## Constantino, Mike

From:

Lori Wright [Lori.Wright@fmc-na.com]

Sent:

Wednesday, March 06, 2013 3:32 PM

To: Subject: Constantino, Mike #12-099 Opposition

Attachments:

12-099 NMFF Dialysis Center Opposition pdf

Mike,

Please see attached Opposition to #12-099.

Thank you and please let me know you received this.



Lori Wright Senior CON Specialist

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March 6, 2013

Ms. Courtney Avery Administrator Illinois Health Facilities & Services Review Board 525 West Jefferson, 2<sup>nd</sup> Floor Springfield, IL 62761

Re: #12-099, Northwestern Medical Faculty Foundation Dialysis Center - Opposition

Dear Ms. Avery:

On behalf of Fresenius Medical Care, I question the necessity for the proposed establishment of an outpatient dialysis clinic on the Northwestern Memorial Hospital Campus by a limited liability company joint venture between Northwestern Medical Faculty Foundation ("NMFF") and Ambulatory Care Services, Inc. d/b/a/ Innovative Dialysis Services, a for profit corporation (the "Applicants"). Currently, Fresenius Medical Care operates a 44 station dialysis facility two blocks (as referenced in the application) from the proposed site of the proposed outpatient dialysis facility. The Fresenius Medical Care Northwestern clinic operates at seventy four (74%) utilization.

The Fresenius Northwestern clinic's patients are all NMFF referred patients. The application for the proposed facility specifically states that NMFF nephrologists currently refer 87% of their patients to the Fresenius Medical Care Northwestern clinic and the remaining 13% to an area DaVita clinic. The application and referral letters submitted state that the NMFF patients will be transferred to the proposed facility and that future NMFF patients will be referred to it. It is rare for an applicant to so clearly state that its project will so directly negatively impact an existing provider. If in fact NMFF does what it says it will do and transfers its current patients and refers its future patients to its own facility, the Fresenius Northwestern clinic will most likely have to eventually close, as it will have no patients. Even if it could develop other referral sources most practices, unlike NMFF, could not support the current 44 station clinic, and Fresenius leases space for that size clinic. IT would make no sense to continue to lease space for a 44 station clinic that could only support 10 to 12 stations.

As indicated the current Frescnius clinic is at seventy four percent utilization, and the NMFF nephrologists have referred to it for over ten years. The proposed clinic is unnecessary and duplicates services already provided to the NMFF physician patients and the community. There could not be a much better example of a project that proposes a duplicative service, negatively impacts an existing provider and thus wastes health care dollars to establish a facility

the application speaks to the clinical integration its outpatient dialysis clinic will have with the teaching, research and transplant program of Northwestern Memorial Hospital. However, Northwestern Memorial Hospital is not an applicant. Further, these programs can easily be coordinated with the Fresenius clinic. In fact in the past two years, six fellows trained at the Fresenius Northwestern facility, and it also allows students and residents to observe at its facility. Also, as the treating nephrologists who admit to the Fresenius Northwestern clinic are all NMFF members, the coordination with the transplant services offered at Northwestern Memorial Hospital would be absolutely no different than it is now with respect to their patients on dialysis at the Fresenius clinic. Transplant services are offered through the coordination of a patient's nephrologist, a transplant surgeon, the transplant hospital and related primary care providers and other specialists. This coordination would occur regardless of where the patient had previously received outpatient dialysis treatment.

The application also states that the proposed facility will better coordinate services because it will be in a building linked to the Feinberg pavilion by a skybridge. It is unclear as to how the proposed facility is any different from the Fresenius Northwestern facility, which is also in a building that is linked to the Feinberg pavilion via a skybridge (see attached map of the Northwestern campus showing the current Fresenius location and the proposed facility location). Nonetheless, should Northwestern Memorial Hospital agree to it, Fresenius Medical Care would be amenable to discussing moving its current site to the site of the proposed facility (with IHFSRB approval of course). This would seem to make more sense than to establish a new outpatient dialysis clinic within two blocks of an existing one that will duplicate services and significantly negatively impact an existing provider.

The application also speaks to fostering clinical research. Fresenius Medical Care's Clinical and Scientific Research Organization brings a wide range of clinical trials to its patients, whether industry sponsored or investigator initiated. It has worked with many academic medical centers all across the country, and would welcome the opportunity to work with Northwestern Memorial Hospital or NMFF physicians on clinical research projects at the Fresenius Northwestern facility.

The application also infers that Fresenius' corporate protocols limit the NMFF physicians' practice. Fresenius does have algorithms and protocols developed by its Medical Office, with input from a Medical Advisory Board made up of experienced nephrologists, designed to reflect best practices to achieve quality outcomes. However, physicians may choose not to implement these algorithms or protocols if, in their professional judgment, they are not appropriate for the treatment of their patients. The NMFF physicians have chosen not to follow certain of the protocols and have admitted and treated their patients for years at the Fresenius Northwestern clinic.

Lastly, the application states it would facilitate fluid removal for non-dialysis patients. To Fresenius Medical Care's knowledge, any arrangement for the provision of outpatient dialysis to a non-nephrology patient requiring fluid removal that could be done at the proposed facility could also be done at the existing Fresenius Northwestern facility.

In summary, the existing Fresenius Northwestern clinic is able to work with the NMFF physicians and Northwestern Memorial Hospital collaboratively to provide the education, training, research and clinical services that the proposed site says it will offer, and already does so. The proposed facility will duplicate services and negatively impact an existing provider currently offering services just two blocks from the proposed site.

We sincerely hope the IHFSRB considers this information in determining whether to approve an application that will duplicate services and seriously negatively impact an existing provider. Thank you for your consideration.

Sincerely,

Brian Brandenburg

Regional Vice President

