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DOCKET NO: H-04	BOARD MEETING: December 16, 2014	<b>PROJECT NO:</b> 14-044	PROJECT COST: Original: \$34,243,594
FACILITY NAME: St. Elizabeth's Hospital-Ambulatory Care Center		CITY: O'Fallon	Oliginai: \$34,243,334
TYPE OF PROJECT	Γ: Substantive		HSA: XI

**PROJECT DESCRIPTION:** The applicants (St. Elizabeth's Hospital of the Hospital Sisters of the Third Order of St. Francis Hospital Sisters Services, Inc, and Hospital Sisters Health System) are proposing to construct a Medical Office Building/Ambulatory Care Center, linked directly to the applicants replacement hospital in O' Fallon, Illinois. The total cost of the project is \$34,243,594. **The anticipated completion date is December 31, 2017.** 

This application, accompanied by application # 14-043, St. Elizabeth's Hospital, constitutes the discontinuation of an existing 303 bed acute care hospital from its current campus, at 211 South Third Street, Belleville, to the establishment of a 144 bed acute care hospital at the intersection of Interstate 64 and North Green Mount Road, in O'Fallon, approximately 6.5 miles (13 minutes), away.

### **EXECUTIVE SUMMARY**

### **PROJECT DESCRIPTION:**

• The applicants are proposing to construct an Ambulatory Care Center/Physicians Office Building (ACC/POB) in close proximity and connected to the applicants proposed replacement hospital in O' Fallon, Illinois. Currently, St. Elizabeth's Hospital is located at 211 South Third Street, Belleville, with some limited ambulatory care services located in O'Fallon. The new facility, located at the intersection of Interstate 64 and North Green Mount Road, O'Fallon (6.5 miles away), will consist of 59,269 GSF of space, and the applicants will lease this space from a landlord. The total cost of the project is \$34,243,594. The anticipated completion date is December 31, 2017.

# WHY THE PROJECT IS BEFORE THE STATE BOARD:

• The project is before the State Board because the cost of the project exceeds the capital expenditure minimum of \$12,670,607.

# **PURPOSE OF THE PROJECT:**

• The applicants note the purpose of this project is in response to changing clinical trends over the past twenty years, and the goals established through the affordable Care Act. These goals promote the delivery of patient care in an outpatient setting as more convenient for the patient, with less cost.

### **PUBLIC COMMENT:**

Two public hearings were held in regard to project #14-043.

• A public hearing was held on October 2, 2014, from 6:00pm to 7:00pm, in the Lindenwood University Auditorium, at 2600 West Main Street, Belleville. The hearing was requested by the applicants, and Board member Bradley was in attendance. 74 individuals were recorded as being in attendance.

### **NEED FOR THE PROJECT:**

• The applicants have stated that the need for project is based upon the age and obsolescence of the existing facility, and the need to establish suitable space for an Ambulatory Care contingency on the campus of the new hospital, in O'Fallon. The applicants note the new space will improve the health care and well being of the market population by providing needed, high quality, less costly, outpatient services, which is consistent with the applicant's mission.

### WHAT WE FOUND:

The applicants' addressed a total of 14 criteria and appears to have met all of them.

# STATE BOARD STAFF REPORT St. Elizabeth's Hospital-Ambulatory Care Center PROJECT #14-044

APPLICATION CHRONOLOGY				
Applicants(s)	St. Elizabeth's Hospital of the Hospital Sisters of the			
	Third Order of St. Francis			
	Hospital Sisters Services, Inc.			
	Hospital Sisters Health System			
Facility Name	St. Elizabeth's Hospital-Ambulatory Care Center			
Location	Belleville/O'Fallon			
Application Received	August 26, 2014			
Application Deemed Complete	August 27, 2014			
Review Period Extended by the State Board Staff?	No			
Can the applicants request a deferral?	Yes			
Public Hearing Conducted	October 22, 2014			

### I. The Proposed Project

The applicants are proposing to construct an Ambulatory Care Center/Physicians Office Building in proximity with and connected to the proposed replacement hospital (project #14-043), in O'Fallon, Illinois. The total cost of the project is \$34,243,594. **The anticipated completion date is December 31, 2017.** 

# 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 St. Elizabeth's Hospital of the Hospital Sisters of the Third Order of St. Francis Hospital Sisters Services, Inc, and Hospital Sisters Health System. St. Elizabeth's Hospital, is a 303-bed general acute care hospital, in Belleville, Illinois. The operating entity licensee and the owner of the site is St. Elizabeth's Hospital. The hospital is located in the HSA XI service area and Health Planning Area F-01. HSA XI consists of Madison, and St. Clair Counties, and portions of Clinton, and Monroe Counties.

The Ambulatory Care Center/Physicians Office Building will be built in proximity with and connected to the replacement hospital proposed in project #14-043. The applicants cite Section 1130.360 of the Illinois Health Planning Act, which states: "The people of Illinois should have facilities which are modern, in accord with recognized standards of design, construction, operation, and which represent the most cost-efficient alternative for the provision of care."

IV. The Proposed Project – Details

The applicants are proposing to establish an Ambulatory Care Center/Physicians Office Building on the campus of a proposed replacement hospital (project #14-043) in O'Fallon, approximately 6.5 miles (13 minutes) from the existing hospital campus in Belleville. The cost of constructing the proposed building will be incurred by O'Fallon Medical Building, LLC (the landlord) and the applicants will lease 65,269 GSF of space, which accounts for the entirety of the project cost. The applicants note that approximately 30,220 GSF of the proposed facility will be used by a residency program clinic, physician office space, and administrative offices, while the remainder will be allocated for the following:

- Cardiac Rehabilitation/(H2H Clinic)(6,062 GSF)
- Infusion Center (1,892 GSF)
- Laboratory/Pathology/Blood Bank (8,899 GSF)
- Pain Management (1,042 GSF)
- Outpatient Physical Medicine (8,689 GSF)
- Women's Imaging (3,781 GSF total)
  - Mammography (2,508 GSF)
  - Densitometry (469 GSF)
  - Mobile Ultrasound (804 GSF)

### V. Project Costs and Sources of Funds

The applicants are funding the project with cash and securities of \$9,337,845, gifts and bequests of \$299,470, and a bond issue of \$24,606,278. The application file contains audited financial statements for Hospital Sisters Health System (HSHS) for the years 2012 and 2013. The application also contains proof of an AA-/F1+ bond rating from FitchRatings Service (application, p. 128), and AA-/Stable bond rating from Standard & Poor's (application, p. 132). The applicants have supplied sufficient verification of financial viability. Table Two illustrates the specific project costs and sources of funding.

TABLE TWO							
Project Costs and Sources of Funds							
St. Elizabeth's Hospital-Ambulatory Care Center							
USE OF FUNDS	CLINICAL	NONCLINICAL	TOTAL				
Preplanning Costs	\$403,161	\$316,770	\$719,932				
Site Survey and Soil Investigation	\$18,626	\$14,635	\$33,261				
Site Preparation	\$1,624,894	\$1,276,704	\$2,901,598				
Off Site Work	\$606,146	\$476,258	\$1,082,404				
New Construction Contracts	\$0	\$0	\$0				
Contingencies	\$0	\$0	\$0				
Architectural/Engineering Fees	\$492,606	\$387,048	\$879,654				
Consulting and Other Fees	\$1,133,433	\$890,555	\$2,023,988				
Movable or Other Equipment (not in construction							
contracts)	\$3,089,658	\$2,427,591	\$5,517,249				

TABLE TWO								
Project Costs and Sources of Funds								
St. Elizabeth's Hospit	tal-Ambulatory C	Care Center						
USE OF FUNDS	USE OF FUNDS CLINICAL NONCLINICAL TOTAL							
Bond Issuance Expense (project related)	\$94,356	\$74,137	\$168,493					
Net Interest Expense During Construction (project related)	\$850,655	\$668,372	\$1,519,027					
Fair Market Value of Space/Equipment	\$7,716,892	\$6,063,280	\$13,780,172					
Other Costs to be Capitalized	\$3,145,976	\$2,471,841	\$5,617,817					
TOTAL USES OF FUNDS	\$19,176,403	\$15,067,191	\$34,243,594					
SOURCE OF FUNDS								
Cash and Securities	\$5,229,193	\$4,108,652	\$9,337,845					
Gifts and Bequests	\$167,703	\$131,767	\$299,470					
Bond Issues (project related)	\$13,779,516	\$10,826,762	\$24,606,278					
TOTAL SOURCES OF FUNDS								

The Ambulatory Care Center/Physician Office Building is located on land currently owned by the co-applicant Hospital Sisters Health System. The Hospital Sisters Health System will transfer ownership of the land to St. Elizabeth's Hospital and it will be ground leased to O'Fallon Medical Office Building, LLC for 25 years. A copy of the St. Elizabeth's Hospital's Letter of Intent for leased space in the building has been provided along with a copy of the Development Agreement, which appears to provide assurance that the building St. Elizabeth's Hospital will lease space in will be constructed. The agreement allows the Hospital to terminate the agreement and take back the project, for the purpose of constructing the building in a timely manner to facilitate the use of the space leased. As has been noted Hospital Sisters Health System has the financial resources to complete the project if necessary.

# VI. Cost/Space Requirements

The applicants are proposing to construct 30,365 gross square feet of clinical space and 34,904 gross square feet of non clinical space for total of 65,269 GSF for the ACC/POB. Table Three illustrates the specific clinical spatial allotments, with the nonclinical subtotal below. Board Staff notes only clinical spatial considerations are evaluated in regard to meeting prescribed Board spatial standards.

TABLE THREE Costs Space Requirements						
Department	Costs	Existing GSF	Proposed GSF	New Construction	Vacated Space	
Cardiac Rehab/H2H Clinic	\$3,827,612	9,999	6,052	6,052	9,999	
Infusion Center	\$1,194,691	3,023	1,892	1,892	3,023	
Lab/Pathology/Blood Bank	\$5,620,607	11,588	8,899	8,899	11,588	
Pain Mgmt./Procedure Room	\$657,751	3,555	1,042	1,042	3,555	
Outpatient Physical Medicine	\$5,488,289	9,789	8,689	8,689	9,789	
Women's Imaging						
Mammography	\$1,583,971	0	2,508	2,508	0	
Densitometry	\$295,317	0	459	459	0	
Ultrasound (mobile)	\$508,175	0	459	459	0	
Total Women's Imaging	\$2,387,463	2,924	3,781	3,781	2,924	
Total Project	\$19,176,413	39,378	30,365	30,365	39,878	

# VII. Charity Care

The applicants stated the following:

"The mission statement of St. Elizabeth's and HSHS is to reveal and embody Christ's healing love for all people through our high quality Franciscan Health Care ministry. St. Elizabeth's colleagues live that mission by providing holistic healing to all who seek our care, as well as through community benefit. By working collaboratively with other organizations, St. Elizabeth's is helping expand access to care, improving residents' health status, and furthering medical education and knowledge."

TABLE FOUR Safety Net Information per PA 96-0031 St. Elizabeth Hospital							
Charity Care							
Charity (# of patients)	2013	2012	2011				
Inpatient	889	1,293	825				
Outpatient	5,090	6,531	4,945				
Total	5,979	7,824	5,770				
Charity (cost in dollars)							
Net Patient Revenue	\$158,547,048	\$170,284,906	\$176,696,159				
Amount of Charity Care Charges	\$19,391,687	\$15,749,939	\$14,788,672				
Charity Care	\$4,398,861	\$4,559,607	\$4,761,950				
	2.77%	2.68%	2.69%				
As previously reported on AHQ (1)	2013	2012	2011				
Inpatients		142	275				
Outpatients		574	990				
Total		716	1,265				
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<sup>1.</sup> Information in 2011 and 2012 charity care patient numbers vary from the AHQ responses because the Hospital used the wrong calculation method (not the one specified in the AHQ responses).

### VIII. Background of Applicant

# A) Criterion 1110. 3030 (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 licensing information as required by this criterion, and a listing of all health care facilities owned/operated by HSHS. The applicants have supplied attestation of no negative judgments or actions being taken against them in the three years prior to the filing of this application, and authorization permitting HFSRB and IDPH to access any documentation necessary to verify said statements. The applicants have met the requirements of this criterion.

# THE STATE BOARD STAFF FINDS THE PROPOSED PROJECT TO BE IN CONFORMANCE WITH CRITERION BACKGROUND OF APPLICANT (77 IAC 1110.3030 (b)(1)(3)

# IX. Section 1110.230 - Project Purpose, Safety Net Impact and Alternatives

# A) Criterion 1110.230 (a) - Purpose of the Project

The applicant shall document that the project will provide health services that improve the health care or well-being of the market area population to be served. The applicant shall define the planning area or market area, or other, per the applicant's definition.

The applicants stated the general purpose for the proposed project stems from the requirements of IL Admin Code 1100.360, which states: "The people of Illinois should have facilities which are modern, are in accord with recognized standards of design, construction, operation, and which represent the most cost efficient alternative for the provision of quality of care."

The applicants propose to achieve this objective through the relocation, modernization, and right-sizing of its acute care hospital, and its outpatient care services. See pages 95-104 of the application for permit for complete discussion.

### B) Criterion 1110.230 (b) – Safety Net Impact

The Illinois Health Facilities Planning Act (20 ILCS 3960/5.4) requires a safety net impact statement of all substantive and discontinuation projects. The proposed project is a non-substantive project.

# C) Criterion 1110.230 (c) - Alternatives to the Proposed Project The applicant shall document that the proposed project is the most effective or least costly alternative for meeting the health care needs of the population to be served by the project.

The applicants considered three alternatives to the proposed project, beginning on page 108 of the application. The four alternatives are:

TABLE FIVE					
	Alternatives to the Proposed Project				
Alternatives	Project	Reason for Rejection			
	Cost	-			
Construct Replacement	\$16.8 million	The applicants rejected this alternative due to its high cost,			
Hospital that would Include	more than	and the fact that it did not accommodate a need for			
those Services Located in	chosen	physician office space.			
the ACC	alternative				
Construct Replacement	Same as	The applicants rejected this alternative, because a project			
Hospital Housing all	Option Chosen	of this nature would still result in the construction of two			
Services with a portion of	(\$287 million,	buildings with the possibility that they could be developed			
the facility being built to	Hospital +	as an integrated structure. However, the applicants note			
business standards as	MOB)	this alternative would present difficulties from the design			
opposed to Life Safety		standards point, and may cause confusion pertaining to its			
Standards		applicability to life safety codes. The applicants further			
		note this alternative would not create a free-standing			
		physicians office building, which was part of the			
	****	applicants original plan.			
Use a Third Party	\$287 Million	<b>Option Chosen</b> . The applicants state this option was the			
Developer to Construct a	(Hospital +	only alternative that would provide the space needed			
Building that would Include	MOB)	without compromising service or function. The total			
Leased Space for an ACC		spatial configuration of the building design allowed for			
and Physician Office Space		ample physician office space, and a design that makes the			
(Option Chosen)		two buildings function as single unit, resulting in optimal			
		traffic flow and enhanced patient/staff movement.			

# X. Criterion 1110.234 (a) - Size of Project

The applicant shall document that the physical space proposed for the project is necessary and appropriate.

To demonstrate compliance with 77 IAC 1110.234(a) Size of the Project the applicant provided the departmental gross square footage for all areas being modernized/established.

This Project proposes to establish an Ambulatory Care Center/Physician Office Building (ACC/POB) in close proximity and attached to a replacement acute care hospital, in O'Fallon, Illinois. Table Six identifies two services to be located in the MOB that have State size standards.

TABLE SIX Size of Project Ambulatory Care Center(ACC) / Physicians Office Building (POB)								
	Number of Proposed Proposed State Standard Met Beds/Units GSF per GSF per Proposed Service Room State Standard?							
Pain Management	1	1,042	1,042	1,110 GSF/Room	Yes			
Mammography and Stereotactic	4	2,508	627	3,600 GSF/ 900 GSF/Room	Yes			

Based on the spatial allocations presented in Table Four, it appears the applicants have met the requirements of this criterion.

THE STATE BOARD STAFF FINDS THE PROPOSED PROJECT TO BE IN CONFORMANCE WITH CRITERION SIZE OF PROJECT (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 supplied data that indicates 86.1% of St. Elizabeth's patients reside in Planning Area F-01, which supports the fact that the primary purpose of the project is to serve the residents of this planning area. The applicants supplied the historical utilization data (from 2013), in Table Seven. The applicants predict the utilization at the new facility will remain stable with the 2013 utilization data, for the second year after project completion, thus supporting the establishment of the rooms/units proposed. A positive finding results for this criterion.

TABLE SEVEN Project Services Utilization St. Elizabeth's Hospital-Ambulatory Care Center					
Historical Projected Number State Board Standard Met Utilization Utilization Rooms/Units Standard 2013 2018 Proposed State Board Standard					
Pain Management	764 hrs	764 hrs	1	1,500 hours/room	Yes
Mammography	18,223 visits	18,223 visits	4	5,000 visits/unit	Yes

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

### XI. 1110.3030 – Clinical Service Areas Other than Categories of Service

- These criteria are applicable only to those projects or components of projects (including major medical equipment), concerning Clinical Service Areas (CSAs) that are not "Categories of Service", but for which utilization standards are listed in Appendix B, including:
  - A) Surgery
  - B) Emergency Services and/or Trauma
  - C) Ambulatory Care Services (organized as a service)
  - D) Diagnostic and Interventional Radiology/Imaging
  - E) Therapeutic Radiology
  - F) Laboratory
  - G) Pharmacy
  - H) Occupational Therapy/Physical Therapy
  - I) Major Medical Equipment
- The applicant shall also comply with requirements of the review criterion in Section 1110.234(a) (Size of Project Review Criteria), as well as all other applicable requirements in this Part and 77 Ill. Adm. Code 1100 and 1130. Applicants proposing to establish, expand or modernize CSAs shall comply with the applicable subsections of this Section, as follows:

PROJECT TYPE	REQUIRED REVIEW CRITERIA		
New Services or Facility or Equipment	(b)(1) & (3)	Background of the Applicant	
	(c)	Need Determination — Establishment	

# 1) Pain Management

The applicants note that 86.9% of its surgical patient base resides in the Planning Area F-01, serving as proof that the primary purpose of the proposed project is to serve the residents of the planning area. The applicants propose to establish one Pain Management Suite, and reports sufficient historical and projected utilization data (See Table Seven) to establish a positive finding for this criterion.

### 2) Mammography

The applicants note that 86.9% of its surgical patient base resides in the Planning Area F-01, serving as proof that the primary purpose of the proposed project is to serve the residents of the planning area. The applicants propose to relocate 4 Mammography units from the current ambulatory care center in Belleville, and reports sufficient historical and projected utilization data (See Table Seven) to establish a positive finding for this criterion.

THE STATE AGENCY FINDS THE PROPOSED PROJECT APPEARS TO BE IN CONFORMANCE WITH THE CLINICAL SERVICE AREAS OTHER THAN CATEGORIES OF SERVICE CRITERIA (77 IAC 1110.3030).

# **XI.** 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 have an AA-/Stable bond rating from Standard and Poor's (application, p. 132), and an AA-/F1+ rating from FitchRatings Service (application, p. 128). The applicants have met the requirements of this criterion.

FINANCIAL INFORMATION						
Audited						
	In thousands		T	T		
	Hospital Sis		St.	St.		
	Syst	tem	Elizabeth	Elizabeth		
			Hospital	Hospital		
Fiscal Year	2013	2012	2013	2012		
	Balance Shee	et				
Cash	\$81,110	\$90,514	\$2,288	(\$4,023)		
Current Assets	\$746,634	\$683,257	\$36,248	\$32,009		
Fixed Assets	\$2,849,432	\$2,672,440	\$77,521	\$96,313		
Total Assets	\$3,596,066	\$3,355,697	\$113,769	\$128,322		
Current Liabilities	\$479,084	\$454,302	\$26,759	\$29,099		
Long Term Liabilities	\$865,473	\$982,172	\$91,047	\$104,290		
Total Liabilities	\$1,344,557	\$1,436,474	\$117,806	\$133,350		
Net Assets	\$2,251,509	\$1,919,223	(\$4,307)	(\$5,028)		
Total Liabilities & Net Assets	\$3,596,066	\$3,355,697	\$113,499	\$128,322		
	Income Statem	ent				
Net Patient Revenue	\$1,904,977	\$1,869,928	\$140,923	\$146,448		
Other Revenue	\$102,589	\$59,946	\$6,907	\$4,526		
Total Revenue	\$2,007,566	\$1,929,874	\$147,830	\$150,974		
Expenses	\$1,986,002	\$1,929,583	\$163,745	\$163,387		
Income from Operations	\$21,564	\$291	(\$15,915)	(\$12,413)		
Non Operating Income (Loss)	\$167,879	(\$11,943)	(\$10,589)	(\$3,148)		
Revenues in Excess of Expenses	\$327,261	(\$165,502)	\$401	(\$15,561)		

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

### XII. Section 1120.130 - Financial Viability

The applicant shall document that the applicant is financially viable.

The applicants have an AA-/Stable bond rating from Standard and Poor's (application, p. 132), and an AA-/F1+ rating from FitchRatings Service (application, p. 128). Based on these submissions, the requirements of this criterion are inapplicable.

THE STATE BOARD STAFF FINDS THE FINANCIAL VIABILITY CRITERION IS INAPPLICABLE TO THE PROPOSED PROJECT (77 IAC 1120.130).

### XIII. 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 have an AA-/Stable bond rating from Standard and Poor's (application, p. 132), and an AA-/F1+ rating from FitchRatings Service (application, p. 128), proving that the applicants have met the requirements of this criterion.

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

B) Criterion 1120.140 (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.

The applicants are funding the proposed project with a combination of Cash & Securities (\$9,337,845), Gifts & Bequests (\$299,470), and Bond Issues (\$24,606,278). The applicants supplied notarized attestation (application, p. 144) stating their intent to use the lowest form of debt financing available, thus meeting the requirements of this criterion.

The applicants stated "the purpose of this letter is to attest to the fact that Hospital Sisters Services, Inc. will use the selected form of debt financing for the St. Elizabeth's Hospital Relocation Project described in this certificate of need application because it will be the lowest interest cost available, is more advantageous due to such terms as prepayment privileges, requires no mortgage, and provides access to additional indebtedness, term, financing costs, and other factors. Generally, the term of the indebtedness is anticipated to be 30 years but would not exceed 40 years and the interest rate approximating 4% but not to exceed 6%."

THE STATE BOARD STAFF FINDS THE PROPOSED PROJECT APPEARS TO BE IN CONFORMANCE WITH THE CONDITIONS OF DEBT FINANCING CRITERION (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 the State Board Standards.

The applicants are utilizing a third-party developer to incur the expense of constructing the proposed MOB, and the applicants will then lease the necessary space from the developer. The applicants report no new construction costs/contingencies, but have identified costs associated with the fair market value (FMV) of the lease. Only the clinical costs will be reviewed for this criterion.

<u>Preplanning</u> – These costs total \$403,161. The applicants did not incur new construction/contingency costs, leaving no evaluative criteria for this line item.

<u>Site Survey and Soil Investigation and Site Preparation</u> – These costs are \$1,643,520. The applicants did not incur new construction/contingency costs, leaving no evaluative criteria for this line item.

<u>Off Site Work</u> – These costs are \$606,146. The State Board does not have a standard for this cost.

<u>Architectural/Engineering Fees</u> – These costs are \$492,606. The applicants did not incur new construction/contingency costs, leaving no evaluative criteria for this line item.

<u>Consulting and Other fees</u> – These costs are \$1,133,433. The State Board does not have a standard for these costs.

<u>Movable of Other Equipment</u> – These costs are \$3,089,658. The State Board does not have a standard for these costs.

**Bond Issuance Expense** – These costs are \$94,356. The State Board does not have a standard for these costs.

<u>Fair Market Value of Leased Space/Equipment</u> – These costs are \$7,716,892. The State Board does not have a standard for these costs.

<u>Other Costs to be Capitalized</u> – These costs are \$3,145,976. The State Board does not have a standard for these costs.

Board Staff reports the applicants did not report costs over the State standard, and a positive finding results for this criterion.

THE STATE BOARD STAFF FINDS THE PROPOSED PROJECT APPEARS TO BE IN CONFORMANCE WITH THE CONDITIONS OF REASONABLENESS OF PROJECT AND RELATED COST CRITERION (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. Direct costs mean the fully allocated costs of salaries, benefits and supplies for the service.

The direct cost per equivalent patient day is \$966 per equivalent patient day. The State Board does not have a standard for these costs.

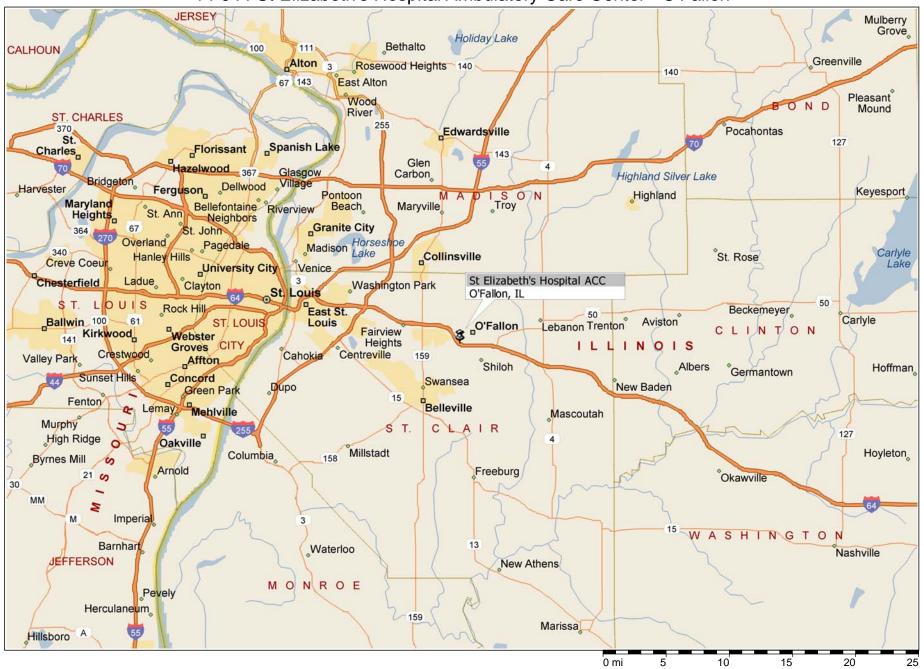
THE STATE BOARD STAFF FINDS THE PROPOSED PROJECT TO BE IN CONFORMANCE WITH CRITERION PROJECTED OPERATING COSTS (77 IAC 1120.140 (d))

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 total effect of the project on capital costs is \$197 per equivalent patient day. 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 TOTAL EFFECT OF THE PROJECT ON CAPITAL COSTS (77 IAC 1120.140 (e)

# 14-044 St Elizabeth's Hospital Ambulatory Care Center - O'Fallon



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