

14-025

ILLINOIS HEALTH FACILITIES AND SERVICES REVIEW BOARD  
APPLICATION FOR PERMIT

ORIGINAL

## SECTION I. IDENTIFICATION, GENERAL INFORMATION, AND PROJECT INFORMATION RECEIVED

This Section must be completed for all projects.

JUN 11 2014

**Facility/Project Identification**

Facility Name: Winchester Endoscopy Center	HEALTH FACILITIES & SERVICES REVIEW BOARD	
Street Address: 1870 West Winchester Road, Suite 146		
City and Zip Code: Libertyville, Illinois 60048		
County: Lake	Health Service Area VIII	Health Planning Area: N/A

**Applicant /Co-Applicant Identification**

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

Exact Legal Name: Winchester Endoscopy, LLC
Address: 1870 West Winchester Road, Suite 146, Libertyville, Illinois 60048
Name of Registered Agent: TFA Registered Agent Corp.
Name of Chief Executive Officer: Arkan Alrashid, M.D.
CEO Address: 1870 West Winchester Road, Suite 146, Libertyville, Illinois 60048
Telephone Number: 847-247-0187

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

<input type="checkbox"/> Non-profit Corporation	<input type="checkbox"/> Partnership	
<input checked="" 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 <b>Illinois certificate of good standing</b>.</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> </ul>		

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]

Name: Kara Friedman
Title: Attorney
Company Name: Polsinelli P.C.
Address: 161 North Clark Street, Suite 4200
Telephone Number: 312-873-3639
E-mail Address: kfriedman@polsinelli.com
Fax Number:

**Additional Contact**

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

Name: Elizabeth McInerney
Title: Practice Administrator
Company Name: Northshore Center for Gastroenterology
Address: 1880 West Winchester Road, Suite 201, Libertyville, Illinois 60048
Telephone Number: 847-247-0187
E-mail Address: emcinerney@northshoregi.org
Fax Number:

**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: Kara Friedman
Title: Attorney
Company Name: Polsinelli P.C.
Address: 161 North Clark Street, Suite 4200
Telephone Number: 312-873-3639
E-mail Address: kfriedman@polsinelli.com
Fax Number:

**Site Ownership**

[Provide this information for each applicable site]

Exact Legal Name of Site Owner: Winchester Medical Building, Ltd.
Address of Site Owner: 1880 Winchester Road, Suite 201, Libertyville, Illinois 60048
Street Address or Legal Description of Site: 1870 West Winchester Road, Suite 146, Libertyville, IL 60048
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 ATTACHMENT-2, 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: Winchester Endoscopy, LLC
Address: 1870 West Winchester Road, Suite 146, Libertyville, Illinois 60048
<input type="checkbox"/> Non-profit Corporation <input type="checkbox"/> Partnership
<input checked="" 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 ATTACHMENT-3, 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

**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.

Winchester Endoscopy, LLC (the "Applicant") seeks authority from the Illinois Health Facilities and Services Review Board (the "State Board") to establish a limited-specialty ambulatory surgical treatment center ("ASTC") with 2 procedure rooms and 4 recovery stations in a medical building located at 1870 West Winchester Road, Suite 146, Libertyville, Illinois 60048. The ASTC will consist of 4,166 gross square feet of clinical space.

This project is classified as a substantive project because it proposes to establish a new health care 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			
Site Preparation	\$30,000		\$30,000
Off Site Work			
New Construction Contracts			
Modernization Contracts	\$550,000		\$550,000
Contingencies	\$50,000		\$50,000
Architectural/Engineering Fees	\$42,500		\$42,500
Consulting and Other Fees	\$72,000		\$72,000
Movable or Other Equipment (not in construction contracts)	\$25,000		\$25,000
Bond Issuance Expense (project related)			
Net Interest Expense During Construction (project related)			
Fair Market Value of Leased Space or Equipment	\$1,463,853		\$1,463,853
Other Costs To Be Capitalized			
Acquisition of Building or Other Property (excluding land)			
<b>TOTAL USES OF FUNDS</b>	<b>\$2,233,353</b>		<b>\$2,233,353</b>
SOURCE OF FUNDS	CLINICAL	NONCLINICAL	TOTAL
Cash and Securities			
Pledges			
Gifts and Bequests			
Bond Issues (project related)			
Mortgages	\$769,500		\$769,500
Leases (fair market value)	\$1,463,853		\$1,463,853
Governmental Appropriations			
Grants			
Other Funds and Sources			
<b>TOTAL SOURCES OF FUNDS</b>	<b>\$2,233,353</b>		<b>\$2,233,353</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>\$256,122</u>		

**Project Status and Completion Schedules**

<b>For facilities in which prior permits have been issued please provide the permit numbers.</b>	
Indicate the stage of the project's architectural drawings:	
<input type="checkbox"/> None or not applicable	<input type="checkbox"/> Preliminary
<input checked="" type="checkbox"/> Schematics	<input type="checkbox"/> Final Working
Anticipated project completion date (refer to Part 1130.140): <u>August 31, 2016</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.	
<b>APPEND DOCUMENTATION AS ATTACHMENT-8, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.</b>	

**State Agency Submittals – NOT APPLICABLE**

Are the following submittals up to date as applicable:
<input type="checkbox"/> Cancer Registry
<input type="checkbox"/> APORS
<input type="checkbox"/> All formal document requests such as IDPH Questionnaires and Annual Bed Reports been submitted
<input 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		Amount of Proposed Total Gross Square Feet That Is:			
		Existing	Proposed	New Const.	Modernized	As Is	Vacated Space
<b>REVIEWABLE</b>							
Medical Surgical							
Intensive Care							
Diagnostic Radiology							
MRI							
Total Clinical							
<b>NON REVIEWABLE</b>							
Administrative							
Parking							
Gift Shop							
Total Non-clinical							
<b>TOTAL</b>							

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

**Facility Bed Capacity and Utilization – NOT APPLICABLE**

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					
Acute/Chronic Mental Illness					
Neonatal Intensive Care					
General Long Term Care					
Specialized Long Term Care					
Long Term Acute Care					
Other ((identify)					
<b>TOTALS:</b>					

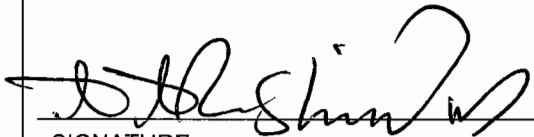


**CERTIFICATION**

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

- in the case of a corporation, any two of its officers or members of its Board of Directors;
- 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);
- 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);
- in the case of estates and trusts, two of its beneficiaries (or the sole beneficiary when two or more beneficiaries do not exist); and
- in the case of a sole proprietor, the individual that is the proprietor.

**This Application for Permit is filed on the behalf of Winchester Endoscopy, LLC\* 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.**

  
 \_\_\_\_\_  
 SIGNATURE

Arkan Alrashid, M.D.

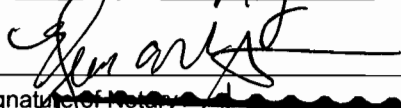
PRINTED NAME

Manager

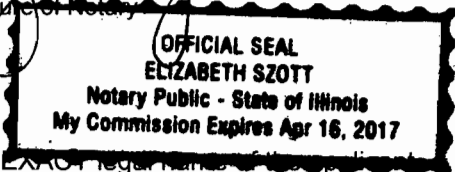
PRINTED TITLE

Notarization:

Subscribed and sworn to before me  
 this 28 day of May

  
 \_\_\_\_\_  
 Signature of Notary

Seal



\*Insert EXACT legal name of the applicant

\_\_\_\_\_  
 SIGNATURE

\_\_\_\_\_  
 PRINTED NAME

\_\_\_\_\_  
 PRINTED TITLE

Notarization:

Subscribed and sworn to before me  
 this \_\_\_\_\_ day of \_\_\_\_\_

\_\_\_\_\_  
 Signature of Notary

Seal

### 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.**

##### 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 Board 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 to 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:

**H. Non-Hospital Based Ambulatory Surgery**

This section is applicable to all projects proposing to establish or modernize a non-hospital based ambulatory surgical treatment center or to the addition of surgical specialties.

**1. Criterion 1110.1540(a), Scope of Services Provided**

Read the criterion and complete the following:

a. Indicate which of the following types of surgery are being proposed:

<input type="checkbox"/> Cardiovascular	<input type="checkbox"/> Obstetrics/Gynecology	<input type="checkbox"/> Pain Management
<input type="checkbox"/> Dermatology	<input type="checkbox"/> Ophthalmology	<input type="checkbox"/> Podiatry
<input checked="" type="checkbox"/> Gastroenterology	<input type="checkbox"/> Oral/Maxillofacial	<input type="checkbox"/> Thoracic
<input type="checkbox"/> General/Other	<input type="checkbox"/> Orthopedic	<input type="checkbox"/> Otolaryngology
<input type="checkbox"/> Neurology	<input type="checkbox"/> Plastic	<input type="checkbox"/> Urology

b. Indicate if the project will result in a  limited or  a multi-specialty ASTC.

**2. Criterion 1110.1540(b), Target Population**

Read the criterion and provide the following:

- On a map (8 1/2" x 11"), outline the intended geographic services area (GSA).
- Indicate the population within the GSA and how this number was obtained.
- Provide the travel time in all directions from the proposed location to the GSA borders and indicate how this travel time was determined.

**3. Criterion 1110.1540(c), Projected Patient Volume**

Read the criterion and provide signed letters from physicians that contain the following:

- The number of referrals anticipated annually for each specialty.
- For the past 12 months, the name and address of health care facilities to which patients were referred, including the number of patients referred for each surgical specialty by facility.
- A statement that the projected patient volume will come from within the proposed GSA.
- A statement that the information in the referral letter is true and correct to the best of his or her belief.

**4. Criterion 1110.1540(d), Treatment Room Need Assessment**

Read the criterion and provide:

- a. The number of procedure rooms proposed.
- b. The estimated time per procedure including clean-up and set-up time and the methodology used in arriving at this figure.

**5. Criterion 1110.1540(e), Impact on Other Facilities**

Read the criterion and provide:

- a. A copy of the letter sent to area surgical facilities regarding the proposed project's impact on their workload. NOTE: This letter must contain: a description of the project including its size, cost, and projected workload; the location of the proposed project; and a request that the facility administrator indicate what the impact of the proposed project will be on the existing facility.
- b. A list of the facilities contacted. NOTE: Facilities must be contacted by a service that provides documentation of receipt such as the US. Postal Service, FedEx or UPS. The documentation must be included in the application for permit.

**6. Criterion 1110.1540(f), Establishment of New Facilities**

Read the criterion and provide:

- a. A list of services that the proposed facility will provide that are not currently available in the GSA; or
- b. Documentation that the existing facilities in the GSA have restrictive admission policies; or
- c. For co-operative ventures,
  - a. Patient origin data that documents the existing hospital is providing outpatient surgery services to the target population of the GSA, and
  - b. The hospital's surgical utilization data for the latest 12 months, and
  - c. Certification that the existing hospital will not increase its operating room capacity until such a time as the proposed project's operating rooms are operating at or above the target utilization rate for a period of twelve full months; and
  - d. Certification that the proposed charges for comparable procedures at the ASTC will be lower than those of the existing hospital.

**7. Criterion 1110.1540(g), Charge Commitment**

Read the criterion and provide:

- a. A complete list of the procedures to be performed at the proposed facility with the proposed charge shown for each procedure.
- b. A letter from the owner and operator of the proposed facility committing to maintain the above charges for the first two years of operation.

**8. Criterion 1110.1540(h), Change in Scope of Service**

Read the criterion and, if applicable, document that existing programs do not currently provide the service proposed or are not accessible to the general population of the geographic area in which the facility is located.

**APPEND DOCUMENTATION AS ATTACHMENT-27, 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**

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:
		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
		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;
	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;
\$769,500	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:
		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;
		2) For revenue bonds, proof of the feasibility of securing the specified amount and interest rate;
		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.;
		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;
		5) For any option to lease, a copy of the option, including all terms and conditions.
	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;
\$1,463,853	g)	All Other Funds and Sources – verification of the amount and type of any other funds that will be used for the project.
\$2,233,353	<b>TOTAL FUNDS AVAILABLE</b>	

**APPEND DOCUMENTATION AS ATTACHMENT 38, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.**



**IX. 1120.130 - Financial Viability**

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. "A" Bond rating or better
2. All of the projects capital expenditures are completely funded through internal sources
3. 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
4. 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-37, 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-38, 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.

**A. Reasonableness of Financing Arrangements**

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:

- 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
- 2) That the total estimated project costs and related costs will be funded in total or in part by borrowing because:
  - 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
  - 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.

**B. Conditions of Debt Financing**

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:

- 1) That the selected form of debt financing for the project will be at the lowest net cost available;
- 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;
- 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.

**C. Reasonableness of Project and Related Costs**

Read the criterion and provide the following:

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).

COST AND GROSS SQUARE FEET BY DEPARTMENT OR SERVICE									
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>									

\* Include the percentage (%) of space for circulation

**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.

**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.

**APPEND DOCUMENTATION AS ATTACHMENT -39, 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			
<b>Total</b>			
Charity (cost In dollars)	Year	Year	Year
Inpatient			
Outpatient			
<b>Total</b>			
MEDICAID			
Medicaid (# of patients)	Year	Year	Year
Inpatient			
Outpatient			
<b>Total</b>			

Medicaid (revenue)			
Inpatient			
Outpatient			
Total			

APPEND DOCUMENTATION AS **ATTACHMENT-40**, 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-41**, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

**Section I, Identification, General Information, and Certification  
Applicant**

The Illinois Certificate of Good Standing for Winchester Endoscopy Center, LLC is attached at Attachment - 1.



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

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

WINCHESTER ENDOSCOPY, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON APRIL 30, 2014, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



Authentication #: 1415601518

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 5TH day of JUNE A.D. 2014*

*Jesse White*

SECRETARY OF STATE

**Section I, Identification, General Information, and Certification**  
**Site Ownership**

The letter of intent between Winchester Endoscopy Center, LLC and Winchester Medical Building, Ltd. to lease the facility is attached at Attachment – 2.

**NON-BINDING REAL ESTATE LEASE LETTER OF INTENT**

June 6, 2014

Arkan Alrashid, M.D.  
President  
Winchester Endoscopy, LLC  
1880 West Winchester Road  
Libertyville, Illinois 60048

**Re: Letter of Intent – Winchester Endoscopy Center Real Estate Lease for 1870  
West Winchester Road, Libertyville, Illinois**

Dear Dr. Alrashid:

This Non-Binding Letter of Intent sets forth the material terms and conditions pursuant to which Winchester Medical Building, Ltd. ("Lessor") is prepared to lease space in the medical office building located at 1870 West Winchester Road, Libertyville, Illinois 60048 ("Subject Property") to Winchester Endoscopy, LLC ("Lessee"). This letter shall serve as a Non-Binding Letter of Intent to lease the Subject Property.

**Proposed Terms and Conditions**

- Space:** 4,166 gross square feet inclusive of common area allocation as determined by the Winchester Court Condominium Association to be located at 1870 West Winchester Road, Libertyville, Illinois.
- Use:** Lessee shall use and occupy the Subject Property for the purpose of a licensed endoscopy center.
- Lease Term:** Initial term will be ten (10) years effective upon the later of the completion of construction or Lessee occupancy. Lessor will grant Lessee two (2) renewal options each for a period of five (5) years.
- Lease Rate:** The lease rate will be based upon the Lessor's costs associated with the Subject Property, which shall include but not be limited to debt service on the mortgage, property taxes, and insurance on the Subject Property, with a reasonable rate of rate of return. The anticipated annual costs for the Subject Property are projected to be \$140,400.
- Lease Contingency:** Lessor and Lessee understand and agree that the establishment of any licensed surgery center in the State of Illinois is subject to the requirements of the Illinois Health Facilities Planning Act, 20 ILCS 3960/1 et seq. and, thus, Lessee cannot establish a licensed endoscopy



center on the Subject Property or execute a binding real estate lease in connection therewith unless Lessee obtains a Certificate of Need (CON) permit from the Illinois Health Facilities and Services Review Board. Thus, any lease executed hereafter between Lessor and Lessee relating to the Subject Property shall be contingent upon Lessee's receipt of a certificate of need permit for the establishment of a limited-specialty ambulatory surgical treatment center from the Illinois Health Facilities and Services Review Board.

The parties agree that this letter shall not be binding on the parties and does not address all essential terms of the lease agreement contemplated by this letter of intent. Neither party may claim any legal right against the other by reason of any action taken in reliance on this non-binding letter. A binding agreement shall not exist between the parties unless and until a lease agreement has been executed and delivered by both parties.

If the above terms and conditions are acceptable, please indicate your acceptance by executing a copy of this letter and returning it to me.

Sincerely,

Winchester Medical Building, Ltd.

By: 

Its: Authorized Agent

AGREED TO AND ACCEPTED THIS 6th DAY OF June, 2014:

**WINCHESTER ENDOSCOPY, LLC**

By: 

Print Name: Arkan Alrashid, M.D.

Title: Manager

**Section I, Identification, General Information, and Certification**  
**Operating Entity/Licensee**

The Illinois Certificate of Good Standing for Winchester Endoscopy Center, LLC is attached at Attachment – 3.

The names and percentage of ownership of all persons with five percent or greater ownership in Winchester Endoscopy Center, LLC is listed below.

<b>Name</b>	<b>Address</b>	<b>Ownership Interest</b>
Arkan Alrashid, M.D.	1880 West Winchester Road, Suite 201 Libertyville, Illinois 60048	33.33%
Sean Lee, M.D.	1880 West Winchester Road, Suite 201 Libertyville, Illinois 60048	33.33%
John N. Tasiopoulos, D.O.	1880 West Winchester Road, Suite 201 Libertyville, Illinois 60048	33.33%



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

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

WINCHESTER ENDOSCOPY, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON APRIL 30, 2014, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



Authentication #: 1415601518

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 5TH day of JUNE A.D. 2014*

*Jesse White*

SECRETARY OF STATE

**Section I, Identification, General Information, and Certification**  
**Organizational Relationships**

The organizational chart for Winchester Endoscopy Center, LLC is attached at Attachment – 4.

Dr. Arkan Alrashid  
PRESIDENT

Dr. Sean Lee  
TRESURER

Dr. John Tasiopoulos  
SECRETARY

Elizabeth McInerney  
ADMINISTRATOR

RECEPTIONIST

BILLING/CODING

CLINICAL STAFF

Alejandra Diaz

Maricar Avecilla

Sylvia Taylor, RN

Vianca Luna

Erin York

Karina Reyes, MA

Jane Kelley

Dan Papantony

**Regina Garcia, MA**

Anabel Atempa, MA

Angie Ruiz, MA

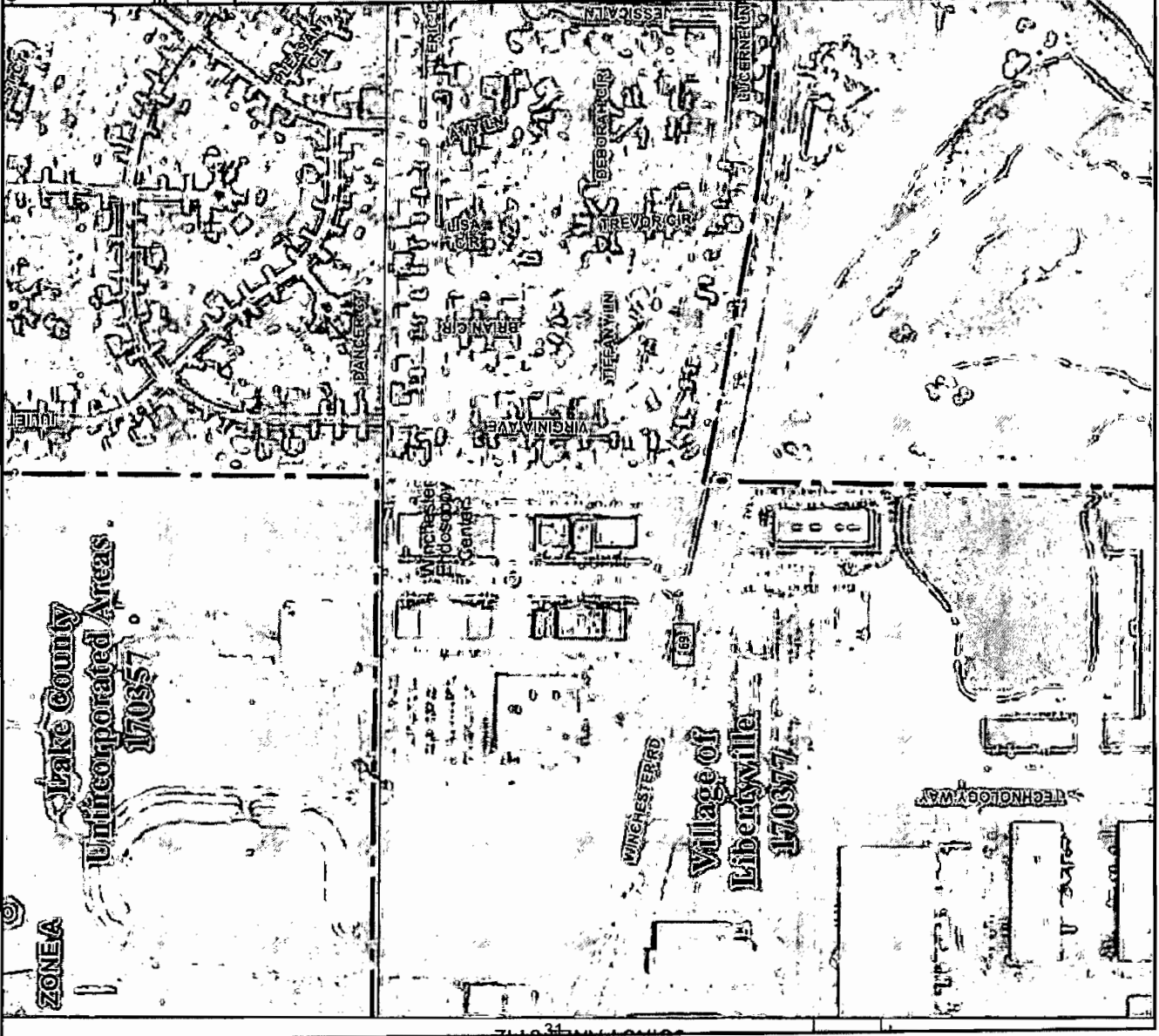
**Winchester Endoscopy Center  
Organization Chart**

- Arabic & English Speaking Staff
- English Speaking Staff
- Greek & English Speaking Staff
- Polish/Russian/Ukrainian & English Speaking Staff
- Spanish & English Speaking Staff

**Section I, Identification, General Information, and Certification**  
**Flood Plain Requirements**

The site of the proposed ASTC complies with the requirements of Illinois Executive Order #2005-5. As shown on the FEMA flood plain map attached at Attachment – 5, the site of the proposed ASTC is located outside of a flood plain.

6620.



MAP SCALE 1" = 500'



NATIONAL FLOOD INSURANCE PROGRAM

PANEL 0161K

**FIRM**  
**FLOOD INSURANCE RATE MAP**  
**LAKE COUNTY,**  
**ILLINOIS**  
**AND INCORPORATED AREAS**

PANEL 161 OF 295

(SEE MAP INDEX FOR FIRM PANEL LAYOUT)

CONTAINS

COMMUNITY	LAKE COUNTY	LIBERTYVILLE VILLAGE OF	MUNDELEIN VILLAGE OF	MAPS	RANGE	SUFFIX
				170357	0161	K
				170377	0161	K
				170387	0161	K

Not for Use: This Map Number should only be used by those who are preparing maps for the National Flood Insurance Program. 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)

MAP NUMBER  
17097C0161K

MAP REVISED  
SEPTEMBER 18, 2013



Federal Emergency Management Agency

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)

**Section I, Identification, General Information, and Certification**  
**Historic Resources Preservation Act Requirements**

The Historic Resources Preservation Act determination from the Illinois Historic Preservation Agency is attached at Attachment – 6.





**Illinois Historic  
Preservation Agency**

1 Old State Capitol Plaza, Springfield, IL 62701-1512

FAX (217) 524-7525

[www.illinoishistory.gov](http://www.illinoishistory.gov)

Lake County  
Libertyville

CON - Rehabilitation to Establish an Ambulatory Surgical Treatment Center  
1870 W. Winchester Road, Suite 146  
IHPA Log #021051314

May 29, 2014

Anne Cooper  
Polsinelli  
161 N. Clark St., Suite 4200  
Chicago, IL 60601

Dear Ms. Cooper:

This letter is to inform you that we have reviewed the information provided concerning the referenced project.

Our review of the records indicates that no historic, architectural or archaeological sites exist within the project area.

Please retain this letter in your files as evidence of compliance with Section 4 of the Illinois State Agency Historic Resources Preservation Act (20 ILCS 3420/1 et. seq.). This clearance remains in effect for two years from date of issuance. It does not pertain to any discovery during construction, nor is it a clearance for purposes of the Illinois Human Skeletal Remains Protection Act (20 ILCS 3440).

If you have any further questions, please contact me at 217/785-5027.

Sincerely,

Anne E. Haaker  
Deputy State Historic  
Preservation Officer

**Section I, Identification, General Information, and Certification**  
**Project Costs and Sources of Funds**

<b>Project Costs and Sources of Funds</b>			
<b>USE OF FUNDS</b>	<b>CLINICAL</b>	<b>NONCLINICAL</b>	<b>TOTAL</b>
Site Preparation			
Demolition & Site Preparation	\$30,000		\$30,000
Modernization Contracts	\$550,000		\$550,000
Contingencies	\$50,000		\$50,000
Architectural & Engineering Fees	\$42,500		\$42,500
Consulting & Other Fees	\$72,000		\$72,000
Moveable Equipment	\$25,000		\$25,000
Fair Market Value of Leased Space or Equipment			
Leased Space	\$1,123,629		\$1,123,629
Capital Lease – High Def. Colonovideoscope & High Def. Gastrovideoscope	\$237,515		\$237,515
Capital Lease – Colonovideoscope Workstation	\$16,710		\$16,710
Capital Lease – Colonovideoscope Hardware	\$5,525		\$5,525
Capital Lease – Colonovideoscope	\$80,474		\$80,474
Total Fair Market Value of Leased Space or Equipment	\$1,463,853		\$1,463,853
<b>TOTAL USES OF FUNDS</b>	<b>\$2,233,353</b>		<b>\$2,233,353</b>
<b>SOURCE OF FUNDS</b>	<b>CLINICAL</b>	<b>NONCLINICAL</b>	<b>TOTAL</b>
Mortgages	\$769,500		\$769,500
Leases (Fair Market Value)			
Leased Space	\$1,123,629		\$1,123,629
Capital Lease – High Def. Colonovideoscope & High Def. Gastrovideoscope	\$237,515		\$237,515
Capital Lease – Colonovideoscope Workstation	\$16,710		\$16,710
Capital Lease – Colonovideoscope Hardware	\$5,525		\$5,525
Capital Lease – Colonovideoscope	\$80,474		\$80,474
Total Fair Market Value of Leased Space or Equipment	\$1,463,853		\$1,463,853
<b>TOTAL SOURCES OF FUNDS</b>	<b>\$2,233,353</b>		<b>\$2,233,353</b>

**Section I, Identification, General Information, and Certification  
Cost Space Requirements**

Dept./Area	Cost	Gross Square Feet		Amount of Proposed Total Gross Square Feet That Is:			
		Existing	Proposed	New Const.	Modernized	As Is	Vacated Space
<b>REVIEWABLE</b>							
ASTC	\$2,233,353	4,166			4,166		
Total Clinical	\$2,233,353	4,166			4,166		
<b>NON REVIEWABLE</b>							
Total Non-clinical							
<b>TOTAL</b>	<b>\$2,233,353</b>	<b>4,166</b>			<b>4,166</b>		

**Section III, Background, Purpose of the Project, and Alternatives – Information Requirements**  
**Criterion 1110.230, Background, Purpose of the Project and Alternatives**

**Purpose of the Project**

1. The Applicant seeks to convert its existing physician-office based endoscopy practice to an ambulatory surgical treatment center ("ASTC"). The Northshore Center for Gastroenterology operates a medical practice exclusively providing gastroenterology care. As part of that practice, one of the ancillary services the medical practice provides is endoscopy services. Due to increased endoscopy volumes, Northshore Center for Gastroenterology has determined it must segregate the endoscopy care it provides into a separate clinic which is licensed as an ASTC. This is required because IDPH rules place limits on offering ancillary surgical services in a medical practice setting and this application is required in order to conform with the requirements of the Illinois Ambulatory Surgical Treatment Center Act. The proposed ASTC will be a single-specialty ASTC limited to endoscopy (gastroenterology) services.

**Early Detection of Colorectal Cancer**

Colorectal cancer is the third leading cause of cancer-related death in the United States and the second leading cause of cancer-related deaths in Illinois. In Illinois, there are over 2500 deaths per year across the state. Cancer mortality can be reduced by 15 to 25% through recommended screening methods, but only 50% of adults have been properly screened because of a lack of awareness about screening. However, if detected early, it is highly treatable

One of the core functions of an endoscopy service is to provide colonoscopies, which is the gold standard for screening for and detecting colorectal cancer. While there are other screening methods, such as fecal blood, they are a comparatively poor marker for colorectal neoplasia. Most cancers and the vast majority of polyps will be missed. For a colonoscopy, the physician uses a thin, flexible tube with a light and camera attached to examine the lining of the large intestine. Northshore Center for Gastroenterology provides such screening to residents of Libertyville and surrounding communities. Beyond screening accuracy, unlike other forms of colorectal cancer screening such as fecal blood test, sigmoidoscopy or barium enema, if a colonoscopy reveals a problem, initial treatment can occur simultaneously with the removal of the suspicious polyps. More than 90 percent of colon cancers start as polyps. The great advantage of a colonoscopy over other testing methods is it makes it possible to remove a suspect polyp or cancer immediately. Finding and removing polyps or other areas of abnormal cell growth is one of the most effective ways to prevent colorectal cancer development. Also, colorectal cancer is generally more treatable when it is found early, before it has had a chance to spread. In fact, effective colorectal cancer (CRC) screening can drastically reduce the number of individuals that are diagnosed with advanced colorectal cancer each year. With timely screening and treatment, advanced stages of the disease can be avoided. In fact, there is a 74% chance for five-year survival in Stage 1 of colorectal cancer compared to only a 6% chance of survival in Stage 4.<sup>1</sup>

The U.S. Preventative Services Task Force (USPSTF) recommends screening for colorectal cancer in adults, beginning at age 50 years and continuing until age 75.<sup>2</sup> Colonoscopy which offers visualization of the colon is preferred to indirect CRC screening methods. In considering the magnitude of benefit from a colorectal cancer screening program, the USPSTF has noted with high

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<sup>1</sup> American Cancer Society, *Colorectal Cancer*, Jan. 2014 available at <http://www.cancer.org/acs/groups/cid/documents/webcontent/003096-pdf.pdf> (last visited May 8, 2014).

<sup>2</sup> U.S. Preventative Services Task Force, *Screening for Colorectal Cancer*, Clinical Summary of U.S. Preventative Services Task Force Recommendation, Oct. 2008 available at <http://www.uspreventiveservicestaskforce.org/uspstf08/colocancer/colosum.htm> (last visited May 13, 2014).

certainty that there are substantial benefits to screening asymptomatic adults. Yet screening rates lag behind the target screening rate.

One of the reasons endoscopy services have increased is because of the payment policies of the Center for Medicare and Medicaid Services which now cover colorectal cancer screening as a preventative service. There are several barriers to effectively screening the population as a whole, despite expanded coverage. While from a public health perspective, there is still a long way to go to reach a more optimal screening rate, enhancing the availability of colonoscopy services and providing a non-hospital based option for such care is progress toward an important public health care goal and saves the government money in the short term and long-term (by avoiding far more expensive cancer care treatment). Only 25% of Medicare beneficiaries were screened for CRC between 1998 and 2004. A recent Centers for Disease Control report found 65 percent of Americans reported being up-to-date on CRC screening — a rate significantly lower than the Healthy People 2020 target of 70.5 percent.<sup>3</sup> Individuals who do not get CRC screened at all or as often as recommended include low-income individuals, those with a lack of education and those without health insurance.

Current levels of screening in this country lag behind those of other effective cancer screening tests; it has been estimated that attainment of goals for population colorectal cancer screening could save 18,800 lives per year. Colorectal cancer incidence and mortality show health disparities, with a disproportionate burden occurring in certain minority populations, including African Americans, Native Americans and Alaska Natives. The American Cancer Society estimates 136,830 people will be diagnosed and 50,310 will die from colorectal cancer in 2014. Colorectal cancer is second only to lung cancer as a cause of cancer deaths among American men and women.<sup>4</sup> Studies show at least 60% of these deaths could be avoided if people 50 and older received regular screening tests.<sup>5</sup> Screening helps reduce such deaths in two ways: by finding precancerous polyps that can be removed before they become cancer and by finding colorectal cancer early, when treatment is most effective. Colonoscopy is the “gold standard” for colorectal cancer screening, and can be completed in more than 95% of examinations with negligible risk and is cost-effective.

ASTCs play a vital role in ensuring patient access to preventive measures, such as colonoscopies, in a convenient and affordable setting. Today, ASTCs perform more than 40 percent of Medicare colonoscopies.<sup>6</sup> They have the capacity to do more. When these life-saving procedures are performed in ASTCs, both beneficiaries and the Medicare program save money because surgery centers perform the procedures at a lower cost than HOPDs. According to data from IDPH, the median cost of a colonoscopy performed in one of the local hospital outpatient departments ranged from a high of \$7,291 to a low of \$3,569;<sup>7</sup> the median cost of a colonoscopy at the proposed Winchester Endoscopy is \$1,525, which is less than half the cost of a colonoscopy at the hospital with the lowest charges. As set forth in the letter from the ASC Advocacy Committee to former

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<sup>3</sup> Centers for Disease Control and Prevention, *Colorectal Cancer Tests Save Lives*, VITAL SIGNS, Nov. 2013 available at <http://www.cdc.gov/vitalsigns/colorectalcancerscreening/> (last visited May 9, 2014).

<sup>4</sup> American Cancer Society, *Colorectal Cancer Early Detection 4* (2014) available at <http://www.cancer.org/cancer/colonandrectumcancer/moreinformation/colonandrectumcancerearlydetection/colorectal-cancer-early-detection-what-is-crc> (last visited May 9, 2014).

<sup>5</sup> Centers for Disease Control and Prevention, *Screen for Life, Colorectal Cancer Screening Basic Fact Sheet* (2014) available at [http://www.cdc.gov/cancer/colorectal/sfl/print\\_materials.htm](http://www.cdc.gov/cancer/colorectal/sfl/print_materials.htm) (last visited May 9, 2014).

<sup>6</sup> Ambulatory Surgical Center Association, *Medicare Cost Savings Tied to Ambulatory Surgery Centers 6* (2013) available at <http://www.ascassociation.org/CONNECT/othercommunities/resources/viewdocument?DocumentKey=866fa139-09d2-4cad-b1f1-a97a65b5169d> (last visited May 15, 2014).

<sup>7</sup> Illinois Department of Public Health, *Illinois Hospital Report Card and Consumer Guide to Health Care* available at <http://www.healthcarereportcard.illinois.gov/> (last visited May 15, 2014).

Secretary Sebelius regarding implementation of a value-based purchasing system for ASTCs, ASTCs are efficient providers of surgical services. See Attachment – 12A. ASTCs provide high quality surgical care, excellent outcomes, and high level of patient satisfaction at a lower cost than HOPDs. Surgical procedures performed in an ASTC are reimbursed at lower rates than HOPDs and result in lower out-of-pocket expenses for patients. Furthermore, patients often report an enhanced experience at ASTCs compared to HOPDs due, in part, to easier access to parking, shorter waiting times, and ease of access into and out of the operating rooms. Finally, surgeons are more efficient due to faster turnover of operating rooms, designated surgical times without risk of delay due to more urgent procedures, and specialized nursing staff. As a result of these efficiencies, more time can be spent with patients thereby improving the quality of care. Given the benefits of ASTCs, this facility will benefit area residents. According to the 2010 U.S. Census, there are over 1.9 million residents in the GSA and only 9 ASTCs performing gastroenterology surgical procedures, this ASTC will serve a large number of patients.

2. The Applicant expects the service area of the planned endoscopy center to be identical to the service area of Northshore Center for Gastroenterology. A map of that service area is attached at Attachment – 12B. The service area consists of those Illinois areas within 45 minutes normal travel time of Winchester Endoscopy Center. Travel times to and from Winchester Endoscopy to the market area borders are as follows:

- East: Approximately 23 minutes normal travel time to Lake Michigan
- Southeast: Approximately 45 minutes normal travel time to Evanston
- South: Approximately 45 minutes normal travel time to Wood Dale
- Southwest: Approximately 45 minutes normal travel time to South Barrington
- West: Approximately 45 minutes normal travel time to Woodstock
- Northwest: Approximately 45 minutes normal travel time to Hebron
- North: Approximately 25 minutes normal travel time to Wisconsin border
- Northeast Approximately 37 minutes normal travel time to Winthrop Harbor, IL

3. This project is needed to ensure the Northshore Center for Gastroenterology's compliance with IDPH requirements relating to the scope of care permitted for a gastroenterologist's medical practice and to improve access to colorectal cancer screening and other gastroenterology procedures to patients residing in Libertyville and the surrounding area. People and communities are unlikely to follow medically sound advice unless they have a trusting relationship with the provider giving it. The physicians supporting this project nurture strong relationships with their patients and believe they are most comfortable with the continuity of care provided when the physicians are able to meet their colonoscopy and other endoscopy requirements on site at their Libertyville location.

4. Sources.

American Cancer Society, *Colorectal Cancer*, Jan. 2014 available at <http://www.cancer.org/acs/groups/cid/documents/webcontent/003096-pdf.pdf> (last visited May 8, 2014).

U.S. Preventive Services Task Force, *Screening for Colon Cancer*, Oct. 2008, available at <http://www.uspreventiveservicestaskforce.org/uspstf/uspSCOLO.htm> (last visited May 13, 2014).

American Cancer Society, *Colorectal Cancer Early Detection 4* (2014) available at <http://www.cancer.org/cancer/colonandrectumcancer/moreinformation/colonandrectumcancerearlydetection/colorectal-cancer-early-detection-what-is-crc> (last visited May 9, 2014).

Centers for Disease Control and Prevention, *Colorectal Cancer Tests Save Lives, VITAL SIGNS*, Nov. 2013 available at <http://www.cdc.gov/vitalsigns/colorectalcancerscreening/> (last visited May 9, 2014).

American Cancer Society, *Colorectal Cancer Early Detection 4* (2014) available at <http://www.cancer.org/cancer/colonandrectumcancer/moreinformation/colonandrectumcancerearlydetection/colorectal-cancer-early-detection-what-is-crc> (last visited May 9, 2014).

Centers for Disease Control and Prevention, Screen for Life, Colorectal Cancer Screening Basic Fact Sheet (2014) available at [http://www.cdc.gov/cancer/colorectal/sfl/print\\_materials.htm](http://www.cdc.gov/cancer/colorectal/sfl/print_materials.htm) (last visited May 9, 2014).

Maciosek MV, Solberg LI, Coffield AB, Edwards NM, Goodman MJ. Colorectal Cancer Screening: Health Impact and Cost Effectiveness. *Am J Prev Med.* 2006;31:80-9.

U.S. Multi-Society Task Force on Colorectal Cancer, and the American College of Adenomatous Polyps, 2008: A Joint Guideline from the American Cancer Society, the Screening and Surveillance for the Early Detection of Colorectal Cancer and Radiology, 58 *Cancer Journal for Clinicians* 130-160 (2008), available at <http://caonline.amcancersoc.org/cgi/reprint/58/3/130>.

U.S. Census Bureau, American FactFinder, Fact Sheet, available at [http://factfinder.census.gov/home/saff/main.html?\\_lang=en](http://factfinder.census.gov/home/saff/main.html?_lang=en).

5. The goal of this project is to ensure the Northshore Center for Gastroenterology does not exceed the scope of the surgical services it is permitted to provide under Section 205.110 of the Ambulatory Surgical Treatment Center Act (77 IAC 204.110) and to increase access to colonoscopy and other endoscopy services in a cost effective, high quality ASTC setting to patients residing in Libertyville and surrounding areas.

August 3, 2010

VIA HAND DELIVERY

Secretary Sebelius  
The U.S. Department of Health and Human Services  
200 Independence Avenue, S.W.  
Washington, D.C. 20201

**Re: Report on a Value-Based Purchasing System for Ambulatory Surgical Centers**

Dear Secretary Sebelius:

Please accept the following comments regarding the report on a value-based purchasing (VBP) program for ASCs, as outlined in the Patient Protection and Affordable Care Act (PL 111-148, PPACA) §3006(f). These comments are submitted by the ASC Advocacy Committee, a joint effort of the ASC Coalition and the ASC Association, representing all types of ASCs; and the ASC Quality Collaboration, a cooperative effort of organizations and companies interested in ensuring ASC quality data is appropriately developed and reported. Together, these organizations include single- and multi-specialty ASCs; physician-owned ASCs, joint ventures between hospitals and physicians, and joint ventures between physicians and management companies; professional societies; and accrediting bodies. Participating ASCs range from the very small to the very large and are located in all 50 states.

Progress towards a Medicare VBP program for ASCs should be incremental: beginning with building a reliable, voluntary quality reporting infrastructure for ASCs, and then measuring performance within the ASC setting. Indicators of quality should include measures such as efficiency, outcomes, patient experience of care, adherence to evidence-based processes. As the culmination of VBP, CMS should develop and implement comparisons of the quality and costs for outpatient surgery in ASCs and hospital outpatient departments (HOPDs). A VBP system for outpatient surgery in these settings could create competition based on quality and efficiency, drive improvement, recognize the highest quality and most efficient providers, and improve transparency.

Some patients in hospital outpatient departments are not comparable to patients who are treated in ASCs. For example, the current HOPD measures include a hospital's emergency room patients. Designing a VBP for ASCs which enables cross-setting comparisons should focus on patients who can be treated appropriately in both ASCs and HOPDs.



**Value-based purchasing includes financial and other incentives**

One tool of VBP is public disclosure of data on the quality of care and costs to payers. We strongly support increasing the transparency of Medicare rates, patients' out-of-pocket costs, and quality of surgeries and procedures. Confidential feedback to ASCs from quality measurement systems should be used in the first year of VBP. Data should not be publicly reported while a reliable reporting infrastructure is being created and implemented. Building quality measurement on a solid foundation with a high level of reliability may help increase participation and the value of the data for all stakeholders. The following principles should guide public reporting of the VBP measure set:

- Consumers should be able to directly compare providers of outpatient surgical services.
- ASCs should be given the opportunity to review, validate, and appeal measurements and scores prior to publishing.
- There should be a provider narrative section for each provider-specific item to allow the provider to advise the consumer of any concerns the provider has regarding the reliability or accuracy of the information presented.
- In addition to reporting quality measures, other useful information such as facility accreditation status, state licensure and Medicare certification should be made available.

Many private payers incentivize their enrollees to use higher value services by charging lower co-pays or coinsurance for them. The Medicare program already incorporates this VBP tool: because Medicare payments for the same service are lower in ASCs than HOPDs, the copayments for services provided in ASCs are generally lower than in an HOPD. This differential can function as a value incentive for beneficiaries. For example, a patient needing cataract surgery would be responsible for \$193 if it were performed in the ASC; the patient would owe \$496 if the service were provided in the hospital outpatient department, a difference of 61%. Table 1 below illustrates the payment differentials for some common surgeries and procedures for beneficiaries in 2010. VBP could help to build an awareness of these differences and help the Medicare program leverage the choices of its beneficiaries to increase value.

*Table 1. Co-payment savings for Medicare beneficiaries in ASCs for some typical procedures*

<b>Comparison of 2010 ASC and HOPD beneficiary copayments</b>				
<b>HCPCS</b>	<b>Description</b>	<b>ASC Copay</b>	<b>HOPD Copay</b>	<b>Difference</b>
66984	Cataract surg w/IOL, 1 stage	\$192.49	\$495.96	61%
43239	Upper GI endoscopy, biopsy	\$73.89	\$143.38	48%
45378	Diagnostic colonoscopy	\$76.05	\$186.06	59%
45380	Colonoscopy and biopsy	\$76.05	\$186.06	59%
45385	Lesion removal colonoscopy	\$76.05	\$186.06	59%
66821	After cataract laser surgery	\$46.81	\$104.31	55%
64483	Inj foramen epidural l/s	\$59.20	\$97.09	39%
66982	Cataract surgery, complex	\$192.49	\$495.96	61%
45384	Lesion remove colonoscopy	\$76.05	\$186.06	59%

29881	Knee arthroscopy	\$209.92	\$403.36	48%
63650	Implant neuroelectrodes	\$699.19	\$885.85	21%
29827	Arthroscop rotator cuff repr	\$327.64	\$804.74	59%

The chief tool of VBP is payment differentials for providers: paying more to high-performing providers and to those who have made significant improvements to the quality of care. Provider payment differentials are key pieces of CMS's Premier Hospital Quality Incentive Demonstration, Home Health Pay for Performance Demonstration, and Nursing Home Value Based Purchasing Demonstration. The ASC industry supports payment differentials in VBP for outpatient surgery.

Another VBP tool is shared savings which allows providers to recoup some of the efficiencies they create through lowering cost and improving quality. This VBP tool is used in the private sector and most recently by CMS in its design of the Home Health Pay for Performance Demonstration and the Medicare Physician Group Practice Demonstration. CMS has allowed high quality agencies and group practices to share the savings generated by decreasing hospital admissions and readmissions, and decreasing skilled nursing facility use and the use of other healthcare resources. We support the shared savings model for later phases of VBP for ASCs.

Medicare's VBP for ASCs should encourage widespread participation through incremental implementation. VBP should begin with voluntary data collection, followed by public disclosure of quality information. Improved transparency regarding Medicare's rates and patient co-payments at ASCs and HOPDs should be supplemented with comparable quality data as it becomes available. CMS should provide patients and physicians with a tool to enable apples-to-apples comparisons of outpatient surgery settings. Payment differentials for providers should be built upon a solid foundation of quality measurement. Shared savings should be the final stage of an incremental VBP implementation.

**Rewarding ambulatory surgery centers**

A VBP for ASCs should acknowledge the role that the facility plays in providing high quality surgical care to patients. ASCs range in size and scope from small, single-specialty facilities focused on endoscopic procedures to large facilities offering a range of surgical sub-specialties in multiple operating rooms. The ASC VBP program will have the greatest impact when it is implemented incrementally and is designed to reach the full spectrum of ASCs in the industry. The Secretary should consider exemptions for ASCs with very low Medicare volume.

ASCs that attain high quality or make substantial improvements should be rewarded. It is important to acknowledge centers that have already applied evidence-based guidelines in their care, implemented structures of care that enhance quality, ensured patient safety, achieved good outcomes, and provided a valuable patient experience. It is also important to acknowledge that some centers may be continuing to progress toward the highest level of quality. VBP should reward ASCs that achieve a high rank or exceed a national threshold as well as ASCs that close the gap between their past performance and the national threshold.

### **ASC quality measurement**

The VBP system for ASCs should be based on quality measurements which capture many aspects of ASC patient services. These measures include processes, efficiency, outcomes, and patient experience.

Process measures can indicate that the ASC follows guidelines and uses evidence-based practices. The ASC Quality Collaboration has already developed two process measures for ASCs which have been endorsed for outpatient surgery by the National Quality Forum. These capture whether antibiotics given for prevention of surgical site infection were administered on time and the number of patients who have appropriate surgical site hair removal. We support the development of additional process measures which are similarly applicable across a wide range of surgical facilities, such as medication reconciliation.

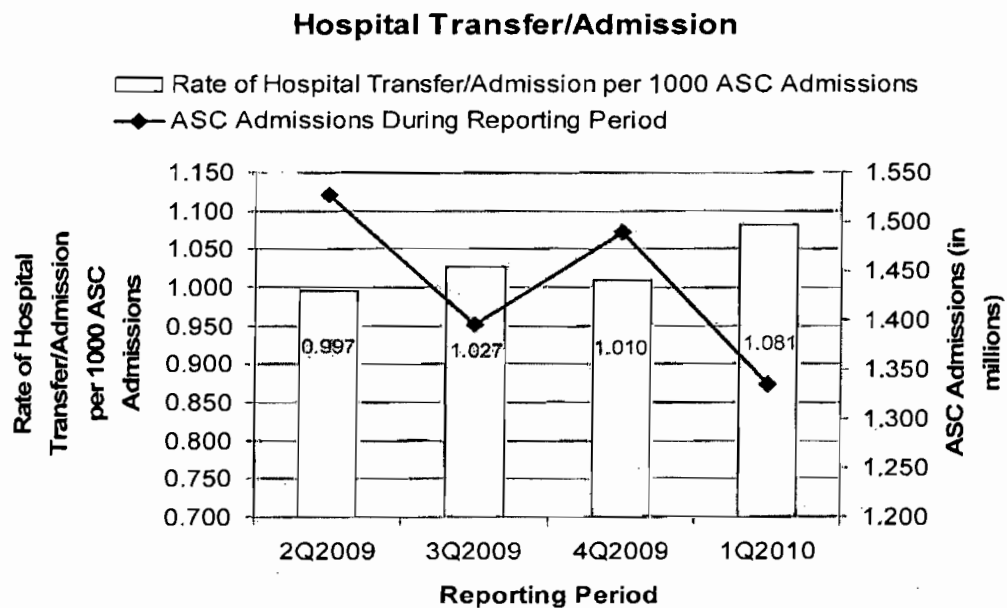
ASCs are efficient providers. Assessing the value of ASCs should include measures of the ways in which ASCs maximize health care resources and provide high quality surgical care and procedures in lean, well-managed facilities.

ASCs achieve excellent outcomes for patients and high levels of patient satisfaction. The ASC Quality Collaboration has already developed four measures of patient outcomes which have been endorsed by the National Quality Forum. These include patient safety indicators—patient burn; patient fall; and wrong site, side, patient, procedure or implant—and hospital transfers. Figure 1 below is an example of the voluntary outcome measure reporting in which many ASCs currently participate. A variety of patient satisfaction surveys are used throughout the industry to capture some aspects of patient experience.

Figure 1. Example of data available through ASC Quality Collaboration voluntary reporting

**Data Summary: Hospital Transfer/Admission**

Reporting Period	2Q2009	3Q2009	4Q2009	1Q2010
Number of Participating ASCs	1,294	1,177	1,266	1,185
Number of ASC Admissions Represented	1,528,402	1,396,179	1,490,427	1,334,614
Hospital Transfer/Admission Rate per 1000 ASC Admissions	0.997	1.027	1.010	1.081



Both outcome measures and patient experience measurement for ASCs deserve a greater investment by CMS, the Agency for Healthcare Research and Quality, and other entities. A tool such as the Consumer Assessment of Healthcare Providers and Systems (CAHPS) would be a useful way to measure patient experience and satisfaction and would give patients relevant and easy-to-understand information.

Additionally, new research is needed to support the development of measures that enable fair, valid, and reliable comparison for similar patients in ASCs and HOPDs. In some cases, HOPD patients are not comparable to patients treated in ASCs. Designing a VBP for ASCs which enables cross-setting comparisons is an opportunity to improve transparency. Developing sound, useful comparisons across settings will require an investment in understanding the patient populations which can be compared and identifying and measuring factors that influence.

outpatient surgical risks for patients. Improvements are also needed in post-surgical surveillance and case finding to support reliable outcome and patient safety measures.

The ASC Quality Collaboration should be included as a critical stakeholder in quality measurement for outpatient surgery. A role for the ASC Quality Collaboration similar to the role of the Hospital Quality Alliance would improve the VBP development process for all stakeholders. The following principles should guide measure development for VBP:

- Measure collection should minimize burden on ASCs and CMS. ASCs should be given more than one way to report quality data. For example, claims-based reporting should be an option, especially in the initial phases of VBP implementation. ASCs should be able to authorize an agent (e.g. a parent company or a registry) to report on their behalf.
- Where possible, measures should enable comparisons between ASCs and HOPDs. Patients who require care that could be provided in either ASCs or HOPDs should be enabled to identify and choose the setting with the best value through VBP.
- New measures must be credible: they must be based on evidence, broadly understood, and collected reliably across the variety of ASCs that serve Medicare beneficiaries.

We welcome opportunities to explore partnerships with agencies that can assist the industry in growing and enhancing the quality measurement tools for outpatient surgery in ASCs and HOPDs. New quality measurement infrastructure will be a key to evolving the most effective VBP and achieving the best value for Medicare and other payers.

#### **Design a funding mechanism which strengthens VBP**

Linking a portion of Medicare's payments to quality will be a significant change in Medicare ASC payment policy. To ensure that all Medicare beneficiaries continue to have access to care, VBP incentives should begin as a small portion of total Medicare spending for ASC services.

Funding should progress in increments, consistent with the phases in other aspects of the program. Full updates should be given to all of the ASCs that make the investment of time and resources to participate in the initial phase of pay for reporting and report valid and reliable data to CMS. The Secretary should consider a bonus for the use of health information technology to gather and report quality data, similar to the bonus for physicians' EHR use in Medicare.

The structure of incentive payments linked to performance should recognize that Medicare's payments to ASCs have been under a payment freeze for many years, and in addition, some payments have been dropping due to transition from the previous grouper payment system. The VBP system may lose acceptance if it is applied as a cost-cutting measure.

In the final phase of VBP, the VBP bonuses should be funded through a shared-savings mechanism. ASCs have already saved the Medicare program billions of dollars by providing a lower-priced setting for outpatient surgeries which can be appropriately performed in an ASC rather than an HOPD. VBP can help to demonstrate the quality and value of ASC services and encourage the continued, appropriate migration of services to the lower-priced setting. We

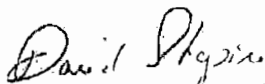
propose that later phases of the VBP for ASCs allow high-quality ASCs to share some of the savings they have produced for the Medicare program. A pool of ASC VBP bonus dollars could be generated from Medicare program's savings on the total amount spent for outpatient surgical services for Medicare beneficiaries that can be supplied in both HOPDs and ASCs. The shared-savings structure aligns the incentives of ASCs and the Medicare program to increase value.

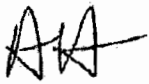
- Building incentives across silos of care was a goal set by the Medicare Payment Advisory Commission in their recommendations for developing VBP.
- Decreasing the growth of Medicare spending on outpatient surgeries by encouraging continued migration to lower-priced settings could generate substantial savings for the Medicare program.
- A shared pool could create competition based on value between settings

\* \* \*

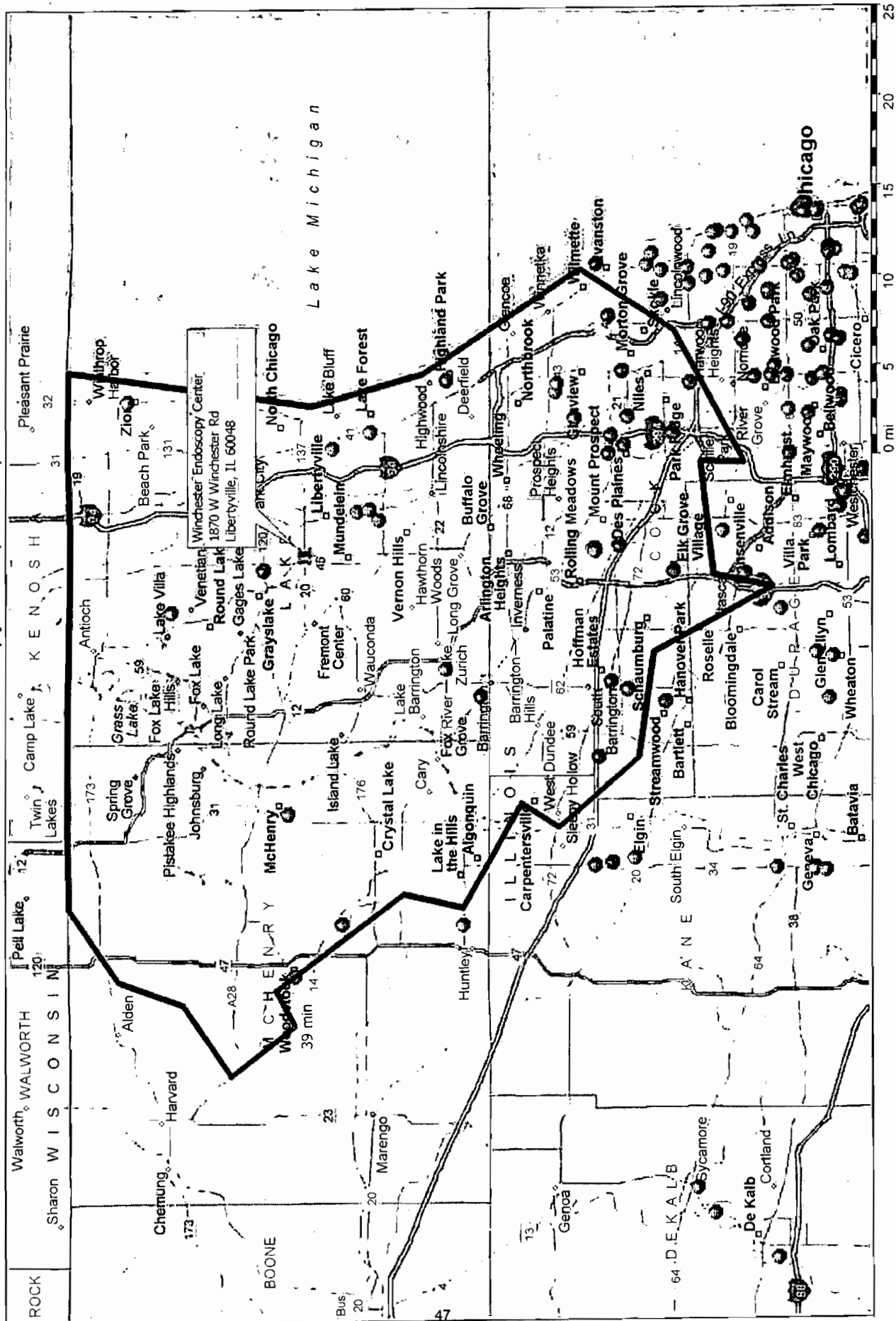
In summary, the report on value based purchasing required by PL 111-148, §3006(f), should map out a VBP system for ASCs which increases transparency and enables patients and physicians to choose the best surgical setting. We look forward to conversations with CMS as they consider the development of VBP. Thank you for providing this opportunity to comment. We appreciate the dialogue and look forward to continued participation in the development process.

Sincerely,

  
David Shapiro, M.D.  
Chairman  
ASC Association

  
Andrew Hayek  
Chairman  
ASC Advocacy Committee

# Winchester Endoscopy GSA (45 min)



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**Section III, Background, Purpose of the Project, and Alternatives – Information Requirements**  
**Criterion 1110.230, Background, Purpose of the Project and Alternatives**

Alternatives

The Applicant explored three options prior to determining to establish Winchester Endoscopy Center. The options considered are as follows:

- Continue to Perform Endoscopies at Northshore Center for Gastroenterology
- Utilize Existing ASTCs and Hospital Outpatient Facilities; and
- Establish an ASTC.

After exploring these options, which are discussed in more detail below, the Applicant decided to establish the Surgery Center. A review of each of the options considered and the reasons they were rejected follows.

Continue to Perform Endoscopies in the Center for Gastrointestinal Health

As discussed at Attachment – 12, the Northshore Center for Gastroenterology operates a medical practice providing exclusively gastroenterology care. As part of that practice, one of the ancillary services the medical practice provides is endoscopy services. Due to increased endoscopy volumes, Northshore Center for Gastroenterology has determined that it must segregate the endoscopy care that it provides into a separate clinic which is licensed as an ambulatory surgical treatment center. This is required because IDPH rules place limits on offering ancillary surgical services in a medical practice setting and this application is required in order to conform with the requirements of the Illinois Ambulatory Surgical Treatment Center Act. The proposed ASTC will be a single-specialty ASTC limited to endoscopy (gastroenterology) services.

There is not cost to this alternative.

Utilize Existing ASTCs and Hospitals

The Applicant considered utilizing existing ASTCs and Hospitals. This is not a viable option for several reasons. These facilities cannot efficiently accommodate the volume of colonoscopies the physicians at Northshore Center for Gastroenterology is performing and patients would lose the continuity of care they experience with their physicians. If procedures were moved, the physicians would be forced to travel to several facilities using small scheduling blocks, which poses an inconvenience for both the physicians and their patients. Setting aside the inconveniences and lack of consistency in care delivery, the physicians would have to travel some distance from their medical practice office on multiple days of week which would make them far less accessible to their non-surgical patients as well as their staffs and for consultation with each other. By establishing an ASTC adjacent to Northshore Center for Gastroenterology, the Applicant's medical practice, the ASTC will achieve operational efficiencies that cannot be created at other hospitals and ASTCs due to limited scheduling slots and anesthesia services. As the gastroenterologist shortage worsens, it is important to ensure the efficient use of existing gastroenterologists in order to also ensure adequate access to CRC screening.

There is not cost to this alternative.

Establish an ASTC

To better serve the needs of the residents of Libertyville and the surrounding area, the Applicant decided to establish a single-specialty ASTC. The estimated cost of this alternative is \$2,233,353.



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

Size of the Project

The Project proposes to establish an ASTC with two procedure rooms and 4 recovery stations. Pursuant to Section 1110, Appendix B of the HFSRB's rules, the State standard is 1,660 to 2,200 gross square feet per procedure room and 180 gross square feet per recovery station for a total of 4,040 to 5,120 gross square feet for two procedure rooms and 4 recovery stations. The gross square footage of clinical space will be 4,166 gross square feet. Accordingly, the size of the ASTC meets the State standard.

Table 1110.234(a) SIZE OF PROJECT				
DEPARTMENT/SERVICE	PROPOSED BGSF/DGSF	STATE STANDARD	DIFFERENCE	MET STANDARD?
ASTC	4,166	4,040 – 5,120	0	Yes

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

Project Services Utilization

By the second year after project completion, the ASTC's annual utilization shall meet or exceed HFSRB's utilization standards. Pursuant to Section 1110, Appendix B of the HFSRB's rules, utilization for ambulatory surgical treatment centers is based upon 1,500 hours per operating/procedure room. Based upon historical utilization and projected procedures documented in the physician referral letter attached at Appendix - 1, approximately 4,233 procedures will be performed at the ASTC within the first year after project completion. Based upon current experience, the estimated procedure time, including prep and cleanup, is approximately 45 minutes. As a result, 3,175 surgical hours are projected for the first year after project completion, which is sufficient to support the need for two procedure rooms.

<b>Table 1110.234(b)</b>					
<b>UTILIZATION</b>					
	<b>DEPT./ SERVICE</b>	<b>HISTORICAL UTILIZATION (PATIENT DAYS) (TREATMENTS) ETC.</b>	<b>PROJECTED UTILIZATION</b>	<b>STATE STANDARD</b>	<b>MET STANDARD?</b>
<b>YEAR 1</b>	ASTC	N/A	3,175 hours	3,000 hours	Yes
<b>YEAR 2</b>	ASTC	N/A	3,175 hours	3,000 hours	Yes

**Section IV, Project Scope, Utilization, and Unfinished/Shell Space**  
**Criterion 1110.234(c), Unfinished or Shell Space**

This project will not include unfinished space designed to meet an anticipated future demand for service. Accordingly, this criterion is not applicable.

**Section IV, Project Scope, Utilization, and Unfinished/Shell Space**  
**Criterion 1110.234(d), Assurances**

This project will not include unfinished space designed to meet an anticipated future demand for service. Accordingly, this criterion is not applicable.

**Section VII, Service Specific Review Criteria**  
**Non-Hospital Based Ambulatory Surgery**  
**Criterion 1110.1540(b), Background of the Applicant**

1. The Applicant does not currently own or operate any health care facilities. Accordingly, this criterion is not applicable.
2. No LLC manager, members or owners of at least 5% of the proposed surgery center own or operate any health care facilities in Illinois. Accordingly, this criterion is not applicable.
3. The Applicant has not previously owned or operated any health care facilities. Accordingly, this criterion is not applicable.
4. Attached at Attachment – 27A is a certification that no LLC manager, members or owner of at least 5% of the proposed surgery center:
  - a. have been cited, arrested, taken into custody, charged with, indicted, convicted or tried for, or pled guilty to:
    - i. the commission of any felony or misdemeanor or violation of law, except for minor parking violations; or
    - ii. has been the subject of any juvenile delinquency or youthful offender proceeding;
  - b. has been charged with fraudulent conduct or any act involving moral turpitude;
  - c. has any unsatisfied judgments against him or her; or
  - d. is in default in the performance or discharge of any duty or obligation imposed by a judgment decree, order or directive of any court or governmental agency.
5. An authorization permitting the State Board and the Illinois Department of Public Health (“IDPH”) access to any documents necessary to verify information submitted, including, but not limited to: official records of IDPH or other State agencies and the records of nationally recognized accreditation organizations is attached at Attachment – 27A.
6. The Applicant has not previously submitted an application for permit during this calendar year. Accordingly, this criterion is not applicable.

May 28, 2014

Kathryn J. Olson  
Chair  
Illinois Health Facilities and Services Review Board  
525 West Jefferson Street, 2nd Floor  
Springfield, Illinois 62761

Dear Chair Olson:

I hereby certify under penalty of perjury as provided in § 1-109 of the Illinois Code of Civil Procedure, 735 ILCS 5/1-109 that no adverse action has been taken against any facility owned or operated by Winchester Endoscopy, LLC during the three years prior to filing this application.

Neither Winchester Endoscopy, LLC nor any LLC member or owner of at least 5% of the Winchester Endoscopy:

- has been cited, arrested, taken into custody, charged with, indicted, convicted or tried for, or pled guilty to the commission of (1) any felony or misdemeanor or violation of the law, except for minor parking violations or (2) the subject of any juvenile delinquency or youthful offender proceeding; or
- has been charged with fraudulent conduct or any act involving moral turpitude; or
- has any unsatisfied judgments against him or her; or
- is in default in the performance or discharge of any duty or obligation imposed by a judgment, decree, order, or directive of any court or governmental agency.

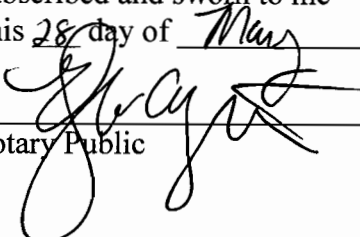
Additionally, pursuant to 77 Ill. Admin. Code § 1110.1540(b)(3)(J), I hereby authorize the Health Facilities and Services Review Board (“HFSRB”) and the Illinois Department of Public Health (“IDPH”) access to any documents necessary to verify information submitted as part of this application for permit. I further authorize HFSRB and IDPH to obtain any additional information or documents from other government agencies which HFSRB or IDPH deem pertinent to process this application for permit.

Sincerely,

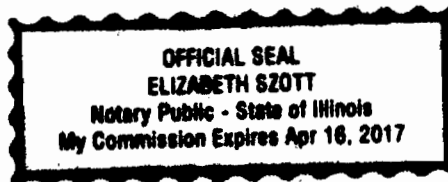


Arkan Alrashid, M.D.  
Manager  
Winchester Endoscopy, LLC

Subscribed and sworn to me  
This 28 day of May, 2014



Notary Public



**Section VII, Service Specific Review Criteria**  
**Non-Hospital Based Ambulatory Surgery**  
**Criterion 1110.1540(c), Service to Geographic Area Residents**

1. Attached at Attachment – 27B is a map outlining the intended geographic service area (“GSA”) for the proposed ASTC. As set forth in Criterion 1110.230, Winchester Endoscopy will serve residents of Libertyville and surrounding communities within 45 minutes normal travel time of the proposed site. Accordingly, the intended GSA consists of those areas within 45 minutes normal travel time of Winchester Endoscopy Center.
2. Table 1110.1540(c)(2)(A) below lists the zip code areas that comprise the GSA of Winchester Endoscopy Center.

<b>Table 1110.1540(c)(2)(A)</b>		
<b>Zip Code</b>	<b>City</b>	<b>Population</b>
60002	Antioch	24,299
60004	Arlington Heights	50,582
60005	Arlington Heights	29,308
60007	Elk Grove Village	33,820
60008	Rolling Meadows	22,717
60010	Barrington	44,095
60012	Crystal Lake	11,120
60013	Cary	26,872
60014	Crystal Lake	48,550
60015	Deerfield	26,800
60016	Des Plaines	59,690
60018	Des Plaines	30,099
60020	Fox Lake	9,825
60021	Fox River Grove	5,545
60022	Glencoe	8,153
60025	Glenview	39,105
60026	Glenview	13,335
60029	Golf	482
60030	Grayslake	36,056
60031	Gurnee	37,947
60034	Hebron	2,040
60035	Highland Park	29,763
60040	Highwood	5,431
60041	Ingleside	9,250
60042	Island Lake	8,547
60043	Kenilworth	2,513
60044	Lake Bluff	9,792
60045	Lake Forest	20,925
60046	Lake Villa	35,111

<b>Table 1110.1540(c)(2)(A)</b>		
<b>Zip Code</b>	<b>City</b>	<b>Population</b>
60047	Lake Zurich	41,669
60048	Libertyville	29,095
60050	McHenry	31,620
60051	McHenry	25,192
60053	Morton Grove	23,260
60056	Mount Prospect	55,219
60060	Mundelein	37,189
60061	Vernon Hills	25,748
60062	Northbrook	39,936
60064	North Chicago	15,407
60067	Palatine	38,585
60068	Park Ridge	37,475
60069	Lincolnshire	8,384
60070	Prospect Heights	16,001
60071	Richmond	3,598
60072	Ringwood	928
60073	Round Lake	60,002
60074	Palatine	38,985
60077	Skokie	26,825
60081	Spring Grove	10,079
60083	Wadsworth	9,838
60084	Wauconda	16,771
60085	Waukegan	71,714
60087	Waukegan	26,978
60088	Great Lakes	15,761
60089	Buffalo Grove	41,533
60090	Wheeling	37,633
60091	Wilmette	27,020
60093	Winnetka	19,570
60096	Winthrop Harbor	6,897
60097	Wonder Lake	11,250
60098	Woodstock	32,228
60099	Zion	31,104
60102	Algonquin	32,193
60110	Carpentersville	38,557
60118	Dundee	15,851
60143	Itasca	10,360
60156	Lake in the Hills	28,987
60157	Medinah	2,380



<b>Table 1110.1540(c)(2)(A)</b>		
<b>Zip Code</b>	<b>City</b>	<b>Population</b>
60169	Hoffman Estates	33,847
60173	Schaumburg	12,217
60192	Hoffman Estates	16,343
60193	Schaumburg	39,188
60194	Schaumburg	19,777
60195	Schaumburg	4,769
60203	Evanston	4,523
60631	Chicago	28,641
60656	Chicago	27,613
60714	Niles	29,931
<b>Total</b>		<b>1,940,443</b>

Source: U.S. Census Bureau, Census 2010, American Factfinder available at <http://factfinder2.census.gov/faces/nav/jsf/pages/index.xhtml> (last visited Jun. 4, 2014).

- Table 1110.1540(c)(2)(B) lists the patient origin by zip code for all patients treated by Northshore Center for Gastroenterology physicians for the last 12-month period. As documented in in Table 1110.1540(c)(2)(B) below 4,122 (or 99.6%) percent of cases were from patients residing in the GSA.

<b>Table 1110.1540(c)(2)(B) Patient Origin by Zip Code</b>	
<b>Zip Code</b>	<b>Cases</b>
24450	1
28712	1
33309	1
33708	1
33991	1
34103	1
34491	1
35242	1
35674	1
46037	1
46077	1
46321	1
46410	1
47905	1
49128	1
53092	1

**Table 1110.1540(c)(2)(B)  
Patient Origin by Zip Code**

53115	1
53140	1
53208	1
53211	1
53402	1
53405	1
53406	1
54213	1
54311	1
60005	1
60021	1
60025	1
60063	1
60070	1
60079	1
60102	1
60103	1
60108	1
60154	1
60188	1
60189	1
60195	1
60201	1
60462	1
60473	1
60491	1
60514	1
60525	1
60561	1
60601	1
60605	1
60630	1
60634	1
60641	1
60654	1
60656	1
60659	1
61036	1
61038	1
61073	1

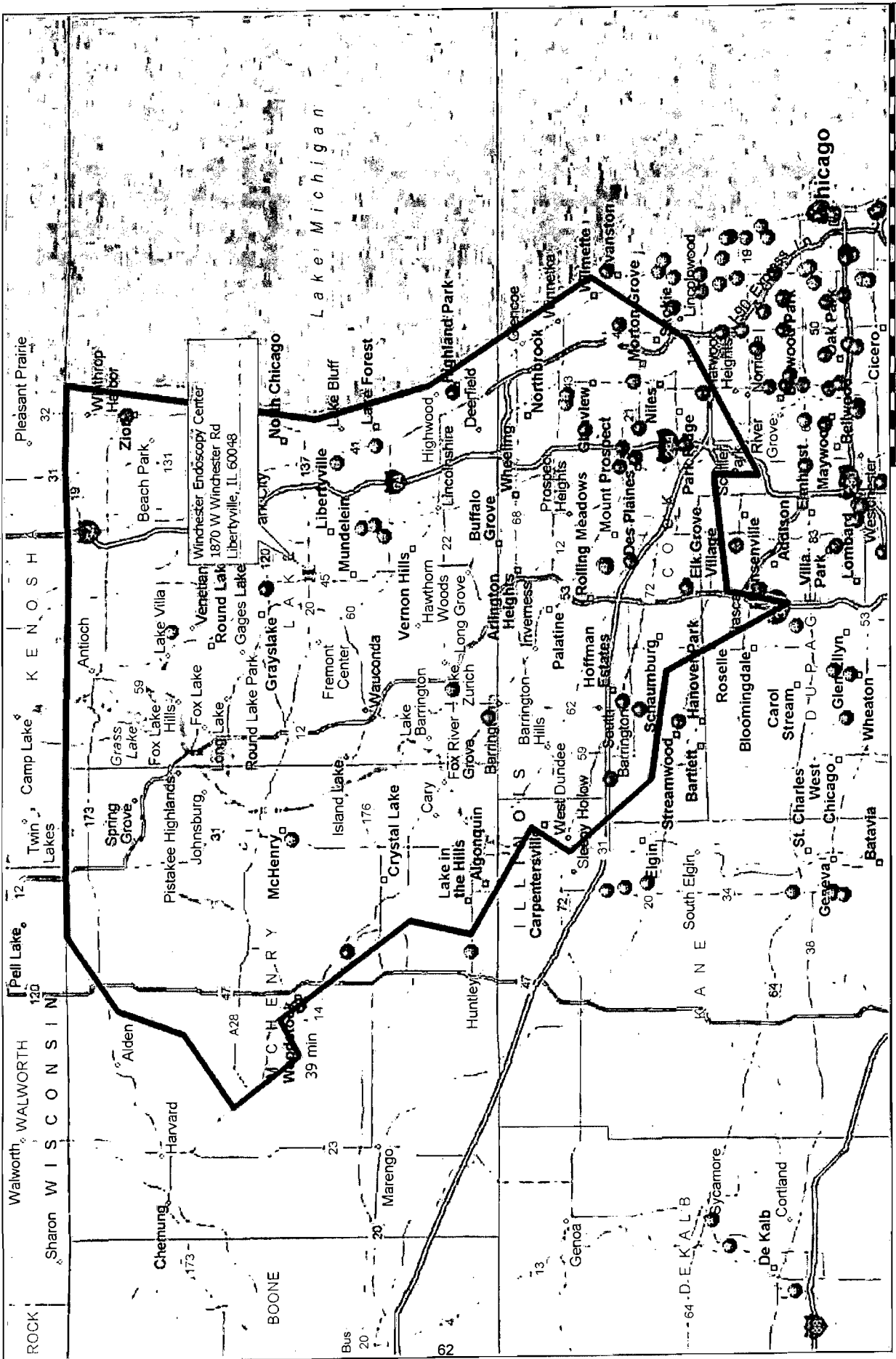
**Table 1110.1540(c)(2)(B)  
Patient Origin by Zip Code**

61111	1
62521	1
63122	1
63144	1
78705	1
85225	1
85258	1
85326	1
94703	1
08202	1
33026	2
53147	2
60007	2
60026	2
60033	2
60053	2
60054	2
60056	2
60091	2
60126	2
60131	2
60133	2
60157	2
60625	2
60901	2
62890	2
98087	2
60013	3
60018	3
60067	3
60076	3
60093	3
60118	3
60193	3
60194	3
60618	3
60646	3
53105	4
53144	4
60040	4

<b>Table 1110.1540(c)(2)(B) Patient Origin by Zip Code</b>	
60071	4
60098	4
60142	4
60714	4
53104	5
60074	5
60614	5
60014	6
60097	6
60640	6
53128	7
53179	7
53181	7
60016	7
60035	8
60042	8
53143	9
53168	9
60062	9
60088	9
60004	11
60010	12
60015	13
53158	14
60044	21
60069	21
60090	22
53142	24
60064	26
60096	26
60050	29
60045	35
60081	41
60051	50
60083	54
60099	56
60020	58
60089	67
60084	68
60041	85

<b>Table 1110.1540(c)(2)(B)</b>	
<b>Patient Origin by Zip Code</b>	
60087	109
60047	113
60085	142
60002	182
60061	232
60031	336
60048	352
60060	394
60046	407
60073	421
60030	625
<b>Total</b>	<b>4,317</b>

# Winchester Endoscopy GSA (45 min)



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**Section VII, Service Specific Review Criteria  
 Non-Hospital Based Ambulatory Surgery  
 Criterion 1110.1540(d), Service Demand**

Physician referral letters providing the name and number of patients referred to health care facilities within the past 12 months and the projected number of referrals to the Surgery Center is attached at Appendix - 1. A summary of the physician referral letters is provided in Table 1110.1540(d) below.

**Table 1110.1540(d)**

<b>Current Provider</b>	<b>Current Volume</b>	<b>Projected Referrals to Winchester Endoscopy after Project Completion</b>
Northshore Center for Gastroenterology	4,233	4,233
Advocate Condell Medical Center	84	0
<b>Total</b>	<b>4,317</b>	<b>4,233</b>

**Section VII, Service Specific Review Criteria**  
**Non-Hospital Based Ambulatory Surgery**  
**Criterion 1110.1540(f), Treatment Room Need Assessment**

- a. As stated throughout this application, the Applicant proposes to establish an ASTC providing gastroenterology services with two procedure rooms. The State Board standard is 1,500 per procedure room, or 3,000 hours for two procedure rooms. As documented in Appendix – 1, the referring physicians project to perform 4,317 surgical procedures in the first year after project completion. The Applicant estimates the average length of time per procedure will be 45 minutes, or 3,238 surgical hours. Accordingly, proposed number of procedure rooms is necessary to service the projected patient volume.
- b. As documented in Appendix – 1, the referring physicians project to perform 4,317 surgical procedures in the first year after project completion. Based upon historical caseload data, the Applicant estimates the average length of time per procedure will be 45 minutes. This estimate includes 15 minutes for prep and clean up.



**Section VII, Service Specific Review Criteria**  
**Non-Hospital Based Ambulatory Surgery**  
**Criterion 1110.1540(g), Service Accessibility**

There is not adequate space in any nearby endoscopy center to accommodate the volumes for this practice. In Lake County, there are three endoscopy centers but all have similar capacity as to what is proposed and similar caseloads. Accordingly, they are not an adequate alternative. Based on the State Board's rules and staff interpretations, the Applicant is not projecting growth in services although this flat utilization is not consistent with the referring physicians' practice base which is steadily growing. While the physicians did not project any growth in order to justify the conversion of its office-based service to a licensed center, this growth trend, likely associated with the aging population, is the primary basis for the need to obtain a license. Further, the establishment of Winchester Endoscopy Center will improve access to colorectal cancer screening for residents of Lake County and the surrounding areas.

As previously discussed in Criterion 1110.230, the Applicant proposes to establish an ASTC with two procedure rooms. By establishing an ASTC adjacent to the Applicant's affiliated physician group, the ASTC will achieve operational efficiencies that cannot be created at other hospitals and ASTCs due to limited scheduling slots and anesthesia services. Improved efficiency will result in increased access to much needed endoscopy services in this community. Notably, this community has seen significant population growth: Round Lake, Vernon Hills, Antioch, Lake Villa, and Grayslake increased 53%, 27%, 25%, 16% and 11% from 2000 to 2013.<sup>8</sup> Increased population and screening rates were the basis for a 2009 report by the Lewin Group projecting a shortage of at least 1,050 gastroenterologists in the U.S. by 2020. As the gastroenterologist shortage worsens, it is important to ensure the efficient use of existing gastroenterologists in order to also ensure adequate access to CRC screening.

One of the reasons that endoscopy services have increased is because of the payment policies of the Center for Medicare and Medicaid Services which now cover colorectal cancer screening as a preventative service. Preventative services are covered for a number of reasons but one primary reason from a public health and financing perspective is to avoid the high morbidity and mortality associated with colorectal cancer screening. Despite expanded coverage, a lack of access is one barrier to effectively screening the population as a whole. From a public health perspective, there is still a long way to go to reach a more optimal screening rate. Only 25% of Medicare beneficiaries were screened for colorectal cancer between 1998 and 2004. A recent Centers for Disease Control report found 65 percent of Americans reported being up-to-date on CRC screening — a rate significantly lower than the Healthy People 2020 target of 70.5 percent.<sup>9</sup> Individuals who do not get CRC screened at all or as often as recommended include low-income individuals, those with a lack of education and those without health insurance.

Further, HOPDs are more costly, less efficient and less convenient than ASTCs. The ASTC will allow physicians to schedule their surgeries to maximize efficiency. ASTCs provide high quality surgical care, excellent outcomes, and high level of patient satisfaction at a lower cost than HOPDs. Surgical procedures performed in an ASTC are reimbursed at lower rates than HOPDs and result in lower out-of-pocket expenses for patients. Additionally, patients often report an enhanced experience at ASTCs compared to HOPDs due, in part, to easier access to parking, shorter waiting times, and ease of access into and out of the operating rooms. Finally, surgeons are more efficient due to faster turnover of operating rooms, designated surgical times without risk of delay due to more urgent procedures, and specialized nursing staff. As a result of these efficiencies, more time can be spent with patients thereby improving the quality of care.

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<sup>8</sup> U.S. Census Bureau, American FactFinder, Fact Sheet, available at [http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=DEC\\_00\\_SF1\\_DP1](http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=DEC_00_SF1_DP1) (last visited Jun. 5, 2014).

<sup>9</sup> Centers for Disease Control and Prevention, *Colorectal Cancer Tests Save Lives*, VITAL SIGNS, Nov. 2013 available at <http://www.cdc.gov/vitalsigns/colorectalcancerscreening/> (last visited May 9, 2014).

The Centers for Medicare and Medicaid Services recognizes the importance of colorectal cancer screening, and has even included a specific measure as part of its Shared Savings Program which will reward Accountable Care Organizations that lower growth in health care costs while meeting performance standards on quality of care. As such, the proposed project will not only benefit the community, but could also reduce health care costs through participation in an Accountable Care Organization.

**Section VII, Service Specific Review Criteria**  
**Non-Hospital Based Ambulatory Surgery**  
**Criterion 1110.1540(h), Unnecessary Duplication/Maldistribution**

1. Unnecessary Duplication of Services

- a. Winchester Endoscopy Center will be located at 1870 West Winchester Road, Suite 146, Libertyville, Illinois. A map of the proposed facility's market area is attached at Attachment – 27B. A list of all zip codes located, in total or in part, within 45 minutes normal travel time of the site of the proposed facility as well as 2010 census figures for each zip code is provided in Table 1110.1540(h)(1).

<b>Table 1110.1540(h)(1)</b>		
<b>Zip Code</b>	<b>City</b>	<b>Population</b>
60002	Antioch	24,299
60004	Arlington Heights	50,582
60005	Arlington Heights	29,308
60007	Elk Grove Village	33,820
60008	Rolling Meadows	22,717
60010	Barrington	44,095
60012	Crystal Lake	11,120
60013	Cary	26,872
60014	Crystal Lake	48,550
60015	Deerfield	26,800
60016	Des Plaines	59,690
60018	Des Plaines	30,099
60020	Fox Lake	9,825
60021	Fox River Grove	5,545
60022	Glencoe	8,153
60025	Glenview	39,105
60026	Glenview	13,335
60029	Golf	482
60030	Grayslake	36,056
60031	Gurnee	37,947
60034	Hebron	2,040
60035	Highland Park	29,763
60040	Highwood	5,431
60041	Ingleside	9,250
60042	Island Lake	8,547
60043	Kenilworth	2,513
60044	Lake Bluff	9,792
60045	Lake Forest	20,925
60046	Lake Villa	35,111
60047	Lake Zurich	41,669

Table 1110.1540(h)(1)		
Zip Code	City	Population
60048	Libertyville	29,095
60050	McHenry	31,620
60051	McHenry	25,192
60053	Morton Grove	23,260
60056	Mount Prospect	55,219
60060	Mundelein	37,189
60061	Vernon Hills	25,748
60062	Northbrook	39,936
60064	North Chicago	15,407
60067	Palatine	38,585
60068	Park Ridge	37,475
60069	Lincolnshire	8,384
60070	Prospect Heights	16,001
60071	Richmond	3,598
60072	Ringwood	928
60073	Round Lake	60,002
60074	Palatine	38,985
60077	Skokie	26,825
60081	Spring Grove	10,079
60083	Wadsworth	9,838
60084	Wauconda	16,771
60085	Waukegan	71,714
60087	Waukegan	26,978
60088	Great Lakes	15,761
60089	Buffalo Grove	41,533
60090	Wheeling	37,633
60091	Wilmette	27,020
60093	Winnetka	19,570
60096	Winthrop Harbor	6,897
60097	Wonder Lake	11,250
60098	Woodstock	32,228
60099	Zion	31,104
60102	Algonquin	32,193
60110	Carpentersville	38,557
60118	Dundee	15,851
60143	Itasca	10,360
60156	Lake in the Hills	28,987
60157	Medinah	2,380
60169	Hoffman Estates	33,847

<b>Zip Code</b>	<b>City</b>	<b>Population</b>
60173	Schaumburg	12,217
60192	Hoffman Estates	16,343
60193	Schaumburg	39,188
60194	Schaumburg	19,777
60195	Schaumburg	4,769
60203	Evanston	4,523
60631	Chicago	28,641
60656	Chicago	27,613
60714	Niles	29,931
<b>Total</b>		<b>1,940,443</b>

Source: U.S. Census Bureau, Census 2010, American Factfinder available at <http://factfinder2.census.gov/faces/nav/jsf/pages/index.xhtml> (last visited Jun. 4, 2014).

- b. A list of all existing and approved health care facilities located within the Winchester Endoscopy Center GSA that provide the surgical services proposed by the project is attached at Attachment – 27C.

2. Maldistribution of Services

Ratio of Stations to Population

As shown in Table 1110.1540(h)(2)(A), the ratio of stations to population is 51.3% of the State Average.

	<b>Population</b>	<b>Operating &amp; Procedures Rooms</b>	<b>Stations to Population</b>
<b>Geographic Service Area</b>	1,940,443	341	1:5,690
<b>State</b>	12,830,632	4,395	1:2,919

Sufficient Population to Achieve Target Utilization

The Applicants propose to establish a single specialty ASTC. To achieve the State Board standard of 1,500 hours per operating room within the first two years after project completion, the Applicants would need 4,000 patient referrals. As set forth above in Table 1110.1540(d), the referring physician have historically performed 4,317 procedures annually. Once Winchester Endoscopy Center is operational, the referring physicians anticipate performing an adequate volume of procedures at the facility to reach target utilization after the first year of project completion.

3. Impact to Other Providers

- a. Winchester Endoscopy Center will not have an adverse impact on existing facilities in the GSA. As discussed throughout this application, the procedures proposed to be performed at the surgery center are primarily performed by the referring physicians in an office-based setting.
- b. The proposed facility will not lower the utilization of other area providers that are operating below the occupancy standards.

Facility Name	Address	City	Distance	Time	Adjusted Time	Operating Rooms	Procedure Rooms
Northwestern Grayslake Ambulatory Surgery Cent	1475 East Belvidere Road	Grayslake	3.7	5	6	4	0
Advocate Condell Medical Center	801 South Milwaukee Avenue	Libertyville	3.4	6	7	12	6
Grand Oaks Surgical Center Sc	1800 Hollister Dr.	Libertyville	5.2	10	12	0	1
Hawthorn Place Outpatient Surgery Center LP	240 Center Drive	Vernon Hills	6.1	11	13	3	0
Ritacca Laser Center, Ltd.	230 Center Drive	Vernon Hills	6.1	11	13	2	0
The Lake Bluff Illinois Endoscopy ASC	101 South Waukegan Road	Lake Bluff	6.7	12	14	0	2
Northwestern Lake Forest Hospital	660 North Westmoreland Road	Lake Forest	9.0	16	18	8	8
Lindenhurst Surgery Center, LLC	1050 Red Oak Lane	Lindenhurst	10.6	17	20	4	2
Advocate Good Shepherd Hospital	450 West Highway 22	Barrington	11.8	20	23	11	7
Highland Park Hospital	777 Park Avenue West	Highland Park	16.7	24	28	11	7
Barrington Pain and Spine Institute, LLC	600 Hart Road Suite 300	Barrington	17.5	26	30	2	1
Glenbrook Hospital	2100 Pfingsten Road	Glenview	20.0	26	30	9	8
Centegra Hospital - McHenry	4201 Medical Center Drive	McHenry	18.6	28	32	10	6
The Glen Endoscopy Center, LLC	2551 Compass Road, Suite 115	Glenview	21.1	28	32	0	3
Regenerative Surgery Center	1455 Golf Road, Suite 134	Des Plaines	23.0	28	32	3	0
Golf Surgical Center	8901 Golf Road	Des Plaines	23.0	28	32	5	3
Ravine Way Surgery Center	2350 Ravine Way Suite 500	Glenview	21.1	29	33	3	1
Lutheran General Hospital - Advocate	1775 Dempster Street	Park Ridge	23.8	30	35	24	8
Midwestern Regional Medical Center	2520 Elisha Avenue	Zion	18.9	31	36	4	1
Northwest Community Hospital	800 West Central Road	Arlington Heights	17.5	32	37	14	9
Northwest Community Day Surgery Center	675 West Kirchoff Road	Arlington Heights	17.5	32	37	10	0
Northwest Surgicare	1100 West Central Road, Ste L-4	Arlington Heights	17.7	32	37	5	2
Algonquin Road Surgery Center, LLC	2550 Algonquin Road	Lake in the Hills	19.7	32	37	3	1
Illinois Hand & Upper Extremity Center	515 West Algonquin Road	Arlington Heights	22.3	32	37	1	0
Alexian Brothers Medical Center	800 West Biesterfield Road	Elk Grove Village	25.2	33	38	15	16
Illinois Sports Medicine & Orthopedic Surgery Cent	9000 Waukegan Road Suite 120	Morton Grove	26.2	34	39	4	1
Apollo Health Center Ltd	2750 South River Road	Des Plaines	26.4	35	40	N/A	N/A
Skokie Hospital	9600 Gross Point Road	Skokie	26.4	35	40	10	6
Hoffman Estates Surgery Center, LLC	1555 Barrington Road Suite 0400	Hoffman Estates	23.3	36	41	3	1
St. Alexius Medical Center	1555 Barrington Road	Hoffman Estates	23.3	36	41	11	10
Presence Resurrection Medical Center	7435 West Talcott Avenue	Chicago	30.3	36	41	14	9
Aiden Center for Day Surgery, LLC	1580 W. Lake Street	Addison	28.5	37	43	4	0
Centegra Hospital Woodstock	3701 Doty Road	Woodstock	24.7	39	45	5	4
Ashton Center for Day Surgery	1800 McDonough Road	Hoffman Estates	25.2	39	45	4	0
<b>Total</b>						<b>218</b>	<b>123</b>

**Section VIII, Service Specific Review Criteria**  
**Non-Hospital Based Ambulatory Surgery**  
**Criterion 1110.1540(i), Staffing**

Winchester Endoscopy will be staffed in accordance with all State and Medicare staffing requirements. Staffing for Winchester Endoscopy will be as follows:

Patient Coordinator  
Sterilization Technician  
Endoscopy Nurse  
GI Technician  
Medical Assistant  
Registered Nurse (4 FTEs)  
Orderly



**Section VII, Service Specific Review Criteria  
 Non-Hospital Based Ambulatory Surgery  
 Criterion 1110.1540(j), Charge Commitment**

- a. A list of the procedures to be performed at Winchester Endoscopy Center with the proposed charges is provided in Table 1110.1540(j) below.

43235	EGD DX	\$1,100
43236	EGD W/SUBMUC INC	\$1,712
43239	EGD W/BIOPSY	\$1,150
43244	EGD W/VARICES BANDING	\$1,440
43247	EGD W/REMOVAL OF FB	\$1,500
43249	EGD W/DIALATION	\$1,175
43251	EGD SNARE BX	\$1,210
43255	EGD W/CONTROL OF BLEED	\$1,375
44388	COLON ENDOSCOPY	\$1,450
44389	COLONOSCOPY WITH BIOPSY	\$1,480
45330	DIAGNOSTIC SIGMOIDOSCOPY	\$500
45331	SIGMOIDOSCOPY AND BIOPSY	\$750
45335	SIGMOIDOSCOPE W/SUBMUC ING	\$825
45338	SIGMOIDOSCPY W/REMOVAL OF TUMOR	\$915
45340	SIG W/BALLOON DILATION	\$825
45378	DIAGNOSTIC COLONOSCOPY	\$1,450
45379	COLONOSCOPY W/FB REMOVAL	\$1,510
45380	COLONOSCOPY AND BIOPSY	\$1,480
45381	COLONOSCOPE, SUBMUCOUS INJ	\$1,525
45382	COLONOSCOPY/CONTROL BLEEDING	\$1,880
45385	LEISION REMOVAL COLONOSCOPY	\$1,745
45386	COLONOSCOPY W/DILATION	\$1,900
45905	DILATION OF ANAL SPHINCTER	\$500
45910	DILATION OF RECTAL NARROWING	\$500
45915	REMOVAL RECTAL OBSTRUCTION	\$650
46221	LIGATION OF HEMORRHOID(S)	\$980
99214	HPI ASSESSMENT	\$175
99354	OPD PROCEDURE	\$300
A4550	STERILE TRAY	\$500
G0104	COLOREC CANCER SCREENING; FLEXSIG	\$1,450
G0105	COLOREC CANCR SCR; COLNSCPY HI RISK	\$1,480
G0121	COLOREC CNCR SCR; COLNSCPY NO HI RISK	\$1,450

- b. A letter from Winchester Endoscopy Center committing to maintain the above charges for the first two years of operation is attached at Attachment – 27D.

May 27, 2014

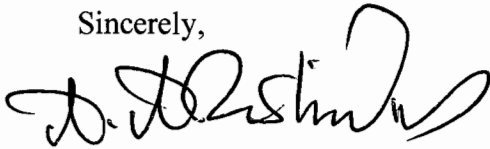
Kathryn J. Olson  
Chair  
Illinois Health Facilities and Services Review Board  
525 West Jefferson Street, 2nd Floor  
Springfield, Illinois 62761

**Re: Charge Commitment**

Dear Chair Olson:

Pursuant to 77 Ill. Admin. Code § 1110.1540(j), I hereby commit the charge schedule submitted as part of the Winchester Endoscopy certificate of need application will not be increased, at a minimum, for the first two years of operation unless a permit is first obtained pursuant to 77 Ill. Admin. Code § 1130.310(a).

Sincerely,



Arkan Alrashid, M.D.  
Manager  
Winchester Endoscopy, LLC

**Section VIII, Service Specific Review Criteria  
Non-Hospital Based Ambulatory Surgery  
Criterion 1110.1540(k), Assurances**

Attached at Attachment – 27E is a letter from Winchester Endoscopy Center certifying that the proposed facility will achieve target utilization by the end of the first year of operation.

May 21, 2014

Kathryn J. Olson  
Chair  
Illinois Health Facilities and Services Review Board  
525 West Jefferson Street, 2nd Floor  
Springfield, Illinois 62761

**Re: Non-Hospital Based Ambulatory Surgical Treatment Center Assurances**

Dear Chair Olson:

Pursuant to 77 Ill. Admin. Code § 1110.1540(k), I hereby certify the following:


- A peer review program will be implemented at Winchester Endoscopy that evaluates whether patient outcomes are consistent with quality standards established by professional organizations for the surgical services, and if outcomes do not meet or exceed those standards, a quality improvement plan will be initiated; and
- By the second year of operation after the project completion date, the annual utilization of the surgical/treatment rooms at Winchester Endoscopy will meet or exceed the utilization standard specified in 77 Ill. Adm. Code 1100.

Sincerely,



Arkan Alrashid, M.D.  
Manager  
Winchester Endoscopy, LLC

Subscribed and sworn to me  
This 21 day of May, 2014

  
\_\_\_\_\_  
Notary Public

**Section VIII**

**Criterion 1120.120, Availability of Funds**

1. Attached at Attachment – 36A is a letter from Northern Trust Bank indicating an interest in providing financing for Winchester Endoscopy Center.
2. Attached at Attachment – 36B is the letter of intent for the lease between Winchester Medical Building, Ltd. and Winchester Endoscopy Center.
3. Attached at Attachment – 36C is the equipment lease between Winchester Endoscopy Center and Olympus America Inc.

The Northern Trust Company  
1700 Green Bay Road  
Highland Park, Illinois 60035  
(847) 266-4200



## Northern Trust

May 30, 2014

Dr. Arkan Alrashid  
Manager  
Winchester Endoscopy, LLC  
1880 West Winchester Road, Suite 201  
Libertyville, Illinois 60048

Dear Dr. Alrashid:

It is my understanding Winchester Endoscopy, LLC ("Winchester Endoscopy") plans to establish a licensed ambulatory surgical treatment center ("ASTC"). I further understand Winchester will be owned exclusively by yourself, Dr. Sean Lee, and Dr. John Tasiopoulos, and the proposed ASTC will require a loan(s) for certain capital expenditures, equipment purchases and working capital. I have previously worked with you and the other owners of Winchester Endoscopy in your capacities as the owners of Northshore Center for Gastroenterology, S.C. Northshore Center for Gastroenterology has been a good and valuable client of The Northern Trust Company since 2011. Based upon the positive business experience in working with Northshore Center for Gastroenterology, The Northern Trust Company is interested in providing financing to Winchester Endoscopy for its proposed ASTC.

While this letter does not represent a commitment in any form by The Northern Trust Company to lend money, it is intended to serve as a statement of interest to facilitate further discussions between Winchester Endoscopy and The Northern Trust Company for the proposed financing opportunity and may form the basis for a discussion of various credit accommodations. Any commitments to make credit available to Winchester Endoscopy would be evidenced in writing.

Please to not hesitate to contact me should you have any questions. I can be reached at 847-266-4242 or [mafl6@ntrs.com](mailto:mafl6@ntrs.com).

Sincerely,

Michael A. Foster  
Vice President

## NON-BINDING REAL ESTATE LEASE LETTER OF INTENT

June 6, 2014

Arkan Alrashid, M.D.  
President  
Winchester Endoscopy, LLC  
1880 West Winchester Road  
Libertyville, Illinois 60048

**Re: Letter of Intent – Winchester Endoscopy Center Real Estate Lease for 1870  
West Winchester Road, Libertyville, Illinois**

Dear Dr. Alrashid:

This Non-Binding Letter of Intent sets forth the material terms and conditions pursuant to which Winchester Medical Building, Ltd. ("Lessor") is prepared to lease space in the medical office building located at 1870 West Winchester Road, Libertyville, Illinois 60048 ("Subject Property") to Winchester Endoscopy, LLC ("Lessee"). This letter shall serve as a Non-Binding Letter of Intent to lease the Subject Property.

### **Proposed Terms and Conditions**

- Space:** 4,166 gross square feet inclusive of common area allocation as determined by the Winchester Court Condominium Association to be located at 1870 West Winchester Road, Libertyville, Illinois.
- Use:** Lessee shall use and occupy the Subject Property for the purpose of a licensed endoscopy center.
- Lease Term:** Initial term will be ten (10) years effective upon the later of the completion of construction or Lessee occupancy. Lessor will grant Lessee two (2) renewal options each for a period of five (5) years.
- Lease Rate:** The lease rate will be based upon the Lessor's costs associated with the Subject Property, which shall include but not be limited to debt service on the mortgage, property taxes, and insurance on the Subject Property, with a reasonable rate of rate of return. The anticipated annual costs for the Subject Property are projected to be \$140,400.
- Lease Contingency:** Lessor and Lessee understand and agree that the establishment of any licensed surgery center in the State of Illinois is subject to the requirements of the Illinois Health Facilities Planning Act, 20 ILCS 3960/1 et seq. and, thus, Lessee cannot establish a licensed endoscopy


center on the Subject Property or execute a binding real estate lease in connection therewith unless Lessee obtains a Certificate of Need (CON) permit from the Illinois Health Facilities and Services Review Board. Thus, any lease executed hereafter between Lessor and Lessee relating to the Subject Property shall be contingent upon Lessee's receipt of a certificate of need permit for the establishment of a limited-specialty ambulatory surgical treatment center from the Illinois Health Facilities and Services Review Board.

The parties agree that this letter shall not be binding on the parties and does not address all essential terms of the lease agreement contemplated by this letter of intent. Neither party may claim any legal right against the other by reason of any action taken in reliance on this non-binding letter. A binding agreement shall not exist between the parties unless and until a lease agreement has been executed and delivered by both parties.

If the above terms and conditions are acceptable, please indicate your acceptance by executing a copy of this letter and returning it to me.

Sincerely,

Winchester Medical Building, Ltd.

By: 

Its: Authorized Agent

AGREED TO AND ACCEPTED THIS 6th DAY OF June, 2014:

**WINCHESTER ENDOSCOPY, LLC**

By: 

Print Name: Arkan Alrashid, M.D.

Title: Manager



# **OLYMPUS**

February 28, 2014

WINCHESTER ENDOSCOPY CENTER, S.C.  
1880 W WINCHESTER RD. STE 201  
LIBERTYVILLE, IL 60048  
ATTN: Elizabeth McInerney

NORTHSHORE CENTER FOR GASTROENTEROLOGY, S.C.  
1800 W WINCHESTER RD. STE 201  
LIBERTYVILLE, IL 60048  
ATTN: Elizabeth McInerney

**RE: Transfer & Assumption Agreement and Supporting Documentation**

Dear Ms. McInerney:

Enclosed please find the following documents for signature in connection with the above referenced agreement:

- Transfer & Assumption Agreement
- Request For Insurance Certificate
- Information Sheet

If your facility is Tax-exempt for Sales/Use tax, please provide a copy of your Exemption Certificate and initial the "Tax-exempt" line in the signature block of the Fixed Periodic Payment Schedule.

Please do not alter any of the documents. If you have any questions, please do not hesitate to contact Jennifer Orochena at 484-896-3592.

Please use the attached Fed Ex shipping label to return the documents to:

Olympus America Inc.  
Financial Services Dept.  
3500 Corporate Pkwy  
Center Valley, PA 18034-0610  
Attn: Jennifer Orochena

The FedEx label may only be used once in conjunction with the return of the lease documents. Please do not use this FedEx Shipping label for any other Olympus transaction.

Very truly yours,

Jennifer Orochena  
Financing Relationship Specialist

**OLYMPUS AMERICA INC.  
TRANSFER & ASSUMPTION AGREEMENT  
(Continuing Transferor Liability)**

**Master Lease Agreement:** (Agreement Number 0013946) and **Schedule Numbers:** 001, 002, 003 & 004

**Owner:** Olympus America Inc., 3500 Corporate Parkway, Center Valley, Pennsylvania 18034 ("Olympus").

**Transferor Name & Address:** WINCHESTER ENDOSCOPY CENTER, S.C.  
1880 W WINCHESTER RD. STE 201  
LIBERTYVILLE, IL 60048

**Transferee Name & Address:** NORTHSORE CENTER FOR GASTROENTEROLOGY, S.C.  
1800 W WINCHESTER RD. STE 201  
LIBERTYVILLE, IL 60048

**Schedule 001:**

**Prior Equipment Location:** 1870 W WINCHESTER RD SUITE 146  
LIBERTYVILLE, IL 60048

**New Equipment Location:** 1870 W WINCHESTER RD SUITE 146  
LIBERTYVILLE, IL 60048

**Equipment Description:** See Schedule A attached

**Transaction Terms:**

<b>Periodic Payment:</b>	\$7,680.60
<b>Current Applicable Sales Tax:</b>	6.25%
<b>Total Term:</b>	36 months
<b>Remaining Term:</b>	31 months
<b>Next Payment Due Date:</b>	11/10/13
<b>Purchase Option:</b>	\$1.00
<b>Outstanding Invoice:</b>	Invoice Number(s) 520163, 524091, 526845

**Schedule 002:**

**Prior Equipment Location:** 1870 W WINCHESTER RD SUITE 146  
LIBERTYVILLE, IL 60048

**New Equipment Location:** 1870 W WINCHESTER RD SUITE 146  
LIBERTYVILLE, IL 60048

**Equipment Description:** See Schedule A attached

**Transaction Terms:**

<b>Periodic Payment:</b>	\$540.35
<b>Current Applicable Sales Tax:</b>	6.25%
<b>Total Term:</b>	36 months
<b>Remaining Term:</b>	34 months
<b>Next Payment Due Date:</b>	N/A
<b>Purchase Option:</b>	\$1.00
<b>Outstanding Invoice:</b>	Invoice Number(s) None

**Schedule 003:**

**Prior Equipment Location:** 1870 W WINCHESTER RD SUITE 146  
LIBERTYVILLE, IL 60048

**New Equipment Location:** 1870 W WINCHESTER RD SUITE 146  
LIBERTYVILLE, IL 60048

**Equipment Description:** See Schedule A attached

**Transaction Terms:**

<b>Periodic Payment:</b>	\$178.69
<b>Current Applicable Sales Tax:</b>	6.25%
<b>Total Term:</b>	36 months
<b>Remaining Term:</b>	34 months
<b>Next Payment Due Date:</b>	2/11/14
<b>Purchase Option:</b>	\$1.00
<b>Outstanding Invoice:</b>	Invoice Number 528606

**Schedule 004:**

**Prior Equipment Location:** 1870 W WINCHESTER RD SUITE 146  
LIBERTYVILLE, IL 60048

**New Equipment Location:** 1870 W WINCHESTER RD SUITE 146  
LIBERTYVILLE, IL 60048

**Equipment Description:** See Schedule A attached

**Transaction Terms:**

<b>Periodic Payment:</b>	\$2,611.14
<b>Current Applicable Sales Tax:</b>	6.25%
<b>Total Term:</b>	36 months
<b>Remaining Term:</b>	34 months
<b>Next Payment Due Date:</b>	2/18/14
<b>Purchase Option:</b>	\$1.00
<b>Outstanding Invoice:</b>	Invoice Number(s) 523949, 528867

**AGREEMENT BETWEEN TRANSFEROR AND TRANSFEREE:**

1. For good and valuable consideration, receipt and sufficiency of which is hereby acknowledged, Transferor hereby assigns and transfers to Transferee, its heirs, executors, successors and assigns, all of Transferor's right, title and interest in and to the Agreement and to the Equipment (each as described above), subject to (a) the terms and conditions of the Agreement, (b) the Transaction Terms listed above, and (c) Olympus's consent to such assignment and transfer set forth below. Notwithstanding this assignment and transfer, Transferor agrees that it shall remain primarily liable to Olympus, jointly and severally with Transferee, for all obligations under the Agreement, whether presently existing or hereafter arising.
2. Transferee represents and warrants that, as of the date hereof, (a) the Equipment has been delivered to and inspected by Transferee, (b) it irrevocably accepts the Equipment for all purposes under the Agreement on an "AS IS, WHERE IS" basis without recourse to or warranty of Olympus, (c) no event of default (as described in the Agreement) or event which, with the passage of time or the giving of notice or both, would constitute an event of default under the Agreement has occurred, and (d) that all the representations and warranties contained in the Agreement are true and correct as of the date of this Transfer & Assumption Agreement.
3. To induce Olympus to execute and deliver its consent to this Transfer & Assumption Agreement, and in consideration of its so doing:

- (a) Transferee hereby unconditionally assumes, becomes a party to, and agrees to be bound by, perform, and pay all obligations under the Agreement (including without limitation payment of any Purchase Option Amount listed above and all other sums due or to become due under the Agreement) as though Transferee were the User/Lessee named in the Agreement.
- (b) Transferee agrees not to assert against Olympus any defense, setoff, claim, or counterclaim which it might have against Transferor arising from or in connection with the Agreement, the Equipment, or this Transfer & Assumption Agreement.
- (c) Transferor hereby waives any defense or claim it may have against Olympus arising from or in connection with this Transfer & Assumption Agreement or, after the date hereof, with the Agreement or the Equipment.
- (d) Transferor agrees that Olympus may grant any extensions or renewals of any obligation under the Agreement, and that all settlements, compromises, compositions, accounts stated, and agreed balances with Transferee, its heirs, executors, successors, assigns or transferees, may be made without notice to Transferor and shall be binding upon and shall not affect the liability of Transferor hereunder.

4. Transferee agrees that it will not sell, rent, transfer, encumber, or dispose of any or all of the Agreement or the Equipment without the prior written consent of Olympus, its successors or assigns.

**THIS TRANSFER & ASSUMPTION AGREEMENT IS EFFECTIVE UPON SIGNING BY TRANSFEEE AND TRANSFEROR AND UPON THE WRITTEN CONSENT OF OLYMPUS. TRANSFEEE IRREVOCABLY AUTHORIZES OLYMPUS TO PREPARE AND SIGN ON BEHALF OF TRANSFEEE ANY INSTRUMENT NECESSARY OR EXPEDIENT FOR FILING, RECORDING, OR PERFECTING THE INTEREST OF OLYMPUS IN THE AGREEMENT, THE EQUIPMENT, OR THE PROCEEDS OF EITHER.**

IN WITNESS WHEREOF, the parties have executed or caused this Transfer & Assumption Agreement to be executed by their respective duly authorized representatives.

TRANSFEROR: WINCHESTER ENDOSCOPY CENTER, S.C.

By: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Date: \_\_\_\_\_

TRANSFEEE: NORTHSORE CENTER FOR GASTROENTEROLOGY, S.C.

By: Elizabeth Proter  
 Name: Elizabeth Proter  
 Title: Practice Administrator  
 Date: 3/14/2014

OLYMPUS'S CONSENT: OLYMPUS AMERICA INC.

By: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Date: \_\_\_\_\_

**SCHEDULE A  
EQUIPMENT LISTING**

**Master Agreement Number: 0013946  
Schedule Number: 001**

**Seller/Supplier: Olympus America Inc.  
Quote Number: 209465-13**

<u>Quantity</u>	<u>Model Number</u>	<u>Description</u>
Two (2)	CV-190	EVIS EXERA III VIDEO PROCESSOR
Two (2)	CLV-190	EVIS EXERA III LIGHT SOURCE
Two (2)	CF-H180AL	EVIS EXERA II HIGH DEF COLONOVIDEOSCOPE LONG
Six (6)	GIF-H180	EVIS EXERA II HIGH DEFINITION GASTROVIDEOSCOPE
Two (2)	MAJ-1916	CV INTERFACE CONVERTER DEVICE
Two (2)	MAJ-1918	REMOTE CABLE PERIPHERAL DEVICE 1.8M
Two (2)	MAJ-1430	VIDEOSCOPE CABLE EVIS EXERA II

**Consumable Products:**

Fifteen (15)	BW-412T	DISP COMBO CLEANING BRUSH 2.0-4.2 MM CH 2200MM L 50/BOX
Two (2)	HX-201UR-135.A	SINGLE USE ROTATABLE CLIP FIX DEVICE 230CM 2.8MM 20/BOX
Two (2)	FD-410LR	COAGRASPER-MONOPOLAR HEMOSTAST IC GRASPER
Twenty Five (25)	MAJ-1555	DISPOSABLE BIOPSY VALVE. (20/BOX)
Eight (8)	MAJ-1632	60FR. MOUTHPIECE, 50/ BOX
Twelve (12)	H334	4-CHAMBER SUCTION POLYP TRAP 12 PER BOX
Two (2)	NM-400U-0423	INJECTOR FORCE MAX, 4MM X 23G, 2.8MM CH. 230CM 5/BX
Two (2)	NM-400U-0425	INJECTOR FORCE MAX, 4MM X 25G, 2.8MM CH. 230CM 5/BX

**Seller/Supplier: Olympus America Inc.  
Quote Number: 229002**

<u>Quantity</u>	<u>Model Number</u>	<u>Description</u>
Two (2)	K10020639	WM-DP2 STANDARD CART

**SCHEDULE A  
EQUIPMENT LISTING**

**Master Agreement Number: 0013946**

**Schedule Number: 002**

**Seller/Supplier: Olympus America Inc.**

**Quote Number: 245800-00-2**

<b>Quantity</b>	<b>Model Number</b>	<b>Description</b>
One (1)	SW74-235	PEER-TO-PEER IMAGE CAPTURE SOFTWARE WORKSTATION LICENSE
One (1)	HW74-235	IMAGE CAPTURE WORKSTATION HARDWARE
Two (2)	CV-MTXR-3-1	3 FT CV-160 DIGITAL FILE CABLE
Two (2)	556451.10-1	10'CV-140/160/190 DIGITAL FILE
Two (2)	56688L10	CAT5E PATCH CABLE 10 FT.
Two (2)	56688L25	CAT5E PATCH CABLE 25 FT.

**Softcost Items:**

One (1) EW74-INSTL: ENDOWORKS INSTALLATION SERVICE

**SCHEDULE A  
EQUIPMENT LISTING**

**Master Agreement Number: 0013946  
Schedule Number: 003**

**Seller/Supplier: Olympus America Inc.  
Quote Number: 246299-00-0**

<u>Quantity</u>	<u>Model Number</u>	<u>Description</u>
One (1)	HW74-230	PEER TO PEER SERVER & IMAGE CAPTURE WORKSTATION HARDWARE

CORP-FS/00001/9638.3

3

CORP-FS/00001/9638.3

4

**Section IX**

**Criterion 1120.130, Financial Viability**

1. Pro forma financial statements for the first full fiscal year after the project achieves target utilization are attached at Attachment – 38.
  
2. Financial viability worksheets for the first full fiscal year after the project achieves target utilization are attached at Attachment – 38.



# **Winchester Endoscopy Center**

## **FINANCIAL PRO FORMA**

Prepared by:



June 9, 2014

Arkan Alrashid, MD  
Winchester Endoscopy Center  
1880 W. Winchester Road  
Suite 201  
Libertyville, IL 60048

We have compiled the accompanying forecasted balance sheet, statements of income, retained earnings, and cash flows of Winchester Endoscopy Center for the first two years of operations, in accordance with attestation standards established by the American Institute of Certified Public Accountants.

A compilation is limited to presenting in the form of a forecast, information that is representation of management and does not include evaluation of the support for the assumptions underlying the forecast. We have not examined the forecast and, accordingly, do not express an opinion or any other form of assurance on the accompanying statements or assumptions. Furthermore, there will usually be differences between the forecasted and actual results, because events and circumstances frequently do not occur as expected, and those differences may be material. We have no responsibility to update this report for events and circumstances occurring after the date of this report.



June 9, 2014

Winchester Endoscopy Center  
Projected Volume and Reimbursement by Procedure

CPT	Year 1 - Volume											Year 1 - Reimbursement											Annual Revenue
	Payor Mix											Medicare											
	BCBS	United	Advocate	Aetna	Cigna	Commercial	Humana	IDPA	Self Pay	Total	Medicare	BCBS	United	Advocate	Aetna	Cigna	Commercial	Humana	IDPA	Self Pay	Total		
43235	27	19	6	1	5	1	2	3	1	1	2	37	335.47	553.53	402.56	285.15	335.47	419.34	419.34	335.47	335.47	335.47	24,760
43236	1	1	1	1	1	1	1	1	1	1	1	4	335.47	553.53	402.56	285.15	335.47	419.34	419.34	335.47	335.47	335.47	1,577
43239	347	770	250	38	125	77	2	55	51	10	26	1,751	335.47	553.53	402.56	285.15	335.47	419.34	419.34	335.47	335.47	207.72	769,185
43244													498.70	822.86	598.44	423.90	498.70	523.38	523.38	498.70	498.70	498.70	1,847
43249	2	2	2	2	2	2	2	2	2	2	2	4	498.70	822.86	598.44	423.90	498.70	523.38	523.38	498.70	498.70	498.70	2,663
43251	1	1	1	1	1	1	1	1	1	1	1	3	498.70	822.86	598.44	423.90	498.70	523.38	523.38	498.70	498.70	498.70	5,251
43255	1	1	1	1	1	1	1	1	1	1	1	1	498.70	822.86	598.44	423.90	498.70	523.38	523.38	498.70	498.70	498.70	1,820
44386	1	1	1	1	1	1	1	1	1	1	1	2	372.00	613.80	446.40	316.20	372.00	465.00	465.00	372.00	372.00	372.00	489
45389	1	1	1	1	1	1	1	1	1	1	1	28	372.00	613.80	446.40	316.20	372.00	465.00	465.00	372.00	372.00	372.00	372
45390	4	4	4	4	4	4	4	4	4	4	4	112	1,488.00	2,455.20	1,785.60	1,264.80	1,488.00	1,860.00	1,860.00	1,488.00	1,488.00	1,488.00	5,987
45391	3	3	3	3	3	3	3	3	3	3	3	13	1,116.00	1,869.60	1,371.60	951.60	1,116.00	1,395.00	1,395.00	1,116.00	1,116.00	1,116.00	3,448
45392	5	5	5	5	5	5	5	5	5	5	5	20	1,836.00	3,084.00	2,244.00	1,584.00	1,836.00	2,325.00	2,325.00	1,836.00	1,836.00	1,836.00	7,193
45393	4	4	4	4	4	4	4	4	4	4	4	16	1,488.00	2,455.20	1,785.60	1,264.80	1,488.00	1,860.00	1,860.00	1,488.00	1,488.00	1,488.00	5,987
45394	1	1	1	1	1	1	1	1	1	1	1	4	372.00	613.80	446.40	316.20	372.00	465.00	465.00	372.00	372.00	372.00	1,966
45395	1	1	1	1	1	1	1	1	1	1	1	2	744.00	1,227.60	892.80	632.40	744.00	930.00	930.00	744.00	744.00	744.00	635
45396	1	1	1	1	1	1	1	1	1	1	1	754	372.00	613.80	446.40	316.20	372.00	465.00	465.00	372.00	372.00	372.00	385,844
45397	59	363	125	22	67	41	2	38	27	6	15	754	372.00	613.80	446.40	316.20	372.00	465.00	465.00	372.00	372.00	372.00	894,600
45398	271	771	302	35	127	82	67	14	24	17	57	2,157	1,116.00	1,869.60	1,371.60	951.60	1,116.00	1,395.00	1,395.00	1,116.00	1,116.00	1,116.00	8,232
45399	15	23	7	3	6	3	1	2	1	2	1	80	558.00	920.70	678.12	489.60	558.00	700.50	700.50	558.00	558.00	558.00	2,020
45399	33	66	22	6	11	5	3	5	3	1	2	160	1,311.60	2,155.20	1,588.80	1,131.60	1,311.60	1,650.00	1,650.00	1,311.60	1,311.60	1,311.60	5,020
45399													372.00	613.80	446.40	316.20	372.00	465.00	465.00	372.00	372.00	372.00	60,237
45905	3	11	3	3	3	3	3	3	3	3	3	24	1,116.00	1,869.60	1,371.60	951.60	1,116.00	1,395.00	1,395.00	1,116.00	1,116.00	1,116.00	372
45915													888.14	1,435.43	825.77	584.92	888.14	860.18	860.18	888.14	888.14	888.14	21,676
46221													888.14	1,435.43	825.77	584.92	888.14	860.18	860.18	888.14	888.14	888.14	14,038
G0104	1	2	3	1	1	1	2	2	1	1	1	8	177.14	295.55	214.84	152.25	177.14	223.80	223.80	177.14	177.14	177.14	1,791
G0105	81											86	103.42	170.84	124.10	87.91	103.42	129.28	129.28	103.42	103.42	103.42	1,031
G0121	70											77	329.19	543.16	395.03	279.81	329.19	411.49	411.49	329.19	329.19	329.19	29,461
TOTALS	574	2,354	777	106	348	234	151	172	31	74	453	2,771	3,291.90	2,320.20	1,711.10	1,245.00	1,549.10	1,549.10	1,245.00	1,245.00	1,245.00	26,468	

CPT	Year 2 - Volume											Year 2 - Reimbursement											Annual Revenue
	Payor Mix											Medicare											
	BCBS	United	Advocate	Aetna	Cigna	Commercial	Humana	IDPA	Self Pay	Total	Medicare	BCBS	United	Advocate	Aetna	Cigna	Commercial	Humana	IDPA	Self Pay	Total		
43235	28	17	6	1	5	1	2	3	1	1	2	39	335.47	553.53	402.56	285.15	335.47	419.34	419.34	335.47	335.47	335.47	25,396
43236	1	1	1	1	1	1	1	1	1	1	1	4	335.47	553.53	402.56	285.15	335.47	419.34	419.34	335.47	335.47	335.47	1,656
43239	364	809	263	38	131	81	2	58	56	11	29	1,939	335.47	553.53	402.56	285.15	335.47	419.34	419.34	335.47	335.47	207.72	839,144
43244													498.70	822.86	598.44	423.90	498.70	523.38	523.38	498.70	498.70	498.70	1,395
43249	2	2	2	2	2	2	2	2	2	2	2	4	498.70	822.86	598.44	423.90	498.70	523.38	523.38	498.70	498.70	498.70	2,715
43251	1	1	1	1	1	1	1	1	1	1	1	3	498.70	822.86	598.44	423.90	498.70	523.38	523.38	498.70	498.70	498.70	6,710
43255	1	1	1	1	1	1	1	1	1	1	1	1	498.70	822.86	598.44	423.90	498.70	523.38	523.38	498.70	498.70	498.70	1,914
44389	1	1	1	1	1	1	1	1	1	1	1	2	372.00	613.80	446.40	316.20	372.00	465.00	465.00	372.00	372.00	372.00	1,913
45390	4	4	4	4	4	4	4	4	4	4	4	16	1,488.00	2,455.20	1,785.60	1,264.80	1,488.00	1,860.00	1,860.00	1,488.00	1,488.00	1,488.00	5,987
45391	3	3	3	3	3	3	3	3	3	3	3	12	1,116.00	1,869.60	1,371.60	951.60	1,116.00	1,395.00	1,395.00	1,116.00	1,116.00	1,116.00	4,186
45392	5	5	5	5	5	5	5	5	5	5	5	20	1,836.00	3,084.00	2,244.00	1,584.00	1,836.00	2,325.00	2,325.00	1,836.00	1,836.00	1,836.00	7,193
45393	4	4	4	4	4	4	4	4	4	4	4	16	1,488.00	2,455.20	1,785.60	1,264.80	1,488.00	1,860.00	1,860.00	1,488.00	1,488.00	1,488.00	5,987
45394	1	1	1	1	1	1	1	1	1	1	1	4	372.00	613.80	446.40	316.20	372.00	465.00	465.00	372.00	372.00	372.00	1,966
45395	1	1	1	1	1	1	1	1	1	1	1	2	744.00	1,227.60	892.80	632.40	744.00	930.00	930.00	744.00	744.00	744.00	635
45396	1	1	1	1	1	1	1	1	1	1	1	754	372.00	613.80	446.40	316.20	372.00	465.00	465.00	372.00	372.00	372.00	385,844
45397	59	363	125	22	67	41	2	38	27	6	15	754	372.00	613.80	446.40	316.20	372.00	465.00	465.00	372.00	372.00	372.00	894,600
45398	271	771	302	35	127	82	67	14	24	17	57	2,157	1,116.00	1,869.60	1,371.60	951.60	1,116.00	1,395.00	1,395.00	1,116.00	1,116.00	1,116.00	8,232
45399	15	23	7	3	6	3	1	2	1	2	1	80	558.00	920.70	678.12	489.60	558.00	700.50	700.50	558.00	558.00	558.00	2,020
45399	33	66	22	6	11	5	3	5	3	1	2	160	1,311.60	2,155.20	1,588.80	1,131.60	1,311.60	1,650.00	1,650.00	1,311.60	1,311.60	1,311.60	5,020
45399													372.00	613.80	446.40	316.20	372.00	465.00	465.00	372.00	372.00	372.00	60,237
45905	3	11	3	3	3	3	3	3	3	3	3	24	1,116.00	1,869.60	1,371.60	951.60	1,116.00	1,395.00	1,395.00	1,116.00	1,116.00	1,116.00	372
45915													888.14	1,435.43	825.77	584.92	888.14	860.18	860.18	888.14	888.14	888.14	21,676
46221													888.14	1,435.43	825.77	584.92	888.14	860.18	860.18	888.14	888.14	888.14	14,038
G0104	1	2	3	1	1	1	2	2	1	1	1	8	177.14	295.55	214.84	152.25	177.14	223.80	223.80	177.14	177.14	177.14	1,791
G0105	85											86	103.42	170.84	124.10	87.91	103.42	129.28	129.28	103.42	103.42	103.42	1,031
G0121	74											77	329.19	543.16	395.03	279.81	329.19	411.49	411.49	329.19	329.19	329.19	29,461
TOTALS	971	2,493	773	111	363	250	169	191	31	74	453	3,017	3,616.00	2,651.10	1,956.60	1,400.00	1,711.10	1,711.10	1,400.00	1,400.00	1,400.00	2,465,075	

Assumptions:  
Volume increase in year 2  
Rate increase in year 2

**Winchester Endoscopy Center**  
Expense Assumptions

	<u>Year 1</u>	<u>Annual Increase</u>	<u>Year 2</u>	<u>Assumptions</u>
Leased employee costs	272,580	3.0%	280,757	Per management
Endoscopy drug and supply costs (per case)	39	2.0%	40	Based on management amount of \$15,688 per month / cases
Rent and real estate taxes	96,000	3.0%	98,880	Per management
General liability insurance	4,200	2.5%	4,305	Per management
Utilities	140,400	2.5%	143,910	Per management
Outside Services	7,200	2.5%	7,380	Per management
Lease Payments	279,853	0.0%	279,853	Per management
Other	-	-	-	miscellaneous

Assets/liabilities transferred from WEC

Initial Cash balance from WEC 100,000

Initial book value of contributed equipment

**Winchester Endoscopy Center**  
**PROJECTED STATEMENT OF OPERATIONS**  
Accrual Basis

	Year 1	Year 2
<b>Number of Cases-Endoscopy</b>	4,832	5,074
<b>Revenues-Endoscopy</b>	\$ 2,347,690	\$ 2,465,075
<b>Operating Expenses</b>		
Leased employee costs	272,580	280,757
Drugs and supplies-endoscopy	188,256	201,622
Facility Rent and RE taxes	96,000	98,880
Insurance	4,200	4,305
Utilities	140,400	143,910
Outside Services	7,200	7,380
Lease Payments	279,853	279,853
Other	-	-
<b>Total Operating Expenses</b>	988,489	1,016,708
Depreciation	-	-
<b>Net Income (loss)</b>	\$ 1,359,201	\$ 1,448,367

**Winchester Endoscopy Center**  
**PROJECTED STATEMENT OF CASH FLOWS**

	<u>Year 1</u>	<u>Year 2</u>
Cash From Operating Activities		
Net Income	\$ 1,359,201	\$ 1,448,367
Add (subtract):		
Depreciation and Amortization	-	-
(Inc.) dec. in Accounts Receivable	(293,461)	(14,673)
Change in Accounts Payable	82,374	2,352
	<u>1,148,114</u>	<u>1,436,045</u>
Cash from (used for) Operations		
Cash from Investing & Financing Activities		
Owner Cash Contributions	100,000	
Owner Distributions	<u>(1,000,000)</u>	<u>(1,450,000)</u>
Cash (used for) from Invest. & Finance Activities	<u>(900,000)</u>	<u>(1,450,000)</u>
Beginning Cash	-	248,114
Ending Cash	<u>\$ 248,114</u>	<u>\$ 234,159</u>

**Winchester Endoscopy Center  
PROJECTED BALANCE SHEET**

**ASSETS**

	Year 1	Year 2
Current Assets:		
Cash and equivalents	\$ 248,114	\$ 234,159
Accounts Receivable	293,461	308,134
Total Current Assets	<u>541,575</u>	<u>542,293</u>
Fixed Assets:		
Furniture and equipment (10 years)	-	-
Accumulated Depreciation	-	-
Total Fixed Assets	<u>-</u>	<u>-</u>
Total Assets	<u>\$ 541,575</u>	<u>\$ 542,293</u>

**LIABILITIES & SHAREHOLDERS' EQUITY**

Current Liabilities		
Accounts Payable	\$ 82,374	\$ 84,726
Total Current Liabilities	<u>82,374</u>	<u>84,726</u>
Member's Equity		
Paid in capital	100,000	100,000
Net Income	1,359,201	1,448,367
Owner distributions	(1,000,000)	(1,450,000)
Retained Earnings	-	359,201
Total Member's Equity	<u>459,201</u>	<u>457,567</u>
Total Liabilities and Equity	<u>\$ 541,575</u>	<u>\$ 542,293</u>

**Winchester Endoscopy Center**  
**Monthly Cash Flow Statement**  
**Year 1**

Month	Month 1	Month 2	Month 3	Month 4	Month 5	Month 6	Month 7	Month 8	Month 9	Month 10	Month 11	Month 12	Year 1
Cases/Month-Endoscopy	403	403	403	403	403	403	403	403	403	403	403	403	4,832
Revenues	\$ 195,641	\$ 195,641	\$ 195,641	\$ 195,641	\$ 195,641	\$ 195,641	\$ 195,641	\$ 195,641	\$ 195,641	\$ 195,641	\$ 195,641	\$ 195,641	\$ 2,347,690
<b>CASH - BEGINNING</b>	<b>\$ 100,000</b>	<b>\$ 115,446</b>	<b>\$ 228,713</b>	<b>\$ 228,713</b>	<b>\$ 341,980</b>	<b>\$ 455,246</b>	<b>\$ 568,513</b>	<b>\$ 181,780</b>	<b>\$ 295,047</b>	<b>\$ 408,313</b>	<b>\$ 521,580</b>	<b>\$ 634,847</b>	<b>\$ -</b>
Collections	\$ 97,820	\$ 195,641	\$ 195,641	\$ 195,641	\$ 195,641	\$ 195,641	\$ 195,641	\$ 195,641	\$ 195,641	\$ 195,641	\$ 195,641	\$ 195,641	\$ 2,054,229
Operating Expenses													
Leased employee costs	22,715	22,715	22,715	22,715	22,715	22,715	22,715	22,715	22,715	22,715	22,715	22,715	249,865
Drugs and supplies-endoscopy	15,688	15,688	15,688	15,688	15,688	15,688	15,688	15,688	15,688	15,688	15,688	15,688	172,568
Facility Rent and RE Taxes	8,000	8,000	8,000	8,000	8,000	8,000	8,000	8,000	8,000	8,000	8,000	8,000	88,000
Insurance	350	350	350	350	350	350	350	350	350	350	350	350	3,850
Utilities	11,700	11,700	11,700	11,700	11,700	11,700	11,700	11,700	11,700	11,700	11,700	11,700	128,700
Outside Services	600	600	600	600	600	600	600	600	600	600	600	600	6,600
Lease Payments	23,321	23,321	23,321	23,321	23,321	23,321	23,321	23,321	23,321	23,321	23,321	23,321	256,532
Other													
<b>Total Operating Expenses</b>	<b>\$ -</b>	<b>\$ 82,374</b>	<b>\$ 82,374</b>	<b>\$ 82,374</b>	<b>\$ 82,374</b>	<b>\$ 82,374</b>	<b>\$ 82,374</b>	<b>\$ 82,374</b>	<b>\$ 82,374</b>	<b>\$ 82,374</b>	<b>\$ 82,374</b>	<b>\$ 82,374</b>	<b>\$ 906,115</b>
<b>NET CASH PROFIT</b>	<b>\$ -</b>	<b>\$ 15,446</b>	<b>\$ 113,267</b>	<b>\$ 113,267</b>	<b>\$ 113,267</b>	<b>\$ 113,267</b>	<b>\$ 113,267</b>	<b>\$ 113,267</b>	<b>\$ 113,267</b>	<b>\$ 113,267</b>	<b>\$ 113,267</b>	<b>\$ 113,267</b>	<b>\$ 1,148,114</b>
Owner contribution	100,000	0	0	0	0	0	0	0	0	0	0	0	100,000
Less: owner distributions													(1,000,000)
<b>CASH - ENDING</b>	<b>100,000</b>	<b>115,446</b>	<b>228,713</b>	<b>341,980</b>	<b>455,246</b>	<b>568,513</b>	<b>181,780</b>	<b>295,047</b>	<b>408,313</b>	<b>521,580</b>	<b>634,847</b>	<b>748,114</b>	<b>248,114</b>



**Winchester Endoscopy Center**  
**Monthly Cash Flow Statement**  
**Year 2**

Month	Month 13	Month 14	Month 15	Month 16	Month 17	Month 18	Month 19	Month 20	Month 21	Month 22	Month 23	Month 24	Year 2
Cases/Month-Endoscopy	423	423	423	423	423	423	423	423	423	423	423	423	5,074
Revenues	\$ 205,423	\$ 205,423	\$ 205,423	\$ 205,423	\$ 205,423	\$ 205,423	\$ 205,423	\$ 205,423	\$ 205,423	\$ 205,423	\$ 205,423	\$ 205,423	\$ 2,465,075
<b>CASH - BEGINNING</b>	\$ 248,114	\$ 361,380	\$ 477,186	\$ 597,884	\$ 718,581	\$ 839,278	\$ 959,975	\$ 1,081,373	\$ 1,202,799	\$ 1,324,225	\$ 1,445,651	\$ 1,567,077	\$ 248,114
Collections	\$ 195,641	\$ 200,532	\$ 205,423	\$ 205,423	\$ 205,423	\$ 205,423	\$ 205,423	\$ 205,423	\$ 205,423	\$ 205,423	\$ 205,423	\$ 205,423	\$ 2,450,402
Operating Expenses													
Leased employee costs	22,715	23,396	23,396	23,396	23,396	23,396	23,396	23,396	23,396	23,396	23,396	23,396	280,076
Drugs and supplies-endoscopy	15,688	16,802	16,802	16,802	16,802	16,802	16,802	16,802	16,802	16,802	16,802	16,802	200,508
Facility Rent and RE taxes	8,000	8,240	8,240	8,240	8,240	8,240	8,240	8,240	8,240	8,240	8,240	8,240	98,640
Insurance	350	359	359	359	359	359	359	359	359	359	359	359	4,296
Utilities	11,700	11,993	11,993	11,993	11,993	11,993	11,993	11,993	11,993	11,993	11,993	11,993	143,618
Outside Services	600	615	615	615	615	615	615	615	615	615	615	615	7,365
Lease Payments	23,321	23,321	23,321	23,321	23,321	23,321	23,321	23,321	23,321	23,321	23,321	23,321	279,853
Other													
Total Operating Expenses	\$ 82,374	\$ 84,726	\$ 84,726	\$ 84,726	\$ 84,726	\$ 84,726	\$ 84,726	\$ 84,726	\$ 84,726	\$ 84,726	\$ 84,726	\$ 84,726	\$ 1,014,356
<b>NET CASH PROFIT</b>	\$ 113,049	\$ 115,806	\$ 120,697	\$ 120,697	\$ 120,697	\$ 120,697	\$ 120,697	\$ 120,697	\$ 120,697	\$ 120,697	\$ 120,697	\$ 120,697	\$ 1,436,045
Less: owner distributions													(1,450,000)
<b>CASH - ENDING</b>	\$ 361,380	\$ 477,186	\$ 597,884	\$ 718,581	\$ 839,278	\$ 959,975	\$ 1,081,373	\$ 1,202,799	\$ 1,324,225	\$ 1,445,651	\$ 1,567,077	\$ 1,687,503	\$ 334,159

**Winchester Endoscopy Center**  
Ratio Analysis - Year 2

Ratio	Calculation	Actual	Target
1 Current Ratio	$\frac{\text{Current Assets}}{\text{Current Liabilities}}$	$\frac{542,293}{84,726} = 6.40$	> 1.5
2 Net Margin Percentage	$\frac{\text{Net Income}}{\text{Net operating revenue}}$	$\frac{1,448,367}{2,465,075} = 59\%$	> 3.5%
3 Debt to Total Capitalization	$\frac{\text{Long-term debt}}{\text{Net Assets}}$	$\frac{-}{457,567} = \text{NA}$	< 80%
4 Debt Service Coverage	$\frac{\text{Net income} + \text{Depreciation} + \text{Interest}}{\text{Current Year Principal} + \text{Interest}}$	$\frac{1,728,220}{-} = \text{NA}$	> 1.75
5 Days Cash on Hand	$\frac{\text{Cash}}{\text{Operating Expenses} - \text{Depreciation} / 365}$	$\frac{234,159}{2,786} = 84$	> 45 days
6 Cushion Ratio	$\frac{\text{Cash}}{\text{Current Year Principal} + \text{Interest}}$	$\frac{234,159}{-} = \text{NA}$	> 3.0

**Section X Economic Feasibility**

**Criterion 1120.140(a) Reasonableness of Financing Arrangements**

A letter from Winchester Endoscopy Center certifying the estimated project costs and related costs will be funded in total or in part by borrowing attached at Attachment – 39A.

May 28, 2014

Kathryn J. Olson  
Chair  
Illinois Health Facilities and Services Review Board  
525 West Jefferson Street, 2nd Floor  
Springfield, Illinois 62761

**Re: Reasonableness of Financing Arrangements**

Dear Chair Olson:

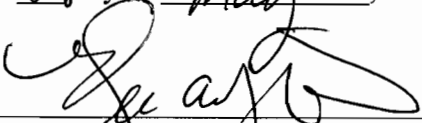
I hereby certify under penalty of perjury as provided in § 1-109 of the Illinois Code of Civil Procedure, 735 ILCS 5/1-109 and pursuant to 77 Ill. Admin. Code § 1120.140(a) that the total estimated project costs and related costs will be funded in total with cash and cash equivalents, including investment securities, unrestricted funds, received pledge receipts and funded depreciation.

Sincerely,



Arkan Alrashid, M.D.  
Manager  
Winchester Endoscopy, LLC

Subscribed and sworn to me  
This 28 day of May, 2014



Notary Public



**Section X Economic Feasibility**  
**Criterion 1120.140(b), Conditions of Debt Financing**

A letter from Winchester Endoscopy Center certifying that the selected form of debt financing will be the lowest cost available is attached at Attachment – 39A.

**Section X Economic Feasibility**

**Criterion 1120.140(c), Reasonableness of Project and Related Costs**

1. The Cost and Gross Square Feet by Department or Service table below sets forth the modernization cost and square footage allocated to each department of the proposed ASTC.

COST AND GROSS SQUARE FEET BY DEPARTMENT OR SERVICE									
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)	
<b>Clinical</b>									
ASTC		\$132.02			4,166			\$550,000	\$550,000
Contingency – Clinical		\$12.00			4,166			\$50,000	\$50,000
<b>Total Clinical</b>		<b>\$144.02</b>			<b>4,166</b>			<b>\$600,000</b>	<b>\$600,000</b>
<b>Non-Clinical</b>									
Contingency – Non-Clinical									
<b>Total Non- Clinical</b>									
<b>TOTALS</b>		<b>\$144.02</b>			<b>4,166</b>			<b>\$600,000</b>	<b>\$600,000</b>

\* Include the percentage (%) of space for circulation

2. As shown in Table 1120.310(c) below, the project costs are below the State Standard.

Table 1120.310(c)			
	Proposed ASTC	State Standard	Above/Below State Standard
Site Survey and Preparation	\$30,000	5% x (Construction + Contingencies) = 5% x (\$550,000 + \$50,000) = 5% x \$600,000 = \$30,000	Meets State Standard
Modernization Costs	\$600,000	\$249.66 x 4,166 GSF \$1,040,084	Below State Standard
Contingencies	\$50,000	10% to 15% x Construction Costs = (10% x \$550,000) to (15% x \$550,000) = \$55,000 to \$82,500	Below State Standard

Table 1120.310(c)			
	Proposed ASTC	State Standard	Above/Below State Standard
Architectural/ Engineering Fees	\$42,500	7.5 % to 11.26% x (Construction Contingencies) = 7.5% to 11.26% x (\$550,000 + \$600,000) = 7.5% to 11.26% x \$600,000 = \$45,000 to \$67,560	Below State Standard
Consulting & Other Fees	\$72,000	No State Standard	
Equipment	\$25,000	\$435,131.83 per procedure room = \$435,131.83 x 2 procedure rooms = \$870,263.66	Below State Standard
Fair Market Value of Leased Space or Equipment	\$1,463,853	No State Standard	

**Section X, Economic Feasibility Review Criteria**  
**Criterion 1120.310(d), Projected Operating Costs**

Operating Expenses: \$422,433

Procedures: 4,233

Operating Expense per Procedure: \$99.80



**Section X, Economic Feasibility Review Criteria**  
**Criterion 1120.310(e), Total Effect of Project on Capital Costs**

Capital Costs: \$344,532

Procedures: 4,233

Capital Costs per Procedure: \$81.39 per procedure

**Section XI, Safety Net Impact Statement**

1. Winchester Endoscopy Center will not have a material impact on essential safety net services in the community. As documented in the physician referral letters attached at Appendix – 1, the procedures to be performed at Winchester Endoscopy Center are currently performed by Northshore Center for Gastroenterology physicians in their offices. No procedures will be transferred to Winchester Endoscopy Center from existing hospitals and surgery centers.
2. The establishment of the ASTC will not impact the ability of other providers or other health care facilities to cross-subsidize safety net services. As noted above, no procedures will be transferred from existing hospitals and surgery centers to Winchester Endoscopy Center. Accordingly, the proposed project will not impact the ability of other providers to cross-subsidize safety net services.

By establishing an ASTC proximately located to Northshore Center for Gastroenterology, the Applicant's medical practice, the ASTC will achieve operational efficiencies that cannot be created at other hospitals and ASTCs due to limited scheduling slots and anesthesia services.

3. The Applicant is proposing to establish a limited-specialty ASTC. Thus this criterion does not apply.

**Section XII, Charity Care Information**

Winchester Endoscopy Center is newly formed entity and has no historical data on net revenue or charity care. Thus, it cannot report charity care data and has no historical payor mix experience.

**Appendix 1**  
**Physician Referral Letters**

Attached as Appendix 1 are physician referral letters projecting 4,233 procedures will be performed at Winchester Endoscopy Center within the first year after project completion.

June 5, 2014

Kathryn J. Olson  
Chair  
Illinois Health Facilities and Services Review Board  
525 West Jefferson Street, 2nd Floor  
Springfield, Illinois 62761

Dear Ms. Olson:

I am a physician specializing in gastroenterology. I am writing in support of the establishment of Winchester Endoscopy Center. Over the past twelve months, I performed a total of 1,907 gastroenterology procedures. Outpatient gastroenterology procedures will constitute the majority of my work in the future.

During the past twelve months, I referred cases to the following hospitals and surgery centers. With the opening of the proposed Winchester Endoscopy Center, I expect to refer my cases as noted below. A list of the zip codes for patients treated within the last 12 months is attached at Attachment – 1. Projected patient volume shall come from the proposed geographic service area of Winchester Endoscopy Center.

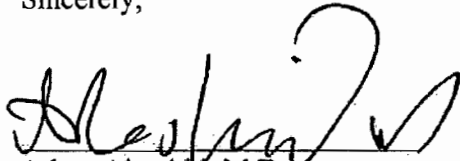
<b>Provider</b>	<b>Historical Referrals</b>	<b>Projected Referrals to Winchester Endoscopy Center</b>
Northshore Center for Gastroenterology	1,875	1,875
Advocate Condell Medical Center	32	0
<b>Total</b>	<b>1,907</b>	<b>1875</b>

These referrals have not been used to support another pending or approved certificate of need application.

The information in this letter is true and correct to the best of my knowledge.

I support the proposed establishment of Winchester Endoscopy Center.

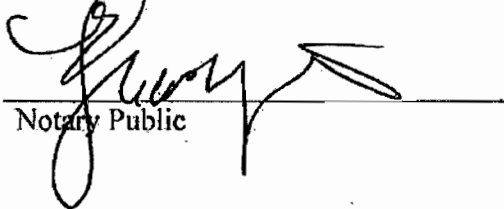
Sincerely,



Arkan Alrashid, M.D.  
Gastroenterologist

Northshore Center for Gastroenterology  
1880 West Winchester Road, Suite 201  
Libertyville, Illinois 60048

Subscribed and sworn to me  
This 5 day of June, 2014



Notary Public



**ATTACHMENT - 1**

<b>Patient Zip Code</b>	<b>Cases</b>
33026	2
46037	1
46077	1
46410	1
53104	2
53105	3
53128	4
53142	4
53143	5
53158	5
53168	3
53179	3
53181	1
53208	1
60002	79
60004	7
60005	1
60007	2
60010	5
60013	3
60014	1
60015	7
60016	3
60020	25
60026	2
60030	232
60031	131
60035	4
60040	2
60041	25
60042	1
60044	7
60045	16
60046	203
60047	68
60048	127
60050	15
60051	19

Patient Zip Code	Cases
60054	2
60056	2
60060	195
60061	102
60062	6
60063	1
60064	17
60069	7
60071	2
60073	192
60074	3
60076	2
60081	17
60083	27
60084	36
60085	78
60087	63
60088	5
60089	36
60090	9
60091	2
60096	8
60097	3
60098	2
60099	36
60102	1
60118	1
60142	1
60154	1
60157	2
60188	1
60193	2
60194	3
60514	1
60614	1
60618	3
60625	1
60640	6
60646	3
60654	1



<b>Patient Zip Code</b>	<b>Cases</b>
61073	1
63122	1
98087	2
34491	1
<b>TOTAL</b>	<b>1,907</b>

May 30, 2014

Kathryn J. Olson  
Chair  
Illinois Health Facilities and Services Review Board  
525 West Jefferson Street, 2nd Floor  
Springfield, Illinois 62761

Dear Ms. Olson:

I am a physician specializing in gastroenterology. I am writing in support of the establishment of Winchester Endoscopy Center. Over the past twelve months, I performed a total of 1,231 gastroenterology procedures. Outpatient gastroenterology procedures will constitute the majority of my work in the future.

During the past twelve months, I referred cases to the following hospitals and surgery centers. With the opening of the proposed Winchester Endoscopy Center, I expect to refer my cases as noted below. A list of the zip codes for patients treated within the last 12 months is attached at Attachment – 1. Projected patient volume shall come from the proposed geographic service area of Winchester Endoscopy Center.

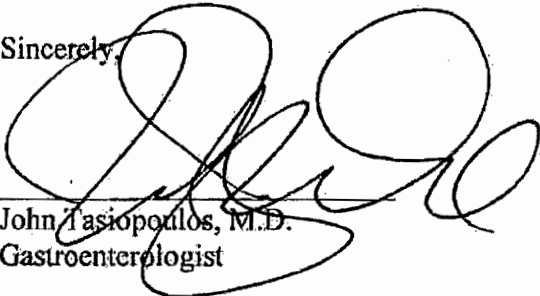
<b>Provider</b>	<b>Historical Referrals</b>	<b>Projected Referrals to Winchester Endoscopy Center</b>
Northshore Center for Gastroenterology	1,217	1,217
Advocate Condell Medical Center	14	0
<b>Total</b>	<b>1,231</b>	<b>1,217</b>

These referrals have not been used to support another pending or approved certificate of need application.

The information in this letter is true and correct to the best of my knowledge.

I support the proposed establishment of Winchester Endoscopy Center.

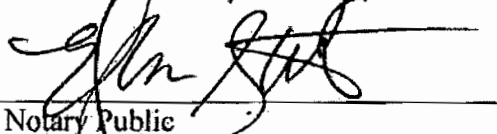
Sincerely,



John Tasiopoulos, M.D.  
Gastroenterologist

Northshore Center for Gastroenterology  
1880 West Winchester Road, Suite 201  
Libertyville, Illinois 60048

Subscribed and sworn to me  
This 30 day of May, 2014

  
Notary Public

**ATTACHMENT - 1**

<b>Patient Zip Code</b>	<b>Cases</b>
08202	1
28712	1
33309	1
33708	1
33991	1
34103	1
35242	1
35674	1
46321	1
53105	1
53115	1
53128	1
53140	1
53142	9
53143	2
53147	2
53158	1
53168	5
53179	4
53181	5
53211	1
53402	1
53406	1
54311	1
60002	64
60004	3
60010	4
60014	5
60015	2
60016	3
60018	2
60020	24
60021	1
60025	1
60030	215
60031	113
60033	2
60035	2

<b>Patient Zip Code</b>	<b>Cases</b>
60040	1
60041	35
60042	2
60044	4
60045	12
60046	114
60047	21
60048	111
60050	7
60051	24
60053	1
60060	82
60061	52
60064	2
60067	2
60069	6
60071	2
60073	116
60074	2
60076	1
60081	17
60083	11
60084	17
60085	16
60087	19
60088	1
60089	11
60090	6
60093	1
60096	8
60097	3
60098	2
60099	7
60118	2
60126	2
60142	1
60189	1
60462	1
60473	1
60491	1

<b>Patient Zip Code</b>	<b>Cases</b>
60525	1
60601	1
60614	2
60625	1
60630	1
60634	1
60714	4
60901	2
62890	2
78705	1
85225	1
85258	1
94703	1
49128	1
<b>TOTAL</b>	<b>1,231</b>

May 30, 2014

Kathryn J. Olson  
Chair  
Illinois Health Facilities and Services Review Board  
525 West Jefferson Street, 2nd Floor  
Springfield, Illinois 62761

Dear Ms. Olson:

I am a physician specializing in gastroenterology. I am writing in support of the establishment of Winchester Endoscopy Center. Over the past twelve months, I performed a total of 1,179 gastroenterology procedures. Outpatient gastroenterology procedures will constitute the majority of my work in the future.

During the past twelve months, I referred cases to the following hospitals and surgery centers. With the opening of the proposed Winchester Endoscopy Center, I expect to refer my cases as noted below. A list of the zip codes for patients treated within the last 12 months is attached at Attachment – 1. Projected patient volume shall come from the proposed geographic service area of Winchester Endoscopy Center.

<b>Provider</b>	<b>Historical Referrals</b>	<b>Projected Referrals to Winchester Endoscopy Center</b>
Northshore Center for Gastroenterology	1,141	1,141
Advocate Condell Medical Center	38	0
<b>Total</b>	<b>1,179</b>	<b>1,141</b>

These referrals have not been used to support another pending or approved certificate of need application.

The information in this letter is true and correct to the best of my knowledge.

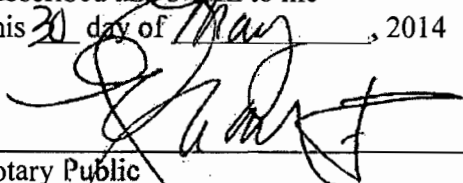
I support the proposed establishment of Winchester Endoscopy Center.

Sincerely,

  
Sean Lee, M.D.  
Gastroenterologist

Northshore Center for Gastroenterology  
1880 West Winchester Road, Suite 201  
Libertyville, Illinois 60048

Subscribed and sworn to me  
This 30 day of May, 2014

  
Notary Public





**ATTACHMENT - 1**

<b>Patient Zip Code</b>	<b>Cases</b>
24450	1
47905	1
53092	1
53104	3
53128	2
53142	11
53143	2
53144	4
53158	8
53168	1
53181	1
53405	1
54213	1
60002	39
60004	1
60010	3
60015	4
60016	1
60018	1
60020	9
60030	178
60031	92
60035	2
60040	1
60041	25
60042	5
60044	10
60045	7
60046	90
60047	24
60048	114
60050	7
60051	7
60053	1
60060	117
60061	78
60062	3
60064	7

<b>Patient Zip Code</b>	<b>Cases</b>
60067	1
60069	8
60070	1
60073	113
60079	1
60081	7
60083	16
60084	15
60085	48
60087	27
60088	3
60089	20
60090	7
60093	2
60096	10
60099	13
60103	1
60108	1
60131	2
60133	2
60142	2
60193	1
60195	1
60201	1
60561	1
60605	1
60614	2
60641	1
60656	1
60659	1
61036	1
61038	1
61111	1
62521	1
63144	1
85326	1
<b>Total</b>	<b>1,179</b>

**Appendix 2**  
**Time and Distance**

Attached as Appendix 2 are MapQuest printouts with the time and distance to each facility within 45 minutes normal travel time of Winchester Endoscopy Center.



**mapquest**

Trip to:

**1475 E Belvidere Rd**

Grayslake, IL 60030

3.67 miles / 5 minutes

Notes

Northwestern Lake Forest Hospital



**1870 W Winchester Rd, Libertyville, IL 60048-5353**

Download  
Free App



1. Start out going **west** on **W Winchester Rd / County Hwy-69 / County Hwy-A34** toward **Soccer Rd**. [Map](#)

**0.5 Mi**

*0.5 Mi Total*



2. Take the **3rd right** onto **US-45 N / N US Highway 45**. [Map](#)  
*US-45 N is 0.1 miles past American Way  
If you reach Franklin Blvd you've gone about 0.1 miles too far*

**2.8 Mi**

*3.3 Mi Total*



3. Turn **left** onto **US Highway 45 / US-45 N / IL-120**. Continue to follow **IL-120**. [Map](#)  
*IL-120 is 0.5 miles past Jones Point Rd  
159 Grayslake BP is on the corner  
If you are on US Highway 45 and reach Country Faire Dr you've gone about 0.1 miles too far*

**0.3 Mi**

*3.7 Mi Total*



4. Make a **U-turn** onto **E Belvidere Rd / IL-120**. [Map](#)  
*If you reach Bobolink Dr you've gone about 0.1 miles too far*

**0.01 Mi**

*3.7 Mi Total*



5. **1475 E BELVIDERE RD** is on the **right**. [Map](#)  
*If you reach US Highway 45 you've gone about 0.3 miles too far*



**1475 E Belvidere Rd, Grayslake, IL 60030**

**Total Travel Estimate: 3.67 miles - about 5 minutes**








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Trip to:  
**1475 E Belvidere Rd**  
 Grayslake, IL 60030  
 3.67 miles / 5 minutes

Notes

Northwestern Grayslake Ambulatory Surgery Center

- |   |  |  |
|---|--|--|
|    | <p><b>1870 W Winchester Rd, Libertyville, IL 60048-5353</b></p>  | <p>Download<br/>Free App</p>           |
|    | <p>1. Start out going west on W Winchester Rd / County Hwy-69 / County Hwy-A34 toward Soccer Rd. <a href="#">Map</a></p>   | <p><b>0.5 Mi</b><br/>0.5 Mi Total</p>  |
|    | <p>2. Take the 3rd right onto US-45 N / N US Highway 45. <a href="#">Map</a><br/> <i>US-45 N is 0.1 miles past American Way<br/>                 If you reach Franklin Blvd you've gone about 0.1 miles too far</i></p>  | <p><b>2.8 Mi</b><br/>3.3 Mi Total</p>  |
|    | <p>3. Turn left onto US Highway 45 / US-45 N / IL-120. Continue to follow IL-120. <a href="#">Map</a><br/> <i>IL-120 is 0.5 miles past Jones Point Rd<br/>                 159 Grayslake BP is on the corner<br/>                 If you are on US Highway 45 and reach Country Faire Dr you've gone about 0.1 miles too far</i></p> | <p><b>0.3 Mi</b><br/>3.7 Mi Total</p>  |
|  | <p>4. Make a U-turn onto E Belvidere Rd / IL-120. <a href="#">Map</a><br/> <i>If you reach Bobolink Dr you've gone about 0.1 miles too far</i></p>   | <p><b>0.01 Mi</b><br/>3.7 Mi Total</p> |
|  | <p>5. <b>1475 E BELVIDERE RD</b> is on the right. <a href="#">Map</a><br/> <i>If you reach US Highway 45 you've gone about 0.3 miles too far</i></p>   |  |
|  | <p><b>1475 E Belvidere Rd, Grayslake, IL 60030</b></p>   |  |

Total Travel Estimate: **3.67 miles - about 5 minutes**

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**mapquest**

Trip to:

**801 S Milwaukee Ave**

Libertyville, IL 60048-3204

3.38 miles / 6 minutes

Notes

Advocate Condell Medical Center



**1870 W Winchester Rd, Libertyville, IL 60048-5353**

Download  
Free App



1. Start out going **east** on **W Winchester Rd / County Hwy-69 / County Hwy-A34** toward **Tiffany Ln**. Continue to follow **W Winchester Rd / County Hwy-69**. [Map](#)

**2.0 Mi**

*2.0 Mi Total*



**21**

2. Turn **right** onto **N Milwaukee Ave / IL-21**. [Map](#)

**1.4 Mi**

*N Milwaukee Ave is 0.2 miles past W Ellis Ave*

*3.4 Mi Total*

*If you are on E Winchester Rd and reach E Ellis Ave you've gone a little too far*



3. **801 S MILWAUKEE AVE** is on the **right**. [Map](#)

*Your destination is 0.1 miles past Coolidge Ave*

*If you reach Valley Park Dr you've gone a little too far*



**801 S Milwaukee Ave, Libertyville, IL 60048-3204**

**Total Travel Estimate: 3.38 miles - about 6 minutes**

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**mapquest**

Trip to:

**1800 Hollister Dr**

Libertyville, IL 60048-5261

5.16 miles / 10 minutes

Notes

Grand Oaks Surgical Center



**1870 W Winchester Rd, Libertyville, IL 60048-5353**

Download  
Free App



1. Start out going east on **W Winchester Rd / County Hwy-69 / County Hwy-A34** toward **Tiffany Ln**. Continue to follow **W Winchester Rd / County Hwy-69**. [Map](#)

**2.0 Mi**  
2.0 Mi Total



**21**

2. Turn right onto **N Milwaukee Ave / IL-21**. [Map](#)  
*N Milwaukee Ave is 0.2 miles past W Ellis Ave  
If you are on E Winchester Rd and reach E Ellis Ave you've gone a little too far*

**2.9 Mi**  
4.9 Mi Total



3. Turn left onto **Hollister Dr**. [Map](#)  
*If you reach E Ring Dr you've gone about 0.5 miles too far*

**0.3 Mi**  
5.2 Mi Total



**1800 Hollister Dr, Libertyville, IL 60048-5261**

Total Travel Estimate: **5.16 miles - about 10 minutes**

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**mapquest**

Trip to:

**240 Center Dr**

Vernon Hills, IL 60061-1518

6.08 miles / 11 minutes

Notes

Hawthorn Place Outpatient Surgery Center



**1870 W Winchester Rd, Libertyville, IL 60048-5353**

Download  
Free App



1. Start out going east on **W Winchester Rd / County Hwy-69 / County Hwy-A34** toward **Tiffany Ln**. Continue to follow **W Winchester Rd / County Hwy-69**. [Map](#)

**2.0 Mi**

*2.0 Mi Total*



**21**

2. Turn right onto **N Milwaukee Ave / IL-21**. [Map](#)

**3.4 Mi**

*N Milwaukee Ave is 0.2 miles past W Ellis Ave*

*5.4 Mi Total*

*If you are on E Winchester Rd and reach E Ellis Ave you've gone a little too far*



3. Turn right onto **E Ring Dr**. [Map](#)

**0.5 Mi**

*If you are on IL-21 and reach Hawthorne Shopping Ctr you've gone about 0.2 miles too far*

*5.9 Mi Total*



4. Turn right onto **Center Dr**. [Map](#)

**0.2 Mi**

*Center Dr is 0.2 miles past N Museum Blvd*

*6.1 Mi Total*

*If you are on Mall Dr and reach E Hawthorn Pkwy you've gone about 0.1 miles too far*



5. **240 CENTER DR** is on the right. [Map](#)

*If you reach Lakeview Pkwy you've gone a little too far*



**240 Center Dr, Vernon Hills, IL 60061-1518**

Total Travel Estimate: **6.08 miles - about 11 minutes**

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Trip to:  
**230 Center Dr**  
 Vernon Hills, IL 60061-1518  
 6.10 miles / 11 minutes

Notes

Ritacca Laser Center



**1870 W Winchester Rd, Libertyville, IL 60048-5353**

Download  
Free App



1. Start out going **east** on **W Winchester Rd / County Hwy-69 / County Hwy-A34** toward **Tiffany Ln**. Continue to follow **W Winchester Rd / County Hwy-69**. [Map](#)

**2.0 Mi**  
2.0 Mi Total



**21**

2. Turn **right** onto **N Milwaukee Ave / IL-21**. [Map](#)  
*N Milwaukee Ave is 0.2 miles past W Ellis Ave  
 If you are on E Winchester Rd and reach E Ellis Ave you've gone a little too far*

**3.4 Mi**  
5.4 Mi Total



3. Turn **right** onto **E Ring Dr**. [Map](#)  
*If you are on IL-21 and reach Hawthorne Shopping Ctr you've gone about 0.2 miles too far*

**0.5 Mi**  
5.9 Mi Total



4. Turn **right** onto **Center Dr**. [Map](#)  
*Center Dr is 0.2 miles past N Museum Blvd  
 If you are on Mall Dr and reach E Hawthorn Pkwy you've gone about 0.1 miles too far*

**0.2 Mi**  
6.1 Mi Total



5. **230 CENTER DR** is on the **right**. [Map](#)  
*If you reach Lakeview Pkwy you've gone a little too far*



**230 Center Dr, Vernon Hills, IL 60061-1518**

**Total Travel Estimate: 6.10 miles - about 11 minutes**

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**mapquest**

Trip to:

**Northshore Endoscopy Center  
101 Waukegan Rd**

Lake Bluff, IL 60044

(847) 604-8700

6.71 miles / 12 minutes

Notes

Lake Bluff Endoscopy Center

- |          |   |                                |
|----------|---|--------------------------------|
| <b>A</b> | <b>1870 W Winchester Rd, Libertyville, IL 60048-5353</b>  | <b>Download<br/>Free App</b>   |
| ●        | 1. Start out going <b>east</b> on <b>W Winchester Rd / County Hwy-69 / County Hwy-A34</b> toward <b>Tiffany Ln</b> . Continue to follow <b>W Winchester Rd / County Hwy-69</b> . <a href="#">Map</a>  | <b>2.0 Mi</b><br>2.0 Mi Total  |
| ➤        | <b>21</b> 2. Turn <b>right</b> onto <b>N Milwaukee Ave / IL-21</b> . <a href="#">Map</a><br><i>N Milwaukee Ave is 0.2 miles past W Ellis Ave<br/>If you are on E Winchester Rd and reach E Ellis Ave you've gone a little too far</i>   | <b>0.8 Mi</b><br>2.8 Mi Total  |
| ↶        | <b>176</b> 3. Turn <b>left</b> onto <b>E Park Ave / IL-176</b> . Continue to follow <b>IL-176</b> . <a href="#">Map</a><br><i>IL-176 is just past Hurburt Ct<br/>Union Oil Inc is on the corner<br/>If you are on S Milwaukee Ave and reach Sunnyside Pl you've gone a little too far</i> | <b>3.8 Mi</b><br>6.6 Mi Total  |
| ➤        | <b>43</b> 4. Turn <b>right</b> onto <b>Waukegan Rd / IL-43</b> . <a href="#">Map</a><br><i>Waukegan Rd is 0.1 miles past Adelpia Ave<br/>Scooters is on the corner<br/>If you reach Thomtree Ln you've gone about 0.1 miles too far</i>   | <b>0.08 Mi</b><br>6.7 Mi Total |
| ■        | 5. <b>101 WAUKEGAN RD</b> is on the <b>left</b> . <a href="#">Map</a><br><i>Your destination is just past Knollwood Rd<br/>If you reach Carriage Park Ln you've gone a little too far</i>   |                                |
| <b>B</b> | <b>Northshore Endoscopy Center</b><br>101 Waukegan Rd, Lake Bluff, IL 60044<br>(847) 604-8700   |                                |

**Total Travel Estimate: 6.71 miles - about 12 minutes**

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**mapquest**

Trip to:

**2615 W Washington St**

Waukegan, IL 60085-4980

11.00 miles / 15 minutes

Notes

Vista Medical Center West

- |          |  |                                       |
|----------|--|---------------------------------------|
| <b>A</b> | <b>1870 W Winchester Rd, Libertyville, IL 60048-5353</b>   | <b>Download<br/>Free App</b>          |
| ●        | 1. Start out going <b>west</b> on <b>W Winchester Rd / County Hwy-69 / County Hwy-A34</b> toward <b>Soccer Rd</b> . <a href="#">Map</a>  | <b>0.5 Mi</b><br><i>0.5 Mi Total</i>  |
| ➤        | 2. Take the 3rd <b>right</b> onto <b>US-45 N / N US Highway 45</b> . <a href="#">Map</a><br><i>US-45 N is 0.1 miles past American Way<br/>If you reach Franklin Blvd you've gone about 0.1 miles too far</i>   | <b>2.8 Mi</b><br><i>3.3 Mi Total</i>  |
| ➤        | 3. Turn <b>right</b> onto <b>Belvidere Rd / IL-120</b> . Continue to follow <b>IL-120</b> . <a href="#">Map</a><br><i>IL-120 is 0.5 miles past Arbor Blvd<br/>If you are on US Highway 45 and reach Country Faire Dr you've gone about 0.1 miles too far</i> | <b>6.6 Mi</b><br><i>9.9 Mi Total</i>  |
| ↶        | 4. Turn <b>left</b> onto <b>S Green Bay Rd / IL-131</b> . <a href="#">Map</a><br><i>S Green Bay Rd is just past Beechnut Ave<br/>Subway is on the corner</i>   | <b>0.8 Mi</b><br><i>10.7 Mi Total</i> |
| ➤        | 5. Turn <b>right</b> onto <b>County Hwy-A22 / Washington St</b> . Continue to follow <b>Washington St</b> . <a href="#">Map</a><br><i>Washington St is just past Jolley Ave</i>  | <b>0.3 Mi</b><br><i>11.0 Mi Total</i> |
| ■        | 6. <b>2615 W WASHINGTON ST</b> . <a href="#">Map</a><br><i>Your destination is just past St Therese Blvd<br/>If you reach N McAree Rd you've gone about 0.1 miles too far</i>  |                                       |



**2615 W Washington St, Waukegan, IL 60085-4980**

**Total Travel Estimate: 11.00 miles - about 15 minutes**

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**mapquest**

Trip to:

**660 N Westmoreland Rd**

Lake Forest, IL 60045

9.01 miles / 16 minutes

Notes

Northwestern Lake Forest Hospital

- |          |  |                                      |
|----------|--|--------------------------------------|
| <b>A</b> | <b>1870 W Winchester Rd, Libertyville, IL 60048-5353</b>   | <b>Download<br/>Free App</b>         |
| ●        | 1. Start out going <b>east</b> on <b>W Winchester Rd / County Hwy-69 / County Hwy-A34</b> toward <b>Tiffany Ln</b> . Continue to follow <b>W Winchester Rd / County Hwy-69</b> . <a href="#">Map</a>   | <b>2.0 Mi</b><br><i>2.0 Mi Total</i> |
| ➡        | <b>21</b> 2. Turn <b>right</b> onto <b>N Milwaukee Ave / IL-21</b> . <a href="#">Map</a><br><i>N Milwaukee Ave is 0.2 miles past W Ellis Ave<br/>If you are on E Winchester Rd and reach E Ellis Ave you've gone a little too far</i>  | <b>0.8 Mi</b><br><i>2.8 Mi Total</i> |
| ⬅        | <b>176</b> 3. Turn <b>left</b> onto <b>E Park Ave / IL-176</b> . Continue to follow <b>IL-176</b> . <a href="#">Map</a><br><i>IL-176 is just past Hurlburt Ct<br/>Union Oil Inc is on the corner<br/>If you are on S Milwaukee Ave and reach Sunnyside Pl you've gone a little too far</i> | <b>3.8 Mi</b><br><i>6.6 Mi Total</i> |
| ➡        | <b>43</b> 4. Turn <b>right</b> onto <b>Waukegan Rd / IL-43</b> . <a href="#">Map</a><br><i>Waukegan Rd is 0.1 miles past Adelpia Ave<br/>Scooters is on the corner<br/>If you reach Thorntree Ln you've gone about 0.1 miles too far</i>   | <b>1.6 Mi</b><br><i>8.2 Mi Total</i> |
| ⬅        | 5. Turn <b>left</b> onto <b>N Westmoreland Rd</b> . <a href="#">Map</a><br><i>If you reach W Summerfield Dr you've gone about 0.2 miles too far</i>  | <b>0.8 Mi</b><br><i>9.0 Mi Total</i> |
| ■        | 6. <b>660 N WESTMORELAND RD</b> . <a href="#">Map</a><br><i>If you reach W Deepath Rd you've gone about 0.4 miles too far</i>  |                                      |
| <b>B</b> | <b>660 N Westmoreland Rd, Lake Forest, IL 60045</b>  |                                      |

**Total Travel Estimate: 9.01 miles - about 16 minutes**

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**mapquest**

Trip to:

**1050 Red Oak Ln**

Lindenhurst, IL 60046-4998

10.55 miles / 17 minutes

Notes

Lindenhurst Surgery Center



**1870 W Winchester Rd, Libertyville, IL 60048-5353**

Download  
Free App

- 1. Start out going west on W Winchester Rd / County Hwy-69 / County Hwy-A34 toward Soccer Rd. [Map](#)**

**0.5 Mi**  
*0.5 Mi Total*
- 2. Take the 3rd right onto US-45 N / N US Highway 45. Continue to follow N US Highway 45. [Map](#)**

*N US Highway 45 is 0.1 miles past American Way  
If you reach Franklin Blvd you've gone about 0.1 miles too far*

**6.2 Mi**  
*6.7 Mi Total*
- 3. Turn left onto W Grand Ave / IL-132. [Map](#)**

*Fogcutter, The is on the corner  
If you are on N US Highway 45 and reach Highfield Dr W you've gone about 0.4 miles too far*

**3.6 Mi**  
*10.4 Mi Total*
- 4. Turn left onto Red Oak Ln. [Map](#)**

*Red Oak Ln is 0.1 miles past E Victory Dr  
BMO Harris Bank is on the corner  
If you reach Woodhead Dr you've gone about 0.1 miles too far*

**0.05 Mi**  
*10.4 Mi Total*
- 5. Turn left to stay on Red Oak Ln. [Map](#)**

*Lake Villa Public Library is on the corner*

**0.1 Mi**  
*10.5 Mi Total*
- 6. 1050 RED OAK LN is on the left. [Map](#)**

*Your destination is just past Red Oak Ln  
If you reach E Victory Dr you've gone a little too far*



**1050 Red Oak Ln, Lindenhurst, IL 60046-4998**

**Total Travel Estimate: 10.55 miles - about 17 minutes**

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**mapquest**

Trip to:

**Advocate Good Shepherd Hospital**  
**450 West Highway 22**

Barrington, IL 60010

(847) 381-0123

11.81 miles / 20 minutes

Notes

Advocate Good Shepherd Hospital



**1870 W Winchester Rd, Libertyville, IL 60048-5353**

Download  
Free App



1. Start out going west on **W Winchester Rd / County Hwy-69 / County Hwy-A34** toward **Soccer Rd.** [Map](#)

**1.3 Mi**  
1.3 Mi Total



2. Turn **left** onto **N Midlothian Rd / County Hwy-48 / County Hwy-V73**. Continue to follow **N Midlothian Rd.** [Map](#)  
*N Midlothian Rd is 0.1 miles past Harris Rd*  
*If you reach Adderley Ln you've gone about 0.1 miles too far*

**7.9 Mi**  
9.2 Mi Total



3. **N Midlothian Rd** becomes **Church St.** [Map](#)

**0.6 Mi**  
9.8 Mi Total



4. Turn **right** onto **E Main St.** [Map](#)

**0.6 Mi**  
10.4 Mi Total



5. Turn **right** onto **W Illinois Route 22 / IL-22**. Continue to follow **IL-22.** [Map](#)  
*IL-22 is just past Robertson Rd*

**1.5 Mi**  
11.8 Mi Total



6. **450 WEST HIGHWAY 22.** [Map](#)  
*Your destination is just past Hewes Dr*  
*If you reach N Saddle Tree Ln you've gone a little too far*



**Advocate Good Shepherd Hospital**  
**450 West Highway 22, Barrington, IL 60010**  
**(847) 381-0123**

**Total Travel Estimate: 11.81 miles - about 20 minutes**

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**mapquest**

Trip to:

**1324 N Sheridan Rd**

Waukegan, IL 60085-2161

13.94 miles / 22 minutes

Notes

Vista Medical Center East

- |          |  |                                       |
|----------|--|---------------------------------------|
| <b>A</b> | <b>1870 W Winchester Rd, Libertyville, IL 60048-5353</b>   | <b>Download<br/>Free App</b>          |
| ●        | 1. Start out going <b>west</b> on <b>W Winchester Rd / County Hwy-69 / County Hwy-A34</b> toward <b>Soccer Rd</b> . <a href="#">Map</a>  | <b>0.5 Mi</b><br><i>0.5 Mi Total</i>  |
| ➤        | 2. Take the 3rd <b>right</b> onto <b>US-45 N / N US Highway 45</b> . <a href="#">Map</a><br><i>US-45 N is 0.1 miles past American Way<br/>If you reach Franklin Blvd you've gone about 0.1 miles too far</i>   | <b>2.8 Mi</b><br><i>3.3 Mi Total</i>  |
| ➤        | 3. Turn <b>right</b> onto <b>Belvidere Rd / IL-120</b> . Continue to follow <b>IL-120</b> . <a href="#">Map</a><br><i>IL-120 is 0.5 miles past Arbor Blvd<br/>If you are on US Highway 45 and reach Country Faire Dr you've gone about 0.1 miles too far</i> | <b>6.7 Mi</b><br><i>10.0 Mi Total</i> |
| ↑        | 4. <b>IL-120</b> becomes <b>Belvidere Rd</b> . <a href="#">Map</a>   | <b>2.3 Mi</b><br><i>12.3 Mi Total</i> |
| ↶        | 5. Turn <b>left</b> onto <b>S Sheridan Rd</b> . <a href="#">Map</a><br><i>If you reach Market St you've gone a little too far</i>  | <b>1.6 Mi</b><br><i>13.9 Mi Total</i> |
| ■        | 6. <b>1324 N SHERIDAN RD</b> is on the <b>left</b> . <a href="#">Map</a><br><i>Your destination is just past W Grove Ave<br/>If you reach Stanley Ave you've gone about 0.1 miles too far</i>  |                                       |

**B** **1324 N Sheridan Rd, Waukegan, IL 60085-2161**

**Total Travel Estimate: 13.94 miles - about 22 minutes**

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**mapquest**

Trip to:

**777 Park Ave W**

Highland Park, IL 60035-2433

16.70 miles / 24 minutes

Notes

Highland Park Hospital



**1870 W Winchester Rd, Libertyville, IL 60048-5353**

Download  
Free App

- 1. Start out going east on W Winchester Rd / County Hwy-69 / County Hwy-A34 toward Tiffany Ln. [Map](#)**

**0.6 Mi**  
0.6 Mi Total
- 2. Take the 3rd left onto N Butterfield Rd / County Hwy-57 / County Hwy-W11. [Map](#)**

*N Butterfield Rd is 0.1 miles past Lucerne Ln  
If you reach Pine Meadow Ct you've gone a little too far*

**0.7 Mi**  
1.3 Mi Total
- 3. Turn right onto W Peterson Rd / IL-137. Continue to follow IL-137. [Map](#)**

*IL-137 is 0.1 miles past Old Barn Cir  
If you reach Old Peterson Rd you've gone a little too far*

**5.6 Mi**  
6.9 Mi Total
- 4. Turn right onto N Skokie Hwy / US-41 S. Continue to follow US-41 S. [Map](#)**

*US-41 S is just past Frontenac St  
Days Inn Great Lakes - N.Chicago is on the corner  
If you are on Buckley Rd and reach Mississippi St you've gone about 0.1 miles too far*

**8.9 Mi**  
15.8 Mi Total
- 5. Turn left onto Park Ave W. [Map](#)**

*Park Ave W is 0.8 miles past Half Day Rd  
Shell is on the corner*

**0.9 Mi**  
16.7 Mi Total
- 6. 777 PARK AVE W is on the left. [Map](#)**

*Your destination is just past Exmoor Ave  
If you reach Midlothian Ave you've gone a little too far*



**777 Park Ave W, Highland Park, IL 60035-2433**

**Total Travel Estimate: 16.70 miles - about 24 minutes**

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Trip to:  
**600 Hart Rd**  
 Barrington, IL 60010-2603  
 17.47 miles / 26 minutes

Notes

Barrington Pain and Spine Institute

- |          |  | Download<br>Free App           |
|----------|--|--------------------------------|
| <b>A</b> | <b>1870 W Winchester Rd, Libertyville, IL 60048-5353</b>   |                                |
| ●        | 1. Start out going west on <b>W Winchester Rd / County Hwy-69 / County Hwy-A34</b> toward <b>Soccer Rd.</b> <a href="#">Map</a>  | <b>1.9 Mi</b><br>1.9 Mi Total  |
| ↩        | 2. Turn left onto <b>N IL Route 83 / IL-83.</b> <a href="#">Map</a>  | <b>1.5 Mi</b><br>3.5 Mi Total  |
| ↑        | 3. Stay straight to go onto <b>Schank Ave.</b> <a href="#">Map</a>   | <b>0.1 Mi</b><br>3.6 Mi Total  |
| ↪        | 4. Take the 1st right onto <b>W IL Route 176 / IL-176.</b> Continue to follow <b>IL-176.</b> <a href="#">Map</a>   | <b>5.4 Mi</b><br>9.0 Mi Total  |
| ↩        | 5. Turn left onto <b>Barrington Rd.</b> <a href="#">Map</a><br><i>Barrington Rd is just past S Main St<br/>If you are on W Liberty St and reach S Church St you've gone a little too far</i>   | <b>0.7 Mi</b><br>9.7 Mi Total  |
| ↑        | 6. <b>Barrington Rd</b> becomes <b>IL-59.</b> <a href="#">Map</a>  | <b>6.4 Mi</b><br>16.1 Mi Total |
| ↪        | 7. Turn right onto <b>W Northwest Hwy / US-14 W.</b> <a href="#">Map</a><br><i>W Northwest Hwy is just past Elm Rd<br/>CIRCLE K is on the right<br/>If you are on N Hough St and reach Lions Dr you've gone a little too far</i>                       | <b>1.1 Mi</b><br>17.2 Mi Total |
| ↩        | 8. Turn left onto <b>Hart Rd.</b> <a href="#">Map</a><br><i>Hart Rd is 0.2 miles past W Old Northwest Hwy<br/>Barrington Country Bistro is on the corner<br/>If you are on W Northwest Hwy and reach N 20th St you've gone about 0.2 miles too far</i> | <b>0.3 Mi</b><br>17.5 Mi Total |
| ■        | 9. <b>600 HART RD</b> is on the right. <a href="#">Map</a><br><i>Your destination is 0.2 miles past Oakwood Dr<br/>If you reach W County Line Rd you've gone about 0.5 miles too far</i>   |                                |
| <b>B</b> | <b>600 Hart Rd, Barrington, IL 60010-2603</b>  |                                |

**Total Travel Estimate: 17.47 miles - about 26 minutes**

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**mapquest**

Trip to:

**2100 Pfingsten Rd**

Glenview, IL 60026-1301

20.03 miles / 26 minutes

Notes

Glenbrook Hospital



**1870 W Winchester Rd, Libertyville, IL 60048-5353**

Download  
Free App



1. Start out going **east** on **W Winchester Rd / County Hwy-69 / County Hwy-A34** toward **Tiffany Ln**. Continue to follow **W Winchester Rd / County Hwy-69**. [Map](#)

**2.0 Mi**  
2.0 Mi Total



2. Turn **right** onto **N Milwaukee Ave / IL-21**. [Map](#)  
*N Milwaukee Ave is 0.2 miles past W Ellis Ave  
If you are on E Winchester Rd and reach E Ellis Ave you've gone a little too far*

**0.8 Mi**  
2.8 Mi Total



3. Turn **left** onto **E Park Ave / IL-176**. Continue to follow **IL-176**. [Map](#)  
*IL-176 is just past Hurlburt Ct  
Union Oil Inc is on the corner  
If you are on S Milwaukee Ave and reach Sunnyside Pl you've gone a little too far*

**2.0 Mi**  
4.8 Mi Total



4. Merge onto **I-94 E / Tri State Tollway S** via the ramp on the **left** (Portions toll). [Map](#)

**9.3 Mi**  
14.1 Mi Total



5. Keep **right** to take **I-294 S / Tri State Tollway S** toward **Indiana / O'Hare** (Portions toll). [Map](#)

**3.6 Mi**  
17.7 Mi Total



6. Take the **Willow Rd** exit. [Map](#)

**0.4 Mi**  
18.1 Mi Total



7. Keep **left** to take the ramp toward **NORTHBROOK / GLENVIEW**. [Map](#)

**0.04 Mi**  
18.1 Mi Total



8. Turn **left** onto **Willow Rd**. [Map](#)

**1.0 Mi**  
19.1 Mi Total



9. Turn **right** onto **Pfingsten Rd**. [Map](#)  
*Pfingsten Rd is 0.2 miles past Charlie Ct  
Blufish Sushi Bistro is on the corner  
If you reach Quail Ln you've gone about 0.2 miles too far*

**0.9 Mi**  
20.0 Mi Total



10. **2100 PFINGSTEN RD**. [Map](#)  
*Your destination is 0.1 miles past Brett Ln  
If you reach Glenlake Dr you've gone a little too far*



**2100 Pfingsten Rd, Glenview, IL 60026-1301**

Total Travel Estimate: **20.03 miles - about 26 minutes**

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**mapquest**

Trip to:

**Centegra Health System**  
**4201 W Medical Center Dr**

Mchenry, IL 60050  
 (877) 236-8347

18.59 miles / 28 minutes

Notes

Centegra Hospital McHenry

- |          |  |                              |
|----------|--|------------------------------|
| <b>A</b> | <b>1870 W Winchester Rd, Libertyville, IL 60048-5353</b>   | <b>Download<br/>Free App</b> |
| ●        | 1. Start out going west on <b>W Winchester Rd / County Hwy-69 / County Hwy-A34</b> toward <b>Soccer Rd</b> . <a href="#">Map</a>   | 1.9 Mi<br>1.9 Mi Total       |
| ↩        | 2. Turn left onto <b>N IL Route 83 / IL-83</b> . <a href="#">Map</a>   | 1.5 Mi<br>3.5 Mi Total       |
| ↪        | 3. Turn right onto <b>W IL Route 60 / IL-60</b> . <a href="#">Map</a><br><i>W IL Route 60 is just past W Maple Ave<br/>If you are on Schank Ave and reach W IL Route 176 you've gone about 0.1 miles too far</i> | 6.7 Mi<br>10.2 Mi Total      |
| ↩        | 4. Turn left onto <b>W Belvidere Rd / IL-120</b> . Continue to follow <b>IL-120</b> . <a href="#">Map</a>  | 4.7 Mi<br>14.9 Mi Total      |
| ↩        | 5. Turn left onto <b>N Chapel Hill Rd</b> . <a href="#">Map</a><br><i>N Chapel Hill Rd is 0.4 miles past N Hill Rd<br/>SHELL is on the right<br/>If you reach Farm Ln you've gone about 0.1 miles too far</i>    | 0.7 Mi<br>15.6 Mi Total      |
| ↑        | 6. <b>N Chapel Hill Rd</b> becomes <b>N River Rd</b> . <a href="#">Map</a>   | 0.8 Mi<br>16.5 Mi Total      |
| ↪        | 7. Turn right onto <b>Charles J Miller Rd</b> . <a href="#">Map</a><br><i>Charles J Miller Rd is just past Brefeld Ct<br/>If you reach Ford Rd you've gone about 0.1 miles too far</i>                           | 1.2 Mi<br>17.7 Mi Total      |
| ↑        | 8. <b>Charles J Miller Rd</b> becomes <b>Bull Valley Rd</b> . <a href="#">Map</a>  | 0.8 Mi<br>18.4 Mi Total      |
| ↩        | 9. Turn left onto <b>Ridgeview Dr</b> . <a href="#">Map</a><br><i>Ridgeview Dr is 0.3 miles past Lawrence Pkwy<br/>If you reach Kresswood Dr you've gone about 0.3 miles too far</i>                             | 0.2 Mi<br>18.6 Mi Total      |
| ↩        | 10. Take the 1st left onto <b>W Medical Center Dr</b> . <a href="#">Map</a><br><i>If you reach Century Ct you've gone about 0.1 miles too far</i>  | 0.01 Mi<br>18.6 Mi Total     |
| ■        | 11. <b>4201 W MEDICAL CENTER DR</b> . <a href="#">Map</a><br><i>If you are on Centegra Dr and reach Gladstone Dr you've gone about 0.3 miles too far</i>   |                              |
| <b>B</b> | <b>Centegra Health System</b><br>4201 W Medical Center Dr, Mchenry, IL 60050<br>(877) 236-8347   |                              |

**Total Travel Estimate: 18.59 miles - about 28 minutes**

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Notes  
The Glen Endoscopy Center

Trip to:  
**2551 Compass Rd**  
Glenview, IL 60026-8003  
21.12 miles / 28 minutes

- |  |   |                              |
|--|---|------------------------------|
|  | <b>1870 W Winchester Rd, Libertyville, IL 60048-5353</b>  | <b>Download<br/>Free App</b> |
|  | 1. Start out going <b>east</b> on <b>W Winchester Rd / County Hwy-69 / County Hwy-A34</b> toward <b>Tiffany Ln</b> . Continue to follow <b>W Winchester Rd / County Hwy-69</b> . <a href="#">Map</a>  | 2.0 Mi<br>2.0 Mi Total       |
|  | 2. Turn <b>right</b> onto <b>N Milwaukee Ave / IL-21</b> . <a href="#">Map</a><br><i>N Milwaukee Ave is 0.2 miles past W Ellis Ave<br/>If you are on E Winchester Rd and reach E Ellis Ave you've gone a little too far</i>   | 0.8 Mi<br>2.8 Mi Total       |
|  | 3. Turn <b>left</b> onto <b>E Park Ave / IL-176</b> . Continue to follow <b>IL-176</b> . <a href="#">Map</a><br><i>IL-176 is just past Hurlburt Ct<br/>Union Oil Inc is on the corner<br/>If you are on S Milwaukee Ave and reach Sunnyside Pl you've gone a little too far</i> | 2.0 Mi<br>4.8 Mi Total       |
|  | 4. Merge onto <b>I-94 E / Tri State Tollway S</b> via the ramp on the <b>left</b> (Portions toll). <a href="#">Map</a>  | 9.3 Mi<br>14.1 Mi Total      |
|  | 5. Keep <b>right</b> to take <b>I-294 S / Tri State Tollway S</b> toward <b>Indiana / O'Hare</b> (Portions toll). <a href="#">Map</a>   | 3.6 Mi<br>17.7 Mi Total      |
|  | 6. Take the <b>Willow Rd</b> exit. <a href="#">Map</a>  | 0.4 Mi<br>18.1 Mi Total      |
|  | 7. Keep <b>left</b> to take the ramp toward <b>NORTHBROOK / GLENVIEW</b> . <a href="#">Map</a>  | 0.04 Mi<br>18.1 Mi Total     |
|  | 8. Turn <b>left</b> onto <b>Willow Rd</b> . <a href="#">Map</a>   | 2.3 Mi<br>20.3 Mi Total      |
|  | 9. Turn <b>right</b> onto <b>Patriot Blvd</b> . <a href="#">Map</a><br><i>Patriot Blvd is 0.2 miles past Shenner Rd</i>   | 0.6 Mi<br>20.9 Mi Total      |
|  | 10. Turn <b>left</b> onto <b>Compass Rd</b> . <a href="#">Map</a><br><i>Compass Rd is 0.3 miles past Lehigh Ave<br/>Koolau Baptist Church is on the corner</i>  | 0.2 Mi<br>21.1 Mi Total      |
|  | 11. <b>2551 COMPASS RD</b> is on the <b>right</b> . <a href="#">Map</a><br><i>If you reach Lehigh Ave you've gone about 0.1 miles too far</i>   |                              |
|  | <b>2551 Compass Rd, Glenview, IL 60026-8003</b>   |                              |

Total Travel Estimate: **21.12 miles - about 28 minutes**

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**mapquest**

Trip to:

**8901 Golf Rd**

Des Plaines, IL 60016-4016

23.02 miles / 28 minutes

Notes

Golf Surgical Center

- |            |  |  |
|------------|--|--|
| <b>A</b>   | <b>1870 W Winchester Rd, Libertyville, IL 60048-5353</b>   | <b>Download<br/>Free App</b>           |
| ●          | 1. Start out going <b>east</b> on <b>W Winchester Rd / County Hwy-69 / County Hwy-A34</b> toward <b>Tiffany Ln</b> . Continue to follow <b>W Winchester Rd / County Hwy-69</b> . <a href="#">Map</a>   | <b>2.0 Mi</b><br><i>2.0 Mi Total</i>   |
| ➔          | <b>21</b> 2. Turn <b>right</b> onto <b>N Milwaukee Ave / IL-21</b> . <a href="#">Map</a><br><i>N Milwaukee Ave is 0.2 miles past W Ellis Ave<br/>If you are on E Winchester Rd and reach E Ellis Ave you've gone a little too far</i>  | <b>0.8 Mi</b><br><i>2.8 Mi Total</i>   |
| ➤          | <b>176</b> 3. Turn <b>left</b> onto <b>E Park Ave / IL-176</b> . Continue to follow <b>IL-176</b> . <a href="#">Map</a><br><i>IL-176 is just past Hurlburt Ct<br/>Union Oil Inc is on the corner<br/>If you are on S Milwaukee Ave and reach Sunnyside Pl you've gone a little too far</i> | <b>2.0 Mi</b><br><i>4.8 Mi Total</i>   |
| ⬆️         | <b>EAST</b><br><b>94</b> 4. Merge onto <b>I-94 E / Tri State Tollway S</b> via the ramp on the <b>left</b> (Portions toll). <a href="#">Map</a>  | <b>9.3 Mi</b><br><i>14.1 Mi Total</i>  |
| ➤          | <b>SOUTH</b><br><b>294</b> 5. Keep <b>right</b> to take <b>I-294 S / Tri State Tollway S</b> toward <b>Indiana / O'Hare</b> (Portions toll). <a href="#">Map</a>   | <b>7.1 Mi</b><br><i>21.3 Mi Total</i>  |
| EXIT<br>⬇️ | 6. Take the exit toward <b>ROUTE 58 / Golf Rd</b> . <a href="#">Map</a>  | <b>0.5 Mi</b><br><i>21.7 Mi Total</i>  |
| ➤          | 7. Turn <b>left</b> onto <b>N East River Rd</b> . <a href="#">Map</a>  | <b>0.1 Mi</b><br><i>21.8 Mi Total</i>  |
| ➤          | <b>58</b> 8. Turn <b>left</b> onto <b>E Golf Rd / IL-58</b> . <a href="#">Map</a>  | <b>1.1 Mi</b><br><i>23.0 Mi Total</i>  |
| ➤          | <b>58</b> 9. Make a <b>U-turn</b> at <b>David Pl</b> onto <b>Golf Rd / IL-58</b> . <a href="#">Map</a><br><i>If you reach N Western Ave you've gone about 0.1 miles too far</i>  | <b>0.05 Mi</b><br><i>23.0 Mi Total</i> |
| ■          | 10. <b>8901 GOLF RD</b> . <a href="#">Map</a><br><i>If you reach Steven Dr you've gone a little too far</i>  |  |
| <b>B</b>   | <b>8901 Golf Rd, Des Plaines, IL 60016-4016</b>  |  |

**Total Travel Estimate: 23.02 miles - about 28 minutes**

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**mapquest**

Trip to:

**Foot and Ankle Surgical Center**  
**1455 E Golf Rd**

Des Plaines, IL 60016

(847) 627-4973

23.02 miles / 28 minutes

Notes

Foot and Ankle Surgical Center



**1870 W Winchester Rd, Libertyville, IL 60048-5353**

Download  
Free App

- 1. Start out going **east** on **W Winchester Rd / County Hwy-69 / County Hwy-A34** toward **Tiffany Ln**. Continue to follow **W Winchester Rd / County Hwy-69**. [Map](#)

**2.0 Mi**  
2.0 Mi Total
- 2. Turn **right** onto **N Milwaukee Ave / IL-21**. [Map](#)

*N Milwaukee Ave is 0.2 miles past W Ellis Ave*  
*If you are on E Winchester Rd and reach E Ellis Ave you've gone a little too far*

**0.8 Mi**  
2.8 Mi Total
- 3. Turn **left** onto **E Park Ave / IL-176**. Continue to follow **IL-176**. [Map](#)

*IL-176 is just past Hurlburt Ct*  
*Union Oil Inc is on the corner*  
*If you are on S Milwaukee Ave and reach Sunnyside Pl you've gone a little too far*

**2.0 Mi**  
4.8 Mi Total
- 4. Merge onto **I-94 E / Tri State Tollway S** via the ramp on the left (Portions toll). [Map](#)

**9.3 Mi**  
14.1 Mi Total
- 5. Keep **right** to take **I-294 S / Tri State Tollway S** toward **Indiana / O'Hare** (Portions toll). [Map](#)

**7.1 Mi**  
21.3 Mi Total
- 6. Take the exit toward **ROUTE 58 / Golf Rd**. [Map](#)

**0.5 Mi**  
21.7 Mi Total
- 7. Turn **left** onto **N East River Rd**. [Map](#)

**0.10 Mi**  
21.8 Mi Total
- 8. Take the 1st **right** onto **E Golf Rd / IL-58**. [Map](#)

**1.1 Mi**  
22.9 Mi Total
- 9. Make a **U-turn** onto **E Golf Rd / IL-58**. [Map](#)

*If you reach Nazareth Way you've gone a little too far*

**0.1 Mi**  
23.0 Mi Total
- 10. **1455 E GOLF RD**. [Map](#)

*Your destination is just past Mary St*  
*If you reach N River Rd you've gone a little too far*



**Foot and Ankle Surgical Center**  
**1455 E Golf Rd, Des Plaines, IL 60016**  
**(847) 627-4973**

Total Travel Estimate: **23.02 miles - about 28 minutes**

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**mapquest**

Trip to:

**2350 Ravine Way**

Glenview, IL 60025-7626

21.11 miles / 29 minutes

Notes

Ravine Way Surgery Center



**1870 W Winchester Rd, Libertyville, IL 60048-5353**

Download  
Free App

- 1. Start out going **east** on **W Winchester Rd / County Hwy-69 / County Hwy-A34** toward **Tiffany Ln**. Continue to follow **W Winchester Rd / County Hwy-69**. [Map](#)

**2.0 Mi**  
2.0 Mi Total
- 2. Turn **right** onto **N Milwaukee Ave / IL-21**. [Map](#)  
*N Milwaukee Ave is 0.2 miles past W Ellis Ave  
If you are on E Winchester Rd and reach E Ellis Ave you've gone a little too far*

**0.8 Mi**  
2.8 Mi Total
- 3. Turn **left** onto **E Park Ave / IL-176**. Continue to follow **IL-176**. [Map](#)  
*IL-176 is just past Hurburt Ct  
Union Oil Inc is on the corner  
If you are on S Milwaukee Ave and reach Sunnyside Pl you've gone a little too far*

**2.0 Mi**  
4.8 Mi Total
- ↑↑

4. Merge onto **I-94 E / Tri State Tollway S** via the ramp on the **left** (Portions toll). [Map](#)

**9.3 Mi**  
14.1 Mi Total
- 5. Keep **left** to take **I-94 E / Tri State Tollway S** toward **Edens Expy / Chicago** (Portions toll). [Map](#)

**2.5 Mi**  
16.6 Mi Total
- EXIT

6. Take the **IL-43 / Waukegan Rd** exit. [Map](#)

**0.2 Mi**  
16.8 Mi Total
- ↑↑

7. Merge onto **IL-43 / Waukegan Rd**. [Map](#)

**3.1 Mi**  
19.9 Mi Total
- 8. Turn **right** onto **Willow Rd**. [Map](#)  
*Willow Rd is 0.2 miles past Three Lakes Dr*

**0.6 Mi**  
20.6 Mi Total
- 9. Turn **left** onto **Ravine Way**. [Map](#)  
*Ravine Way is 0.2 miles past Founders Dr  
If you reach Old Willow Rd you've gone about 0.1 miles too far*

**0.6 Mi**  
21.1 Mi Total
- 10. **2350 RAVINE WAY** is on the **right**. [Map](#)  
*Your destination is 0.1 miles past Ridge Dr  
If you reach Claire Ct you've gone a little too far*



**2350 Ravine Way, Glenview, IL 60025-7626**

Total Travel Estimate: **21.11 miles - about 29 minutes**

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**mapquest**

Trip to:

**1775 Dempster St**

Park Ridge, IL 60068-1143

23.80 miles / 30 minutes

Notes

Advocate Lutheran General Hospital

- |          |  | Download<br>Free App           |
|----------|--|--------------------------------|
| <b>A</b> | <b>1870 W Winchester Rd, Libertyville, IL 60048-5353</b>   |                                |
| ●        | 1. Start out going <b>east</b> on <b>W Winchester Rd / County Hwy-69 / County Hwy-A34</b> toward <b>Tiffany Ln</b> . Continue to follow <b>W Winchester Rd / County Hwy-69</b> . <a href="#">Map</a>   | <b>2.0 Mi</b><br>2.0 Mi Total  |
| ➔        | 2. Turn <b>right</b> onto <b>N Milwaukee Ave / IL-21</b> . <a href="#">Map</a><br><i>N Milwaukee Ave is 0.2 miles past W Ellis Ave<br/>If you are on E Winchester Rd and reach E Ellis Ave you've gone a little too far</i>  | <b>0.8 Mi</b><br>2.8 Mi Total  |
| ➤        | 3. Turn <b>left</b> onto <b>E Park Ave / IL-176</b> . Continue to follow <b>IL-176</b> . <a href="#">Map</a><br><i>IL-176 is just past Hurburt Ct<br/>Union Oil Inc is on the corner<br/>If you are on S Milwaukee Ave and reach Sunnyside Pl you've gone a little too far</i> | <b>2.0 Mi</b><br>4.8 Mi Total  |
| ⬆        | 4. Merge onto <b>I-94 E / Tri State Tollway S</b> via the ramp on the <b>left</b> (Portions toll). <a href="#">Map</a>   | <b>9.3 Mi</b><br>14.1 Mi Total |
| ➤        | 5. Keep <b>right</b> to take <b>I-294 S / Tri State Tollway S</b> toward <b>Indiana / O'Hare</b> (Portions toll). <a href="#">Map</a>  | <b>7.1 Mi</b><br>21.3 Mi Total |
| EXIT     | 6. Take the exit toward <b>ROUTE 58 / Golf Rd</b> . <a href="#">Map</a>  | <b>0.5 Mi</b><br>21.7 Mi Total |
| ➤        | 7. Turn <b>left</b> onto <b>N East River Rd</b> . <a href="#">Map</a>  | <b>0.1 Mi</b><br>21.8 Mi Total |
| ⬆        | 8. <b>N East River Rd</b> becomes <b>Bender Rd</b> . <a href="#">Map</a>   | <b>0.7 Mi</b><br>22.5 Mi Total |
| ➤        | 9. Turn <b>left</b> onto <b>E Ballard Rd</b> . <a href="#">Map</a>   | <b>0.6 Mi</b><br>23.1 Mi Total |
| ➔        | 10. Take the 2nd <b>right</b> onto <b>Potter Rd</b> . <a href="#">Map</a><br><i>Potter Rd is 0.1 miles past Good Ave<br/>7-Eleven is on the right<br/>If you are on W Ballard Rd and reach Landings Ln you've gone a little too far</i>  | <b>0.3 Mi</b><br>23.3 Mi Total |
| ➤        | 11. Take the 2nd <b>left</b> onto <b>E Dempster St / US-14 E</b> . <a href="#">Map</a><br><i>E Dempster St is 0.1 miles past Prairie Ave<br/>If you reach Evergreen Ln you've gone a little too far</i>  | <b>0.5 Mi</b><br>23.8 Mi Total |
| ■        | 12. <b>1775 DEMPSTER ST</b> . <a href="#">Map</a><br><i>Your destination is just past Vernon Ave<br/>If you reach Luther Ln you've gone a little too far</i>   |                                |
| <b>B</b> | <b>1775 Dempster St, Park Ridge, IL 60068-1143</b>   |                                |

**Total Travel Estimate: 23.80 miles - about 30 minutes**

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**mapquest**

Trip to:  
**2520 Elisha Ave**  
 Zion, IL 60099-2676  
 18.87 miles / 31 minutes

Notes

Midwestern Regional Medical Center



**1870 W Winchester Rd, Libertyville, IL 60048-5353**

Download  
Free App

- 1. Start out going east on **W Winchester Rd / County Hwy-69 / County Hwy-A34** toward **Tiffany Ln**. [Map](#)

**0.6 Mi**  
0.6 Mi Total
- ↩

2. Take the 3rd left onto **N Butterfield Rd / County Hwy-57 / County Hwy-W11**. [Map](#)  
*N Butterfield Rd is 0.1 miles past Lucerne Ln  
 If you reach Pine Meadow Ct you've gone a little too far*

**0.7 Mi**  
1.3 Mi Total
- ↪

3. Turn right onto **W Peterson Rd / IL-137**. [Map](#)  
*W Peterson Rd is 0.1 miles past Old Barn Cir  
 If you reach Old Peterson Rd you've gone a little too far*

**1.2 Mi**  
2.5 Mi Total
- ↩

4. Turn left onto **N Milwaukee Ave / IL-21**. Continue to follow **IL-21**. [Map](#)  
*IL-21 is 0.4 miles past Martin Dr*

**6.3 Mi**  
8.8 Mi Total
- ↩

5. Turn left onto **N Skokie Hwy / US-41 N**. Continue to follow **US-41 N**. [Map](#)

**2.9 Mi**  
11.7 Mi Total
- ↪

6. Turn right onto **W Wadsworth Rd / County Hwy-17 / County Hwy-A9**. Continue to follow **W Wadsworth Rd**. [Map](#)  
*If you reach W Kelly Rd you've gone about 1.0 mile too far*

**5.7 Mi**  
17.4 Mi Total
- ↩

7. Turn left onto **N Sheridan Rd / IL-137**. [Map](#)  
*N Sheridan Rd is 0.1 miles past N Geraghty Ave  
 McDonald's is on the corner  
 If you are on Illinois Beach State Park and reach Beach Rd you've gone about 1.1 miles too far*

**1.4 Mi**  
18.8 Mi Total
- ↩

8. Turn left onto **Shiloh Blvd**. [Map](#)  
*Shiloh Blvd is 0.1 miles past 26th St  
 Mobil is on the left  
 If you reach 24th you've gone about 0.1 miles too far*

**0.07 Mi**  
18.8 Mi Total
- ↩

9. Take the 1st left onto **Elisha Ave**. [Map](#)  
*If you reach Emmaus Ave you've gone a little too far*

**0.04 Mi**  
18.9 Mi Total
- 10. **2520 ELISHA AVE**. [Map](#)  
*If you reach 26th St you've gone a little too far*



**2520 Elisha Ave, Zion, IL 60099-2676**

Total Travel Estimate: **18.87 miles - about 31 minutes**

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Trip to:

**800 W Central Rd**

Arlington Heights, IL 60005-2349

17.52 miles / 32 minutes

Notes

Northwest Community Hospital

- |          |  |                                       |
|----------|--|---------------------------------------|
| <b>A</b> | <b>1870 W Winchester Rd, Libertyville, IL 60048-5353</b>   | <b>Download<br/>Free App</b>          |
| ●        | 1. Start out going west on W Winchester Rd / County Hwy-69 / County Hwy-A34 toward Soccer Rd. <a href="#">Map</a>  | <b>0.5 Mi</b><br><i>0.5 Mi Total</i>  |
| ↩        | 2. Take the 2nd left onto N US Highway 45 / US-45 S. Continue to follow US-45 S. <a href="#">Map</a><br><i>US-45 S is just past N US Highway 45<br/>If you reach Franklin Blvd you've gone about 0.1 miles too far</i> | <b>4.4 Mi</b><br><i>4.9 Mi Total</i>  |
| ↑        | 3. US-45 S becomes IL-83. <a href="#">Map</a>  | <b>4.4 Mi</b><br><i>9.3 Mi Total</i>  |
| ↘        | 4. Turn right onto N Arlington Heights Rd / County Hwy-V69. Continue to follow N Arlington Heights Rd. <a href="#">Map</a><br><i>N Arlington Heights Rd is 0.1 miles past IL-53</i>                                    | <b>7.6 Mi</b><br><i>16.9 Mi Total</i> |
| ↘        | 5. Turn right onto E Central Rd. <a href="#">Map</a><br><i>E Central Rd is 0.1 miles past E Orchard St<br/>If you reach E Magnolia St you've gone about 0.1 miles too far</i>  | <b>0.6 Mi</b><br><i>17.5 Mi Total</i> |
| ■        | 6. <b>800 W CENTRAL RD</b> is on the right. <a href="#">Map</a><br><i>Your destination is just past S Fernandez Ave<br/>If you reach S Dwyer Ave you've gone about 0.3 miles too far</i>                               |                                       |
| <b>B</b> | <b>800 W Central Rd, Arlington Heights, IL 60005-2349</b>  |                                       |

**Total Travel Estimate: 17.52 miles - about 32 minutes**

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**mapquest**

Trip to:

**Northwest Community Hospital**  
**675 W Kirchhoff Rd**  
 Arlington Heights, IL 60005  
 (847) 618-7000  
 17.53 miles / 32 minutes

Notes

Northwest Community Day Surgery

- |  |   |                                 |
|--|---|---------------------------------|
|  | <b>1870 W Winchester Rd, Libertyville, IL 60048-5353</b>  | <b>Download<br/>Free App</b>    |
|  | 1. Start out going <b>west</b> on <b>W Winchester Rd / County Hwy-69 / County Hwy-A34</b> toward <b>Soccer Rd.</b> <a href="#">Map</a>  | <b>0.5 Mi</b><br>0.5 Mi Total   |
|  | 2. Take the 2nd <b>left</b> onto <b>N US Highway 45 / US-45 S</b> . Continue to follow <b>US-45 S</b> . <a href="#">Map</a><br><i>US-45 S is just past N US Highway 45<br/>If you reach Franklin Blvd you've gone about 0.1 miles too far</i> | <b>4.4 Mi</b><br>4.9 Mi Total   |
|  | 3. <b>US-45 S</b> becomes <b>IL-83</b> . <a href="#">Map</a>  | <b>4.4 Mi</b><br>9.3 Mi Total   |
|  | 4. Turn <b>right</b> onto <b>N Arlington Heights Rd / County Hwy-V69</b> . Continue to follow <b>N Arlington Heights Rd</b> . <a href="#">Map</a><br><i>N Arlington Heights Rd is 0.1 miles past IL-53</i>                                    | <b>7.6 Mi</b><br>16.9 Mi Total  |
|  | 5. Turn <b>right</b> onto <b>E Central Rd</b> . <a href="#">Map</a><br><i>E Central Rd is 0.1 miles past E Orchard St<br/>If you reach E Magnolia St you've gone about 0.1 miles too far</i>  | <b>0.09 Mi</b><br>17.0 Mi Total |
|  | 6. Turn <b>slight right</b> onto <b>W Kirchhoff Rd</b> . <a href="#">Map</a>  | <b>0.5 Mi</b><br>17.5 Mi Total  |
|  | 7. <b>675 W KIRCHHOFF RD</b> . <a href="#">Map</a><br><i>Your destination is just past Fernandez Ave<br/>If you reach S Fernandez Ave you've gone a little too far</i>  |                                 |

**B Northwest Community Hospital**  
 Other Surgery  
 675 W Kirchhoff Rd, Arlington Heights, IL 60005  
 (847) 618-7000

**Total Travel Estimate: 17.53 miles - about 32 minutes**

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**mapquest**

Trip to:

**1100 W Central Rd**

Arlington Heights, IL 60005-2401

17.69 miles / 32 minutes

Notes

Northwest Surgicare

- |          |   |                                       |
|----------|---|---------------------------------------|
| <b>A</b> | <b>1870 W Winchester Rd, Libertyville, IL 60048-5353</b>  | <b>Download<br/>Free App</b>          |
| ●        | 1. Start out going <b>west</b> on <b>W Winchester Rd / County Hwy-69 / County Hwy-A34</b> toward <b>Soccer Rd.</b> <a href="#">Map</a>  | <b>0.5 Mi</b><br><i>0.5 Mi Total</i>  |
| ↩        | 2. Take the 2nd <b>left</b> onto <b>N US Highway 45 / US-45 S</b> . Continue to follow <b>US-45 S</b> . <a href="#">Map</a><br><i>US-45 S is just past N US Highway 45<br/>If you reach Franklin Blvd you've gone about 0.1 miles too far</i> | <b>4.4 Mi</b><br><i>4.9 Mi Total</i>  |
| ↑        | 3. <b>US-45 S</b> becomes <b>IL-83</b> . <a href="#">Map</a>  | <b>4.4 Mi</b><br><i>9.3 Mi Total</i>  |
| ↘        | 4. Turn <b>right</b> onto <b>N Arlington Heights Rd / County Hwy-V69</b> . Continue to follow <b>N Arlington Heights Rd</b> . <a href="#">Map</a><br><i>N Arlington Heights Rd is 0.1 miles past IL-53</i>                                    | <b>7.6 Mi</b><br><i>16.9 Mi Total</i> |
| ↘        | 5. Turn <b>right</b> onto <b>E Central Rd</b> . <a href="#">Map</a><br><i>E Central Rd is 0.1 miles past E Orchard St<br/>If you reach E Magnolia St you've gone about 0.1 miles too far</i>  | <b>0.8 Mi</b><br><i>17.7 Mi Total</i> |
| ■        | 6. <b>1100 W CENTRAL RD</b> . <a href="#">Map</a><br><i>Your destination is 0.2 miles past S Fernandez Ave<br/>If you reach S Dwyer Ave you've gone about 0.1 miles too far</i>   |                                       |
| <b>B</b> | <b>1100 W Central Rd, Arlington Heights, IL 60005-2401</b>  |                                       |

**Total Travel Estimate: 17.69 miles - about 32 minutes**

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Notes  
Algonquin Road Surgery Center

Trip to:  
**2550 Algonquin Rd**  
Lake In The Hills, IL 60102  
19.66 miles / 32 minutes

		Download Free App
	<b>1870 W Winchester Rd, Libertyville, IL 60048-5353</b>	
●	1. Start out going <b>west</b> on <b>W Winchester Rd / County Hwy-69 / County Hwy-A34</b> toward <b>Soccer Rd.</b> <a href="#">Map</a>	<b>1.9 Mi</b> 1.9 Mi Total
↩	2. Turn <b>left</b> onto <b>N IL Route 83 / IL-83.</b> <a href="#">Map</a>	<b>1.5 Mi</b> 3.5 Mi Total
↑	3. Stay <b>straight</b> to go onto <b>Schank Ave.</b> <a href="#">Map</a>	<b>0.1 Mi</b> 3.6 Mi Total
↘	4. Take the 1st <b>right</b> onto <b>W IL Route 176 / IL-176.</b> Continue to follow <b>IL-176.</b> <a href="#">Map</a>	<b>5.4 Mi</b> 9.0 Mi Total
↩	5. Turn <b>left</b> onto <b>Barrington Rd.</b> <a href="#">Map</a> <i>Barrington Rd is just past S Main St If you are on W Liberty St and reach S Church St you've gone a little too far</i>	<b>0.7 Mi</b> 9.7 Mi Total
↑	6. <b>Barrington Rd</b> becomes <b>N IL Route 59 / IL-59.</b> <a href="#">Map</a>	<b>1.4 Mi</b> 11.2 Mi Total
↘	7. Turn <b>right</b> onto <b>W Kelsey Rd / County Hwy-30 / County Hwy-V49.</b> <a href="#">Map</a> <i>W Kelsey Rd is 0.2 miles past W Indian Trail Rd If you are on N IL Route 59 and reach Shoreline Rd you've gone about 0.1 miles too far</i>	<b>1.6 Mi</b> 12.8 Mi Total
↩	8. Turn <b>left</b> onto <b>W Kelsey Rd / County Hwy-4 / County Hwy-30.</b> Continue to follow <b>W Kelsey Rd / County Hwy-30.</b> <a href="#">Map</a> <i>W Kelsey Rd is 0.1 miles past Coneflower Dr If you reach the end of Bridgewater Ct you've gone about 0.2 miles too far</i>	<b>1.9 Mi</b> 14.7 Mi Total
↘	9. Turn <b>right</b> onto <b>W IL Route 22 / IL-22.</b> <a href="#">Map</a> <i>W IL Route 22 is 0.1 miles past Dublin Way If you reach N Linden Dr you've gone about 0.1 miles too far</i>	<b>1.2 Mi</b> 15.9 Mi Total
↘	10. Turn <b>right</b> onto <b>Northwest Hwy / US-14 W.</b> <a href="#">Map</a> <i>Northwest Hwy is 0.2 miles past Ski Hill Rd Walgreens is on the corner</i>	<b>0.5 Mi</b> 16.4 Mi Total
↩	11. Turn <b>left</b> onto <b>Algonquin Rd.</b> <a href="#">Map</a> <i>Algonquin Rd is just past Lucille Ave If you reach Illinois St you've gone a little too far</i>	<b>0.7 Mi</b> 17.2 Mi Total
↩	12. Turn <b>left</b> to stay on <b>Algonquin Rd.</b> <a href="#">Map</a>	<b>0.3 Mi</b> 17.4 Mi Total



13. Turn **right** to stay on **Algonquin Rd.** [Map](#)

**1.0 Mi**

*Algonquin Rd is just past Crescent Pkwy*

*18.4 Mi Total*

*If you are on Plumtree Rd and reach Jane Ln you've gone about 0.6 miles too far*



14. **Algonquin Rd becomes N River Rd.** [Map](#)

**1.2 Mi**

*19.7 Mi Total*



15. **2550 ALGONQUIN RD.** [Map](#)

*Your destination is 0.5 miles past Haegers Bend Rd*

*If you reach Starr Dr you've gone about 0.3 miles too far*



**2550 Algonquin Rd, Lake In The Hills, IL 60102**

**Total Travel Estimate: 19.66 miles - about 32 minutes**

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**mapquest**

Trip to:

**515 W Algonquin Rd**

Arlington Heights, IL 60005-4411

22.30 miles / 32 minutes

Notes

Illinois Hand & Upper Extremity Center

- |          |  |                                |
|----------|--|--------------------------------|
| <b>A</b> | <b>1870 W Winchester Rd, Libertyville, IL 60048-5353</b>   | <b>Download<br/>Free App</b>   |
| ●        | 1. Start out going west on <b>W Winchester Rd / County Hwy-69 / County Hwy-A34</b> toward <b>Soccer Rd</b> . <a href="#">Map</a>   | <b>0.5 Mi</b><br>0.5 Mi Total  |
| ←        | 2. Take the 2nd left onto <b>N US Highway 45 / US-45 S</b> . Continue to follow <b>US-45 S</b> . <a href="#">Map</a><br><i>US-45 S is just past N US Highway 45<br/>If you reach Franklin Blvd you've gone about 0.1 miles too far</i> | <b>4.4 Mi</b><br>4.9 Mi Total  |
| ↑        | 3. <b>US-45 S</b> becomes <b>N IL Route 83 / IL-83</b> . <a href="#">Map</a>   | <b>4.1 Mi</b><br>9.1 Mi Total  |
| ↘        | 4. Turn <b>right</b> onto <b>IL-53</b> . <a href="#">Map</a><br><i>IL-53 is 0.1 miles past Robert Parker Coffin Rd</i>   | <b>3.1 Mi</b><br>12.2 Mi Total |
| ↙        | 5. Turn <b>left</b> onto <b>Lake Cook Rd / IL-53</b> . <a href="#">Map</a><br><i>Community Food Mart is on the corner<br/>If you are on N Hicks Rd and reach E Pennsylvania Dr you've gone a little too far</i>                        | <b>0.4 Mi</b><br>12.6 Mi Total |
| ↗        | 6. Merge onto <b>IL-53 S</b> toward <b>West Suburbs</b> . <a href="#">Map</a>  | <b>6.5 Mi</b><br>19.2 Mi Total |
| EXIT     | 7. Take the <b>I-90 / Tollway</b> exit toward <b>Rockford / Chicago</b> . <a href="#">Map</a>  | <b>0.4 Mi</b><br>19.5 Mi Total |
| RAMP     | 8. Keep <b>right</b> to take the <b>IL-62 / Algonquin Rd</b> ramp. <a href="#">Map</a>   | <b>0.4 Mi</b><br>19.9 Mi Total |
| ↙        | 9. Turn <b>left</b> onto <b>E Algonquin Rd / IL-62</b> . <a href="#">Map</a>   | <b>2.4 Mi</b><br>22.3 Mi Total |
| ■        | 10. <b>515 W ALGONQUIN RD</b> . <a href="#">Map</a><br><i>Your destination is 0.1 miles past Meijer Dr<br/>If you reach S Reserve Dr you've gone about 0.3 miles too far</i>   |                                |
| <b>B</b> | <b>515 W Algonquin Rd, Arlington Heights, IL 60005-4411</b>  |                                |

**Total Travel Estimate: 22.30 miles - about 32 minutes**

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**mapquest**

Trip to:

**Alexian Brothers Medical Center**  
**800 Biesterfield Rd**

Elk Grove Village, IL 60007  
 (847) 437-5500

25.18 miles / 33 minutes

Notes

Alexian Brothers Medical Center

- |  |  |                                 |
|--|--|---------------------------------|
|  | <b>1870 W Winchester Rd, Libertyville, IL 60048-5353</b>   | <b>Download<br/>Free App</b>    |
|  | 1. Start out going west on <b>W Winchester Rd / County Hwy-69 / County Hwy-A34</b> toward <b>Soccer Rd</b> . <a href="#">Map</a>   | <b>0.5 Mi</b><br>0.5 Mi Total   |
|  | 2. Take the 2nd left onto <b>N US Highway 45 / US-45 S</b> . Continue to follow <b>US-45 S</b> . <a href="#">Map</a><br><i>US-45 S is just past N US Highway 45<br/>If you reach Franklin Blvd you've gone about 0.1 miles too far</i> | <b>4.4 Mi</b><br>4.9 Mi Total   |
|  | 3. <b>US-45 S</b> becomes <b>N IL Route 83 / IL-83</b> . <a href="#">Map</a>   | <b>4.1 Mi</b><br>9.1 Mi Total   |
|  | 4. Turn right onto <b>IL-53</b> . <a href="#">Map</a><br><i>IL-53 is 0.1 miles past Robert Parker Coffin Rd</i>  | <b>3.1 Mi</b><br>12.2 Mi Total  |
|  | 5. Turn left onto <b>Lake Cook Rd / IL-53</b> . <a href="#">Map</a><br><i>Community Food Mart is on the corner<br/>If you are on N Hicks Rd and reach E Pennsylvania Dr you've gone a little too far</i>                               | <b>0.4 Mi</b><br>12.6 Mi Total  |
|  | 6. Merge onto <b>IL-53 S</b> toward <b>West Suburbs</b> . <a href="#">Map</a>  | <b>11.1 Mi</b><br>23.7 Mi Total |
|  | 7. Take the <b>Biesterfield Rd / IL-53 S</b> exit, <b>EXIT 4</b> . <a href="#">Map</a>   | <b>0.3 Mi</b><br>24.0 Mi Total  |
|  | 8. Turn left onto <b>IL-53 / Biesterfield Rd</b> . Continue to follow <b>Biesterfield Rd</b> . <a href="#">Map</a>   | <b>0.9 Mi</b><br>24.9 Mi Total  |
|  | 9. Make a <b>U-turn</b> onto <b>Biesterfield Rd</b> . <a href="#">Map</a><br><i>If you reach Wellington Ave you've gone about 0.1 miles too far</i>  | <b>0.3 Mi</b><br>25.2 Mi Total  |
|  | 10. <b>800 BIESTERFIELD RD</b> is on the right. <a href="#">Map</a><br><i>Your destination is 0.2 miles past Leicester Rd<br/>If you reach Beisner Rd you've gone a little too far</i>   |                                 |
|  | <b>Alexian Brothers Medical Center</b><br>800 Biesterfield Rd, Elk Grove Village, IL 60007<br>(847) 437-5500   |                                 |

Total Travel Estimate: **25.18 miles - about 33 minutes**

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**mapquest**

Trip to:

**Illinois Sports Medicine and Orthopedic Surgery  
9000 Waukegan Rd**

Morton Grove, IL 60053  
(847) 213-5444  
26.23 miles / 34 minutes

Notes

Illinois Sports Medicine & Orthopedic Surgery Center



**1870 W Winchester Rd, Libertyville, IL 60048-5353**

Download  
Free App

- |           |  |                                |
|-----------|--|--------------------------------|
| ●         | 1. Start out going <b>east</b> on <b>W Winchester Rd / County Hwy-69 / County Hwy-A34</b> toward <b>Tiffany Ln</b> . Continue to follow <b>W Winchester Rd / County Hwy-69</b> . <a href="#">Map</a>   | <b>2.0 Mi</b><br>2.0 Mi Total  |
| ➔         | 2. Turn <b>right</b> onto <b>N Milwaukee Ave / IL-21</b> . <a href="#">Map</a><br><i>N Milwaukee Ave is 0.2 miles past W Ellis Ave<br/>If you are on E Winchester Rd and reach E Ellis Ave you've gone a little too far</i>  | <b>0.8 Mi</b><br>2.8 Mi Total  |
| ➤         | 3. Turn <b>left</b> onto <b>E Park Ave / IL-176</b> . Continue to follow <b>IL-176</b> . <a href="#">Map</a><br><i>IL-176 is just past Hurburt Ct<br/>Union Oil Inc is on the corner<br/>If you are on S Milwaukee Ave and reach Sunnyside Pl you've gone a little too far</i> | <b>2.0 Mi</b><br>4.8 Mi Total  |
| ⬆         | 4. Merge onto <b>I-94 E / Tri State Tollway S</b> via the ramp on the <b>left</b> (Portions toll). <a href="#">Map</a>   | <b>9.3 Mi</b><br>14.1 Mi Total |
| ➤         | 5. Keep <b>right</b> to take <b>I-294 S / Tri State Tollway S</b> toward <b>Indiana / O'Hare</b> (Portions toll). <a href="#">Map</a>  | <b>7.1 Mi</b><br>21.3 Mi Total |
| EXIT<br>➤ | 6. Take the exit toward <b>ROUTE 58 / Golf Rd</b> . <a href="#">Map</a>  | <b>0.5 Mi</b><br>21.7 Mi Total |
| ➤         | 7. Turn <b>left</b> onto <b>N East River Rd</b> . <a href="#">Map</a>  | <b>0.1 Mi</b><br>21.8 Mi Total |
| ➤         | 8. Turn <b>left</b> onto <b>E Golf Rd / IL-58</b> . Continue to follow <b>IL-58</b> . <a href="#">Map</a>  | <b>3.5 Mi</b><br>25.4 Mi Total |
| ➔         | 9. Turn <b>right</b> onto <b>Waukegan Rd / IL-43 / IL-58</b> . <a href="#">Map</a><br><i>Waukegan Rd is just past Sayre Ave<br/>Popeyes Chicken and Biscuits is on the corner</i>  | <b>0.9 Mi</b><br>26.2 Mi Total |
| ■         | 10. <b>9000 WAUKEGAN RD</b> . <a href="#">Map</a><br><i>Your destination is just past Churchill St<br/>If you reach Greenwood St you've gone a little too far</i>  |                                |



**Illinois Sports Medicine and Orthopedic Surgery**  
9000 Waukegan Rd, Morton Grove, IL 60053  
(847) 213-5444

Total Travel Estimate: **26.23 miles - about 34 minutes**



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**mapquest**

Trip to:

**9600 Gross Point Rd**

Skokie, IL 60076-1214

26.40 miles / 35 minutes

Notes

Skokie Hospital



**1870 W Winchester Rd, Libertyville, IL 60048-5353**

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Free App



1. Start out going east on **W Winchester Rd / County Hwy-69 / County Hwy-A34** toward Tiffany Ln. [Map](#)

**0.6 Mi**  
0.6 Mi Total



2. Take the 3rd left onto **N Butterfield Rd / County Hwy-57 / County Hwy-W11**. [Map](#)  
*N Butterfield Rd is 0.1 miles past Luceme Ln  
If you reach Pine Meadow Ct you've gone a little too far*

**0.7 Mi**  
1.3 Mi Total



3. Turn right onto **W Peterson Rd / IL-137**. Continue to follow **IL-137**. [Map](#)  
*IL-137 is 0.1 miles past Old Bam Cir  
If you reach Old Peterson Rd you've gone a little too far*

**5.6 Mi**  
6.9 Mi Total



4. Turn right onto **N Skokie Hwy / US-41 S**. Continue to follow **US-41 S**. [Map](#)  
*US-41 S is just past Frontenac St  
Days Inn Great Lakes - N.Chicago is on the corner  
If you are on Buckley Rd and reach Mississippi St you've gone about 0.1 miles too far*

**16.7 Mi**  
23.5 Mi Total



5. Merge onto **Skokie Blvd / US-41 S** via **EXIT 34A**. [Map](#)

**2.5 Mi**  
26.0 Mi Total



6. Turn left onto **Golf Rd**. [Map](#)  
*Boston Blackie's is on the corner  
If you are on Skokie Blvd and reach Foster St you've gone about 0.1 miles too far*

**0.4 Mi**  
26.4 Mi Total



7. Turn left onto **Gross Point Rd**. [Map](#)  
*Gross Point Rd is just past Kenton Ave  
4511 Golf Rd Svc 504 is on the corner  
If you reach Kilbourn Ave you've gone a little too far*

**0.04 Mi**  
26.4 Mi Total



8. **9600 GROSS POINT RD** is on the left. [Map](#)  
*If you reach Payne St you've gone about 0.1 miles too far*



**9600 Gross Point Rd, Skokie, IL 60076-1214**

**Total Travel Estimate: 26.40 miles - about 35 minutes**

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**mapquest**

Trip to:

**2750 S River Rd**

Des Plaines, IL 60018-4101

26.40 miles / 35 minutes

Notes

Apollo Health Center

- |           |  |  |
|-----------|--|--|
|           | <b>A</b> <b>1870 W Winchester Rd, Libertyville, IL 60048-5353</b>  | <b>Download<br/>Free App</b>           |
| ●         | 1. Start out going east on <b>W Winchester Rd / County Hwy-69 / County Hwy-A34</b> toward <b>Tiffany Ln</b> . Continue to follow <b>W Winchester Rd / County Hwy-69</b> . <a href="#">Map</a>  | <b>2.0 Mi</b><br><i>2.0 Mi Total</i>   |
| ➤         | <b>21</b> 2. Turn <b>right</b> onto <b>N Milwaukee Ave / IL-21</b> . <a href="#">Map</a><br><i>N Milwaukee Ave is 0.2 miles past W Ellis Ave</i><br><i>If you are on E Winchester Rd and reach E Ellis Ave you've gone a little too far</i>  | <b>0.8 Mi</b><br><i>2.8 Mi Total</i>   |
| ➤         | <b>176</b> 3. Turn <b>left</b> onto <b>E Park Ave / IL-176</b> . Continue to follow <b>IL-176</b> . <a href="#">Map</a><br><i>IL-176 is just past Hurburt Ct</i><br><i>Union Oil Inc is on the corner</i><br><i>If you are on S Milwaukee Ave and reach Sunnyside Pl you've gone a little too far</i>    | <b>2.0 Mi</b><br><i>4.8 Mi Total</i>   |
| ↑↑        | <b>EAST</b><br><b>94</b> 4. Merge onto <b>I-94 E / Tri State Tollway S</b> via the ramp on the <b>left</b> (Portions toll). <a href="#">Map</a>  | <b>9.3 Mi</b><br><i>14.1 Mi Total</i>  |
| ➤         | <b>SOUTH</b><br><b>294</b> 5. Keep <b>right</b> to take <b>I-294 S / Tri State Tollway S</b> toward <b>Indiana / O'Hare</b> (Portions toll). <a href="#">Map</a>   | <b>7.1 Mi</b><br><i>21.3 Mi Total</i>  |
| EXIT<br>✕ | 6. Take the exit toward <b>ROUTE 58 / Golf Rd</b> . <a href="#">Map</a>  | <b>0.5 Mi</b><br><i>21.7 Mi Total</i>  |
| ➤         | 7. Turn <b>left</b> onto <b>N East River Rd</b> . <a href="#">Map</a>  | <b>0.10 Mi</b><br><i>21.8 Mi Total</i> |
| ➤         | <b>58</b> 8. Take the <b>1st right</b> onto <b>E Golf Rd / IL-58</b> . <a href="#">Map</a>   | <b>0.9 Mi</b><br><i>22.8 Mi Total</i>  |
| ➤         | 9. Turn <b>left</b> onto <b>N River Rd / US-45 S</b> . Continue to follow <b>N River Rd</b> . <a href="#">Map</a><br><i>N River Rd is 0.1 miles past College Dr</i><br><i>Chidren's Choice Learning Centers is on the corner</i><br><i>If you reach Nazareth Way you've gone about 0.2 miles too far</i> | <b>3.6 Mi</b><br><i>26.4 Mi Total</i>  |
| ■         | 10. <b>2750 S RIVER RD</b> is on the <b>right</b> . <a href="#">Map</a><br><i>Your destination is 0.4 miles past E Touhy Ave</i><br><i>If you reach E Devon Ave you've gone about 0.6 miles too far</i>  |  |

**B** **2750 S River Rd, Des Plaines, IL 60018-4101**

**Total Travel Estimate: 26.40 miles - about 35 minutes**

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**mapquest**

Trip to:

**1555 Barrington Rd**

Hoffman Estates, IL 60169-1018

23.26 miles / 36 minutes









Notes

St. Alexius Medical Center



**1870 W Winchester Rd, Libertyville, IL 60048-5353**

Download  
Free App

- |   |   |  |
|---|---|--|
| <br><br><br><br><br><br><br><br><br><br><br><br><br><br> | <p>1. Start out going <b>west</b> on <b>W Winchester Rd / County Hwy-69 / County Hwy-A34</b> toward <b>Soccer Rd</b>. <a href="#">Map</a></p> <p>2. Turn <b>left</b> onto <b>N Midlothian Rd / County Hwy-48 / County Hwy-V73</b>. Continue to follow <b>N Midlothian Rd</b>. <a href="#">Map</a><br/><i>N Midlothian Rd is 0.1 miles past Harris Rd<br/>If you reach Adderley Ln you've gone about 0.1 miles too far</i></p> <p>3. Turn <b>left</b> onto <b>County Hwy-32 / County Hwy-V77 / N Old McHenry Rd</b>. <a href="#">Map</a><br/><i>County Hwy-32 is 0.2 miles past Landover Pkwy<br/>If you reach Midlothian Rd you've gone a little too far</i></p> <p>4. Turn <b>right</b> onto <b>N Quentin Rd / County Hwy-5 / County Hwy-V62</b>. Continue to follow <b>N Quentin Rd</b>. <a href="#">Map</a><br/><i>If you reach Lagoon Dr you've gone about 0.2 miles too far</i></p> <p>5. Turn <b>right</b> onto <b>W Dundee Rd / IL-68</b>. <a href="#">Map</a><br/><i>W Dundee Rd is 0.7 miles past W Rosiland Dr<br/>If you reach N Lakeview Dr you've gone about 0.1 miles too far</i></p> <p>6. Turn <b>left</b> onto <b>S Barrington Rd</b>. <a href="#">Map</a><br/><i>If you are on W Dundee Rd and reach Columbia Ln you've gone about 0.1 miles too far</i></p> <p>7. Make a <b>U-turn</b> at <b>W Higgins Rd</b> onto <b>Barrington Rd</b>. <a href="#">Map</a><br/><i>If you reach W Golf Rd you've gone about 0.3 miles too far</i></p> <p>8. <b>1555 BARRINGTON RD</b> is on the right. <a href="#">Map</a><br/><i>If you reach Old Higgins Rd you've gone about 0.1 miles too far</i></p> | <p><b>1.3 Mi</b><br/><i>1.3 Mi Total</i></p> <p><b>6.5 Mi</b><br/><i>7.8 Mi Total</i></p> <p><b>0.5 Mi</b><br/><i>8.3 Mi Total</i></p> <p><b>5.7 Mi</b><br/><i>13.9 Mi Total</i></p> <p><b>3.8 Mi</b><br/><i>17.8 Mi Total</i></p> <p><b>5.3 Mi</b><br/><i>23.1 Mi Total</i></p> <p><b>0.2 Mi</b><br/><i>23.3 Mi Total</i></p> |
|---|---|--|



**1555 Barrington Rd, Hoffman Estates, IL 60169-1018**

Total Travel Estimate: **23.26 miles - about 36 minutes**

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**mapquest**

Trip to:

**1555 Barrington Rd**

Hoffman Estates, IL 60169-1018

23.26 miles / 36 minutes

Notes

Hoffman Estates Surgery Center



**1870 W Winchester Rd, Libertyville, IL 60048-5353**

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Free App



1. Start out going west on **W Winchester Rd / County Hwy-69 / County Hwy-A34** toward **Soccer Rd**. [Map](#)

**1.3 Mi**  
1.3 Mi Total



2. Turn **left** onto **N Midlothian Rd / County Hwy-48 / County Hwy-V73**. Continue to follow **N Midlothian Rd**. [Map](#)  
*N Midlothian Rd is 0.1 miles past Harris Rd  
If you reach Adderley Ln you've gone about 0.1 miles too far*

**6.5 Mi**  
7.8 Mi Total



3. Turn **left** onto **County Hwy-32 / County Hwy-V77 / N Old McHenry Rd**. [Map](#)  
*County Hwy-32 is 0.2 miles past Landover Pkwy  
If you reach Midlothian Rd you've gone a little too far*

**0.5 Mi**  
8.3 Mi Total



4. Turn **right** onto **N Quentin Rd / County Hwy-5 / County Hwy-V62**. Continue to follow **N Quentin Rd**. [Map](#)  
*If you reach Lagoon Dr you've gone about 0.2 miles too far*

**5.7 Mi**  
13.9 Mi Total



**68**

5. Turn **right** onto **W Dundee Rd / IL-68**. [Map](#)  
*W Dundee Rd is 0.7 miles past W Rosiland Dr  
If you reach N Lakeview Dr you've gone about 0.1 miles too far*

**3.8 Mi**  
17.8 Mi Total



6. Turn **left** onto **S Barrington Rd**. [Map](#)  
*If you are on W Dundee Rd and reach Columbia Ln you've gone about 0.1 miles too far*

**5.3 Mi**  
23.1 Mi Total



7. Make a **U-turn** at **W Higgins Rd** onto **Barrington Rd**. [Map](#)  
*If you reach W Golf Rd you've gone about 0.3 miles too far*

**0.2 Mi**  
23.3 Mi Total



**1555 Barrington Rd, Hoffman Estates, IL 60169-1018**

Total Travel Estimate: **23.26 miles - about 36 minutes**

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**mapquest**

Trip to:

**7435 W Talcott Ave**

Chicago, IL 60631-3707

30.26 miles / 36 minutes

Notes

Presence Resurrection Medical Center

- |  |   | Download<br>Free App            |
|--|---|---------------------------------|
|  | <b>1870 W Winchester Rd, Libertyville, IL 60048-5353</b>  |                                 |
|  | 1. Start out going east on <b>W Winchester Rd / County Hwy-69 / County Hwy-A34</b> toward <b>Tiffany Ln</b> . Continue to follow <b>W Winchester Rd / County Hwy-69</b> . <a href="#">Map</a>   | <b>2.0 Mi</b><br>2.0 Mi Total   |
|  | 2. Turn <b>right</b> onto <b>N Milwaukee Ave / IL-21</b> . <a href="#">Map</a><br><i>N Milwaukee Ave is 0.2 miles past W Ellis Ave</i><br><i>If you are on E Winchester Rd and reach E Ellis Ave you've gone a little too far</i>   | <b>0.8 Mi</b><br>2.8 Mi Total   |
|  | 3. Turn <b>left</b> onto <b>E Park Ave / IL-176</b> . Continue to follow <b>IL-176</b> . <a href="#">Map</a><br><i>IL-176 is just past Hurlburt Ct</i><br><i>Union Oil Inc is on the corner</i><br><i>If you are on S Milwaukee Ave and reach Sunnyside Pl you've gone a little too far</i> | <b>2.0 Mi</b><br>4.8 Mi Total   |
|  | 4. Merge onto <b>I-94 E / Tri State Tollway S</b> via the ramp on the <b>left</b> (Portions toll). <a href="#">Map</a>  | <b>9.3 Mi</b><br>14.1 Mi Total  |
|  | 5. Keep <b>right</b> to take <b>I-294 S / Tri State Tollway S</b> toward <b>Indiana / O'Hare</b> (Portions toll). <a href="#">Map</a>   | <b>11.8 Mi</b><br>25.9 Mi Total |
|  | 6. Merge onto <b>I-90 E</b> toward <b>Kennedy Expy / Chicago</b> (Portions toll). <a href="#">Map</a>   | <b>3.2 Mi</b><br>29.2 Mi Total  |
|  | 7. Take <b>EXIT 81A</b> toward <b>IL-43 / Harlem Ave</b> . <a href="#">Map</a>  | <b>0.2 Mi</b><br>29.4 Mi Total  |
|  | 8. Stay <b>straight</b> to go onto <b>N Octavia Ave</b> . <a href="#">Map</a>   | <b>0.02 Mi</b><br>29.4 Mi Total |
|  | 9. Keep <b>right</b> at the fork to continue on <b>N Octavia Ave</b> . <a href="#">Map</a>  | <b>0.05 Mi</b><br>29.5 Mi Total |
|  | 10. Turn <b>slight left</b> onto <b>W Higgins Ave / IL-72</b> . <a href="#">Map</a>   | <b>0.09 Mi</b><br>29.6 Mi Total |
|  | 11. Turn <b>left</b> onto <b>N Harlem Ave / IL-43</b> . <a href="#">Map</a><br><i>Taco Burrito King is on the corner</i><br><i>If you reach N Neva Ave you've gone a little too far</i>   | <b>0.3 Mi</b><br>29.9 Mi Total  |
|  | 12. Turn <b>left</b> onto <b>W Talcott Ave</b> . <a href="#">Map</a><br><i>W Talcott Ave is 0.1 miles past W Seminole St</i><br><i>If you reach W Thorndale Ave you've gone about 0.1 miles too far</i>   | <b>0.4 Mi</b><br>30.3 Mi Total  |
|  | 13. <b>7435 W TALCOTT AVE</b> is on the <b>left</b> . <a href="#">Map</a><br><i>If you reach N Oriole Ave you've gone about 0.2 miles too far</i>   |                                 |



**7435 W Talcott Ave, Chicago, IL 60631-3707**

**Total Travel Estimate: 30.26 miles - about 36 minutes**

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Trip to:  
**1580 W Lake St**  
 Addison, IL 60101-1171  
 28.46 miles / 37 minutes

Notes

Aiden Center for Day Surgery

- |  |   |  |
|--|---|--|
|  | <b>A</b> <b>1870 W Winchester Rd, Libertyville, IL 60048-5353</b>   | <b>Download<br/>Free App</b>           |
|  | 1. Start out going <b>west</b> on <b>W Winchester Rd / County Hwy-69 / County Hwy-A34</b> toward <b>Soccer Rd</b> . <a href="#">Map</a>   | <b>0.5 Mi</b><br><i>0.5 Mi Total</i>   |
|  | 2. Take the 2nd <b>left</b> onto <b>N US Highway 45 / US-45 S</b> . Continue to follow <b>US-45 S</b> . <a href="#">Map</a><br><i>US-45 S is just past N US Highway 45</i><br><i>If you reach Franklin Blvd you've gone about 0.1 miles too far</i> | <b>4.4 Mi</b><br><i>4.9 Mi Total</i>   |
|  | 3. <b>US-45 S</b> becomes <b>N IL Route 83 / IL-83</b> . <a href="#">Map</a>  | <b>4.1 Mi</b><br><i>9.1 Mi Total</i>   |
|  | 4. Turn <b>right</b> onto <b>IL-53</b> . <a href="#">Map</a><br><i>IL-53 is 0.1 miles past Robert Parker Coffin Rd</i>  | <b>3.1 Mi</b><br><i>12.2 Mi Total</i>  |
|  | 5. Turn <b>left</b> onto <b>Lake Cook Rd / IL-53</b> . <a href="#">Map</a><br><i>Community Food Mart is on the corner</i><br><i>If you are on N Hicks Rd and reach E Pennsylvania Dr you've gone a little too far</i>                               | <b>0.4 Mi</b><br><i>12.6 Mi Total</i>  |
|  | 6. Merge onto <b>IL-53 S</b> toward <b>West Suburbs</b> . <a href="#">Map</a>   | <b>11.1 Mi</b><br><i>23.7 Mi Total</i> |
|  | 7. Stay <b>straight</b> to go onto <b>I-290 E</b> . <a href="#">Map</a>   | <b>2.5 Mi</b><br><i>26.2 Mi Total</i>  |
|  | 8. Keep <b>left</b> to take <b>I-355 S</b> via <b>EXIT 7</b> toward <b>Joliet</b> . <a href="#">Map</a>   | <b>0.8 Mi</b><br><i>27.0 Mi Total</i>  |
|  | 9. Take the <b>US-20 / Lake St</b> exit. <a href="#">Map</a>  | <b>0.7 Mi</b><br><i>27.7 Mi Total</i>  |
|  | 10. Keep <b>left</b> to take the ramp toward <b>Addison</b> . <a href="#">Map</a>   | <b>0.09 Mi</b><br><i>27.8 Mi Total</i> |
|  | 11. Turn <b>left</b> onto <b>US-20 E / Lake St</b> . <a href="#">Map</a>  | <b>0.6 Mi</b><br><i>28.4 Mi Total</i>  |
|  | 12. Make a <b>U-turn</b> at <b>Marcus Dr</b> onto <b>W Lake St / US-20 W</b> . <a href="#">Map</a><br><i>If you reach Lombard Rd you've gone about 0.1 miles too far</i>  | <b>0.06 Mi</b><br><i>28.5 Mi Total</i> |
|  | 13. <b>1580 W LAKE ST</b> is on the <b>right</b> . <a href="#">Map</a><br><i>Your destination is just past Marcus Dr</i><br><i>If you reach N Central Ct you've gone about 0.1 miles too far</i>  |  |



**1580 W Lake St, Addison, IL 60101-1171**

**Total Travel Estimate: 28.46 miles - about 37 minutes**

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**mapquest**

Trip to:

**3701 Doty Rd**

Woodstock, IL 60098-7509

24.72 miles / 39 minutes

Notes

Centegra Hospital Woodstock

- |          |  | Download<br>Free App                   |
|----------|--|--|
| <b>A</b> | <b>1870 W Winchester Rd, Libertyville, IL 60048-5353</b>   |  |
| ●        | 1. Start out going <b>west</b> on <b>W Winchester Rd / County Hwy-69 / County Hwy-A34</b> toward <b>Soccer Rd.</b> <a href="#">Map</a>   | <b>1.9 Mi</b><br><i>1.9 Mi Total</i>   |
| ↶        | 2. Turn <b>left</b> onto <b>N IL Route 83 / IL-83.</b> <a href="#">Map</a>   | <b>1.5 Mi</b><br><i>3.5 Mi Total</i>   |
| ↑        | 3. Stay <b>straight</b> to go onto <b>Schank Ave.</b> <a href="#">Map</a>  | <b>0.1 Mi</b><br><i>3.6 Mi Total</i>   |
| ↷        | 4. Take the 1st <b>right</b> onto <b>W IL Route 176 / IL-176.</b> Continue to follow <b>IL-176.</b> <a href="#">Map</a>  | <b>14.4 Mi</b><br><i>18.0 Mi Total</i> |
| ↷        | 5. Turn <b>slight right</b> onto <b>E Terra Cotta Ave / IL-176.</b> <a href="#">Map</a><br><i>E Terra Cotta Ave is 0.6 miles past Smith Rd<br/>Mobil is on the corner</i>        | <b>3.0 Mi</b><br><i>21.0 Mi Total</i>  |
| ↷        | 6. Turn <b>right</b> onto <b>US Highway 14 / US-14 W.</b> <a href="#">Map</a><br><i>US Highway 14 is 0.1 miles past Hickory Dr<br/>MPD CITGO is on the corner</i>                | <b>3.6 Mi</b><br><i>24.6 Mi Total</i>  |
| ↶        | 7. Turn <b>left</b> onto <b>Doty Rd.</b> <a href="#">Map</a><br><i>Doty Rd is 0.6 miles past Lily Pond Rd<br/>If you reach Lake Shore Dr you've gone about 0.5 miles too far</i> | <b>0.08 Mi</b><br><i>24.7 Mi Total</i> |
| ■        | 8. <b>3701 DOTY RD</b> is on the <b>right.</b> <a href="#">Map</a><br><i>If you reach Memorial Dr you've gone about 0.1 miles too far</i>  |  |
| <b>B</b> | <b>3701 Doty Rd, Woodstock, IL 60098-7509</b>  |  |

Total Travel Estimate: **24.72 miles - about 39 minutes**

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Notes

1800 McDonough Road Surgery Center

Trip to:

**1800 McDonough Rd**

Hoffman Estates, IL 60192-4520

25.20 miles / 39 minutes

- |   | Download<br>Free App            |
|---|---------------------------------|
| <b>A</b> <b>1870 W Winchester Rd, Libertyville, IL 60048-5353</b>   |                                 |
| ● 1. Start out going <b>west</b> on <b>W Winchester Rd / County Hwy-69 / County Hwy-A34</b> toward <b>Soccer Rd</b> . <a href="#">Map</a>   | <b>1.9 Mi</b><br>1.9 Mi Total   |
| ↶ <b>83</b> 2. Turn <b>left</b> onto <b>N IL Route 83 / IL-83</b> . <a href="#">Map</a>   | <b>1.5 Mi</b><br>3.5 Mi Total   |
| ↑ 3. Stay <b>straight</b> to go onto <b>Schank Ave</b> . <a href="#">Map</a>  | <b>0.1 Mi</b><br>3.6 Mi Total   |
| ↷ <b>176</b> 4. Take the 1st <b>right</b> onto <b>W IL Route 176 / IL-176</b> . Continue to follow <b>IL-176</b> . <a href="#">Map</a>  | <b>5.4 Mi</b><br>9.0 Mi Total   |
| ↶ 5. Turn <b>left</b> onto <b>Barrington Rd</b> . <a href="#">Map</a><br><i>Barrington Rd is just past S Main St<br/>If you are on W Liberty St and reach S Church St you've gone a little too far</i>                  | <b>0.7 Mi</b><br>9.7 Mi Total   |
| ↑ <b>59</b> 6. <b>Barrington Rd</b> becomes <b>IL-59</b> . <a href="#">Map</a>  | <b>14.4 Mi</b><br>24.1 Mi Total |
| ↷ 7. Turn <b>right</b> onto <b>Shoe Factory Rd</b> . <a href="#">Map</a><br><i>Shoe Factory Rd is 0.6 miles past Hoffman Blvd<br/>If you are on Sutton Rd and reach Magnolia Ln you've gone about 0.6 miles too far</i> | <b>1.0 Mi</b><br>25.1 Mi Total  |
| ↶ 8. Turn <b>left</b> onto <b>McDonough Rd</b> . <a href="#">Map</a><br><i>McDonough Rd is 0.2 miles past Bridlewood Dr<br/>If you reach Ivy Ridge Dr you've gone about 0.3 miles too far</i>                           | <b>0.1 Mi</b><br>25.2 Mi Total  |
| ■ 9. <b>1800 MCDONOUGH RD</b> is on the <b>right</b> . <a href="#">Map</a><br><i>If you reach Nicholson Dr you've gone about 0.1 miles too far</i>  |                                 |
| <b>B</b> <b>1800 McDonough Rd, Hoffman Estates, IL 60192-4520</b>   |                                 |

Total Travel Estimate: **25.20 miles - about 39 minutes**

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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	21-22
2	Site Ownership	23-25
3	Persons with 5 percent or greater interest in the licensee must be identified with the % of ownership.	26-27
4	Organizational Relationships (Organizational Chart) Certificate of Good Standing Etc.	28-29
5	Flood Plain Requirements	30-31
6	Historic Preservation Act Requirements	32-33
7	Project and Sources of Funds Itemization	34
8	Obligation Document if required	
9	Cost Space Requirements	35
10	Discontinuation	
11	Background of the Applicant	
12	Purpose of the Project	36-47
13	Alternatives to the Project	48
14	Size of the Project	49
15	Project Service Utilization	50
16	Unfinished or Shell Space	51
17	Assurances for Unfinished/Shell Space	52
18	Master Design Project	
19	Mergers, Consolidations and Acquisitions	
	<b>Service Specific:</b>	
20	Medical Surgical Pediatrics, Obstetrics, ICU	
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	53-76
28	Selected Organ Transplantation	
29	Kidney Transplantation	
30	Subacute Care Hospital Model	
31	Children's Community-Based Health Care Center	
32	Community-Based Residential Rehabilitation Center	
33	Long Term Acute Care Hospital	
34	Clinical Service Areas Other than Categories of Service	
35	Freestanding Emergency Center Medical Services	
	<b>Financial and Economic Feasibility:</b>	
36	Availability of Funds	77-87
37	Financial Waiver	
38	Financial Viability	88-98
39	Economic Feasibility	99-105
40	Safety Net Impact Statement	106
41	Charity Care Information	107
Appendix 1	Physician Referral Letters	108-122
Appendix 2	Time & Distance	123-172