



STATE OF ILLINOIS

HEALTH FACILITIES AND SERVICES REVIEW BOARD

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

DOCKET NO: H-03	BOARD MEETING: November 12, 2014	PROJECT NO: 14-041	PROJECT COST: Original: \$1,542,110
FACILITY NAME: Fresenius Medical Care Elgin		CITY: Elgin	
TYPE OF PROJECT: Substantive			HSA: VIII

PROJECT DESCRIPTION: The applicants (Fresenius Medical Care Elgin, LLC, and Fresenius Medical Care Holdings, Inc.) are proposing to add 6 stations to its existing 14 station end stage renal dialysis ("ESRD") facility in Elgin, Illinois. The cost of the project is \$1,542,110 and the project completion date is June 30, 2016.

EXECUTIVE SUMMARY

PROJECT DESCRIPTION:

- The applicants (Fresenius Medical Care Elgin, LLC, and Fresenius Medical Care Holdings, Inc.) are proposing to add 6 stations to an existing 14 station end stage renal dialysis (“ESRD”) facility in Elgin, Illinois. The cost of the project is \$1,542,110 and the project completion date is June 30, 2016

WHY THE PROJECT IS BEFORE THE STATE BOARD:

- This project is before the State Board because the project proposes to expand an existing health care facility greater than 10% or 3 stations whichever is less of the approved number of ESRD stations. (20 ILCS 3960/5)

PURPOSE OF THE PROJECT:

- **According to the applicants the purpose of the project is “to provide life-sustaining dialysis services in Elgin in the most cost –effective way by leasing additional space adjacent to the current Fresenius Elgin facility”.** Board Staff notes the current 14-staion facility is operating at 89.2% capacity.

NEED FOR THE PROJECT:

- Currently 91% of the pre ESRD patients reside in the HSA VIII ESRD Planning Area. 74% of the current ESRD patients reside in the HSA VIII ESRD Planning Area. The facility has been operating at an average of 85.2% over the last 5 quarters, and notes that while the facility has only been in operation for three years, the need to address overcrowding has resulted in adding two stations in 2013, and taking the operation of a 4th shift under consideration. Board Staff notes the facility is currently operating at 89.2%

TABLE ONE	
FMC Elgin Quarterly Utilization Data	
Quarter	Percentile
Sept. 2013	88.8%
December 2013	75%
March 2014	79.7%
June 2014	92.8%
September 2014	89.2%

PUBLIC COMMENT:

- An opportunity of a public hearing was provided however no hearing was requested. No letters of support or opposition were received by the State Board Staff.

FINANCIAL:

- The applicants are funding the project with cash and cash equivalents totaling \$911,810, and the fair market value of lease and equipment of \$630,300. The applicants have provided sufficient proof of financial viability.

WHAT WE FOUND

- The applicants successfully addressed a total of 18 criteria.

STATE BOARD STAFF REPORT
Fresenius Medical Care Elgin
PROJECT #14-041

APPLICATION CHRONOLOGY	
Applicants(s)	Fresenius Medical Care Elgin LLC Fresenius Medical Care Holdings, Inc.
Facility Name	Fresenius Medical Care Elgin
Location	Elgin
Application Received	August 25, 2014
Application Deemed Complete	August 25, 2014
Can applicants request a deferral?	Yes
Review Period Extended by the State Board Staff?	No

I. The Proposed Project

The applicants are proposing to add 6 stations to an existing 14-station ESRD facility in Elgin, Illinois. The cost of the project is \$1,542,110 and the project completion date is June 30, 2016.

II. Summary of Findings

- A. The State Board Staff finds the proposed project appears to be in conformance with the provisions of Part 1110.
- B. The State Board Staff finds the proposed project appears to be in conformance with the provisions of Part 1120.

III. General Information

The applicants are Fresenius Medical Care Elgin, LLC d/b/a Fresenius Medical Care Elgin and Fresenius Medical Care Holdings, Inc. Fresenius Medical Care Holdings, Inc., a New York corporation, is a subsidiary of Fresenius Medical Care AG & Co. KGaA, a German partnership. The facility is located at 2130 Point Boulevard, Suite 800, Elgin. The operating entity is Fresenius Medical Care Elgin, LLC d/b/a Fresenius Medical Care Elgin. The owner of the site is RP 2 Limited Partnership.

The project is a substantive project and is subject to Part 1110 and Part 1120 review. Obligation will occur after permit issuance. **The anticipated project completion date is June 30, 2016.**

The facility is located in the HSA 8 ESRD Planning Area. HSA 8 ESRD Planning Area includes Kane, Lake, and McHenry Counties.

IV. The Proposed Project – Details

The applicants are proposing to add six ESRD stations and 3,400 GSF of modernized space to an existing 14-station facility, in Elgin. Once complete, the facility will consist of 10,900 GSF of space, and contain 20 ESRD stations. The current facility has operated in excess of the State standard for ESRD facilities (80%), for two of the last four reporting quarters, and the additional stations will address recent overcrowding at the facility.

TABLE TWO	
FMC Elgin Quarterly Utilization Data	
Quarter	Percentile
Sept. 2013	88.8%
December 2013	75%
March 2014	79.7%
June 2014	92.8%
September 2014	89.2%

V. Project Costs and Sources of Funds

The applicants are funding the project with cash and securities of \$911,810 and a lease with a FMV of \$630,300. All costs are considered clinical costs.

TABLE THREE	
Project Costs and Sources of Funds	
USE OF FUNDS	TOTAL
Modernization Contracts	\$547,400
Contingencies	\$54,400
Architectural/Engineering Fees	60,000
Movable or Other Equipment (not in construction contracts)	\$250,010
Fair Market Value of Leased Space or Equipment	\$630,300
TOTAL USES OF FUNDS	\$1,542,110
SOURCE OF FUNDS	TOTAL
Cash and Securities	\$911,810
Leases (fair market value)	\$630,300
TOTAL SOURCES OF FUNDS	\$1,542,110

VI. Section 1110.230 - Purpose of Project, Safety Net Impact Statement and Alternatives – Information Requirements

A) Criterion 1110.230 (a) - Purpose of the Project – Information Requirements

The applicants stated the following: The purpose of this project is to provide life-sustaining dialysis services to residents of Elgin, in the most cost effective way. This involves the leasing of additional space adjacent to the current 14-station facility, and establishing 6 additional stations, resulting in a 20-station ESRD facility in 10,900 GSF of space. The applicants note the facility has historically operated in excess of the State standard (See Table One), and is currently operating into the 90th percentile. The applicants note the Elgin service area is a Federally Designated Medically Underserved Area, and access to dialysis services is limited, with no choices in shift preference. The applicants state their goal is to keep dialysis access available to the patient base in this service area, and maintain the exceptional clinical outcomes experienced at the existing facility. **See page 39 of the application for permit.**

B) Criterion 1110.230 (b) - Safety Net Impact Statement – Information Requirements

The applicants stated the following: *The expansion of the Fresenius Medical Care Elgin dialysis facility will not have any impact on safety net services in Elgin and the surrounding service area. Outpatient dialysis services are not typically considered "safety net" services, to the best of our knowledge. However, we do provide care for patients in the community who are economically challenged and/or who are undocumented aliens, who do not qualify for Medicare/Medicaid. We assist patients who do not have insurance in enrolling when possible in Medicaid and/or Medicaid as applicable, and also our social services department assists patients who have issues regarding transportation and/or who are wheel chair bound or have other disabilities which require assistance with respect to dialysis services and transport to and from the unit. This particular application will not have an impact on any other safety net provider in the area, as no hospital within the area provides dialysis services on an outpatient basis. Fresenius Medical Care is a for-profit publicly traded company and is not required to provide charity care, nor does it do so according to the Board's definition. However, Fresenius Medical Care provides care to all patients regardless of their ability to pay. There are patients treated by Fresenius who either do not qualify for or will not seek any type of coverage for dialysis services. These patients are considered "self-pay" patients. These patients are invoiced as all patients are invoiced, however payment is not expected and Fresenius does not initiate any collections activity on these accounts. These unpaid invoices are written off as bad debt. Fresenius notes that as a for profit entity, it does pay sales, real estate and income taxes. It also does provide community benefit by supporting various medical education activities and associations, such as the*

Renal Network and National Kidney Foundation. See pages 70-72 of the application for permit.

TABLE FOUR			
Safety Net Information per PA 96-0031			
CHARITY CARE			
	2011	2012	2013
Net Revenue	\$362,977,407	\$387,393,758	\$398,570,288
Charity * (# of self-pay patients)	93	203	642
Charity (cost In dollars)	\$642,947	\$1,536,372	\$5,346,976
Ratio Charity Care Cost to Net Patient Revenue	0.18%	0.40%	1.34%
MEDICAID			
Medicaid (# of patients)	1,865	1,705	1,660
Medicaid (revenue)	\$42,367,328	\$36,254,633	\$31,373,534
Ratio Medicaid to Net Patient Revenue	12%	9.36%	7.87%

C) Criterion 1110.230 (c) - Alternatives to the Proposed Project – Information Requirements

The applicants note having considered, and acted on some of the alternatives listed below:

A. Pursuing a joint venture or similar arrangement with one or more providers of 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.

The applicants note entering into a joint venture with physicians supporting this facility in 2012, and report the ongoing arrangement continues.

B. Expand Existing Facility

The applicants report having added 2 ESRD stations to the initial 12-station complement in late 2013 to accommodate a growing patient population, at a cost of \$8,000. The applicants rejected this alternative, and recognize a need for more than 2 stations to address the projected growth. The applicants identified no costs with this alternative.

C. Establish Additional Stations via an Additional Facility

The applicants attempted to establish a 12-station ESRD facility in South Elgin (Project #13-004), but was denied by the State Board in 2014, based on unmet need and maldistribution in the service area. Cost of the proposed alternative: \$4,800,000.

D. Utilize Existing Facilities

The applicants report having referred patients to area facilities in the past, based on preference and proximity to patient housing. The applicants identified no cost with this alternative.

E. Alternative as Chosen

The applicants chose the presented alternative as a the most cost-effective way to meet the present and future patient demand. The applicants notes this alternative will not result in unnecessary duplication of common areas, will create a continuum of care for Dr. Ray's patients, and meets State Board criterion.

VII. Section 1110.234 - Project Scope and Size, Utilization and Unfinished/Shell Space

A) Criterion 1110.234 (a) - Size of Project

The applicants are currently operating a 14-station ESRD facility in 7,500 GSF of leased space, in Elgin. The applicants propose to expand the existing facility through the addition of 6 ESRD stations, and 3,400 additional gross square feet of space, in the same building. Upon project completion the 20-station facility will be housed in 10,900 GSF of space, resulting 545 GSF per station.

THE STATE BOARD STAFF FINDS THE PROPOSED PROJECT APPEARS TO BE IN CONFORMANCE WITH CRITERION SIZE OF PROJECT CRITERION (77 IAC 1110.234 (a))

B) Criterion 1110.234 (b) - Project Services Utilization

The applicant shall document that, by the end of the second year of operation, the annual utilization of the clinical service areas or equipment shall meet or exceed the utilization standards specified in Appendix B.

The applicants are currently providing in center hemodialysis services to 79 patients, as of August 2014, which exceeds the 80% utilization target for a 14-station facility. The applicants note they will only need 18 more patients to meet the 80th percentile for State occupancy standards for a 20-station facility. Dr. Ray, M.D., the referring physician, is currently treating 148 pre-ESRD patients, and the applicant expect a minimum of 18 of these patients to utilize the expanded facility, upon project completion. The applicants have met the requirements of this criterion.

THE STATE BOARD STAFF FINDS THE PROPOSED PROJECT APPEARS TO BE IN CONFORMANCE WITH CRITERION PROJECT SERVICES UTILIZATION (77 IAC 1110.234 (b))

C) Criterion 1110.234 (e) - Assurances

The applicants have attested that the proposed facility will be at target occupancy of 80% by the second year after project completion. See page 59 of the application for permit.

THE STATE BOARD STAFF FINDS THE PROPOSED PROJECT APPEARS TO BE IN CONFORMANCE WITH CRITERION ASSURANCES (77 IAC 1110.234 (e))

VIII. Section 1110.1430 - In-Center Hemodialysis Projects

PROJECT TYPE	EXPANSION OF SERVICE	
Expansion of Existing Services	(b)(1) & (3)	Background of the Applicant
	(c)(2)	Planning Area Need – Service to Planning Area Residents
	(c)(4)	Planning Area Need – Service Demand – Expansion of In-Center Hemodialysis
	(f)(1)	Staffing – Availability
	(g)	Support Services
	(k)	Assurances

A) Criterion 1110.1430 (b) (1) (3) - Background of Applicant

An applicant must demonstrate that it is fit, willing and able, and *has the qualifications, background and character to adequately provide a proper standard of health care service for the community.* [20 ILCS 3960/6]

The applicants have provided the necessary information at pages 33-38 of the application for permit to address this criterion.

THE STATE BOARD STAFF FINDS THE PROPOSED PROJECT TO BE IN CONFORMANCE WITH CRITERION BACKGROUND OF APPLICANT (77 IAC 1110.1430 (b) (1) (3))

B) Criterion 1110.1430 (c) (2) (4) - Planning Area Need

The applicant shall document that the number of stations to be established or added is necessary to serve the planning area's population, based on the following:

1110.1430 (c) (2) - Service to Planning Area Residents

1110.1430 (c) (4) - Service Demand

Currently 91% of the pre ESRD patients reside in the HSA VIII ESRD Planning Area. 74% of the current ESRD patients reside in the HSA VIII ESRD Planning Area. The facility has been operating at an average of 85.2% over the last 5 quarters, and notes that while the facility has only been in operation for three years, the need to address overcrowding has resulted in adding two stations in 2013, and taking the operation of a 4th shift under consideration. Board Staff notes the facility is currently operating at 89.2%

TABLE FIVE	
FMC Elgin Quarterly Utilization Data	
Quarter	Percentile
Sept. 2013	88.8%
December 2013	75%
March 2014	79.7%
June 2014	92.8%
September 2014	89.2%

THE STATE BOARD STAFF FINDS THE PROPOSED APPEARS TO BE IN CONFORMANCE WITH CRITERION PLANNING AREA NEED (77 IAC 1110.1430 (b) (2) (4))

C) Criterion 1110.1430 (e) -Staffing

D) Criterion 1110.1430 (f) -Support Services

E) Criterion 1110.1430 (j) -Assurances

The applicants have provided the necessary information to successfully address criteria listed above at pages 54-59 of the application for permit.

THE STATE BOARD STAFF FINDS THE PROPOSED PROJECT TO BE IN CONFORMANCE WITH CRITERION STAFFING, SUPPORT SERVICES, AND ASSURANCES (77 IAC 1110.1430 (e)(f)(j))

IX. Section 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.

The applicants are funding the project with cash and cash equivalents of \$911,810 and the fair market value of lease and equipment of \$630,300. The applicants have sufficient resources available to fund the proposed project.

TABLE SIX Fresenius Medical Care Audited Financial Information In thousands (000)		
Calendar Year	2013	2012
Cash and Investments	\$275,719	\$341,071
Current Assets	\$3,866,123	\$5,673,703
Total Assets	\$16,597,314	\$17,808,635
Current Liabilities	\$2,094,693	\$2,510,111
Long Term Debt	\$2,113,723	\$2,030,126
Total Liabilities	\$8,075,490	\$8,401,166
Net Revenues	\$9,433,192	\$8,885,401
Expenses	\$8,088,952	\$7,384,745
Income Before Tax	\$1,344,240	\$1,500,656
Income Tax	\$465,540	\$497,177
Net Income	\$878,700	\$1,003,479

THE STATE BOARD STAFF FINDS THE PROPOSED PROJECT TO BE IN CONFORMANCE WITH CRITERION AVAILABILITY OF FUNDS (77 IAC 1120.120)

X. Section 1120.130 - Financial Viability

The applicant is NOT required to submit financial viability ratios if all project capital expenditures, including capital expended through a lease, are completely funded through internal resources (cash, securities or received pledges).

The applicants have qualified for the financial viability waiver because all capital expenditures are being funded from internal resources.

THE STATE BOARD STAFF FINDS THE PROPOSED PROJECT TO BE IN CONFORMANCE WITH CRITERION FINANCIAL VIABILITY WAIVER (77 IAC 1120.130)

XI. Section 1120.140 - Economic Feasibility

A) Criterion 1120.140 (a) – Reasonableness of Financing Arrangements

The applicant shall document the reasonableness of financing arrangements.

The applicants are funding the project with cash and cash equivalents of \$911,810 and the fair market value of lease and equipment of \$630,300. Per the Board's rules the entering of a lease is treated as borrowing. The applicants supplied a letter of intent, leasing the additional 3,400 GSF of space, to accommodate the additional six stations (application, p. 60).

THE STATE BOARD STAFF FINDS THE PROPOSED PROJECT TO BE IN CONFORMANCE WITH CRITERION REASONABLENESS OF FINANCING ARRANGEMENTS (77 IAC 1120.140(a))

B) Criterion 1120.140 (b) - Conditions of Debt Financing
The applicant shall document that the conditions of debt financing are reasonable.

The applicants are paying for the project with cash on hand, and not borrowing any funds for the project. Per the Board's rules the entering of a lease is treated as borrowing. The applicants are attesting that the entering into a lease (borrowing) is less costly than the liquidation of existing investments which would be required for the applicants to buy the property and build a structure itself to house a dialysis clinic. Further, should the applicant be required to payoff the lease in full, its existing investments and capital retained could be converted to cash or used to retire the outstanding lease obligations within a sixty (60) day period. The expenses incurred with leasing the proposed facility and cost of leasing the equipment is less costly than constructing a new facility or purchasing new equipment. See page 65 of the application for permit.

THE STATE BOARD STAFF FINDS THE PROPOSED PROJECT TO BE IN CONFORMANCE WITH CRITERION CONDITIONS OF DEBT FINANCING (77 IAC 1120.140(b))

C) Criterion 1120.140 (c) - Reasonableness of Project and Related Costs
The applicant shall document that the estimated project costs are reasonable and shall document compliance with State Board Standards.

All costs are clinical. Itemization of these costs can be found at page 69 of the application of permit.

Modernization and Contingencies – These costs are \$601,800 or \$177 per GSF. This appears reasonable when compared to the State Board Standard of \$178.33.

Contingencies – These costs are \$ 54,400 or 9.93% of modernization costs. This appears reasonable when compared to the State Board Standard of 10-15%.

Architectural and Engineering Fees – These costs are \$60,000 or 9.97% of modernization and contingency costs. This appears reasonable when compared to the State Board Standard of 7.5% – 11.26%.

Movable Equipment – These costs are \$250,010 or \$41,668 per station. This appears reasonable when compared to the State Standard of \$53,683 per station.

Fair Market Value of Leased Space and Equipment – These costs are \$630,300. The State Board does not have a standard for these costs.

THE STATE BOARD STAFF FINDS THE PROPOSED PROJECT TO BE IN CONFORMANCE WITH CRITERION REASONABLENESS OF PROJECT COSTS (77 IAC 1120.140 (c))

D) Criterion 1120.140 (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.

The projected operating cost per treatment is \$95.43. This appears reasonable when compared to previously approved ESRD projects.

THE STATE BOARD STAFF FINDS THE PROPOSED PROJECT TO BE IN CONFORMANCE WITH CRITERION PROJECTED OPERATING COSTS (77 IAC 1120.140 (d))

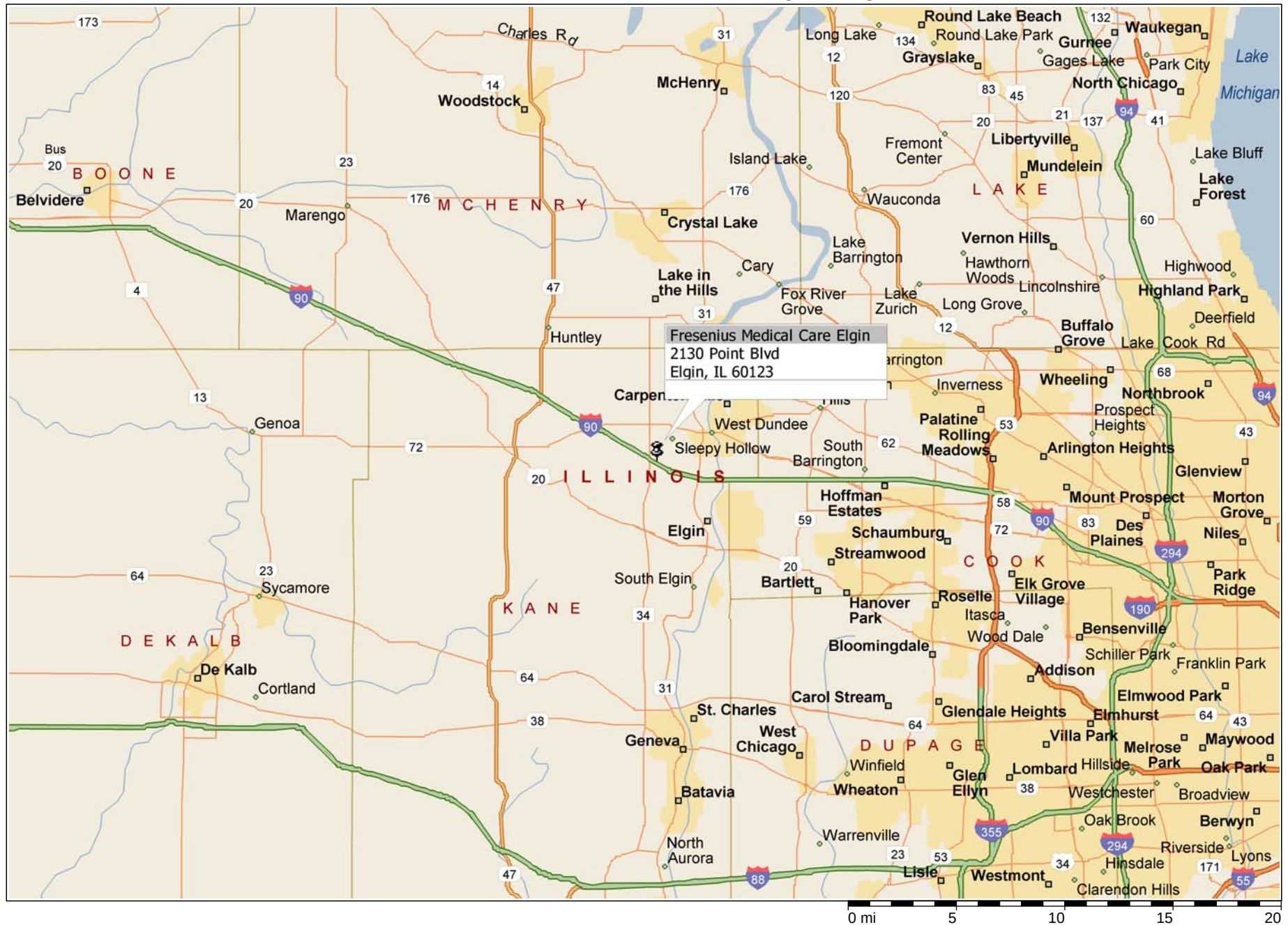
E) Criterion 1120.140 (e) - Total Effect of the Project on Capital Costs

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.

The projected capital cost per treatment is \$9.77. This appears reasonable when compared to previously approved ESRD projects.

THE STATE BOARD STAFF FINDS THE PROPOSED PROJECT IS IN CONFORMANCE WITH CRITERION TOTAL EFFECT OF THE PROJECT ON CAPITAL COSTS (77 IAC 1120.140(e))

14-041 Fresenius Medical Care Elgin - Elgin



Copyright © and (P) 1988–2006 Microsoft Corporation and/or its suppliers. All rights reserved. <http://www.microsoft.com/mappoint/>
 Portions © 1990–2005 InstallShield Software Corporation. All rights reserved. Certain mapping and direction data © 2005 NAVTEQ. All rights reserved. The Data for areas of Canada includes information taken with permission from Canadian authorities, including: © Her Majesty the Queen in Right of Canada, © Queen's Printer for Ontario. NAVTEQ and NAVTEQ ON BOARD are trademarks of NAVTEQ. © 2005 Tele Atlas North America, Inc. All rights reserved. Tele Atlas and Tele Atlas North America are trademarks of Tele Atlas, Inc.

END STAGE RENAL DIALYSIS - FACILITY PROFILE 2013

Ownership, Management and General Information

Name:	Fresenius Medical Care Elgin	Legal Entity Operator:	Fresenius Medical Care Elgin, LLC
Address:	2130 Point Boulevard	Legal Entity Owner:	
City:	Elgin	Ownership Type:	Limited Liability Company
County:	Kane	Property Owner:	RP2 Limited Partnership
HSA:	8	Other Ownership:	
Medicare ID:	14-2726	Medical Director Name:	Dr. Raju Ray
		Provides Incenter Nocturnal Dialysis:	☐

STATION INFORMATION

Authorized Stations as of 12/31/2013:	14
Certified Stations by CMS:	14
Peak Authorized Stations Operated:	12
Authorized Stations Setup and Staffed in Oct 1-7:	12
Isolation Stations Set up in Oct 1-7: (subset of authorized stations)	1
Number of Shifts Operated per day	

FACILITY STAFFING - FULL TIME EQUIVALENT

Full-Time Work Week:	32
Registered Nurse :	3
Dialysis Technician :	5
Dietician :	1
Social Worker:	1
LPN :	0
Other Health :	0
Other Non-Health:	2

Dialysis Station Utilization for the Week of Oct 1 - 7

Date of Operation	Oct 1	Oct 2	Oct 3	Oct 4	Oct 5	Oct 6	Oct 7
Hours operated	15	15	15	15	15	0	15
Number of Patients Treated	26	33	26	32	26	0	32

Facility Utilization Information

Facility Reported Patient Information

Patients treated as of 1/1/2013: (Beginning patients)	28
Patients treated as of 12/31/2013: (Ending patients)	63
Total Unduplicated patients treated in calendar year:	103

Facility Reported Treatment Information

In-Center Treatments in calendar year:	7,538
Number of Missed Treatments:	505
Average Daily Treatments:	
Average Treatment Time (min):	330.0

ADDITIONS to the FACILITY

New Patients:	48
Transient Patients:	24
Patients Re-Started:	0
Post-Transplant Patien	3
Total:	75

LOSSES to the FACILITY

Recovered patients:	1
Transplant Recipients:	2
Patients transferred out:	35
Patients voluntarily discontinued	1
Patients lost to follow up:	0
Patients deceased:	7
Total:	46

USE RATE for the FACILITY

Treatment Capacity/year (based on Stations):	13,104
Use Rate (Treatments/Treatment capacity):	58%
Use Rate (including Missed Treatments):	61%
Use Rate (Beginning patients treated):	33%
Use Rate (Year end Patients/Stations*6):	75%
Renal Network Use Rate:	75%

Patients and Net Revenue by Payor Source

	Medicare	Medicaid	Private Insurance	Private Pay	Other Public	TOTAL	Charity Care
	61.2%	11.7%	20.4%	5.8%	1.0%	100.0%	0.0%
Patient	63	12	21	6	1	103	0
1/1/2012 to 12/31/2012	36.9%	18.2%	42.1%	0.0%	2.8%	100.0%	0.0%
Net Revenue	\$612,260	\$302,050	\$698,476	\$0	\$46,906	\$1,659,692	\$0

Patients by Age and Sex

AGE GROUPS	MALE	FEMALE	TOTAL
<14 yrs	0	0	0
15-44 yr	12	11	23
45-64 yr	20	11	31
65-74 yr	14	12	26
75 < yrs	13	10	23
Total	59	44	103

Patients by Race

Asian Patients:	9
Native American/ Indian:	0
Black/ African American :	10
Hawaiian /Pacific Islande	0
White:	84
Unknown :	0
TOTAL:	103

Patients by Ethnicity

Hispanic Latino Patients:	21
Non-Hispanic Latino Patien	82
Unknown Ethnicity Patients	0
TOTAL:	103

Fresenius Medical Care does not hold long term debt on any Illinois dialysis location balance sheet. Fresenius Medical Care does not, as a for profit corporation, provide charity care under the Board's definition of same; however, it treats all patients regardless of ability to pay and thus does provide uncompensated care.

Source: Data based on 2013 Annual ESRD Questionnaire administered on behalf of Illinois Department of Public Health, Health Systems Development.