	65	130		Combined with Shower/Changing
2 Men's Shower/Changing	1 @	160	160		
3 Women's Shower/Changing	1 @	160	160		
4 Treatment Room	1 @	108	108		
5 Gym	1 @	300	300		
6 Consult	1 @	108	108		
7 Office	1 @	108	108		
8 Handwashing	1 @	5	5		
9					
<b>Subtotal Cardiac Rehab Zone</b>			<b>1,079</b>		

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**Respiratory Therapy**

Room Name			Total NSF	Required by:	Comments
1 Pulmonary Function Testing	1 @	144	144		
2 Patient Education	1 @	108	108		
3 Office	1 @	108	108		

**Subtotal Respiratory Therapy 360**

**Subtotal Outpatient Physical Therapy (NSF) 3,453**

**Total Department Gross Square Feet (DGSF) @ 1. 1.00 3,453**

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**Pharmacy/DME**

**SPACE REQUIREMENTS**

**Pharmacy**

Room Name			Total NSF	Required by:	Comments
1 OTC Display	1 @	40	40	none	
2 Administrative Area	1 @	100	100	IDPH, AIA	
3 Quality Control Area	1 @	100	100	IDPH, AIA	
4 Locked Storage	1 @	80	80	IDPH, AIA	
5 Storage	1 @	100	100	AIA	
6 Dispensing Area	1 @	300	300	IDPH, AIA	
7 Handwashing	1 @	15	15	IDPH, AIA	
8 IV Prep	1 @	100	100	IDPH, AIA	

**Subtotal Pharmacy** 835

**Total Department Gross Square Feet (DGSF) @ 1.20** 835

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**Dietary**

**SPACE REQUIREMENTS**

**Dietary**

Room Name			Total NSF	Required by:	Comments
1 Receiving/Control	1	@	80	80	IDPH, AIA
2 Bulk Storage	1	@	200	200	IDPH, AIA
3 Refrigerated Storage	1	@	100	100	IDPH, AIA
4 Frozen Storage	1	@	100	100	IDPH, AIA
5 Cleaning Supply Storage	1	@	120	120	IDPH, AIA
6 Cookware/Flatware Storage	1	@	80	80	IDPH, AIA
7 Kitchen/Food Preparation	1	@	400	400	IDPH, AIA
8 Patient Tray Assembly	1	@	250	250	IDPH, AIA
9 Food Service Carts	1	@	120	120	IDPH, AIA
10 Dining Area	1	@	850	850	IDPH, AIA
11 Servery	1	@	250	250	IDPH, AIA
12 Vending Area	1	@	60	60	IDPH, AIA
13 Dirty Dishes	1	@	120	120	IDPH, AIA
14 Dishwashing	1	@	195	195	IDPH, AIA
15 Pot Washing	1	@	195	195	IDPH, AIA
16 Waste Storage	1	@	150	150	IDPH, AIA
17 Handwashing	3	@	25	75	IDPH, AIA
18 Office	1	@	120	120	IDPH, AIA
19 Kitchen Toilet	1	@	65	65	IDPH, AIA
20 Kitchen Lockers	1	@	180	180	IDPH, AIA
21 Housekeeping	1	@	45	45	IDPH, AIA

**Subtotal Dietary** **3,755**

**Total Department Gross Square Feet (DGSF) @ 1.20** **3,755**

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**Administration / Business Office**

**SPACE REQUIREMENTS**

**Administration**

Room Name			Total NSF	Required by:	Comments
1 Administrative Director	1 @	120	120	Area	
2 Administrative Office	2 @	120	240	Room	Secretary, Manager & Marketing
3 Secretary	2 @	80	160	Room	
4 Mailroom	1 @	60	60	Area	
5 Financial Counselor	2 @	108	216	IDPH, AIA	Adjacent to each Reception
6 Finance Office (Private)	1 @	108	108		
7 Finance Office (Open)	1 @	900	900		15 people x 60 SF = 900 SF
8 Finance Conf/Work Room	1 @	200	200		10 people x 20 SF = 200 SF
9 Future Financial Counselor	1 @	108	108		located in Diagnostic area
10	@		0		
11	@		0		
12 Call Center	1 @	240	240		12 phones x 20 SF = 240 SF
13 Registration	2 @	120	240	IDPH, AIA	One per Level

**Subtotal Administration** 2,592

**Medical Records**

Room Name			Total NSF	Required by:	Comments
1 Data Center	1 @	960	960		
2 Medical Records Storage	1 @	400	400	IDPH, AIA	
3 Medical Records Work	2 @	250	500		5 staff x 50 SF/staff = 250 SF, 1 per level
4 Dumbwaiter-Records	2 @	16	32		One per Level
5 Copy Alcove	2 @	40	80		One per Level

**Subtotal Medical Records** 1,972

**Marketing**

Room Name			Total NSF	Required by:	Comments
1 Clinic Manager Office	1 @	120	120	Area	
2 Administrative Office	2 @	120	240	Room	Secretary, Manager & Marketing
3 Secretary	2 @	80	160	Room	
4 Mailroom	1 @	60	60	Area	
5 Financial Counselor	2 @	108	216	IDPH, AIA	Adjacent to each Reception
6 Registration	2 @	120	240	IDPH, AIA	One per Level

**Subtotal Marketing** 1,036

**Subtotal Admitting (NSF)** 4,564

**Total Department Gross Square Feet (DGSF) @ 1.80** 8,216

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**Mercy Crystal Lake Hospital and  
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**Public Areas**

**SPACE REQUIREMENTS**

**Public Areas**

Room Name			Total NSF	Required by:	Comments
1 Public Toilets	4 @	200	800	IDPH, AIA	
2 Public Telephones	2 @	6	12	IDPH, AIA	
3 Vending/Lounge	1 @	400	400	IDPH, AIA	
4 Community Education	1 @	200	200	IDPH	
5 Medical Library	1 @	120	120	IDPH, AIA	
6 Meeting Rooms	2 @	600	1,200	IDPH, AIA	
7 Public Corridor/Atrium/Walk	1 @	20,000	20,000	IDPH, AIA	
8 Entrance Vestibule	2 @	250	500	IDPH, AIA	
9 Wheelchair Storage	1 @	120	120	IDPH, AIA	
10 Reception	1 @	80	80	IDPH, AIA	
11 Drinking Fountains	2 @	6	12	IDPH, AIA	

**Subtotal Public Areas: 23,444**

**Total Department Gross Square Feet (DGSF) @ 1.00 35,166**

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**Mercy Crystal Lake Hospital and  
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**Materials Management**

**SPACE REQUIREMENTS**

**Central Sterilization**

Room Name			Total NSF	Required by:	Comments
1 Decontam	1 @	180	180	IDPH,AIA	
2 Prep & Pack	1 @	250	250	IDPH,AIA	
3 Sterilizers	1 @	100	100	IDPH,AIA	
4 Handwashing	2 @	5	10	IDPH,AIA	
5 Dirty Cart Holding	1 @	100	100	IDPH,AIA	
6 Receiving/Breakout	1 @	180	180	IDPH,AIA	
7 Cart Washing	1 @	150	150	IDPH,AIA	
8 Sterile Storage	1 @	200	200	IDPH,AIA	

**Subtotal Central Sterilization** 1,170

**Materials Management**

Room Name			Total NSF	Required by:	Comments
1 Loading Dock	1 @	1,800	1,800	IDPH,AIA	
2 Shipping and Receiving	1 @	180	180	IDPH,AIA	
3 General Storage	1 @	1,938	1,938	IDPH,AIA	
4 Trash Room	1 @	120	120	IDPH,AIA	Adjacent to Loading Dock.
5 Infectious Waste	1 @	100	100	IDPH,AIA	
6 Recycling	1 @	100	100	IDPH,AIA	Adjacent to Loading Dock.

**Subtotal Materials Management** 4,238

**Subtotal Materials Management** 5,408

**Total Department Gross Square Feet (DGSF) @ 1** 1.00 **5,408**

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**Employee Facilities**

**SPACE REQUIREMENTS**

**Employee Facilities**

Room Name			Total NSF	Required by:	Comments
1 Employee Lounge	1	@	160	160	IDPH,AIA Handwashing in ea. Rm.; 1 Seclusion rm
2 Employee Locker/Toilet/Sh.	2	@	300	600	IDPH,AIA One each for men and women
3 Volunteer Area/Coats	1	@	160	160	IDPH,AIA
<b>Subtotal Employee Facilities</b>			<b>920</b>		
<b>Total Department Gross Square Feet (DGSF) @ 1.40</b>					<b>1,288</b>

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**Building Support**

**SPACE REQUIREMENTS**

**Building Systems**

Room Name			Total NSF	Required by:	Comments
1 Mechanical Fan Room	2 @	3200	6,400	IDPH, AIA	Basement level
2 Mechanical Boiler/Chiller	2 @	1900	3,800	IDPH, AIA	Basement level
3 Mechanical Pumps/Equip	2 @	650	1,300	IDPH, AIA	Basement level
4 Electrical Room	1 @	500	500	IDPH, AIA	
5 Electrical Closet	6 @	80	480	IDPH, AIA	
6 Communication Closet	1 @	100	120	IDPH, AIA	
7 Emergency Generator	1 @	0	0	IDPH, AIA	Outdoor unit

**Subtotal Building Systems** 12,600

**Maintenance**

Room Name			Total NSF	Required by:	Comments
1 Manager	1 @	100	100	none	Lower level
2 Engineer	1 @	100	100	IDPH, AIA	
3 Storage	1 @	500	500	IDPH, AIA	Lower level
4 Yard Equip. Storage	1 @	250	250	IDPH, AIA	
5 Biomedical	1 @	250	250	AIA	
6 Shop Area	1 @	250	250	IDPH, AIA	Lower level

**Subtotal Building Support** 1,450

**Housekeeping / Laundry**

Room Name			Total NSF	Required by:	Comments
1 Supervisor	1 @	100	100	IDPH, AIA	Lower level
2 Housekeeping Storage	1 @	300	300	IDPH, AIA	Cleaning supplies and equipment
3 Clean Linen Storage	6 @	80	480	IDPH, AIA	Storage for 3-days supply plus daily use
4 Soiled Linen Storage	1 @	150	150	IDPH, AIA	
5 Handwashing	2 @	5	10	IDPH, AIA	Located in Clean and Soiled Linen Storage
6 Janitor Closet	5 @	40	200	IDPH, AIA	Building Janitor closets located on each floor

**Subtotal Building Support** 1,240

**Subtotal Building Support** 15,290

**Total Department Gross Square Feet (DGSF) @ 1.20** 21,406

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**Mercy Crystal Lake Hospital and  
Medical Center**

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**Physician Clinics**

**SPACE REQUIREMENTS**

**Reception Zone**

Room Name			Total NSF	Comments
1 Reception/Schedule	2 @	400	800	5 staff x 80 SF/person = 400 SF
2 Waiting	2 @	1700	3,400	87 patient rooms X 2.5 = 218 seats 218 seats x 15 = 3270 SF 3270 SF + 130 SF (Child) = 3400 SF
3 Personal Financial Counselor	4 @	108	432	
4 Records Work Room	2 @	240	480	
5 Clinic Manager	2 @	108	216	
<b>Subtotal Reception Zone:</b>			<b>6,328</b>	

**Clinic**

Room Name				Comments
<b>Family Practice</b>				
1 Exam Room	12 @	108	1,296	
2 Physician Office	4 @	108	432	
<b>Internal Medicine</b>				
3 Exam Room	12 @	108	1,296	
4 Physician Office	4 @	108	432	
<b>Pediatrics</b>				
5 Exam Room	9 @	108	972	
6 Physician Office	3 @	108	324	
<b>Ob/Gyn</b>				
7 Exam Room	9 @	108	972	
8 Physician Office	3 @	108	324	
9 Non Stress Test	1 @	140	140	
<b>Allergy</b>				
10 Exam Room	3 @	108	324	
11 Physician Office	1 @	108	108	
12 Injection Room	1 @	108	108	
<b>Cardiology</b>				
13 Exam Room	6 @	108	648	
14 Physician Office	2 @	108	216	
<b>Dermatology</b>				
15 Exam Room	5 @	108	540	
16 Physician Office	1.5 @	108	162	
17 Light Room	1 @	108	108	
18 Treatment	1 @	108	108	
<b>ENT/Audiology</b>				
19 Exam Room	3 @	108	324	
20 Physician Office	1 @	108	108	
21 Audiology Booth	2 @	108	216	
22 Treatment	1 @	140	140	
<b>General Surgery</b>				
23 Exam Room	6 @	108	648	
24 Physician Office	2 @	108	216	
<b>Gastroenterology</b>				
25 Exam Room	3 @	108	324	
26 Physician Office	1 @	108	108	
<b>Neurology</b>				
27 Exam Room	3 @	108	324	
28 Physician Office	1 @	108	108	
28 ENG	1 @	108	108	
<b>Oncology</b>				
29 Exam Room	6 @	108	648	
30 Physician Office	2 @	108	216	
31 Chemotherapy (6 chairs)	1 @	480	480	
32 Chemo Support	1 @	120	120	

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<b>Ophthalmology</b>				
33 Exam Room	3 @	108	324	
34 Physician Office	1 @	108	108	
35 Lasik	1 @	140	140	
36 Visual Fields	1 @	60	60	
36 Testing	1 @	60	60	
<b>Orthopedics</b>				
37 Exam Room	6 @	108	648	
38 Physician Office	2 @	108	216	
38 Cast Room	1 @	180	180	
<b>Plastic Surgery</b>				
39 Exam Room	3 @	108	324	
40 Physician Office	1 @	108	108	
<b>Pulmonology</b>				
41 Exam Room	3 @	108	324	
42 Physician Office	1 @	108	108	
43 PFT Room	1 @	108	108	
<b>Rheumatology</b>				
44 Exam Room	3 @	108	324	
45 Physician Office	1 @	108	108	
<b>Rotators</b>				
46 Exam Room	15 @	108	1,620	
47 Physician Office	5 @	108	540	
<b>Urology</b>				
48 Exam Room	3 @	108	324	
49 Physician Office	1 @	108	108	
50 Treatment	8 @	144	1,152	
51 Patient Toilet	16 @	60	960	Handicap Accessible.
52 Nurse Station	40 @	54	2,160	
53 Clean Utility	4 @	80	320	
54 Soiled Holding	4 @	60	240	
55 Equipment Storage	4 @	60	240	
56 Scale Alcove	4 @	15	60	

**Subtotal Clinic 23,462**

**Subtotal Physician Clinics (NSF) 26,790**

**Department Gross Square Feet (DGSF) @ 1.5 43,185**

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**Project Services Utilization:**

In the second year of operation, the annual utilization of the hospital and its services will meet or exceed the utilization standards specified in 1110. Appendix B.

These patient volumes will be achieved assuming that the hospital is given a CON by the Board in 2011 and the local permit process and construction are completed within 30 months. This timeframe allows the hospital to open in 2014. By that time the hospital will receive all the physician referrals documented within this application combined with the projected population growth of 4.7% and the 3% impact of additional inpatients that are then covered by the new Health Reform Act. Combined, this activity results in a 87.6% patient volume in Medical/Surgical by 2015, 88.8% in Obstetrics, and 61.8% in Intensive Care.

Department/Service	Projected Utilization	State Standard	Met Standard?
<b>ACUTE CARE</b>			
Medical-Surgical, Pediatric, Obstetric & Long-Term Acute Care Service (56 Med-Surg beds; 10 OB beds)	Med-Surg 87.6% (17,895 patient days) OB 88.8% (3,240 patient days)	Med/Surg - 85% OB - 75%	Yes Yes
Labor Delivery Recovery (LDR) (2 rooms)	2 rooms 810 births 405 births/room	400 births/LDR room	Yes
<b>CRITICAL CARE</b>			
Intensive Care Service (4 beds)	61.8% (902 patient days)	ICU - 60%	Yes
<b>DIAGNOSTIC AND TREATMENT</b>			
* Diagnostic/Interventional Radiology (Excludes portables & mobile equipment/Utilization)			
• General Radiology (2)	13,139 procedures	8,000 procedures	Yes
• Fluoroscopy/Tomography /Other X-ray procedures (includes Echo, Vascular, and Stress) (1)	6,538 procedures	6,500 procedures	Yes
• Mammography (2)	6,518 visits	5,000 visits	Yes
• Ultra-Sound (1)	3,225 visits	3,100 visits	Yes
• CT Scan (1)	7,132 visits	7,000 visits	Yes
• MRI (1)	2,641 procedures	2,500 procedures	Yes
• Nuclear Medicine (1)	2,179 visits	2,000 visits	Yes
Emergency Department (10 stations)	21,030 visits; 2,103/station	2,000 visits/station/ year	Yes
Surgical Operating Suite (Class C) (4 ORs)	9,089 hours; 2,272 hours/OR	1,500 hours/ operating room	Yes
Surgical Procedure Suite (Class B) (2 rooms)	3,168 hours 1,584 hours/room	1,500 hours/ procedure room	Yes

Unfinished or Shell Space

Not applicable; there is no unfinished or shell space.



Assurances

Not applicable; there is no unfinished or shell space.

## Medical/Surgical, Obstetric, Pediatric, and Intensive Care

### b1. Planning Area Need:

#### Planning Area Need:

- A) The applicants, Mercy Crystal Lake Hospital and Medical Center, Inc., and Mercy Alliance, Inc., propose to construct a new hospital with the bed composition listed below. The project is in conformance with the projected bed deficit specified in 77 Ill. Adm. Code 1100 (as reflected in the latest updates to the inventory for Plan Area A-10), and the applicants believe the project will address a current maldistribution of services and population increases projected in the geographic service area.

Category of Service	Proposed Beds	Revised Bed Need 2/18/11	Beds in Excess of Deficit
Medical/Surgical	56	83	-27
Obstetric	10	27	-17
Intensive Care	4	8	-4
TOTAL	70	118	-48

- B) Currently all Hospital beds are located in the north and central areas of McHenry County. However the greatest population density in the County is in the southeast corner of the County, specifically, Crystal Lake. That is the primary reason the applicant proposes to build in Crystal Lake. By doing so, patients in that area are provided easier and quicker access. EMS services are provided faster route times, patients and families have less travel for services and visiting, and patients and providers finally have a choice of hospital services.

These reasons are especially necessary given the high historical population growth in McHenry County and the projected high population growth for the County and specifically this service area. As stated before, McHenry County is projected to grow 8.7% in the next five years alone with continued high growth thereafter.

### b2. Service to Planning Area Residents:

With respect to area studies, as set forth previously in this application, McHenry County's population continues to grow at a significant rate. Moreover, current estimates demonstrate that McHenry County has a deficit of 49.9 physicians as of March 2010.<sup>1</sup> This includes an estimate of a 29.4 FTE shortage in the area of primary care physicians and the balance in specialty care. This is consistent with the national experience. Both the Council on Graduate Medical Education and the American Medical Association recognize a current physician shortage in the U.S. that will worsen over the next several years. The operational model utilized by the applicant has been implemented effectively to recruit and retain needed physicians. Accordingly, the population and service use factors indicate that the county can support the Project, particularly because of the applicant's meeting the need for physicians.

With respect to need, the information discussed above demonstrates the need for physicians in McHenry County. If this need is addressed, the need for the facility will exist as the physicians will reduce the out-migration of services from McHenry County.

## Attachment 20: Medical/Surgical, Obstetric, Pediatric, and Intensive Care

<sup>1</sup> Thomson Healthcare (demand) – MarketPlanner Plus ratios (50% productivity model); Market Expert ratios 2009 (national, population-based model)

With respect to the individuals who will use the project, a spreadsheet follows this page setting forth the calculated utilization of the facility by the 45 physicians at the Crystal lake site, from other employed physicians of the applicant, and through the emergency department. Calculations are based on the applicant's historical experience at its hospital facility in Janesville, Wisconsin, where the same integrated health delivery model is employed. That data show that, based upon the projected number of patient days generated, the 70-bed facility will operate at an overall occupancy of 86% by the second year of operation. The data also show that the projected occupancy for the med/surg, OB and ICU categories of service will be as follows:

Med/Surg	87.6%
OB	88.8%
ICU	61.8%
Total	86.3%

**b3. Service Demand - Projected Referrals:**

Physician referral letters detailing each Mercy-employed physician's historical referrals by hospital and patients' zip code of residence, as well as their anticipated referrals to Mercy Crystal Lake Hospital and Medical Center, are included under Appendix 1.

**b5. Service Accessibility:**

The Applicant shall document that at least one of the following factors exist in the planning area:

With respect to area studies, as set forth previously in this application, McHenry County's population continues to grow at a significant rate. Moreover, current estimates demonstrate that, with respect to service restrictions, the information discussed above demonstrates the need for physicians in McHenry County. If this need is addressed, the need for the facility will exist as the physicians will reduce the out-migration of services from McHenry County. According to reputable studies, McHenry County has a deficit of 49.9 physicians as of March 2010.<sup>2</sup> This includes an estimate of a 29.4 FTE shortage in the area of primary care physicians and the balance in specialty care. This is consistent with the national experience. Both the Council on Graduate Medical Education and the American Medical Association recognize a current physician shortage in the U.S. that will worsen over the next several years. The operational model utilized by the applicant has been implemented effectively to recruit and retain needed physicians.

With respect to Service Accessibility, the information discussed above demonstrates the need for physicians in McHenry County. If this need is addressed, the need for the facility will exist since the additional physicians will reduce the out-migration of services from McHenry County.

**c1. Unnecessary Duplication of Services**

Included below are: 1) projected physician referrals for the new hospital; 2) projected utilization for the new facility; 3) a list of zip codes within 30 minutes of the project's site and the total population of the identified zip code areas; and 4) the names and locations of all facilities within 30 minutes of the project site.

**Attachment 20: Medical/Surgical, Obstetric, Pediatric, and Intensive Care**

<sup>2</sup> Thomson Healthcare (demand) – MarketPlanner Plus ratios (50% productivity model); Market Expert ratios 2009 (national, population-based model)

Projected Physician Referrals for Mercy Crystal Lake Hospital and Medical Center (Admissions)

LastName	FirstName	Crede	Specialty	Clinic	Condell	Good Shepherd	Centegra-McHenry	Centegra-Woodstk	Total
Albright	Kim	M.D.	Family Medicine	Mercy Richmond Medical Center	0	0	35	0	35
Asbury	Jeffrey	M.D.	Urology	Mercy Woodstock Medical Center	0	0	0	11	11
Bistriceanu	Graziella	M.D.	Family Medicine	Mercy Woodstock Medical Center	0	0	1	37	38
Campau	Steven	M.D.	Internal Medicine	Mercy Algonquin Medical Center	0	43	0	0	43
Chatterji	Manju	M.D.	Pediatrics	Mercy Crystal Lake West Medical C	0	0	35	11	46
Chitwood	Rick	M.D.	Pediatrics	Mercy McHenry Medical Cente	0	0	44	5	49
Cook	Richard	M.D.	Obstetrics/Gynecology	Mercy Woodstock Medical Center	0	0	0	177	177
Crawley	Terri	M.D.	Pediatrics	Mercy Woodstock Medical Center	0	0	0	96	96
Cundiff	Jason	M.D.	Otolaryngology	Mercy Crystal Lake East Medical C	0	20	17	9	46
DeHaan	Paul	M.D.	Orthopedic Surgery	Mercy McHenry Medical Cente	0	0	44	25	70
Dillon	Paul	M.D.	Plastic Surgery	Mercy Woodstock Medical Center	22	0	8	4	34
Favia	Julie	M.D.	Obstetrics/Gynecology	Mercy Woodstock Medical Center	0	0	0	79	79
Fojtik	Joseph	M.D.	Internal Medicine	Mercy Crystal Lake South Medical	0	128	0	0	128
Gavran	Monica	M.D.	Internal Medicine	Mercy Woodstock Medical Center	0	0	0	58	58
Goodman	David	M.D.	Otolaryngology	Mercy Crystal Lake East Medical C	0	18	14	8	40
Gulati	Roshi	M.D.	Family Medicine	Mercy Woodstock Medical Center	0	0	0	23	23
Gupta	Lata	M.D.	Obstetrics/Gynecology	Mercy Woodstock Medical Center	0	0	0	51	51
Henning	Douglas	M.D.	Pediatrics	Mercy Crystal Lake East Medical C	0	0	0	12	12
Howey	Susan	M.D.	Obstetrics/Gynecology	Mercy Northwest Women's Group	0	0	82	0	82
Hussain	Yasmin	M.D.	Gastroenterology	Mercy Woodstock Medical Center	0	0	0	16	16
Kakish	Nathan	M.D.	Internal Medicine/Pediatr	Mercy Woodstock Medical Center	0	0	0	117	117
Kang	Hiejn	M.D.	Family Medicine	Mercy McHenry Medical Cente	0	0	18	0	18
Karna	Sandhya	M.D.	Pediatrics	Mercy McHenry Medical Cente	0	0	38	0	38
Karney	Michelle	M.D.	Obstetrics/Gynecology	Mercy Woodstock Medical Center	0	0	0	72	72
Krpan	Marko	D.O.	Orthopedic Surgery	Mercy Crystal Lake South Medical	0	0	29	8	37
Livingston	Gary	M.D.	Otolaryngology	Mercy Crystal Lake East Medical C	0	16	18	12	46
Logman	Mabria	M.D.	Family Medicine	Mercy Crystal Lake East Medical C	0	0	65	43	108
MacDonald	Robert	D.O.	Family Medicine	Mercy Richmond Medical Center	0	0	61	0	61
Marian	Camelia	M.D.	Internal Medicine	Mercy Algonquin Medical Center	0	53	0	0	53
Mirza	Aisha	M.D.	Pediatrics	Mercy Woodstock Medical Center	0	0	0	90	90
Mitra	Deepak	M.D.	Internal Medicine	Mercy McHenry Medical Cente	0	0	71	20	91
Nath	Ranjana	M.D.	Pediatrics	Mercy Crystal Lake West Medical C	0	0	33	14	48
Persino	Richard	M.D.	Obstetrics/Gynecology	Mercy Crystal Lake OB/GYN	0	0	101	0	101
Phelan	Patrick	M.D.	Pediatrics	Mercy Woodstock Medical Center	0	0	0	106	106
Riggs	Mary	M.D.	Obstetrics/Gynecology	Mercy McHenry Medical Cente	0	0	111	0	111
Ronquillo	Bibiano	M.D.	Internal Medicine	Mercy Woodstock Medical Center	0	0	0	74	74
Shen	Emily	M.D.	Family Medicine	Mercy Crystal Lake South Medical	0	0	22	0	22
Soorya	Ranjana	M.D.	Internal Medicine	Mercy Crystal Lake South Medical	0	0	10	0	10
Srinivas	Ratna	M.D.	Obstetrics/Gynecology	Mercy McHenry Medical Cente	0	0	7	0	7
Tarandy	Dana	M.D.	Orthopedic Surgery	Mercy Woodstock Medical Center	0	0	7	52	59
Wittman	Randy	M.D.	Obstetrics/Gynecology	Mercy Crystal Lake OB/GYN	0	0	117	0	117
Zaino	Ricca	M.D.	Obstetrics/Gynecology	Mercy Woodstock Medical Center	0	0	0	163	163
				TOTAL	22	279	986	1,391	2,678

Attachment 20: Medical/Surgical, Obstetric, Pediatric, and Intensive Care

Projected Utilization

Department/Service	Projected Utilization	State Standard	Met Standard?
<b>ACUTE CARE</b>			
Medical-Surgical, Pediatric, Obstetric & Long-Term Acute Care Service (56 Med-Surg beds; 10 OB beds)	Med-Surg 87.6% (17,895 patient days) OB 88.8% (3,240 patient days)	Med/Surg - 85% OB - 75%	Yes Yes
Labor Delivery Recovery (LDR) (2 rooms)	2 rooms 810 births 405 births/room	400 births/LDR room	Yes
<b>CRITICAL CARE</b>			
Intensive Care Service (4 beds)	61.8% (902 patient days)	ICU - 60%	Yes
<b>DIAGNOSTIC AND TREATMENT</b>			
* Diagnostic/Interventional Radiology (Excludes portables & mobile equipment/Utilization)			
• General Radiology (2)	13,139 procedures	8,000 procedures	Yes
• Fluoroscopy/Tomography /Other X-ray procedures (includes Echo, Vascular, and Stress) (1)	6,538 procedures	6,500 procedures	Yes
• Mammography (2)	6,518 visits	5,000 visits	Yes
• Ultra-Sound (1)	3,225 visits	3,100 visits	Yes
• CT Scan (1)	7,132 visits	7,000 visits	Yes
• MRI (1)	2,641 procedures	2,500 procedures	Yes
• Nuclear Medicine (1)	2,179 visits	2,000 visits	Yes
Emergency Department (10 stations)	21,030 visits; 2,103/station	2,000 visits/station/ year	Yes
Surgical Operating Suite (Class C) (4 ORs)	9,089 hours; 2,272 hours/OR	1,500 hours/ operating room	Yes
Surgical Procedure Suite (Class B) (2 rooms)	3,168 hours 1,584 hours/room	1,500 hours/ procedure room	Yes

Attachment 20: Medical/Surgical, Obstetric, Pediatric, and Intensive Care

**Mercy Crystal Lake Hospital and Medical Center - Service Area Population and Growth**

<b>Zip Code</b>	<b>2000 Census</b>	<b>2010 Estimate</b>	<b>2015 Projection</b>	<b>Population Growth 2000-2010</b>	<b>Population Growth 2010-2015</b>
Algonquin -- 60102	25,383	34,875	38,586	37.4%	10.6%
Arlington Heights -- 60004	51,534	48,990	47,826	-4.9%	-2.4%
Arlington Heights -- 60005	29,464	28,135	27,413	-4.5%	-2.6%
Barrington -- 60010	41,545	44,088	45,154	6.1%	2.4%
Bartlett -- 60103	37,190	42,163	44,085	13.4%	4.6%
Buffalo Grove -- 60089	43,964	46,234	47,158	5.2%	2.0%
Carpentersville -- 60110	32,372	40,768	44,696	25.9%	9.6%
Cary -- 60013	24,091	30,084	32,989	24.9%	9.7%
Crystal Lake -- 60012	10,159	11,265	11,954	10.9%	6.1%
Crystal Lake -- 60014	44,008	51,100	54,360	16.1%	6.4%
Dundee -- 60118	15,107	18,930	20,601	25.3%	8.8%
Elgin -- 60120	47,049	49,715	51,314	5.7%	3.2%
Elgin -- 60123	44,065	49,579	52,647	12.5%	6.2%
Fox Lake -- 60020	7,675	8,885	9,112	15.8%	2.6%
Fox River Grove -- 60021	5,882	6,274	6,514	6.7%	3.8%
Gilberts -- 60136	2,026	6,670	7,453	229.2%	11.7%
Grayslake -- 60030	32,448	40,182	43,303	23.8%	7.8%
Hampshire -- 60140	7,072	14,226	15,962	101.2%	12.2%
Hanover Park -- 60133	37,334	36,961	36,697	-1.0%	-0.7%
Huntley -- 60142	9,702	25,824	28,940	166.2%	12.1%
Ingleside -- 60041	8,001	8,765	8,903	9.5%	1.6%
Island Lake -- 60042	8,634	10,058	10,773	16.5%	7.1%
Lake In The Hills -- 60156	21,985	30,066	33,118	36.8%	10.2%
Lake Zurich -- 60047	37,104	43,733	46,470	17.9%	6.3%
Marengo -- 60152	10,995	13,072	14,140	18.9%	8.2%
Mc Henry -- 60050	26,424	32,142	34,717	21.6%	8.0%
Mc Henry -- 60051	21,573	25,525	27,294	18.3%	6.9%
Mundelein -- 60060	36,080	37,701	38,393	4.5%	1.8%
Palatine -- 60067	36,452	38,393	38,893	5.3%	1.3%
Palatine -- 60074	39,272	38,532	37,950	-1.9%	-1.5%
Ringwood -- 60072	680	853	938	25.4%	10.0%
Rolling Meadows -- 60008	22,898	22,428	22,245	-2.1%	-0.8%
Round Lake -- 60073	40,599	55,624	60,472	37.0%	8.7%
Schaumburg -- 60173	11,236	12,574	12,909	11.9%	2.7%
Schaumburg -- 60192	14,058	15,606	16,142	11.0%	3.4%
Schaumburg -- 60193	41,700	40,269	39,405	-3.4%	-2.1%
Schaumburg -- 60194	22,098	20,816	20,594	-5.8%	-1.1%
Schaumburg -- 60195	4,359	4,577	4,595	5.0%	0.4%
South Elgin -- 60177	17,092	22,068	24,354	29.1%	10.4%
Spring Grove -- 60081	7,328	10,228	11,507	39.6%	12.5%
Streamwood -- 60107	35,647	35,116	34,792	-1.5%	-0.9%
Union -- 60180	1,357	1,485	1,550	9.4%	4.4%
Vernon Hills -- 60061	21,900	25,370	26,536	15.8%	4.6%
Wauconda -- 60084	12,221	15,424	16,510	26.2%	7.0%
Wonder Lake -- 60097	9,939	11,814	12,734	18.9%	7.8%
Woodstock -- 60098	27,829	33,657	36,514	20.9%	8.5%
<b>TOTAL</b>	<b>1,085,531</b>	<b>1,240,844</b>	<b>1,299,212</b>	<b>14.3%</b>	<b>4.7%</b>

Source: Nielsen Claritas, Inc., New York, NY; U.S. Census 2000

**Facilities Located Within 30 Minutes Travel Time of Project Site \***

Hospital	Street	City	State	Zip	Miles	Mins
Centegra Hospital-Woodstock	3701 Doty Rd	Woodstock	IL	60098	8.1	17.3
Centegra Hospital-McHenry	4201 Medical Center Dr	McHenry	IL	60050	7.3	12.7
Advocate Good Shepherd Hosp	450 West Highway 22	Barrington	IL	60010	6.2	12.7
Sherman Hospital	1425 Randall Rd	Elgin	IL	60123	13.3	27.6
Provena St. Joseph Hospital	77 North Airlite St	Elgin	IL	60123	16.1	25.3
St. Alexius Medical Center	1555 N. Barrington Rd	Hoffman Estates	IL	60169	16.2	27.6

\*MapQuest travel times multiplied by factor of 1.15 per Administrative Code Section 1100.510. Appendix 2 includes the MapQuest printouts per application instructions.

c2. Maldistribution:

The applicant believes the location chosen for the project will positively impact an existing maldistribution of hospital beds in the market area. As previously stated, maldistribution is typified by the lack of a sufficient population concentration in an area to support the proposed project. Said in the positive, the applicant must demonstrate that the population concentration in the area is in fact sufficient to support the proposed project. As previously noted, the population of McHenry County is growing rapidly. The dot density map shown at the end of this section depicts the concentration of persons within the planning/market area of the project. It should be noted that the greatest concentration of population is in the McHenry County/Crystal Lake region where the applicant's project is proposed to be constructed. Existing facilities are also noted on the attachment to demonstrate that they are physically located in areas of lesser population concentration. The applicant believes that locating its project in the heart of the area of greatest population will improve access.

Facilities located in the county are at or near the State's target utilization rates. Moreover, data indicates that the county currently has a shortage of 49.9 physicians. As a result, it follows that residents are seeking care outside of the community. From 7/1/09–6/30/10, 53% of McHenry County residents received inpatient care outside the county (and 22% at hospitals outside the defined service area). During the same period, 70% of residents from the immediate service area (Crystal Lake, Algonquin, Lake in the Hills, and Cary) received inpatient care outside the county (and 21% at hospitals outside the defined service area). Accordingly, the population growth in McHenry County will continue to drive the need for additional facilities. The applicant's model for care, its intention to recruit 45 physicians to the Crystal Lake facility in McHenry County to address the physician undersupply, and the construction of the Project will support the community's growing need for care.

### c3. Impact of Project on Other Area Providers:

The applicant shall document that, within 24 months after project completion, the proposed project:

- a) will not lower the utilization of other area providers below the occupancy standards specified in 77 I.. Adm. Code 1100; and
- b) will not lower, to a further extent, the utilization of other area hospitals that are currently (during the latest 12-month period) operating below the occupancy standards.

Planning area need and service demand has been previously documented under 110.530(b)(3). With respect to service restrictions, the information discussed above demonstrates the need for physicians in McHenry County. If this need is addressed, the need for the facility will exist as the physicians will reduce the out-migration of services from McHenry County.

According to reputable studies, McHenry County has a deficit of 49.9 physicians as of March 2010.<sup>3</sup> This includes an estimate of a 29.4 FTE shortage in the area of primary care physicians and the balance in specialty care. This is consistent with the national experience. Both the Council on Graduate Medical Education and the American Medical Association recognize a current physician shortage in the U.S. that will worsen over the next several years. The operational model utilized by the applicant has been implemented effectively to recruit and retain needed physicians.

With respect to Service Accessibility, the information discussed above demonstrates the need for physicians in McHenry County. If this need is addressed, the need for the facility will exist as the additional physicians will reduce the out-migration of services from McHenry County. This reduction in out-migration will also positively impact the numbers of admissions at the existing two facilities in the north and central part of McHenry County.

According to the same report, the 2005 Census estimate found that the population of McHenry County stood at 303,990, an increase of 16.9% from the decennial Census in 2000 and a 65.9% increase since the 1990 Census.<sup>4</sup> Nielsen Claritas, Inc. has estimated that the 2010 estimated population in McHenry County stood at 341,297 and is expected to grow to 371,106 by 2015.<sup>5</sup> This projected 8.7% growth further exacerbates the findings from the McHenry County Health Communities study findings

According to Nielsen Claritas, Inc., using U.S. Census 2000 data adjusted for annual estimates, the population of residents in McHenry County age 65 and above stands at 36,605. Nielsen Claritas projects that that population will total an estimated 45,435 by 2015, or a 24.0% increase. Additionally, the service area identified for this application shows a population growth of 14.3% in the decade between 2000 and 2010 and projects a further growth of 4.7% in the next five years.<sup>6</sup> This is clearly the fastest growing demographic in McHenry County and speaks to the need for additional geriatric care and geriatric specialists.<sup>7</sup> Overall population growth in the entire planning/marketing area is projected to increase by 9.1% in the next five years.

The roll out of the Patient Protection and Affordable Care Act will also impact regional hospital admissions. The applicant has projected that, notwithstanding the increased admissions currently occurring as a result of changes in the law, in years one and two of the project's operations, admissions will be further impacted at a rate of 5% the first year and 3% the second year over current rates. We project that other planning/market area facilities will see a similar impact.

### **Attachment 20: Medical/Surgical, Obstetric, Pediatric, and Intensive Care**

<sup>3</sup> Thomson Healthcare (demand) – MarketPlanner Plus ratios (50% productivity model); Market Expert ratios 2009 (national, population-based model)

<sup>4</sup> McHenry county Healthy Community Study: Community “Analysis Report, November 6, 2006, p. 17

<sup>5</sup> Nielsen Claritas, Inc. New York, NY; U.S. 2000 Census reports.

<sup>6</sup> Nielsen Claritas, Inc. New York, N.Y.; U.S. 2000 Census reports

<sup>7</sup> Nielsen Claritas, Inc. New York, N.Y.; U.S. 2000 Census reports



Due to the combination of these factors, the applicant is confident that its project will not lower the utilization of other area providers below the occupancy standards specified in 77 Ill. Adm. Code 1100. Further, the data and projections of the Applicant indicate that its project will not lower, to a further extent, the utilization of other area hospitals that are currently (during the latest 12-month period) operating below the occupancy standards.

e. Staffing Availability:

Mercy Health System currently employs 532 staff and doctors to support our 22 facilities including Mercy Harvard Hospital and Mercy multispecialty clinics in McHenry Co. and contiguous areas of Illinois.

Mercy uses a continuous staffing plan in order to fill new positions or replace individuals who have left employment. Through the use of newspaper advertising, trade magazines web sites, job fairs, colleges and technical training schools in WI and IL, Mercy partner positions are quickly and efficiently filled. Our experience in Illinois has shown that there are ample interested applicants for every job. Mercy will employ this proven process to fully staff the new facility. The staffing process will begin with the recruitment of physicians immediately upon approval of the project due to the long planning timeline necessary for physicians employment. For other staff positions, recruitment will begin one year prior to opening. All staff positions will be filled one month prior to opening so that our comprehensive training program can be completed and trial operation can begin prior to opening.

f. Performance Requirements: Bed Capacity Minimum

1. Medical/Surgical

The applicant is applying for the minimum number of beds (56) within a Metropolitan Statistical Area (MSA)

As described earlier in this application we believe this minimum number is dated and no longer reflects the current needed number of beds to build a hospital and we do have an alternative plan for less beds and less cost if the Board is interested.

2. Obstetrics

The applicant is applying for the minimum unit size for a new obstetrics unit within a MSA which is 10 beds.

3. Intensive Care

The applicant is applying for eight (8) Intensive Care beds which is greater than the minimum of four (4) beds necessary to support a 100 bed medical surgical contingent.

4. Pediatrics

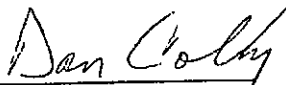
The applicant is not applying for a separate pediatric unit at this time.

g. Assurances: By 2nd year of operation, applicant will achieve and maintain occupancy standards.

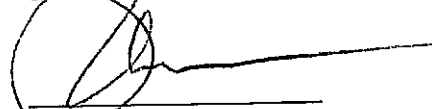
Assurance Statement

The undersigned are officers of the respective corporations designated below and make the following Assurance Statement: by the second year of operation after the project's completion, the applicant will achieve and maintain the occupancy standards specified in 77 ILL. Admin. Code 1100 for each category of service involved in this proposal.

Mercy Alliance, Inc

  
\_\_\_\_\_  
Dan Colby, Vice President  
December 27, 2010

Mercy Crystal Lake Hospital  
and Medical Center, Inc.

  
\_\_\_\_\_  
Richard H. Gruber, Secretary  
December 27, 2010

**Section 1110.3030 (b), Clinical Service Areas Other Than Categories of Service, Need Determination – Establishment**

1) Service to Planning Area Residents

A. Primary Purpose of Project

The primary purpose of this project is to serve residents of Planning Area A-10 (McHenry County), the planning area in which Mercy Crystal Lake Hospital and Medical Center will be physically located, and, in particular, the geographic service area (identified as the market area) for Mercy Crystal Lake Hospital and Medical Center.

Mercy Crystal Lake Hospital and Medical Center will be located in McHenry County, and a majority of the population that the hospital is proposing to service when the hospital becomes operational will be residents of McHenry County.

Currently, all hospital beds are located in the north and central areas of McHenry County. However, the greatest population density in the County is in the southeast corner of the County, specifically Crystal Lake. That is the primary reason the applicant proposes to build in Crystal Lake. By doing so, patients in that area are provided easier and quicker access. EMS services are provided faster route times, patients and families have less travel for services and visiting, and patients and providers finally have a choice of hospital services.

The market area for Mercy Crystal Lake Hospital and Medical Center includes the zip codes located within 30 minutes of the proposed facility, which are listed below. A map of the market area is included as part of the original application.

**Market Area Zip Codes**

Zip Code	Zip Name
60004	Arlington Heights
60005	Arlington Heights
60008	Rolling Meadows
60010	Barrington
60012	Crystal Lake
60013	Cary
60014	Crystal Lake
60020	Fox Lake
60021	Fox River Grove
60030	Grayslake
60041	Ingleside
60042	Island Lake
60047	Lake Zurich
60050	McHenry
60051	McHenry
60060	Mundelein
60061	Vernon Hills
60067	Palatine
60072	Ringwood
60073	Round Lake
60074	Palatine

Zip Code	Zip Name
60081	Spring Grove
60084	Wauconda
60089	Buffalo Grove
60097	Wonder Lake
60098	Woodstock
60102	Algonquin
60103	Bartlett
60107	Streamwood
60110	Carpentersville
60118	Dundee
60120	Elgin
60123	Elgin
60133	Hanover Park
60136	Gilberts
60140	Hampshire
60142	Huntley
60152	Marengo
60156	Lake in the Hills
60173	Schaumburg
60177	South Elgin
60180	Union
60192	Schaumburg
60193	Schaumburg
60194	Schaumburg
60195	Schaumburg

It is anticipated that patient origin for patients utilizing services considered not to be categories of service will likely be similar to that which is anticipated for exclusively inpatient services. To determine likely patient origin for the new facility, historical inpatient data for the physicians who will admit to the new facility was used. The table below shows patient origin for those physicians for the period of 7/1/09–6/30/10.

**Mercy Crystal Lake Hospital and Medical Center Service Area**

Zip	Zip Name	Cases	Pct of Total	Accum Pct of Total
60098	Woodstock	730	18.6%	18.6%
60014	Crystal Lake	469	11.9%	30.5%
60050	McHenry	417	10.6%	41.2%
60033	Harvard	320	8.1%	49.3%
60051	McHenry	216	5.5%	54.8%
60013	Cary	206	5.2%	60.0%
60152	Marengo	176	4.5%	64.5%
60097	Wonder Lake	139	3.5%	68.1%
60156	Lake in the Hills	135	3.4%	71.5%
60102	Algonquin	102	2.6%	74.1%
60142	Huntley	102	2.6%	76.7%
60071	Richmond	83	2.1%	78.8%
60081	Spring Grove	79	2.0%	80.8%
60012	Crystal Lake	60	1.5%	82.4%
60073	Round Lake	49	1.2%	83.6%

**Attachment 37: Clinic Service Areas Other Than Categories of Service**

**Mercy Crystal Lake Hospital and Medical Center Service Area**

Zip	Zip Name	Cases	Pct of Total	Accum Pct of Total
60010	Barrington	42	1.1%	84.7%
60020	Fox Lake	40	1.0%	85.7%
61012	Capron	39	1.0%	86.7%
60084	Wauconda	34	0.9%	87.5%
60042	Island Lake	33	0.8%	88.4%
60041	Ingleside	30	0.8%	89.2%
53128	Genoa City	29	0.7%	89.9%
60034	Hebron	27	0.7%	90.6%
53181	Twin Lakes	23	0.6%	91.2%
60047	Lake Zurich	23	0.6%	91.7%
60110	Carpentersville	22	0.6%	92.3%
60021	Fox River Grove	20	0.5%	92.8%
60060	Mundelein	15	0.4%	93.2%
60002	Antioch	14	0.4%	93.6%
60180	Union	14	0.4%	93.9%
60118	Dundee	11	0.3%	94.2%
60140	Hampshire	11	0.3%	94.5%
61008	Belvidere	10	0.3%	94.7%
53147	Lake Geneva	8	0.2%	94.9%
60072	Ringwood	8	0.2%	95.1%
60177	South Elgin	6	0.2%	95.3%
60030	Grayslake	5	0.1%	95.4%
60061	Vernon Hills	4	0.1%	95.5%
60120	Elgin	4	0.1%	95.6%
60123	Elgin	4	0.1%	95.7%
60192	Schaumburg	4	0.1%	95.8%
60103	Bartlett	3	0.1%	95.9%
60067	Palatine	2	0.1%	96.0%
60089	Buffalo Grove	2	0.1%	96.0%
60136	Gilberts	2	0.1%	96.1%
60194	Schaumburg	1	0.0%	96.1%
All Other		154	3.9%	100.0%
TOTAL		3,927	100.0%	

Source: IHA COMPdata

**B) Strategic Plans or Market Studies**

As set forth previously in the application, McHenry County's population continues to grow at a significant rate. Moreover, current estimates demonstrate that McHenry County has a deficit of 49.9 physicians as of March 2010, according to Thomson Healthcare demand models. This is an estimated 29.4 FTE shortage in the area of primary care physicians with the balance in specialty care. This is consistent with the national experience. Both the Council on Graduate Medical Education and the American Medical Association recognize a current physician shortage in the U.S. that will worsen over the next several years. The operational model utilized by the applicant has been implemented effectively to recruit and retain needed physicians. Accordingly, the population and service use factors indicate that the County can support the Project, particularly because of the applicant's meeting the need for physicians.

The information discussed above demonstrates the need for physicians in McHenry County. If this need is addressed, the need for the facility will exist as the additional physicians will also reduce the out-migration of services from McHenry County.

## 2) Service Demand

### B) Physician Referrals

Physician referrals detailing each Mercy-employed physician's historical referrals by hospital and patients' zip code of residence, as well as their anticipated referrals to Mercy Crystal Lake Hospital and Medical Center, are included under Appendix 1 in the original application.

## 3) Impact of the Proposed Project on Other Area Providers

With respect to service restrictions, the information discussed above demonstrates the need for physicians in McHenry County. If this need is addressed, the need for the facility will exist as the additional physicians will reduce the out-migration of services from McHenry County.

According to reputable studies, McHenry County had a deficit of 49.9 physicians as of March 2010.<sup>8</sup> This includes an estimate of a 29.4 FTE shortage in the area of primary care physicians and the balance in specialty care. This is consistent with the national experience. Both the Council on Graduate Medical Education and the American Medical Association recognize a current physician shortage in the U.S. that will worsen over the next several years. The operational model utilized by the applicant has been implemented effectively to recruit and retain needed physicians.

With respect to Service Accessibility, the information discussed above demonstrates the need for physicians in McHenry County. If this need is addressed, the need for the facility will exist since the additional physicians will reduce the out-migration of services from McHenry County. This reduction in out-migration will also positively impact the numbers of admissions at the existing two facilities in the north and central part of McHenry County.

According to the same report, the 2005 Census estimate found that the population of McHenry County stood at 303,990, an increase of 16.9% from the decennial Census in 2000 and a 65.9% increase since the 1990 Census.<sup>9</sup> Nielsen Claritas, Inc. has estimated that the 2010 estimated population in McHenry County stood at 341,297 and is expected to grow to 371,106 by 2015.<sup>10</sup> This projected 8.7% growth further exacerbates the findings from the McHenry County Health Communities study findings.

According to Nielsen Claritas, Inc., using U.S. Census 2000 data adjusted for annual estimates, the population of residents in McHenry County age 65 and above stands at 36,605. Nielsen Claritas projects that that population will total an estimated 45,435 by 2015, or a 24.0% increase. Additionally, the service area identified for this application shows a population growth of 14.3% in the decade between 2000 and 2010 and projects a further growth of 4.7% in the next five years.<sup>11</sup> This is clearly the fastest growing demographic in McHenry County and speaks to the need for additional geriatric care and geriatric specialists.<sup>12</sup> Overall population for the entire planning/marketing area is projected to increase by 9.1% in the next five years.

<sup>8</sup> Thomson Healthcare (demand) – MarketPlanner Plus ratios (50% productivity model); Market Expert ratios 2009 (national, population-based model)

<sup>9</sup> McHenry county Healthy Community Study: Community “Analysis Report, November 6, 2006, p. 17

<sup>10</sup> Nielsen Claritas, Inc. New York, NY; U.S. 2000 Census reports.

<sup>11</sup> Nielsen Claritas, Inc. New York, N.Y.; U.S. 2000 Census reports

<sup>12</sup> Nielsen Claritas, Inc. New York, N.Y.; U.S. 2000 Census reports

The rollout of the Patient Protection and Affordable Care Act will also impact regional hospital admissions. The applicant has projected that, notwithstanding the increased admissions currently occurring as a result of changes in the law, in years one and two of operations of the project, admissions will be further impacted at a rate of 5% the first year, and 3% the second year, over current rates. We project that other planning/market area facilities will see a similar impact. In combination of these factors, the applicant is confident that its project will not lower the utilization of other area providers below the occupancy standards specified in 77 I. Adm. Code 1100. Further, the data and projections of the Applicant indicate that its project will not lower, to a further extent, the utilization of other area hospitals that are currently (during the latest 12-month period) operating below the occupancy standards. The potential adverse impact on other providers is further reduced due to the downsized Mercy proposal of a 70-bed hospital with 56 Med/Surg, 10 OB, and 4 ICU beds. Given the size of the facility, it is anticipated that the impact on other area facilities could be reduced by up to 47% from the original 128-bed proposal.

#### 4) Utilization

The table below shows that the projected utilization for those services considered not to be categories of service will meet or exceed the utilization standards specified in 1110, Appendix B.

Service	Projected Utilization	State Standard	Met Standard?
Newborn Nursery (10 bassinets)	810 births	Not applicable	--
Labor Delivery Recovery (LDR) (2 rooms)	810 births 405 births/room	400 births/LDR room	Yes
* Diagnostic/Interventional Radiology (Excludes portables & mobile equipment/Utilization)	See below	See below	See below
• General Radiology (2)	13,139 procedures	8,000 procedures	Yes
• Fluoroscopy/Tomography /Other X-ray procedures (includes Echo, Vascular, and Stress) (6)	6,538 procedures	6,500 procedures	Yes
• Mammography (2)	6,518 visits	5,000 visits	Yes
• Ultra-Sound (1)	3,225 visits	3,100 visits	Yes
• CT Scan (1)	7,132 visits	7,000 visits	Yes
• MRI (1)	2,641 procedures	2,500 procedures	Yes
• Nuclear Medicine (1)	2,179 visits	2,000 visits	Yes
Emergency Department (10 stations)	21,030 visits; 2,103/station	2,000 visits/station/ year	Yes
Surgical Operating Suites (Class C) (4 ORs)	9,089 hours; 2,272 hours/OR	1,500 hours/ operating room	Yes
Surgical Procedure Suite (Class B) (2 rooms)	3,168 hours 1,584 hours/room	1,500 hours/ procedure room	Yes
Ambulatory Care Services (organized as a service)	41,160 visits/year	2,000 visits/year	Yes

# MOODY'S

## INVESTORS SERVICE

7 World Trade Center  
250 Greenwich Street  
New York, NY 10007  
www.moody's.com

May 21, 2010

Mr. John Cook  
Vice President/Chief Financial Officer  
Mercy Alliance  
1000 Mineral Point Avenue  
Janesville, WI 53547

Dear Mr. Cook:

We wish to inform you that Moody's Investors Service has assigned an A2 rating to Mercy Alliance's (formerly known as Mercy Hospital of Janesville) Series 2010A fixed rate bonds to be issued by the Wisconsin Health & Educational Facilities Authority. The rating outlook is stable. We are also affirming the A2 ratings on Mercy Alliance's outstanding debt.

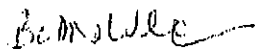
Moody's will monitor these ratings and reserves the right, at its sole discretion, to revise or withdraw these ratings at any time.

The ratings as well as any other revisions or withdrawals thereof will be publicly disseminated by Moody's through the normal print and electronic media and in response to verbal requests to Moody's rating desk.

In order for us to maintain the currency of our rating, we request that you provide ongoing disclosure, including annual and quarterly financial and statistical information.

Should you have any questions regarding the above, please do not hesitate to contact me.

Sincerely,



Beth I. Wexler  
Vice President/Senior Credit Officer  
Phone: 212-553-1384  
Fax: 212-298-7155  
Email: beth.wexler@moody's.com

BIW:rl

cc: Mr. Mark Baumgartner, Ziegler Capital Markets Group

**Attachment 39: Availability of Funds**



Financial Viability and Financial Viability Waiver

Not Applicable. Applicant maintains an A2 bond rating from Moody's Investors Service.

## Economic Feasibility

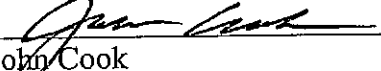
- A) Reasonableness of Financing Arrangements: Not applicable. Applicant maintains an A2 bond rating from Moody's Investors Service.
- B) Conditions of Debt Financing: Conditions of debt financing are reasonable; see letter that follows this page.
- C) Reasonableness of Project and Related Costs; see table in this section
- D) Projected Operating Costs: \$3,150 per patient day (see detail at end of this attachment)
- E) Total Effect of the Project on Capital Costs: \$54 per patient day (see detail at end of this attachment)

Conditions of Financing:

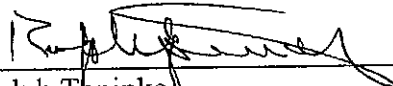
This Conditions of Financing Statement is submitted with the application of Mercy Crystal Lake Hospital and Medical Center, Inc. and Mercy Alliance, Inc. for a Certificate of Need to build a hospital in Crystal Lake, Illinois. The total cost of the project is anticipated to be \$199,344,433.

Mercy Alliance, Inc. has the ability to fund this project through traditional tax exempt bond financing. Bonds will be issued through the Illinois Financing Authority. Moody's A2 Stable rating assures a ready market for Mercy Alliance Bonds at low interest rates. Mercy Alliance anticipates funding \$170 million through a combination of fixed and variable rate bond issuances to achieve the best balance of low cost and limit interest rate risk. The average term of the bonds is expected to be 25 years. Approximately 50% of the debt will be financed with fixed rate bonds that are currently trading at historically low rates. The other 50% will be financed through variable rate demand bonds that will be supported by a bank letter of credit. Mercy Alliance has established letter of credit arrangements with highly rated banks assuring the bonds will trade at the lowest rates in the variable rate demand bond market. The lower interest rate on the variable rate demand bond issuance and the historically low fixed rate market will result in the lowest overall financing cost and limit interest rate risk. The remaining funds (approximately \$30 million) for the project will come from cash reserves.

I attest that this financing plan will result in the lowest net cost available.

Signed:   
John Cook  
Vice President and Chief Financial Officer  
Mercy Alliance, Inc.

Signed before me in Rock County Wisconsin this 23<sup>rd</sup> day of December 2010.

  
Ralph Tbpinka  
Notary Public, State of Wisconsin  
My Commission is permanent.

**COST AND GROSS SQUARE FEET BY DEPARTMENT OR SERVICE**

	A		B		C		D		E		F		G		H	
	Cost/Square Foot New	Square Foot Mod.	Gross Square Foot New	Square Foot Mod.	Gross Square Ft. Circ.*	Square Foot New	Square Foot Mod.	Gross Square Ft. Circ.*	Gross Square Mod.	Square Foot Mod.	Gross Square Ft. Circ.*	Const. \$ (A x C)	Mod. \$ (B x E)	Total Cost (G + H)		
<b>Hospital - All Departments</b>																
<b>IDPH Reviewable Areas</b>																
1 Med/Surg Unit	\$320		32,412									\$10,371,840		\$10,371,840		
2 ICU	\$434		2,385									\$1,035,090		\$1,035,090		
3 Obstetrics	\$320		4,760									\$1,523,200		\$1,523,200		
4 Newborn Nursery	\$315		1,513									\$476,595		\$476,595		
5 Labor-Delivery-Recovery Rooms	\$330		1,974									\$651,420		\$651,420		
6 Emergency	\$330		6,855									\$2,262,150		\$2,262,150		
7 Laboratory	\$398		2,881									\$1,146,638		\$1,146,638		
8 Imaging (Diagnostic Radiology)	\$398		9,900									\$3,940,200		\$3,940,200		
9 MRI	\$473		3,405									\$1,610,565		\$1,610,565		
11 Central Processing	\$406		1,260									\$511,560		\$511,560		
12 Surgical Suite	\$498		9,840									\$4,900,320		\$4,900,320		
13 Recovery	\$320		2,040									\$652,800		\$652,800		
14 Outpatient Surgery	\$320		4,593									\$1,469,760		\$1,469,760		
15 Dietary	\$473		3,780									\$1,787,940		\$1,787,940		
16 Pharmacy	\$291		840									\$244,440		\$244,440		
17 Respiratory Therapy	\$315		623									\$196,245		\$196,245		
18 Cardiac Rehabilitation	\$320		1,200									\$384,000		\$384,000		
19 PT/OT	\$320		1,474									\$471,680		\$471,680		
<b>IDPH Non Reviewable Areas</b>																
21 Building Systems	\$250		10,503									\$2,625,750		\$2,625,750		
22 Administration	\$250		3,437									\$859,250		\$859,250		
23 Public Circulation	\$225		25,351									\$5,703,975		\$5,703,975		
24 Materials Management	\$220		4,150									\$913,000		\$913,000		
25 Building Support	\$215		5,455									\$1,172,825		\$1,172,825		
26 Employee Facilities	\$216		1,163									\$251,208		\$251,208		
27 Medical Library	\$224		750									\$168,000		\$168,000		
28 Housekeeping	\$220		726									\$159,720		\$159,720		
29 Laundry Holding	\$200		479									\$95,800		\$95,800		
30 Morgue	\$224		288									\$64,512		\$64,512		

**COST AND GROSS SQUARE FEET BY DEPARTMENT OR SERVICE**

	A		B		C		D		E		F		G		H	
	Cost/Square Foot New		Gross Square Foot Mod.		Gross Square Foot New		Gross Square Ft. Circ.*		Gross Square Mod.		Gross Square Ft. Circ.*		Const. \$ (A x C)		Mod. \$ (B x E)	Total Cost (G + H)
31 Medical Records	\$224				4,373								\$979,552			\$979,552
32 Dining	\$310				2,550								\$790,500			\$790,500
33 Yard Storage	\$185				336								\$62,160			\$62,160
34 Human Resources	\$220				832								\$183,040			\$183,040
35 Marketing	\$220				1,360								\$299,200			\$299,200
36 Meeting Rooms	\$220				1,121								\$246,620			\$246,620
38 Ambulance Garage	\$157				982								\$154,174			\$154,174
39 Canopies	\$250				6,947								\$1,736,750			\$1,736,750
Subtotal Hospital DGSF	\$308				162,538								\$50,102,479			\$50,102,479
<b>Clinic - All Departments</b>																
1 Building Systems	\$220				8,171								\$1,797,620			\$1,797,620
2 Medical Records	\$224				7,832								\$1,754,368			\$1,754,368
3 Waiting	\$230				6,329								\$1,455,670			\$1,455,670
4 Public Circulation	\$210				10,327								\$2,168,670			\$2,168,670
5 Physician Offices	\$230				44,035								\$10,128,050			\$10,128,050
Total Clinic DGSF	\$226				76,694								\$17,304,378			\$17,304,378
Total Hospital and Clinic DGSF	\$282				239,232								\$67,406,857			\$67,406,857

\* Overall circulation is 8%

D) Projected Operating Costs

The projected direct annual operating costs (fully allocated costs of salaries, benefits and supplies) for the first full fiscal year at target utilization were determined as follows:

Projected Direct Annual Operating Costs	\$69,419,700
Patient Days	22,038
Current Dollars per Patient Day	\$3,150

E) Total Effect of the Project on Capital Costs

Total projected annual capital costs were determined as follows:

Projected Annual Capital Costs	\$1,200,000
Patient Days	22,038
Current Dollars per Patient Day	\$54

## Safety Net Impact Statement

The following shows charity care (number and cost in dollars) and Medicaid (patients and revenue) for the most recent three fiscal years.

Charity (# of Patients)	FY08	FY09	FY10
Inpatient	83	75	28
Outpatient	953	901	349
Total	<u>1,036</u>	<u>976</u>	<u>377</u>
Charity (Cost in Dollars)			
Inpatient	2,998,464	2,341,681	3,079,862
Outpatient	1,677,008	2,369,746	2,945,261
Total	<u>4,675,472</u>	<u>4,711,427</u>	<u>6,025,123</u>
Medicaid (# Patients)			
Inpatient	1,985	2,043	2,405
Outpatient	22,690	24,467	30,488
Total	<u>24,675</u>	<u>26,510</u>	<u>32,893</u>
Medicaid Revenue			
Inpatient	21,152,653	23,738,230	33,391,111
Outpatient	29,477,200	36,328,158	50,695,468
Total	<u>50,629,853</u>	<u>60,066,388</u>	<u>84,086,579</u>

**Charity Care Information**

The amount of charity care for the last three **audited** fiscal years, cost of charity care and ratio of charity care to net patient revenue is shown below.

	FY08	FY09	FY10
Net Patient Revenue	\$226,125,062	\$249,217,025	\$250,655,233
Amount of Charity Care (Charges)	\$8,073,963	\$9,806,503	\$12,932,018
Cost of Charity Care	\$4,675,472	\$4,711,427	\$6,025,123
Ratio of Charity Care Costs to Net Patient Revenue	2.1%	1.9%	2.4%

**Projected Patient Mix by Payor Source (Percent of Gross Revenue)**

Payor Source	FY 2015
Medicare	29.2%
Medicaid	14.1%
Commercial	51.8%
Self-Pay	3.5%
Charity	1.4%
TOTAL	100.0%



## Physician Referral Projections

Revised projected physician referrals are detailed on p. 155 of the application.



# MERCY HEALTH SYSTEM

Member of the Mercy Alliance, Inc.

Kim Albright, M.D.  
 Mercy Richmond Medical Center  
 9715 Prairie Ridge, P.O. Box R  
 Richmond, IL 60071

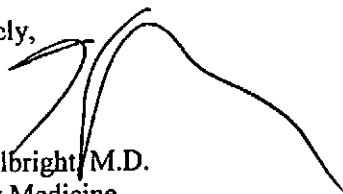
Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761

Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barrington	0	0
Centegra Hospital-McHenry	51	51
Centegra Hospital-Woodstock	0	0
Mercy Harvard Hospital	0	0
Total	51	51

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,  
  
 Kim Albright, M.D.  
 Family Medicine

Notarized signature of the physician  
 Subscribed and sworn before me  
 the 27 day of December, 2010  
 Public Notary

  
 Seal



PHYSICIAN	ALBRIGHT, KIM 1982629390
-----------	--------------------------

Sum of CASES ZIP	HOSPITAL	
	CENT-MCHENRY	Total
60071 RICHMOND	15	15
60081 SPRING GROVE	11	11
60051 MCHENRY	9	9
60050 MCHENRY	7	7
60098 WOODSTOCK	1	1
60020 FOX LAKE	1	1
60033 HARVARD	1	1
60047 LAKE ZURICH	1	1
60014 CRYSTAL LAKE	1	1
60013 CARY	1	1
53147 LAKE GENEVA	1	1
53181 TWIN LAKES	1	1
60097 WONDER LAKE	1	1
Total	51	51



# MERCY HEALTH SYSTEM

Member of the Mercy Alliance, Inc.

Jeffrey Asbury, M.D.  
 Mercy Woodstock Medical Center  
 2000 Lake Avenue  
 Woodstock, IL 60098

Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761

Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barring	0	0
Centegra Hospital-McHenry	0	0
Centegra Hospital-Woodstock	16	16
Mercy Harvard Hospital	5	0
Total	21	16

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,



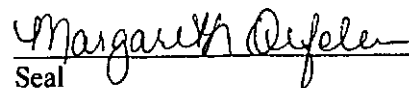
Jeffrey Asbury, M.D.  
 Urology

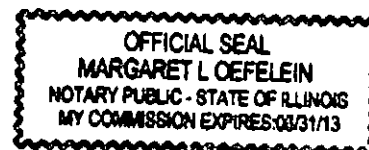
Notarized signature of the physician

Subscribed and sworn before me

the 23 day of December, 2010

Public Notary

  
 Seal



PHYSICIAN ASBURY, JEFFREY 1124048111

Sum of CASES ZIP	HOSPITAL		Total
	CENT-WOODSTK	HARVARD	
60098 WOODSTOCK	6	1	7
60033 HARVARD	1	3	4
60152 MARENGO	3		3
60156 LAKE IN THE HILLS	2		2
60051 MCHENRY	2		2
60097 WONDER LAKE	1		1
60014 CRYSTAL LAKE	1		1
Total	16	4	20



# MERCY HEALTH SYSTEM

Member of the Mercy Alliance, Inc.

Graziella Bistriceanu, M.D.  
 Mercy Woodstock Medical Center  
 2000 Lake Avenue  
 Woodstock, IL 60098

Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761

Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barrington	0	0
Centegra Hospital-McHenry	1	1
Centegra Hospital-Woodstock	54	54
Mercy Harvard Hospital	0	0
Total	55	55

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,



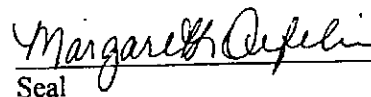
Graziella Bistriceanu, M.D.  
 Family Medicine

Notarized signature of the physician

Subscribed and sworn before me

the 23 day of December, 2010

Public Notary



Seal

PHYSICIAN | BISTRICEANU, GRAZIELLA 1316911472

Sum of CASES ZIP	HOSPITAL		Total
	CENT-MCHENRY	CENT-WOODSTK	
60098 WOODSTOCK		32	32
60014 CRYSTAL LAKE		6	6
60156 LAKE IN THE HILLS		3	3
60152 MARENGO		3	3
60180 UNION		2	2
60050 MCHENRY		2	2
60142 HUNTLEY		2	2
60051 MCHENRY		1	1
53128 GENOA CITY		1	1
60097 WONDER LAKE		1	1
60033 HARVARD		1	1
60012 CRYSTAL LAKE	1		1
Total	1	54	55



# MERCY HEALTH SYSTEM

Member of the Mercy Alliance, Inc.

Steven Campau, M.D.  
 Mercy Algonquin Medical Center  
 2401 Harnish Drive, Suite 101  
 Algonquin, IL 60102

Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761

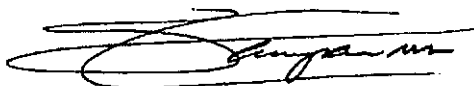
Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barring	63	63
Centegra Hospital-McHenry	0	0
Centegra Hospital-Woodstock	0	0
Mercy Harvard Hospital	0	0
<b>Total</b>	<b>63</b>	<b>63</b>

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,



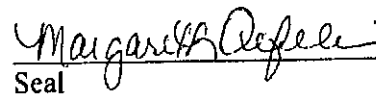
Steven Campau, M.D.  
 Internal Medicine

Notarized signature of the physician

Subscribed and sworn before me

the 23 day of December, 2010

Public Notary



Seal





PHYSICIAN	CAMPAU, STEVEN	1255440954
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Sum of CASES ZIP	HOSPITAL	
	GOOD SHEP	Total
60102 ALGONQUIN	13	13
60013 CARY	7	7
60156 LAKE IN THE HILLS	6	6
60142 HUNTLEY	4	4
60110 CARPENTERSVILLE	4	4
60010 BARRINGTON	4	4
60014 CRYSTAL LAKE	3	3
60021 FOX RIVER GROVE	3	3
60042 ISLAND LAKE	3	3
60098 WOODSTOCK	2	2
60084 WAUCONDA	2	2
60047 LAKE ZURICH	2	2
60050 MCHENRY	2	2
61020 DAVIS JUNCTION	1	1
60051 MCHENRY	1	1
60033 HARVARD	1	1
34231	1	1
60030 GRAYSLAKE	1	1
60012 CRYSTAL LAKE	1	1
60152 MARENGO	1	1
60011 BARRINGTON	1	1
<b>Total</b>	<b>63</b>	<b>63</b>



# MERCY HEALTH SYSTEM

Member of the Mercy Alliance, Inc.

Manju Chatterji, M.D.  
 Mercy Crystal Lake West Medical Center  
 350 Congress Parkway  
 Crystal Lake, IL 60014

Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761

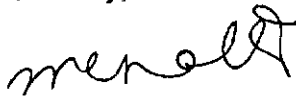
Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barrington	0	0
Centegra Hospital-McHenry	51	51
Centegra Hospital-Woodstock	16	16
Mercy Harvard Hospital	0	0
<b>Total</b>	<b>67</b>	<b>67</b>

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,



Manju Chatterji, M.D.  
 Pediatrics

Notarized signature of the physician

Subscribed and sworn before me

the 23 day of December, 2010

Public Notary



Seal



PHYSICIAN	CHATTERJI, MANJU 1871694661
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Sum of CASES ZIP	HOSPITAL		Total
	CENT-MCHENRY	CENT-WOODSTK	
60050 MCHENRY	11	2	13
60014 CRYSTAL LAKE	5	5	10
60156 LAKE IN THE HILLS	7	1	8
60051 MCHENRY	4	2	6
60102 ALGONQUIN	5		5
60097 WONDER LAKE	5		5
60098 WOODSTOCK	2	2	4
60042 ISLAND LAKE		3	3
60033 HARVARD	3		3
60013 CARY	1		1
60012 CRYSTAL LAKE	1		1
60071 RICHMOND	1		1
60072 RINGWOOD	1		1
60073 ROUND LAKE	1		1
60010 BARRINGTON	1		1
60047 LAKE ZURICH	1		1
60030 GRAYSLAKE	1		1
60110 CARPENTERSVILLE	1		1
60152 MARENGO		1	1
Total	51	16	67



# MERCY HEALTH SYSTEM

Member of the Mercy Alliance, Inc.

Rick Chitwood, M.D.  
 Mercy McHenry Medical Center  
 3922 Mercy Drive  
 McHenry, IL 60050

Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761


Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barring	0	0
Centegra Hospital-McHenry	64	64
Centegra Hospital-Woodstock	8	8
Mercy Harvard Hospital	0	0
Total	72	72

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

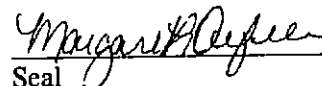
Sincerely,



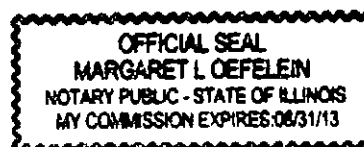
Rick Chitwood, M.D.  
 Pediatrics

Notarized signature of the physician

Subscribed and sworn before me  
 the 23 day of December, 2010  
 Public Notary



Seal



PHYSICIAN CHITWOOD, RICK 1609977305

Sum of CASES ZIP	HOSPITAL		Total
	CENT-MCHENRY	CENT-WOODSTK	
60050 MCHENRY	19	2	21
60051 MCHENRY	16	2	18
60097 WONDER LAKE	4	1	5
60081 SPRING GROVE	4	1	5
60014 CRYSTAL LAKE	3		3
60041 INGLESIDE	3		3
60098 WOODSTOCK	2		2
60042 ISLAND LAKE	2		2
60073 ROUND LAKE	2		2
53128 GENOA CITY	1	1	2
53147 LAKE GENEVA	2		2
60156 LAKE IN THE HILLS	1		1
60071 RICHMOND	1		1
60033 HARVARD		1	1
60084 WAUCONDA	1		1
60013 CARY	1		1
60046 LAKE VILLA	1		1
60110 CARPENTERSVILLE	1		1
<b>Total</b>	<b>64</b>	<b>8</b>	<b>72</b>



# MERCY HEALTH SYSTEM

Member of the Mercy Alliance, Inc.

Richard Cook, M.D.  
 Mercy Woodstock Medical Center  
 2000 Lake Avenue  
 Woodstock, IL 60098

Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761

Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barrington	0	0
Centegra Hospital-McHenry	0	0
Centegra Hospital-Woodstock	259	259
Mercy Harvard Hospital	0	0
Total	259	259

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,

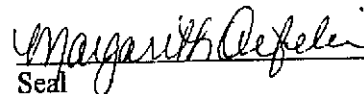


Richard Cook, M.D.  
 Obstetrics/Gynecology

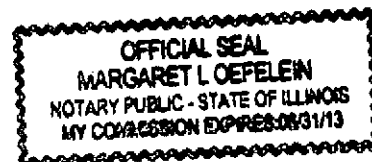
Notarized signature of the physician

Subscribed and sworn before me  
 the 23 day of December, 2010

Public Notary



Seal



PHYSICIAN	COOK, RICHARD 1508957705
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Sum of CASES	HOSPITAL	
ZIP	CENT-WOODSTK	Total
60098 WOODSTOCK	66	66
60033 HARVARD	62	62
60014 CRYSTAL LAKE	35	35
60152 MARENGO	20	20
60050 MCHENRY	20	20
60013 CARY	9	9
60097 WONDER LAKE	6	6
61065 POPLAR GROVE	5	5
60142 HUNTLEY	5	5
61012 CAPRON	4	4
60051 MCHENRY	4	4
60102 ALGONQUIN	4	4
61008 BELVIDERE	3	3
60118 DUNDEE	2	2
60034 HEBRON	2	2
60081 SPRING GROVE	2	2
60042 ISLAND LAKE	1	1
60110 CARPENTERSVILLE	1	1
53128 GENOA CITY	1	1
60140 HAMPSHIRE	1	1
60012 CRYSTAL LAKE	1	1
60007 ELK GROVE VILLAGE	1	1
60502 AURORA	1	1
60085 WAUKEGAN	1	1
60073 ROUND LAKE	1	1
61038 GARDEN PRAIRIE	1	1
Total	259	259



# MERCY HEALTH SYSTEM

Member of the Mercy Alliance, Inc.

Terri Crawley, M.D.  
 Mercy Woodstock Medical Center  
 2000 Lake Avenue  
 Woodstock, IL 60098

Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761

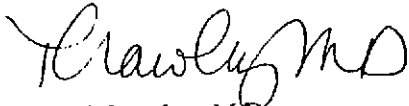
Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barrington	0	0
Centegra Hospital-McHenry	0	0
Centegra Hospital-Woodstock	141	141
Mercy Harvard Hospital	0	0
Total	141	141

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,



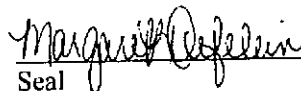
Terri Crawley, M.D.  
 Pediatrics

Notarized signature of the physician

Subscribed and sworn before me

the 27 day of December, 2010

Public Notary



Seal





PHYSICIAN	CRAWLEY, TERRI	1386735595
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Sum of CASES	HOSPITAL	
ZIP	CENT-WOODSTK	Total
60098 WOODSTOCK	43	43
60033 HARVARD	29	29
60014 CRYSTAL LAKE	15	15
60152 MARENGO	10	10
60050 MCHENRY	9	9
61012 CAPRON	5	5
60013 CARY	4	4
60073 ROUND LAKE	4	4
61065 POPLAR GROVE	3	3
60051 MCHENRY	2	2
60071 RICHMOND	2	2
60034 HEBRON	1	1
60081 SPRING GROVE	1	1
60097 WONDER LAKE	1	1
60047 LAKE ZURICH	1	1
60102 ALGONQUIN	1	1
60103 BARTLETT	1	1
60110 CARPENTERSVILLE	1	1
60118 DUNDEE	1	1
60120 ELGIN	1	1
60016 DES PLAINES	1	1
60156 LAKE IN THE HILLS	1	1
60180 UNION	1	1
60192 SCHAUMBURG	1	1
61008 BELVIDERE	1	1
60042 ISLAND LAKE	1	1
Total	141	141



# MERCY HEALTH SYSTEM

Member of the Mercy Alliance, Inc.

Jason Cundiff, M.D.  
 Mercy Crystal Lake East Medical Center  
 390 Congress Parkway  
 Crystal Lake, IL 60014

Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761

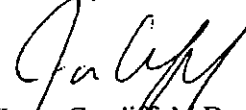
Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barring	30	30
Centegra Hospital-McHenry	25	25
Centegra Hospital-Woodstock	13	13
Mercy Harvard Hospital	1	0
Total	69	68

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,



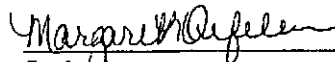
Jason Cundiff, M.D.  
 Otolaryngology

Notarized signature of the physician

Subscribed and sworn before me

the 27 day of December 2010

Public Notary



Seal



PHYSICIAN CUNDIFF, JASON 1053325233

Sum of CASES ZIP	HOSPITAL				Total
	GOOD SHEP	CENT-MCHENRY	CENT-WOODSTK	HARVARD	
60050 MCHENRY		12	1		13
60014 CRYSTAL LAKE	2	1	4		7
60051 MCHENRY	3	3			6
60013 CARY	4	1	1		6
60010 BARRINGTON	6				6
60047 LAKE ZURICH	4				4
60142 HUNTLEY	1		2		3
60041 INGLESIDE	1	2			3
60020 FOX LAKE	1	1			2
60098 WOODSTOCK			2		2
60097 WONDER LAKE		2			2
60084 WAUCONDA	2				2
60081 SPRING GROVE		2			2
60002 ANTIOCH	1	1			2
60411 CHICAGO HEIGHTS		1			1
60060 MUNDELEIN 34667	1	1			1
53147 LAKE GENEVA				1	1
60046 LAKE VILLA	1				1
60102 ALGONQUIN	1				1
60042 ISLAND LAKE	1				1
60152 MARENGO			1		1
60156 LAKE IN THE HILLS	1				1
Total	30	27	11	1	69



# MERCY HEALTH SYSTEM

Member of the Mercy Alliance, Inc.

Paul DeHaan, M.D.  
 Mercy McHenry Medical Center  
 3922 Mercy Drive  
 McHenry, IL 60050

Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761

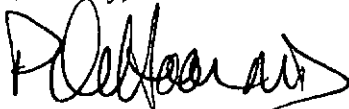
Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barrington	0	0
Centegra Hospital-McHenry	65	65
Centegra Hospital-Woodstock	37	37
Mercy Harvard Hospital	8	0
Total	110	102

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,

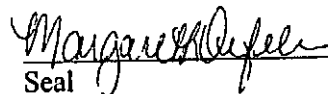


Paul DeHaan, M.D.  
 Orthopedic Surgery

Notarized signature of the physician

Subscribed and sworn before me  
 the 23 day of December, 2010

Public Notary



Seal



PHYSICIAN DEHAAN, PAUL 1386727790

Sum of CASES ZIP	HOSPITAL			Total
	CENT-MCHENRY	CENT-WOODSTK	HARVARD	
60050 MCHENRY	16	1		17
60033 HARVARD	2	5	5	12
60051 MCHENRY	10	1		11
60098 WOODSTOCK	2	7	1	10
60071 RICHMOND	7	3		10
60014 CRYSTAL LAKE		6		6
60097 WONDER LAKE	3	2		5
60013 CARY	4			4
60152 MARENGO		3		3
60020 FOX LAKE	3			3
60012 CRYSTAL LAKE	2	1		3
60081 SPRING GROVE	3			3
60041 INGLESIDE	3			3
61012 CAPRON		1	1	2
53181 TWIN LAKES	1		1	2
53941 LA VALLE	2			2
60002 ANTIOCH	2			2
60046 LAKE VILLA	2			2
61061 OREGON	1			1
60073 ROUND LAKE	1			1
60084 WAUCONDA	1			1
60034 HEBRON		1		1
60072 RINGWOOD		1		1
60140 HAMPSHIRE		1		1
60142 HUNTLEY		1		1
53184 WALWORTH		1		1
60156 LAKE IN THE HILLS		1		1
53585 SHARON		1		1
<b>Total</b>	<b>65</b>	<b>37</b>	<b>8</b>	<b>110</b>



# MERCY HEALTH SYSTEM

*Member of the Mercy Alliance, Inc.*

Paul Dillon, M.D.  
 Mercy Woodstock Medical Center  
 2000 Lake Avenue  
 Woodstock, IL 60098

Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761

Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	32	32
Advocate Good Shepherd Hosp-Barrington	0	0
Centegra Hospital-McHenry	12	12
Centegra Hospital-Woodstock	6	6
Mercy Harvard Hospital	7	0
Total	57	50

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,

Paul Dillon, M.D.  
 Plastic Surgery

Notarized signature of the physician  
 Subscribed and sworn before me  
 the \_\_\_\_ day of \_\_\_\_\_, 2010  
 Public Notary

\_\_\_\_\_  
 Seal

PHYSICIAN DILLON, PAUL 1285717561

Sum of CASES ZIP	HOSPITAL				Total
	CONDELL	CENT-MCHENRY	CENT-WOODSTK	HARVARD	
60060 MUNDELEIN	8				8
60014 CRYSTAL LAKE		4	1		5
60142 HUNTLEY		1	2		3
60085 WAUKEGAN	3				3
60061 VERNON HILLS	3				3
60041 INGLESIDE		2	1		3
60031 GURNEE	3				3
60156 LAKE IN THE HILLS			1	1	2
60098 WOODSTOCK		1	1		2
60073 ROUND LAKE	2				2
60050 MCHENRY	1	1			2
60046 LAKE VILLA	2				2
61111 LOVES PARK				1	1
60048 LIBERTYVILLE	1				1
53121 ELKHORN				1	1
60051 MCHENRY		1			1
46410 MERRILLVILLE		1			1
60002 ANTIOCH	1				1
60064 NORTH CHICAGO	1				1
60071 RICHMOND	1				1
60033 HARVARD				1	1
60077 SKOKIE	1				1
60084 WAUCONDA	1				1
53184 WALWORTH				1	1
60088 GREAT LAKES	1				1
60089 BUFFALO GROVE				1	1
60097 WONDER LAKE		1			1
60020 FOX LAKE	1				1
53147 LAKE GENEVA				1	1
60030 GRAYSLAKE	1				1
60164 MELROSE PARK	1				1
Total	32	12	6	7	57



# MERCY HEALTH SYSTEM

Member of the Mercy Alliance, Inc.

Julie Favia, M.D.  
 Mercy Woodstock Medical Center  
 2000 Lake Avenue  
 Woodstock, IL 60098

Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761

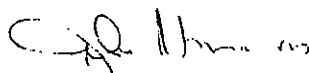
Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barring	0	0
Centegra Hospital-McHenry	0	0
Centegra Hospital-Woodstock	116	116
Mercy Harvard Hospital	0	0
Total	116	116

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,



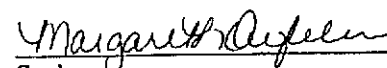
Julie Favia, M.D.  
 Obstetrics/Gynecology

Notarized signature of the physician

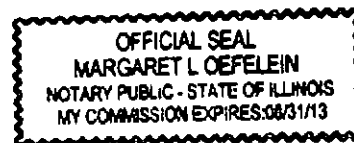
Subscribed and sworn before me

the 27 day of December, 2010

Public Notary



Seal





PHYSICIAN	FAVIA, JULIE 1154418697
-----------	-------------------------

Sum of CASES ZIP	HOSPITAL	
	CENT-WOODSTK	Total
60098 WOODSTOCK	36	36
60033 HARVARD	11	11
60014 CRYSTAL LAKE	11	11
60152 MARENGO	9	9
60156 LAKE IN THE HILLS	7	7
60013 CARY	7	7
60097 WONDER LAKE	7	7
60142 HUNTLEY	6	6
60050 MCHENRY	4	4
60034 HEBRON	3	3
60073 ROUND LAKE	3	3
61012 CAPRON	2	2
60012 CRYSTAL LAKE	2	2
60071 RICHMOND	1	1
53585 SHARON	1	1
53191 WILLIAMS BAY	1	1
60102 ALGONQUIN	1	1
60047 LAKE ZURICH	1	1
60016 DES PLAINES	1	1
60046 LAKE VILLA	1	1
60180 UNION	1	1
Total	116	116



# MERCY HEALTH SYSTEM

Member of the Mercy Alliance, Inc.

Joseph Fojtik, M.D.  
 Mercy Crystal Lake South Medical Center  
 415 Congress Parkway  
 Crystal Lake, IL 60014

Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761

Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barrington	188	188
Centegra Hospital-McHenry	0	0
Centegra Hospital-Woodstock	0	0
Mercy Harvard Hospital	0	0
Total	188	188

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,




Joseph Fojtik, M.D.  
 Internal Medicine

Notarized signature of the physician

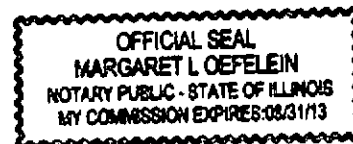
Subscribed and sworn before me

the 27 day of December 2010

Public Notary



Seal



PHYSICIAN FOJTIK, JOSEPH 1801971171

Sum of CASES ZIP	HOSPITAL	
	GOOD SHEP	Total
60013 CARY	78	78
60014 CRYSTAL LAKE	30	30
60010 BARRINGTON	14	14
60102 ALGONQUIN	11	11
60050 MCHENRY	10	10
60021 FOX RIVER GROVE	9	9
60084 WAUCONDA	7	7
60060 MUNDELEIN	6	6
60156 LAKE IN THE HILLS	4	4
60142 HUNTLEY	3	3
60012 CRYSTAL LAKE	3	3
60042 ISLAND LAKE	3	3
60047 LAKE ZURICH	2	2
60051 MCHENRY	2	2
60098 WOODSTOCK	2	2
60177 SOUTH ELGIN	1	1
40220 LOUISVILLE	1	1
60030 GRAYSLAKE	1	1
60081 SPRING GROVE	1	1
Total	188	188



# MERCY HEALTH SYSTEM

Member of the Mercy Alliance, Inc.

Monica Gavran, M.D.  
 Mercy Woodstock Medical Center  
 2000 Lake Avenue  
 Woodstock, IL 60098

Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761

Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barring	0	0
Centegra Hospital-McHenry	0	0
Centegra Hospital-Woodstock	85	85
Mercy Harvard Hospital	0	0
Total	85	85

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,



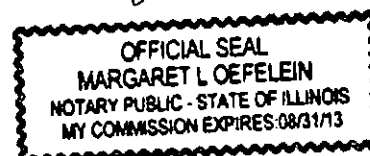
Monica Gavran, M.D.  
 Internal Medicine

Notarized signature of the physician

Subscribed and sworn before me  
 the 23 day of December, 2010

Public Notary

Seal 



PHYSICIAN	GAVRAN, MONICA	1326123530
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Sum of CASES	HOSPITAL	
ZIP	CENT-WOODSTK	Total
60098 WOODSTOCK	41	41
60014 CRYSTAL LAKE	10	10
60152 MARENGO	9	9
60142 HUNTLEY	5	5
60180 UNION	3	3
61012 CAPRON	2	2
60050 MCHENRY	2	2
60051 MCHENRY	2	2
60504 AURORA	2	2
60012 CRYSTAL LAKE	2	2
60097 WONDER LAKE	1	1
60033 HARVARD	1	1
60013 CARY	1	1
60156 LAKE IN THE HILLS	1	1
60034 HEBRON	1	1
60140 HAMPSHIRE	1	1
60565 NAPERVILLE	1	1
Total	85	85



# MERCY HEALTH SYSTEM

Member of the Mercy Alliance, Inc.

David Goodman, M.D.  
 Mercy Crystal Lake East Medical Center  
 390 Congress Parkway  
 Crystal Lake, IL 60014

Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761

Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barrington	27	27
Centegra Hospital-McHenry	20	20
Centegra Hospital-Woodstock	11	11
Mercy Harvard Hospital	0	0
Total	58	58

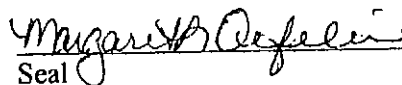
These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,



David Goodman, M.D.  
 Otolaryngology

Notarized signature of the physician  
 Subscribed and sworn before me  
 the 23 day of December, 2010  
 Public Notary

  
 Seal



PHYSICIAN GOODMAN, DAVID 1477610665

Sum of CASES ZIP	HOSPITAL			Total
	GOOD SHEP	CENT-MCHENRY	CENT-WOODSTK	
60051 MCHENRY	1	5		6
60014 CRYSTAL LAKE	2	1	3	6
60084 WAUCONDA	5			5
60010 BARRINGTON	4	1		5
60050 MCHENRY		4		4
60047 LAKE ZURICH	4			4
60098 WOODSTOCK			3	3
60097 WONDER LAKE	1	1	1	3
60081 SPRING GROVE		3		3
60034 HEBRON		2		2
60013 CARY	2			2
61012 CAPRON	1			1
0			1	1
60067 PALATINE	1			1
60071 RICHMOND		1		1
60073 ROUND LAKE	1			1
60041 INGLESIDE		1		1
60012 CRYSTAL LAKE	1			1
60025 GLENVIEW			1	1
60033 HARVARD			1	1
60110 CARPENTERSVILLE	1			1
60118 DUNDEE		1		1
60152 MARENGO			1	1
60156 LAKE IN THE HILLS	1			1
60192 SCHAUMBURG	1			1
60610 CHICAGO	1			1
<b>Total</b>	<b>27</b>	<b>20</b>	<b>11</b>	<b>58</b>



# MERCY HEALTH SYSTEM

Member of the Mercy Alliance, Inc.

Roshi Gulati, M.D.  
 Mercy Woodstock Medical Center  
 2000 Lake Avenue  
 Woodstock, IL 60098

Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761

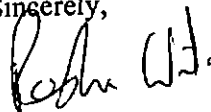
Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barrington	0	0
Centegra Hospital-McHenry	0	0
Centegra Hospital-Woodstock	33	33
Mercy Harvard Hospital	0	0
Total	33	33

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,



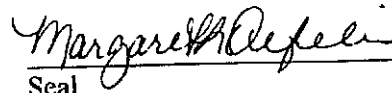
Roshi Gulati, M.D.  
 Family Medicine

Notarized signature of the physician

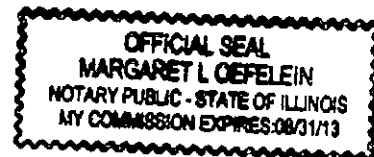
Subscribed and sworn before me

the 23 day of December, 2010

Public Notary



Seal





PHYSICIAN	GULATI, ROSHI	1922290816
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Sum of CASES	HOSPITAL	
ZIP	CENT-WOODSTK	Total
60098 WOODSTOCK	19	19
60152 MARENGO	4	4
60014 CRYSTAL LAKE	2	2
60033 HARVARD	2	2
60142 HUNTLEY	2	2
60050 MCHENRY	1	1
60097 WONDER LAKE	1	1
0	1	1
60071 RICHMOND	1	1
Total	33	33



Lata Gupta, M.D.  
 Mercy Woodstock Medical Center  
 2000 Lake Avenue  
 Woodstock, IL 60098

Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761

Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barrington	0	0
Centegra Hospital-McHenry	0	0
Centegra Hospital-Woodstock	75	75
Mercy Harvard Hospital	0	0
Total	75	75

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,

Lata Gupta, M.D.  
 Obstetrics/Gynecology

Notarized signature of the physician  
 Subscribed and sworn before me  
 the \_\_\_\_ day of \_\_\_\_\_, 2010  
 Public Notary

Seal

PHYSICIAN	GUPTA, LATA 1871621136
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Sum of CASES	HOSPITAL	
ZIP	CENT-WOODSTK	Total
60098 WOODSTOCK	18	18
60033 HARVARD	18	18
60014 CRYSTAL LAKE	8	8
60152 MARENGO	4	4
60050 MCHENRY	4	4
61012 CAPRON	3	3
60156 LAKE IN THE HILLS	3	3
60142 HUNTLEY	3	3
60097 WONDER LAKE	3	3
60074 PALATINE	2	2
60012 CRYSTAL LAKE	1	1
53128 GENOA CITY	1	1
60103 BARTLETT	1	1
60071 RICHMOND	1	1
60013 CARY	1	1
60051 MCHENRY	1	1
60177 SOUTH ELGIN	1	1
60180 UNION	1	1
60629 CHICAGO	1	1
Total	75	75



# MERCY HEALTH SYSTEM

Member of the Mercy Alliance, Inc.

Douglas Henning, M.D.  
 Mercy Crystal Lake East Medical Center  
 390 Congress Parkway  
 Crystal Lake, IL 60014

Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761

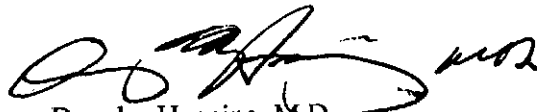
Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barrington	0	0
Centegra Hospital-McHenry	0	0
Centegra Hospital-Woodstock	17	17
Mercy Harvard Hospital	0	0
<b>Total</b>	<b>17</b>	<b>17</b>

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,



Douglas Henning, M.D.  
 Pediatrics

Notarized signature of the physician

Subscribed and sworn before me

the 23 day of December, 2010

Public Notary



Seal



PHYSICIAN HENNING, DOUGLAS 1316017155

Sum of CASES	HOSPITAL	
ZIP	CENT-WOODSTK	Total
60014 CRYSTAL LAKE	9	9
60152 MARENGO	4	4
60156 LAKE IN THE HILLS	1	1
60061 VERNON HILLS	1	1
60110 CARPENTERSVILLE	1	1
60050 MCHENRY	1	1
Total	17	17



Susan Howey, M.D.  
Mercy Northwest Women's Group  
47 W. Acorn Lane  
Lake in the Hills, IL 60156

Illinois Health Facilities and Services Review Board  
525 West Jefferson, Second Floor  
Springfield, IL 62761

Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barrington	0	0
Centegra Hospital-McHenry	120	120
Centegra Hospital-Woodstock	0	0
Mercy Harvard Hospital	0	0
<b>Total</b>	<b>120</b>	<b>120</b>

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,

Susan Howey, M.D.  
Obstetrics/Gynecology

Notarized signature of the physician  
Subscribed and sworn before me  
the \_\_\_\_ day of \_\_\_\_\_, 2010  
Public Notary

\_\_\_\_\_  
Seal

PHYSICIAN	HOWEY, SUSAN 1639242035
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Sum of CASES ZIP	HOSPITAL	
	CENT-MCHENRY	Total
60156 LAKE IN THE HILLS	35	35
60014 CRYSTAL LAKE	19	19
60102 ALGONQUIN	14	14
60142 HUNTLEY	12	12
60098 WOODSTOCK	10	10
60013 CARY	5	5
60118 DUNDEE	3	3
60110 CARPENTERSVILLE	3	3
60097 WONDER LAKE	3	3
60136 GILBERTS	2	2
60081 SPRING GROVE	2	2
61038 GARDEN PRAIRIE	1	1
60033 HARVARD	1	1
60050 MCHENRY	1	1
60071 RICHMOND	1	1
60051 MCHENRY	1	1
60120 ELGIN	1	1
60135 GENOA	1	1
60084 WAUCONDA	1	1
60140 HAMPSHIRE	1	1
60020 FOX LAKE	1	1
60152 MARENGO	1	1
60012 CRYSTAL LAKE	1	1
Total	120	120



# MERCY HEALTH SYSTEM

Member of the Mercy Alliance, Inc.

Yasmin Hussain, M.D.  
 Mercy Woodstock Medical Center  
 2000 Lake Avenue  
 Woodstock, IL 60098

Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761

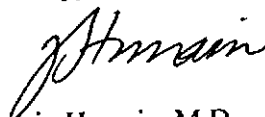
Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barrington	0	0
Centegra Hospital-McHenry	0	0
Centegra Hospital-Woodstock	23	23
Mercy Harvard Hospital	15	0
Total	38	23

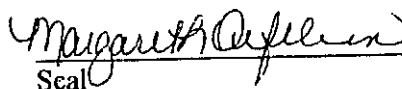
These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,

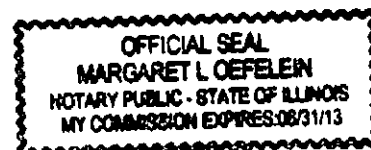


Yasmin Hussain, M.D.  
 Gastroenterology

Notarized signature of the physician  
 Subscribed and sworn before me  
 the 23 day of December, 2010  
 Public Notary



Seal





PHYSICIAN	HUSSAIN, YASMIN	1649288457
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Sum of CASES ZIP	HOSPITAL		Total
	CENT-WOODSTK	HARVARD	
60033 HARVARD	1	11	12
60014 CRYSTAL LAKE	6		6
60098 WOODSTOCK	4		4
60152 MARENGO	3		3
60097 WONDER LAKE	2	1	3
60034 HEBRON	1	1	2
60050 MCHENRY	2		2
60156 LAKE IN THE HILLS	1		1
60051 MCHENRY	1		1
60012 CRYSTAL LAKE	1		1
60102 ALGONQUIN	1		1
60136 GILBERTS		1	1
53105 BURLINGTON		1	1
Total	23	15	38



# MERCY HEALTH SYSTEM

Member of the Mercy Alliance, Inc.

Nathan Kakish, M.D.  
 Mercy Woodstock Medical Center  
 2000 Lake Avenue  
 Woodstock, IL 60098

Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761

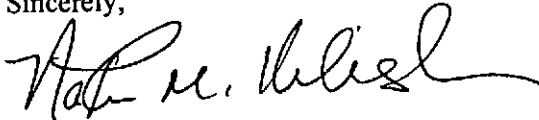
Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barring	0	0
Centegra Hospital-McHenry	0	0
Centegra Hospital-Woodstock	171	171
Mercy Harvard Hospital	0	0
Total	171	171

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,



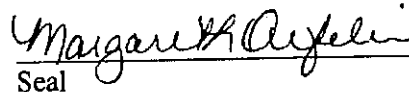
Nathan Kakish, M.D.  
 Internal Medicine/Pediatrics

Notarized signature of the physician

Subscribed and sworn before me

the 23 day of December 2010

Public Notary



Seal



PHYSICIAN	KAKISH, NATHAN	1518975309
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Sum of CASES	HOSPITAL	
ZIP	CENT-WOODSTK	Total
60098 WOODSTOCK	68	68
60033 HARVARD	24	24
60014 CRYSTAL LAKE	23	23
60152 MARENGO	12	12
60142 HUNTLEY	9	9
60097 WONDER LAKE	6	6
60012 CRYSTAL LAKE	4	4
60050 MCHENRY	3	3
61012 CAPRON	2	2
60034 HEBRON	2	2
60102 ALGONQUIN	2	2
60071 RICHMOND	2	2
61065 POPLAR GROVE	1	1
60051 MCHENRY	1	1
60013 CARY	1	1
0	1	1
53128 GENOA CITY	1	1
60110 CARPENTERSVILLE	1	1
60115 DEKALB	1	1
60140 HAMPSHIRE	1	1
53181 TWIN LAKES	1	1
53585 SHARON	1	1
60156 LAKE IN THE HILLS	1	1
60505 AURORA	1	1
61008 BELVIDERE	1	1
60046 LAKE VILLA	1	1
<b>Total</b>	<b>171</b>	<b>171</b>



# MERCY HEALTH SYSTEM

*Member of the Mercy Alliance, Inc.*

Hiejin Kang, M.D.  
 Mercy McHenry Medical Center  
 3922 Mercy Drive  
 McHenry, IL 60050

Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761

Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barrington	0	0
Centegra Hospital-McHenry	26	26
Centegra Hospital-Woodstock	0	0
Mercy Harvard Hospital	0	0
<b>Total</b>	<b>26</b>	<b>26</b>

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,

Hiejin Kang, M.D.  
 Family Medicine

Notarized signature of the physician

Subscribed and sworn before me

the \_\_\_\_ day of \_\_\_\_\_, 2010

Public Notary

\_\_\_\_\_  
 Seal

PHYSICIAN	KANG, HIEJIN 1710052980
-----------	-------------------------

Sum of CASES	HOSPITAL	
ZIP	CENT-MCHENRY	Total
60051 MCHENRY	5	5
60050 MCHENRY	5	5
60097 WONDER LAKE	4	4
60081 SPRING GROVE	4	4
60156 LAKE IN THE HILLS	1	1
60013 CARY	1	1
53128 GENOA CITY	1	1
60071 RICHMOND	1	1
60041 INGLESIDE	1	1
60020 FOX LAKE	1	1
60098 WOODSTOCK	1	1
60140 HAMPSHIRE	1	1
Total	26	26



# MERCY HEALTH SYSTEM

Member of the Mercy Alliance, Inc.

Sandhya Karna, M.D.  
 Mercy McHenry Medical Center  
 3922 Mercy Drive  
 McHenry, IL 60050

Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761


Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barrington	0	0
Centegra Hospital-McHenry	56	56
Centegra Hospital-Woodstock	0	0
Mercy Harvard Hospital	0	0
Total	56	56

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,

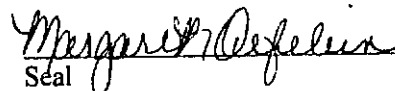
  
 Sandhya Karna, M.D.  
 Pediatrics

Notarized signature of the physician

Subscribed and sworn before me

the 27 day of December 2010

Public Notary

  
 Seal





PHYSICIAN	KARNA, SANDHYA 1700936390
-----------	---------------------------

Sum of CASES ZIP	HOSPITAL	
	CENT-MCHENRY	Total
60050 MCHENRY	22	22
60051 MCHENRY	7	7
60097 WONDER LAKE	5	5
60081 SPRING GROVE	4	4
60098 WOODSTOCK	3	3
60156 LAKE IN THE HILLS	2	2
60084 WAUCONDA	2	2
60033 HARVARD	2	2
60020 FOX LAKE	1	1
53128 GENOA CITY	1	1
53181 TWIN LAKES	1	1
60073 ROUND LAKE	1	1
60013 CARY	1	1
60041 INGLESIDE	1	1
60012 CRYSTAL LAKE	1	1
60014 CRYSTAL LAKE	1	1
60123 ELGIN	1	1
Total	56	56





# MERCY HEALTH SYSTEM

Member of the Mercy Alliance, Inc.

Michelle Karney, M.D.  
 Mercy Woodstock Medical Center  
 2000 Lake Avenue  
 Woodstock, IL 60098

Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761

Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barrington	0	0
Centegra Hospital-McHenry	0	0
Centegra Hospital-Woodstock	105	<del>70</del> 105
Mercy Harvard Hospital	0	0
Total	105	<del>70</del> 105

*MK*  
*MR*

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,

*Michelle Karney*  
 Michelle Karney, M.D.  
 Obstetrics/Gynecology

Notarized signature of the physician

Subscribed and sworn before me  
 the 23 day of December, 2010  
 Public Notary

*Margaret L Oefelein*  
 Seal



PHYSICIAN KARNEY, MICHELLE 1760557987

Sum of CASES	HOSPITAL	
ZIP	CENT-WOODSTK	Total
60098 WOODSTOCK	24	24
60014 CRYSTAL LAKE	18	18
60033 HARVARD	12	12
60050 MCHENRY	7	7
60152 MARENGO	6	6
60097 WONDER LAKE	4	4
60051 MCHENRY	4	4
60156 LAKE IN THE HILLS	3	3
53128 GENOA CITY	3	3
60012 CRYSTAL LAKE	3	3
60013 CARY	3	3
60142 HUNTLEY	2	2
60071 RICHMOND	2	2
60034 HEBRON	2	2
61065 POPLAR GROVE	1	1
60081 SPRING GROVE	1	1
53191 WILLIAMS BAY	1	1
60016 DES PLAINES	1	1
60110 CARPENTERSVILLE	1	1
60118 DUNDEE	1	1
60140 HAMPSHIRE	1	1
53585 SHARON	1	1
60002 ANTIOCH	1	1
53181 TWIN LAKES	1	1
60192 SCHAUMBURG	1	1
61008 BELVIDERE	1	1
Total	105	105



# MERCY HEALTH SYSTEM

Member of the Mercy Alliance, Inc.

Marko Krpan, D.O.  
 Mercy Crystal Lake South Medical Center  
 415 Congress Parkway  
 Crystal Lake, IL 60014

Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761

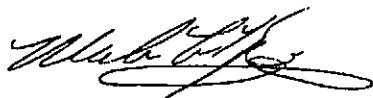
Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barrington	0	0
Centegra Hospital-McHenry	42	42
Centegra Hospital-Woodstock	12	12
Mercy Harvard Hospital	5	0
Total	59	54

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,



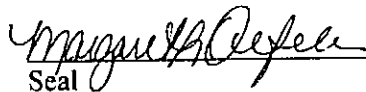
Marko Krpan, D.O.  
 Orthopedic Surgery

Notarized signature of the physician

Subscribed and sworn before me

the 23 day of December 2010

Public Notary

Seal



PHYSICIAN | KR PAN, MARKO | 1992871347

Sum of CASES ZIP	HOSPITAL			Total
	CENT-MCHENRY	CENT-WOODSTK	HARVARD	
60050 MCHENRY	14			14
60098 WOODSTOCK	1	4		5
60097 WONDER LAKE	1	3	1	5
60051 MCHENRY	5			5
60033 HARVARD	2		3	5
60014 CRYSTAL LAKE	3	1		4
60012 CRYSTAL LAKE	3			3
60013 CARY	3			3
60123 ELGIN	2			2
60034 HEBRON		2		2
62707 SPRINGFIELD		1		1
53181 TWIN LAKES	1			1
60042 ISLAND LAKE	1			1
60071 RICHMOND	1			1
60081 SPRING GROVE	1			1
60048 LIBERTYVILLE	1			1
53585 SHARON			1	1
60102 ALGONQUIN	1			1
60046 LAKE VILLA	1			1
60142 HUNTLEY		1		1
60156 LAKE IN THE HILLS	1			1
Total	42	12	5	59



# MERCY HEALTH SYSTEM

Member of the Mercy Alliance, Inc.

Gary Livingston, M.D.  
 Mercy Crystal Lake East Medical Center  
 390 Congress Parkway  
 Crystal Lake, IL 60014

Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761


Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barrington	24	24
Centegra Hospital-McHenry	26	26
Centegra Hospital-Woodstock	17	17
Mercy Harvard Hospital	0	0
Total	67	67

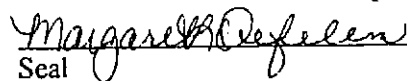
These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,

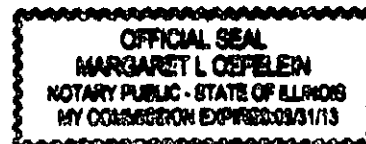


Gary Livingston, M.D.  
 Otolaryngology

Notarized signature of the physician  
 Subscribed and sworn before me  
 the 23 day of December, 2010  
 Public Notary



Seal



PHYSICIAN LIVINGSTON, GARY 1184775744

Sum of CASES ZIP	HOSPITAL			Total
	GOOD SHEP	CENT-MCHENRY	CENT-WOODSTK	
60014 CRYSTAL LAKE	3	6	1	10
60050 MCHENRY	1	5	1	7
60098 WOODSTOCK			6	6
60073 ROUND LAKE	2	3		5
60102 ALGONQUIN	2		2	4
60084 WAUCONDA	4			4
60081 SPRING GROVE		3		3
60051 MCHENRY		3		3
60152 MARENGO			2	2
60021 FOX RIVER GROVE	2			2
60033 HARVARD			2	2
60012 CRYSTAL LAKE		1	1	2
60047 LAKE ZURICH	2			2
60013 CARY	2			2
60622 CHICAGO		1		1
60010 BARRINGTON	1			1
45503	1			1
60020 FOX LAKE	1			1
60097 WONDER LAKE			1	1
60002 ANTIOCH			1	1
53157 PELL LAKE		1		1
60110 CARPENTERSVILLE	1			1
60142 HUNTLEY			1	1
60042 ISLAND LAKE	1			1
60156 LAKE IN THE HILLS	1			1
60180 UNION			1	1
60453 OAK LAWN		1		1
Total	24	24	19	67



# MERCY HEALTH SYSTEM

Member of the Mercy Alliance, Inc.

Mabria Loqman, M.D.  
 Mercy Crystal Lake East Medical Center  
 390 Congress Parkway  
 Crystal Lake, IL 60014

Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761

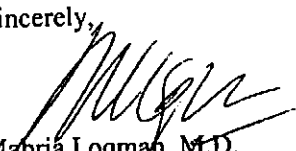
Dear Members of the Illinois Health Facilities and Services Review Board:

In October, 2010, I replaced Dr. Edward Palanca at Mercy Crystal Lake East Medical Center, and I have a similar practice load to what he had in the past. During this past fiscal year (July 2009–June 2010), Dr. Palanca referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barrington	0	0
Centegra Hospital-McHenry	95	95
Centegra Hospital-Woodstock	63	63
Mercy Harvard Hospital	0	0
Total	158	158

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,




Mabria Loqman, M.D.  
 Family Medicine

Notarized signature of the physician

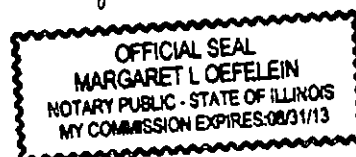
Subscribed and sworn before me

the 27 day of December 2010

Public Notary



Seal



PHYSICIAN LOQMAN, MABRIA 1891862678

Sum of CASES ZIP	HOSPITAL		Total
	CENT-MCHENRY	CENT-WOODSTK	
60014 CRYSTAL LAKE	13	16	29
60050 MCHENRY	24	1	25
60098 WOODSTOCK	5	14	19
60051 MCHENRY	10	1	11
60152 MARENGO	2	7	9
60097 WONDER LAKE	5	4	9
60073 ROUND LAKE	7		7
60142 HUNTLEY	1	5	6
60033 HARVARD		5	5
60071 RICHMOND	4		4
60012 CRYSTAL LAKE	3		3
60013 CARY	2	1	3
60084 WAUCONDA	3		3
0	1	2	3
60169 HOFFMAN ESTATES		2	2
60041 INGLESIDE	2		2
60056 MOUNT PROSPECT	2		2
60081 SPRING GROVE	2		2
61012 CAPRON		1	1
95206	1		1
60042 ISLAND LAKE	1		1
60089 BUFFALO GROVE	1		1
60021 FOX RIVER GROVE	1		1
53181 TWIN LAKES	1		1
60102 ALGONQUIN	1		1
60120 ELGIN	1		1
60016 DES PLAINES		1	1
60034 HEBRON		1	1
53191 WILLIAMS BAY	1		1
60185 WEST CHICAGO	1		1
60656 CHICAGO		1	1
61008 BELVIDERE		1	1
Total	95	63	158





# MERCY HEALTH SYSTEM

Member of the Mercy Alliance, Inc.

Robert MacDonald, D.O.  
 Mercy Richmond Medical Center  
 9715 Prairie Ridge, P.O. Box R  
 Richmond, IL 60071

Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761

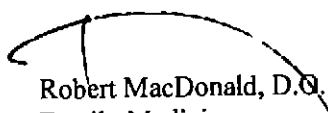
Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barrington	0	0
Centegra Hospital-McHenry	89	89
Centegra Hospital-Woodstock	0	0
Mercy Harvard Hospital	0	0
Total	89	89


These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,



Robert MacDonald, D.O.  
 Family Medicine

Notarized signature of the physician  
 Subscribed and sworn before me  
 the 27 day of December, 2010  
 Public Notary



Seal



PHYSICIAN                      MACDONALD, ROBERT    1679640379

Sum of CASES ZIP	HOSPITAL	
	CENT-MCHENRY	Total
60071 RICHMOND	21	21
60050 MCHENRY	10	10
60051 MCHENRY	9	9
53181 TWIN LAKES	9	9
60081 SPRING GROVE	7	7
53128 GENOA CITY	4	4
60097 WONDER LAKE	3	3
60020 FOX LAKE	3	3
60098 WOODSTOCK	2	2
60073 ROUND LAKE	2	2
60014 CRYSTAL LAKE	2	2
60012 CRYSTAL LAKE	2	2
60033 HARVARD	2	2
60034 HEBRON	2	2
61065 POPLAR GROVE	1	1
53147 LAKE GENEVA	1	1
85365	1	1
53159 POWERS LAKE	1	1
53170 SILVER LAKE	1	1
60084 WAUCONDA	1	1
60089 BUFFALO GROVE	1	1
60002 ANTIOCH	1	1
60013 CARY	1	1
60142 HUNTLEY	1	1
61012 CAPRON	1	1
Total	89	89



Camelia Marian, M.D.  
Mercy Algonquin Medical Center  
2401 Hamish Drive, Suite 101  
Algonquin, IL 60102

Illinois Health Facilities and Services Review Board  
525 West Jefferson, Second Floor  
Springfield, IL 62761

Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barring	77	77
Centegra Hospital-McHenry	0	0
Centegra Hospital-Woodstock	0	0
Mercy Harvard Hospital	0	0
Total	77	77

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,

Camelia Marian, M.D.  
Internal Medicine

Notarized signature of the physician  
Subscribed and sworn before me  
the \_\_\_\_ day of \_\_\_\_\_, 2010  
Public Notary

\_\_\_\_\_  
Seal

PHYSICIAN	MARIAN, CAMELIA	1851451132
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Sum of CASES	HOSPITAL	
ZIP	GOOD SHEP	Total
60013 CARY	16	16
60102 ALGONQUIN	15	15
60014 CRYSTAL LAKE	11	11
60156 LAKE IN THE HILLS	7	7
60142 HUNTLEY	7	7
60010 BARRINGTON	6	6
60051 MCHENRY	4	4
60047 LAKE ZURICH	3	3
72653	2	2
60180 UNION	1	1
60041 INGLESIDE	1	1
60098 WOODSTOCK	1	1
53072 PEWAUKEE	1	1
60020 FOX LAKE	1	1
60042 ISLAND LAKE	1	1
Total	77	77



# MERCY HEALTH SYSTEM

Member of the Mercy Alliance, Inc.

Aisha Mirza, M.D.  
 Mercy Woodstock Medical Center  
 2000 Lake Avenue  
 Woodstock, IL 60098

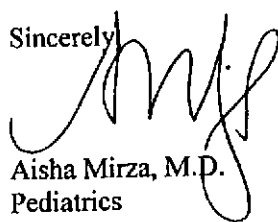
Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761

Dear Members of the Illinois Health Facilities and Services Review Board:


During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barrington	0	0
Centegra Hospital-McHenry	0	0
Centegra Hospital-Woodstock	132	132
Mercy Harvard Hospital	0	0
Total	132	132

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,  
  
 Aisha Mirza, M.D.  
 Pediatrics

Notarized signature of the physician  
 Subscribed and sworn before me  
 the 27 day of December, 2010  
 Public Notary

  
 Seal



PHYSICIAN	MIRZA, AISHA 1689742637
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Sum of CASES	HOSPITAL	
ZIP	CENT-WOODSTK	Total
60098 WOODSTOCK	36	36
60033 HARVARD	32	32
60014 CRYSTAL LAKE	17	17
60152 MARENGO	10	10
60050 MCHENRY	5	5
60013 CARY	4	4
60097 WONDER LAKE	4	4
60142 HUNTLEY	3	3
61012 CAPRON	2	2
60072 RINGWOOD	2	2
60156 LAKE IN THE HILLS	2	2
53128 GENOA CITY	2	2
60051 MCHENRY	2	2
61085 STOCKTON	1	1
60102 ALGONQUIN	1	1
37857	1	1
60012 CRYSTAL LAKE	1	1
60074 PALATINE	1	1
60180 UNION	1	1
60192 SCHAUMBURG	1	1
60629 CHICAGO	1	1
61008 BELVIDERE	1	1
60073 ROUND LAKE	1	1
61038 GARDEN PRAIRIE	1	1
Total	132	132



# MERCY HEALTH SYSTEM

Member of the Mercy Alliance, Inc.

Deepak Mitra, M.D.  
 Mercy McHenry Medical Cente  
 3922 Mercy Drive  
 McHenry, IL 60050

Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761

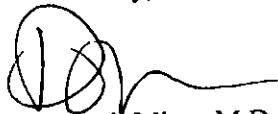
Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barrington	0	0
Centegra Hospital-McHenry	104	104
Centegra Hospital-Woodstock	30	30
Mercy Harvard Hospital	0	0
Total	134	134

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,



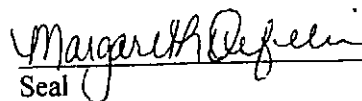
Deepak Mitra, M.D.  
 Internal Medicine

Notarized signature of the physician

Subscribed and sworn before me

the 23 day of December 2010

Public Notary



Seal



PHYSICIAN MITRA, DEEPAK 1114068467

Sum of CASES ZIP	HOSPITAL		Total
	CENT-MCHENRY	CENT-WOODSTK	
60050 MCHENRY	35	2	37
60098 WOODSTOCK	3	13	16
60014 CRYSTAL LAKE	9	6	15
60051 MCHENRY	13		13
60097 WONDER LAKE	6	1	7
60020 FOX LAKE	7		7
60081 SPRING GROVE	6		6
60012 CRYSTAL LAKE	5		5
60152 MARENGO		3	3
60071 RICHMOND	3		3
0	2	1	3
60031 GURNEE	2		2
60110 CARPENTERSVILLE	2		2
60042 ISLAND LAKE	2		2
60073 ROUND LAKE	2		2
60546 RIVERSIDE		1	1
60041 INGLESIDE	1		1
60067 PALATINE	1		1
60002 ANTIOCH	1		1
60021 FOX RIVER GROVE		1	1
48611 AUBURN	1		1
60010 BARRINGTON	1		1
60140 HAMPSHIRE	1		1
60046 LAKE VILLA	1		1
60156 LAKE IN THE HILLS		1	1
60180 UNION		1	1
Total	104	30	134





# MERCY HEALTH SYSTEM

*Member of the Mercy Alliance, Inc.*

Ranjana Nath, M.D.  
 Mercy Crystal Lake West Medical Center  
 350 Congress Parkway  
 Crystal Lake, IL 60014

Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761

Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barring	0	0
Centegra Hospital-McHenry	49	49
Centegra Hospital-Woodstock	21	21
Mercy Harvard Hospital	0	0
Total	70	70

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,

Ranjana Nath, M.D.  
 Pediatrics

Notarized signature of the physician  
 Subscribed and sworn before me  
 the \_\_\_\_ day of \_\_\_\_\_, 2010  
 Public Notary

\_\_\_\_\_  
 Seal

PHYSICIAN	NATH, RANJANA 1982762456
-----------	--------------------------

Sum of CASES ZIP	HOSPITAL		Total
	CENT-MCHENRY	CENT-WOODSTK	
60014 CRYSTAL LAKE	9	10	19
60050 MCHENRY	7	2	9
60013 CARY	7	1	8
60156 LAKE IN THE HILLS	4	2	6
60098 WOODSTOCK	5	1	6
60102 ALGONQUIN	4		4
60051 MCHENRY	3	1	4
60152 MARENGO	2		2
60012 CRYSTAL LAKE	2		2
60097 WONDER LAKE	1	1	2
61038 GARDEN PRAIRIE	1		1
60020 FOX LAKE	1		1
60041 INGLESIDE	1		1
60118 DUNDEE		1	1
60135 GENOA		1	1
60142 HUNTLEY		1	1
60042 ISLAND LAKE	1		1
53147 LAKE GENEVA	1		1
Total	49	21	70



# MERCY HEALTH SYSTEM

Member of the Mercy Alliance, Inc.

Richard Persino, M.D.  
 Mercy Crystal Lake OB/GYN  
 750 E. Terra Cotta, Ste. B  
 Crystal Lake, IL 60014

Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761

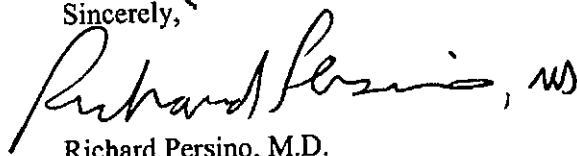
Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barring	0	0
Centegra Hospital-McHenry	148	148
Centegra Hospital-Woodstock	0	0
Mercy Harvard Hospital	0	0
Total	148	148

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,

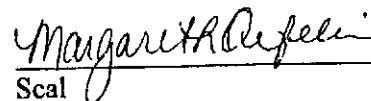


Richard Persino, M.D.  
 Obstetrics/Gynecology

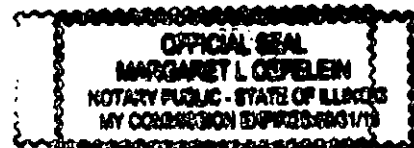
Notarized signature of the physician

Subscribed and sworn before me  
 the 23 day of December, 2010

Public Notary



Seal



PHYSICIAN                      PERSINO, RICHARD    1396806303

Sum of CASES	HOSPITAL	
ZIP	CENT-MCHENRY	Total
60014 CRYSTAL LAKE	30	30
60050 MCHENRY	20	20
60098 WOODSTOCK	18	18
60051 MCHENRY	13	13
60033 HARVARD	9	9
60097 WONDER LAKE	7	7
60102 ALGONQUIN	6	6
60156 LAKE IN THE HILLS	5	5
60081 SPRING GROVE	5	5
60012 CRYSTAL LAKE	5	5
60013 CARY	4	4
60041 INGLESIDE	4	4
61012 CAPRON	3	3
60071 RICHMOND	3	3
53170 SILVER LAKE	3	3
60073 ROUND LAKE	2	2
60020 FOX LAKE	2	2
60042 ISLAND LAKE	2	2
63010 ARNOLD	1	1
60030 GRAYSLAKE	1	1
60110 CARPENTERSVILLE	1	1
60142 HUNTLEY	1	1
60034 HEBRON	1	1
60194 SCHAUMBURG	1	1
60084 WAUCONDA	1	1
<b>Total</b>	<b>148</b>	<b>148</b>



# MERCY HEALTH SYSTEM

Member of the Mercy Alliance, Inc.

Patrick Phelan, M.D.  
 Mercy Woodstock Medical Center  
 2000 Lake Avenue  
 Woodstock, IL 60098

Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761

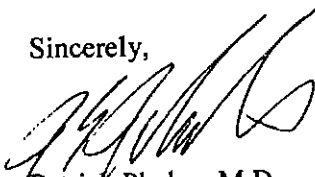
Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barrington	0	0
Centegra Hospital-McHenry	0	0
Centegra Hospital-Woodstock	156	156
Mercy Harvard Hospital	0	0
Total	156	156

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,



Patrick Phelan, M.D.  
 Pediatrics

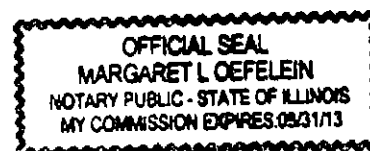
Notarized signature of the physician

Subscribed and sworn before me  
 the 23 day of December 2010

Public Notary



Seal



PHYSICIAN	PHELAN, PATRICK 1083771398
-----------	----------------------------

Sum of CASES	HOSPITAL	
ZIP	CENT-WOODSTK	Total
60098 WOODSTOCK	41	41
60033 HARVARD	28	28
60152 MARENGO	16	16
60050 MCHENRY	14	14
60014 CRYSTAL LAKE	11	11
60156 LAKE IN THE HILLS	6	6
60142 HUNTLEY	4	4
60013 CARY	4	4
60097 WONDER LAKE	4	4
60051 MCHENRY	4	4
60102 ALGONQUIN	3	3
61065 POPLAR GROVE	2	2
60034 HEBRON	2	2
60071 RICHMOND	2	2
60012 CRYSTAL LAKE	2	2
53191 WILLIAMS BAY	2	2
60002 ANTIOCH	2	2
60073 ROUND LAKE	1	1
53181 TWIN LAKES	1	1
53128 GENOA CITY	1	1
53585 SHARON	1	1
60085 WAUKEGAN	1	1
60084 WAUCONDA	1	1
60081 SPRING GROVE	1	1
61008 BELVIDERE	1	1
61012 CAPRON	1	1
<b>Total</b>	<b>156</b>	<b>156</b>



# MERCY HEALTH SYSTEM

Member of the Mercy Alliance, Inc.

Mary Riggs, M.D.  
 Mercy McHenry Medical Center  
 3922 Mercy Drive  
 McHenry, IL 60050


Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761

Dear Members of the Illinois Health Facilities and Services Review Board:


During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

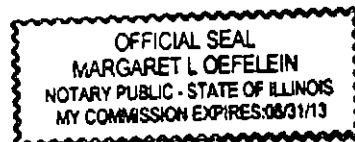
Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condeil Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barring	0	0
Centegra Hospital-McHenry	163	80 <del>163</del>
Centegra Hospital-Woodstock	0	0
Mercy Harvard Hospital	0	0
Total	163	80 <del>163</del>

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,  
  
 Mary Riggs, M.D.  
 Obstetrics/Gynecology

Notarized signature of the physician  
 Subscribed and sworn before me  
 the 27 day of December, 2010  
 Public Notary

  
 Seal



PHYSICIAN	RIGGS, MARY 1285799627
-----------	------------------------

Sum of CASES	HOSPITAL	
ZIP	CENT-MCHENRY	Total
60050 MCHENRY	41	41
60051 MCHENRY	24	24
60081 SPRING GROVE	9	9
60156 LAKE IN THE HILLS	8	8
60073 ROUND LAKE	8	8
60020 FOX LAKE	8	8
60014 CRYSTAL LAKE	8	8
60098 WOODSTOCK	5	5
60097 WONDER LAKE	5	5
60042 ISLAND LAKE	5	5
60102 ALGONQUIN	3	3
60013 CARY	3	3
60046 LAKE VILLA	3	3
60033 HARVARD	3	3
53147 LAKE GENEVA	2	2
60041 INGLESIDE	2	2
60152 MARENGO	2	2
53168 SALEM	2	2
60142 HUNTLEY	2	2
60140 HAMPSHIRE	2	2
60071 RICHMOND	2	2
53158 PLEASANT PRAIRIE	2	2
53128 GENOA CITY	2	2
53181 TWIN LAKES	2	2
60010 BARRINGTON	2	2
61065 POPLAR GROVE	1	1
60099 ZION	1	1
53170 SILVER LAKE	1	1
60084 WAUCONDA	1	1
53121 ELKHORN	1	1
0	1	1
60012 CRYSTAL LAKE	1	1
61008 BELVIDERE	1	1
Total	163	163





# MERCY HEALTH SYSTEM

Member of the Mercy Alliance, Inc.

Bibiano Ronquillo, M.D.  
 Mercy Woodstock Medical Center  
 2000 Lake Avenue  
 Woodstock, IL 60098

Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761

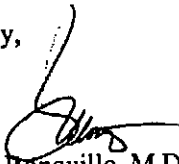
Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barrington	0	0
Centegra Hospital-McHenry	0	0
Centegra Hospital-Woodstock	108	108
Mercy Harvard Hospital	0	0
Total	108	108

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,



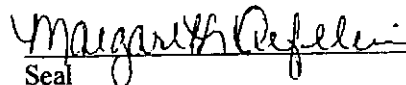
Bibiano Ronquillo, M.D.  
 Internal Medicine

Notarized signature of the physician

Subscribed and sworn before me

the 27 day of December, 2010

Public Notary



Seal



PHYSICIAN	RONQUILLO, BIBIANO 1285791228
-----------	-------------------------------

Sum of CASES	HOSPITAL	
ZIP	CENT-WOODSTK	Total
60098 WOODSTOCK	75	75
60014 CRYSTAL LAKE	8	8
60152 MARENGO	6	6
60097 WONDER LAKE	5	5
0	3	3
60012 CRYSTAL LAKE	2	2
60033 HARVARD	2	2
60180 UNION	1	1
60034 HEBRON	1	1
60013 CARY	1	1
53181 TWIN LAKES	1	1
60118 DUNDEE	1	1
60142 HUNTLEY	1	1
60021 FOX RIVER GROVE	1	1
Total	108	108



# MERCY HEALTH SYSTEM

Member of the Mercy Alliance, Inc.

Emily Shen, M.D.  
 Mercy Crystal Lake South Medical Center  
 415 Congress Parkway  
 Crystal Lake, IL 60014

Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761

Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barrington	0	0
Centegra Hospital-McHenry	32	32
Centegra Hospital-Woodstock	0	0
Mercy Harvard Hospital	0	0
Total	32	32

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,

*Emily Shen, M.D.*  
 Emily Shen, M.D.  
 Family Medicine

Notarized signature of the physician  
 Subscribed and sworn before me  
 the 23 day of December, 2010  
 Public Notary

*Margaret L. Oefelein*  
 Seal



PHYSICIAN	SHEN, EMILY 1871779744
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Sum of CASES	HOSPITAL	
ZIP	CENT-MCHENRY	Total
60050 MCHENRY	8	8
60014 CRYSTAL LAKE	7	7
60098 WOODSTOCK	3	3
60020 FOX LAKE	3	3
60071 RICHMOND	2	2
60013 CARY	2	2
60142 HUNTLEY	1	1
60051 MCHENRY	1	1
60042 ISLAND LAKE	1	1
60081 SPRING GROVE	1	1
60097 WONDER LAKE	1	1
60021 FOX RIVER GROVE	1	1
60102 ALGONQUIN	1	1
Total	32	32



# MERCY HEALTH SYSTEM

Member of the Mercy Alliance, Inc.

Ranjana Soorya, M.D.  
 Mercy Crystal Lake South Medical Center  
 415 Congress Parkway  
 Crystal Lake, IL 60014

Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761

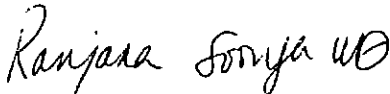
Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barrington	0	0
Centegra Hospital-McHenry	15	15
Centegra Hospital-Woodstock	0	0
Mercy Harvard Hospital	0	0
Total	15	15

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,

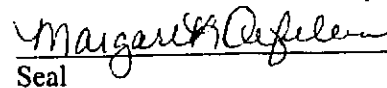


Ranjana Soorya, M.D.  
 Internal Medicine

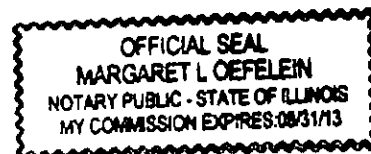
Notarized signature of the physician

Subscribed and sworn before me  
 the 23 day of December, 2010

Public Notary



Seal



PHYSICIAN SOORYA, RANJANA 1396762084

Sum of CASES	HOSPITAL	
ZIP	CENT-MCHENRY	Total
60098 WOODSTOCK	2	2
60081 SPRING GROVE	2	2
60050 MCHENRY	2	2
60021 FOX RIVER GROVE	2	2
60014 CRYSTAL LAKE	2	2
53128 GENOA CITY	1	1
60047 LAKE ZURICH	1	1
60013 CARY	1	1
60051 MCHENRY	1	1
60002 ANTIOCH	1	1
Total	15	15



# MERCY HEALTH SYSTEM

Member of the Mercy Alliance, Inc.

Ratna Srinivas, M.D.  
 Mercy McHenry Medical Center  
 3922 Mercy Drive  
 McHenry, IL 60050

Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761

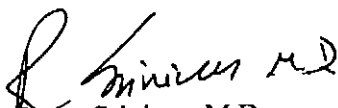
Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barrington	0	0
Centegra Hospital-McHenry	10	10
Centegra Hospital-Woodstock	0	0
Mercy Harvard Hospital	0	0
Total	10	10

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,

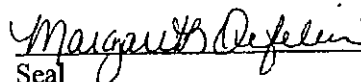


Ratna Srinivas, M.D.  
 Obstetrics/Gynecology

Notarized signature of the physician

Subscribed and sworn before me  
 the 23 day of December 2010

Public Notary



Seal



PHYSICIAN	SRINIVAS, RATNA	1841357845
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Sum of CASES ZIP	HOSPITAL	
	CENT-MCHENRY	Total
60050 MCHENRY	5	5
60041 INGLESIDE	2	2
60097 WONDER LAKE	1	1
60051 MCHENRY	1	1
60081 SPRING GROVE	1	1
Total	10	10





# MERCY HEALTH SYSTEM

Member of the Mercy Alliance, Inc.

Dana Tarandy, M.D.  
 Mercy Woodstock Medical Center  
 2000 Lake Avenue  
 Woodstock, IL 60098

Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761

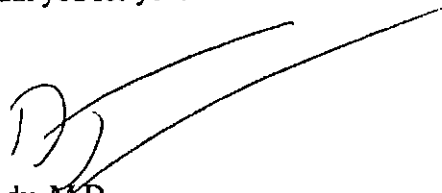
Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barring	0	0
Centegra Hospital-McHenry	10	10
Centegra Hospital-Woodstock	76	76
Mercy Harvard Hospital	9	0
Total	95	86

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,



Dana Tarandy, M.D.  
 Orthopedic Surgery

Notarized signature of the physician

Subscribed and sworn before me

the 23 day of December 2010

Public Notary

  
 Seal



PHYSICIAN	TARANDY, DANA 1629001623
-----------	--------------------------

Sum of CASES ZIP	HOSPITAL			Total
	CENT-MCHENRY	CENT-WOODSTK	HARVARD	
60098 WOODSTOCK	1	25		26
60033 HARVARD		8	6	14
60152 MARENGO		11	1	12
60014 CRYSTAL LAKE		9		9
60050 MCHENRY	5	1		6
61012 CAPRON		4		4
60013 CARY		3		3
53511 BELOIT			2	2
60020 FOX LAKE	2			2
60156 LAKE IN THE HILLS		2		2
60142 HUNTLEY		2		2
60051 MCHENRY	2			2
60097 WONDER LAKE		2		2
60110 CARPENTERSVILLE		2		2
53128 GENOA CITY		1		1
95425		1		1
53181 TWIN LAKES		1		1
53585 SHARON		1		1
60180 UNION		1		1
60504 AURORA		1		1
60942 HOOPESTON		1		1
Total	10	76	9	95



# MERCY HEALTH SYSTEM

Member of the Mercy Alliance, Inc.

Randy Wittman, M.D.  
 Mercy Crystal Lake OB/GYN  
 750 E. Terra Cotta, Ste. B  
 Crystal Lake, IL 60014

Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761

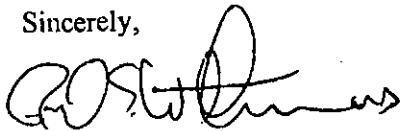
Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barring	0	0
Centegra Hospital-McHenry	172	172
Centegra Hospital-Woodstock	0	0
Mercy Harvard Hospital	0	0
Total	172	172

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,



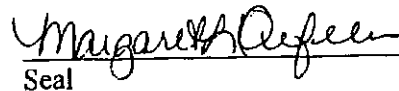
Randy Wittman, M.D.  
 Obstetrics/Gynecology

Notarized signature of the physician

Subscribed and sworn before me

the 23 day of December, 2010

Public Notary



Seal



PHYSICIAN WITTMAN, RANDY 1023165644

Sum of CASES	HOSPITAL	
ZIP	CENT-MCHENRY	Total
60050 MCHENRY	28	28
60014 CRYSTAL LAKE	26	26
60051 MCHENRY	22	22
60098 WOODSTOCK	11	11
60097 WONDER LAKE	11	11
60013 CARY	11	11
60102 ALGONQUIN	8	8
60142 HUNTLEY	6	6
60156 LAKE IN THE HILLS	4	4
60073 ROUND LAKE	4	4
60012 CRYSTAL LAKE	4	4
60033 HARVARD	4	4
53128 GENOA CITY	4	4
61088 WINNEBAGO	2	2
60177 SOUTH ELGIN	2	2
60034 HEBRON	2	2
60041 INGLESIDE	2	2
60042 ISLAND LAKE	2	2
60152 MARENGO	2	2
60081 SPRING GROVE	2	2
53184 WALWORTH	2	2
60020 FOX LAKE	1	1
53147 LAKE GENEVA	1	1
60084 WAUCONDA	1	1
53181 TWIN LAKES	1	1
53179 TREVOR	1	1
55060 OWATONNA	1	1
60103 BARTLETT	1	1
60110 CARPENTERSVILLE	1	1
60002 ANTIOCH	1	1
32137	1	1
60010 BARRINGTON	1	1
60047 LAKE ZURICH	1	1
61065 POPLAR GROVE	1	1
<b>Total</b>	<b>172</b>	<b>172</b>



# MERCY HEALTH SYSTEM

Member of the Mercy Alliance, Inc.

Ricca Zaino, M.D.  
 Mercy Woodstock Medical Center  
 2000 Lake Avenue  
 Woodstock, IL 60098

Illinois Health Facilities and Services Review Board  
 525 West Jefferson, Second Floor  
 Springfield, IL 62761

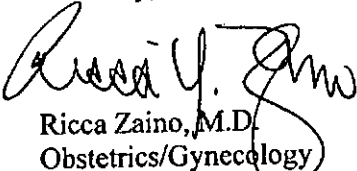
Dear Members of the Illinois Health Facilities and Services Review Board:

During this past fiscal year (July 2009–June 2010), I referred cases to the hospitals listed below. With the opening of Mercy Crystal Lake Hospital and Medical Center, I expect to refer my cases as noted below:

Hospital	FY 10 Discharges	Projected Annual Discharges to Crystal Lake Hospital
Advocate Condell Medical Center-Liberty	0	0
Advocate Good Shepherd Hosp-Barrington	0	0
Centegra Hospital-McHenry	0	0
Centegra Hospital-Woodstock	239	239
Mercy Harvard Hospital	0	0
Total	239	239

These referrals have not been used to support any other CON applications, and it is anticipated that future referrals to the Mercy Crystal Lake Hospital and Medical Center will come from within the proposed geographical service area. The information in this letter is true and correct to the best of my belief. I support the proposed opening of the hospital Mercy Crystal Lake Hospital and Medical Center. Thank you for your time and consideration.

Sincerely,



Ricca Zaino, M.D.  
 Obstetrics/Gynecology

Notarized signature of the physician

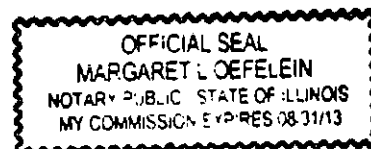
Subscribed and sworn before me

the 23 day of December, 2010

Public Notary



Seal



PHYSICIAN	ZAINO, RICCA 1558418947
-----------	-------------------------

Sum of CASES	HOSPITAL	
ZIP	CENT-WOODSTK	Total
60098 WOODSTOCK	60	60
60033 HARVARD	44	44
60014 CRYSTAL LAKE	26	26
60152 MARENGO	18	18
60050 MCHENRY	14	14
60156 LAKE IN THE HILLS	8	8
61012 CAPRON	7	7
60013 CARY	7	7
60097 WONDER LAKE	6	6
60051 MCHENRY	6	6
60142 HUNTLEY	5	5
60071 RICHMOND	5	5
60072 RINGWOOD	4	4
53128 GENOA CITY	3	3
61085 STOCKTON	2	2
60042 ISLAND LAKE	2	2
61065 POPLAR GROVE	2	2
53191 WILLIAMS BAY	2	2
60177 SOUTH ELGIN	2	2
60012 CRYSTAL LAKE	2	2
60102 ALGONQUIN	2	2
53585 SHARON	2	2
60002 ANTIOCH	1	1
60124 ELGIN	1	1
60140 HAMPSHIRE	1	1
60034 HEBRON	1	1
60120 ELGIN	1	1
60118 DUNDEE	1	1
53181 TWIN LAKES	1	1
60505 AURORA	1	1
60020 FOX LAKE	1	1
60073 ROUND LAKE	1	1
<b>Total</b>	<b>239</b>	<b>239</b>



**Trip to:**  
 4201 W Medical Center Dr  
 McHenry, IL 60050-8409  
 7.26 miles  
 11 minutes

Notes

! Mercy Crystal Lake Hospital  
 ! To  
 ! Centegra Hospital - McHenry, IL

	<b>Miles Per Section</b>	<b>Miles Driven</b>
<p><b>A</b> <b>S ll Route 31 &amp; 3 Oaks Rd</b>                      Crystal Lake, IL 60014</p>		
<p>● 1. Start out going NORTH on IL-31 N toward IL-31 S.</p>	<b>Go 7.0 MI</b>	7.0 mi
<p>● 2. Turn LEFT onto W MEDICAL CENTER DR.  <i>W MEDICAL CENTER DR is 0.1 miles past MERCY DR</i></p>	<b>Go 0.3 MI</b>	7.3 mi
<p>● 3. 4201 W MEDICAL CENTER DR is on the LEFT.  <i>Your destination is just past LAWRENCE PKWY                      If you reach CENTEGRA DR you've gone about 0.1 miles too far</i></p>	<b>Go 0.01 MI</b>	7.3 mi
<p><b>B</b> <b>4201 W Medical Center Dr</b>                      McHenry, IL 60050-8409</p>	7.3 mi	7.3 mi

**Total Travel Estimate: 7.26 miles - about 11 minutes**



**Trip to:**  
 3701 Doty Rd  
 Woodstock, IL 60098-7509  
 8.06 miles  
 15 minutes

Notes

Mercy Crystal Lake Hospital  
 To  
 Centegra Hospital - Woodstock, IL

	<b>Miles Per Section</b>	<b>Miles Driven</b>
<p><b>A</b> <b>S II Route 31 &amp; 3 Oaks Rd</b>                      Crystal Lake, IL 60014</p> <p>●</p> <p>1. Start out going NORTH on IL-31 N toward IL-31 S.</p> <p>●</p> <p>2. Take the US-14 ramp.</p> <p><b>RAMP</b></p> <p>←  3. Turn LEFT onto US-14 / NORTHWEST HWY. Continue to follow US-14.  <i>If you reach IL-31 N you've gone about 0.2 miles too far</i></p> <p>← 4. Turn LEFT onto DOTY RD.  <i>DOTY RD is 0.6 miles past LILY POND RD</i></p> <p>●</p> <p>5. 3701 DOTY RD is on the RIGHT.  <i>If you reach MEMORIAL DR you've gone about 0.1 miles too far</i></p> <p><b>B</b> <b>3701 Doty Rd</b>                      Woodstock, IL 60098-7509</p>	<p><b>Go 0.3 Mi</b></p> <p><b>Go 0.2 Mi</b></p> <p><b>Go 7.5 Mi</b></p> <p><b>Go 0.08 Mi</b></p> <p><b>Go 0.01 Mi</b></p> <p><b>8.1 mi</b></p>	<p><b>0.3 mi</b></p> <p><b>0.5 mi</b></p> <p><b>8.0 mi</b></p> <p><b>8.1 mi</b></p> <p><b>8.1 mi</b></p>

**Total Travel Estimate: 8.06 miles - about 15 minutes**





**Trip to:**  
 450 West Highway 22  
 Barrington, IL 60010  
 6.24 miles  
 11 minutes

Notes

Mercy Crystal Lake Hospital  
 To  
 Advocate Good Sheperd Hospital - Barrington, IL

	Miles Per Section	Miles Driven
<p><b>A</b> <b>S II Route 31 &amp; 3 Oaks Rd</b>                      Crystal Lake, IL 60014</p>		
<p>1. Start out going EAST on THREE OAKS RD toward SANDS RD.</p>	Go 1.3 Mi	1.3 mi
<p>2. Turn SLIGHT RIGHT onto US-14 / NORTHWEST HWY. Continue to follow US-14.  <i>US-14 is 0.1 miles past KAPER DR</i></p>	Go 3.3 Mi	4.6 mi
<p>3. Turn LEFT onto IL-22.  <i>IL-22 is 0.2 miles past FOXMOOR RD</i></p>	Go 1.6 Mi	6.2 mi
<p>4. 450 WEST HIGHWAY 22.  <i>Your destination is 0.4 miles past N KELSEY RD</i>  <i>If you reach N HARBOR RD you've gone about 0.8 miles too far</i></p>	Go 0.01 Mi	6.2 mi
<p><b>B</b> <b>450 West Highway 22</b>                      Barrington, IL 60010</p>	6.2 mi	6.2 mi








**Total Travel Estimate: 6.24 miles - about 11 minutes**



**Trip to:**  
 77 N Airlite St  
 Elgin, IL 60123-4912  
 16.05 miles  
 22 minutes

Notes

Mercy Crystal Lake Hospital  
 To  
 Provena St. Joseph's Hospital - Elgin, IL

 <b>S II Route 31 &amp; 3 Oaks Rd</b> Crystal Lake, IL 60014	<b>Miles Per Section</b>	<b>Miles Driven</b>
 1. Start out going SOUTH on IL-31 toward TEK DR.	Go 0.5 Mi	0.5 mi
 2. Take the 2nd RIGHT onto CR-A45 / JAMES R RAKOW RD. Continue to follow JAMES R RAKOW RD. <i>If you reach TRINITY DR you've gone about 1.1 miles too far</i>	Go 2.7 Mi	3.2 mi
 3. JAMES R RAKOW RD becomes RANDALL RD.	Go 12.0 Mi	15.2 mi
 4. Turn LEFT onto FOOTHILL RD. <i>FOOTHILL RD is 0.1 miles past WINHAVEN DR</i>	Go 0.7 Mi	15.9 mi
 5. Turn LEFT onto N AIRLITE ST.	Go 0.2 Mi	16.0 mi
 6. 77 N AIRLITE ST is on the RIGHT. <i>If you reach LIN LOR LN you've gone about 0.1 miles too far</i>	Go 0.01 Mi	16.0 mi
<b>B</b> 77 N Airlite St Elgin, IL 60123-4912	16.0 mi	16.0 mi



Total Travel Estimate: **16.05 miles - about 22 minutes**



**Trip to:**  
 934 Center St  
 Elgin, IL 60120-2125  
 13.28 miles  
 24 minutes

Notes

Mercy Crystal Lake Hospital  
 To:  
 Sherman Hospital, Elgin

	Miles Per Section	Miles Driven
<b>A</b> S Il Route 31 & 3 Oaks Rd Crystal Lake, IL 60014		
● 1. Start out going SOUTH on IL-31 toward TEK DR.	Go 3.7 Mi	3.7 mi
●		
↩  2. Turn LEFT onto ALGONQUIN RD / IL-62. <i>ALGONQUIN RD is just past FRONT ST</i>	Go 2.1 Mi	5.8 mi
↪  3. Turn RIGHT onto IL-25 S. <i>IL-25 S is 0.3 miles past CR-A50</i>	Go 6.8 Mi	12.6 mi
↑ 4. Stay STRAIGHT to go onto DUNDEE AVE.	Go 0.08 Mi	12.7 mi
↪ 5. Take the 1st RIGHT onto SLADE AVE. <i>If you reach CHESTER AVE you've gone a little too far</i>	Go 0.5 Mi	13.2 mi
↪ 6. Turn RIGHT onto CENTER ST. <i>CENTER ST is just past PROSPECT BLVD</i>	Go 0.04 Mi	13.3 mi
● 7. 934 CENTER ST is on the RIGHT. <i>If you reach LINCOLN AVE you've gone about 0.1 miles too far</i>	Go 0.01 Mi	13.3 mi
<b>B</b> 934 Center St Elgin, IL 60120-2125	13.3 mi	13.3 mi

**Total Travel Estimate: 13.28 miles - about 24 minutes**



**Trip to:**  
 1555 Barrington Rd  
 Hoffman Estates, IL 60169-1019  
 16.21 miles  
 24 minutes

Notes

Mercy Crystal Lake Hospital  
 To:  
 St. Alexius Medical Center, Hoffman Estates, IL

	Miles Per Section	Miles Driven
<b>A</b> <b>S Il Route 31 &amp; 3 Oaks Rd</b> Crystal Lake, IL 60014		
1. Start out going SOUTH on IL-31 toward TEK DR.	Go 3.7 Mi	3.7 mi
2. Turn LEFT onto ALGONQUIN RD / IL-62. <i>ALGONQUIN RD is just past FRONT ST</i>	Go 9.4 Mi	13.0 mi
3. Turn RIGHT onto N BARRINGTON RD. <i>N BARRINGTON RD is 0.2 miles past BRIDLEWOOD TRL</i>	Go 3.2 Mi	16.2 mi
4. Make a U-TURN onto BARRINGTON RD. <i>If you reach W GOLF RD you've gone about 0.3 miles too far</i>	Go 0.01 Mi	16.2 mi
5. 1555 BARRINGTON RD is on the RIGHT. <i>If you reach OLD HIGGINS RD you've gone about 0.3 miles too far</i>	Go 0.01 Mi	16.2 mi
<b>B</b> <b>1555 Barrington Rd</b> Hoffman Estates, IL 60169-1019	16.2 mi	16.2 mi

**Total Travel Estimate: 16.21 miles - about 24 minutes**