

LTC APPLICATION FOR PERMIT
RECEIVED
July 2012 Edition

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**LONG-TERM CARE
APPLICATION FOR PERMIT**

HEALTH FACILITIES &
SERVICES REVIEW BOARD

SECTION I. IDENTIFICATION, GENERAL INFORMATION, AND CERTIFICATION

This Section must be completed for all projects.

15-037

DESCRIPTION OF PROJECT

Project Type

[Check one]

[check one]

<input checked="" type="checkbox"/> General Long-term Care	<input type="checkbox"/> Establishment of a new LTC facility
<input type="checkbox"/> Specialized Long-term Care	<input type="checkbox"/> Establishment of new LTC services
	<input checked="" type="checkbox"/> Expansion of an existing LTC facility or service
	<input checked="" type="checkbox"/> Modernization of an existing facility

Narrative Description

Provide in the space below, a brief narrative description of the project. Explain **WHAT** is to be done, **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. **Include: the number and type of beds involved; the actions proposed (establishment, expansion and/or modernization); the ESTIMATED total project cost and the funding source(s) for the project.**

Alden Courts of Waterford (Alden Courts) is a 66-bed sheltered care facility on a Continuum of Care Retirement Campus (CCRC) that is also home to: Alden of Waterford, a 99-bed nursing care building that is connected to the subject building via an underground tunnel; Alden Gardens of Waterford, a 121-bed sheltered care building; Alden Horizons, a 68 unit, three story apartment building and 30 villas (98 total units); and The Lakes of Waterford which has 33 duplexes. The entire campus is age restricted to the elderly. Specifically, Alden Courts is proposing to convert one of its 22-bed sheltered care units into a 20-bed nursing unit for a resulting building compliment of 20 nursing beds and 44 sheltered care beds. Refer to **ATTACHMENT-ND** for a rendering of the entire campus. It should be known that Alden Courts is a specialized facility exclusively for the care and treatment of those with memory impairment. Moreover, said conversion will be for the continued care and treatment of those with memory issues as their medical needs start outweighing their programmatic needs.

There is some minimal construction/renovation as part of this project as the unit will have to meet nursing care standards. The existing building is a single story 40,118 gross square foot structure. The nursing care unit will comprise 9,254 gross square feet with the balance of 30,864 gross square feet for sheltered care. All ancillary services to support the converted units are and will remain in-common and in-place and as such are listed within this application as part of the existing nursing square footage. Alden Courts of Waterford is located at 1991 Randi Drive in Aurora, Illinois.

This project is classified as substantive as it is the addition of nursing beds to the existing nursing category of in accordance with 77 Illinois Administrative Code, Chapter II, Subchapter a, criterion 1110.40.

ALDEN of Waterford



A member of the Alden network



ATTACHMENT-ND

Facility/Project Identification

Facility Name: Alden Courts of Waterford		
Street Address: 1991 Randi Drive		
City and Zip Code: Aurora 60504		
County: Kane	Health Service Area: 008	Health Planning Area: 089

Applicant /Co-Applicant Identification

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

Exact Legal Name: Waterford Rehab & Courts, LLC
Address: 4200 West Peterson Avenue, Chicago, Illinois 60646
Name of Registered Agent: Mary Chelotti-Smith
Name of Chief Executive Officer: Randi Schullo, Manager
CEO Address: 4200 West Peterson Avenue, Chicago, Illinois 60646
Telephone Number: (773) 724-6324

Type of Ownership (Applicant/Co-Applicants)

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

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

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

Primary Contact

[Person to receive ALL correspondence or inquiries]

Name: John P. Kniery
Title: Health Care Consultant
Company Name: Foley & Associates, Inc.
Address: 133 South 4th Street, Suite 200, Springfield, Illinois 62701
Telephone Number: (217) 544-1551
E-mail Address: <u>jkniery@foleyandassociates.com</u>
Fax Number: (217) 544-3615

Additional Contact

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

Name: Charles H. Foley, MHSA
Title: Health Care Consultant
Company Name: Foley and Associates, Inc.
Address: 133 South 4th Street, Suite 200, Springfield, Illinois 62701
Telephone Number: (217) 544-1551
E-mail Address: <u>cfoley@foleyandassociates.com</u>
Fax Number: (217) 544-3615

Facility/Project Identification

Facility Name: Alden Courts of Waterford		
Street Address: 1991 Randi Drive		
City and Zip Code: Aurora 60504		
County: Kane	Health Service Area: 008	Health Planning Area: 089

Applicant /Co-Applicant Identification

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

Exact Legal Name: Alden of Waterford Investments, LLC
Address: 4200 West Peterson Avenue, Chicago, Illinois 60646
Name of Registered Agent: Mary Chelotti-Smith
Name of Chief Executive Officer: Joan Carl, Manager
CEO Address: 4200 West Peterson Avenue, Chicago, Illinois 60646
Telephone Number: (773) 286-3883

Type of Ownership (Applicant/Co-Applicants)

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

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 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.

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Primary Contact

[Person to receive ALL correspondence or inquiries]

Name: John P. Kniery
Title: Health Care Consultant
Company Name: Foley & Associates, Inc.
Address: 133 South 4th Street, Suite 200, Springfield, Illinois 62701
Telephone Number: (217) 544-1551
E-mail Address: jkniery@foleyandassociates.com
Fax Number: (217) 544-3615

Additional Contact

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

Name: Joe Ourth
Title: Attorney at Law
Company Name: Arnstein & Lehr, LLP
Address: 120 South Riverside Plaza, Suite 1200, Chicago, Illinois 60606
Telephone Number: (312) 876-7815
E-mail Address: jourth@arnstein.com
Fax Number: (312) 876-0288

Facility/Project Identification

Facility Name: Alden Courts of Waterford		
Street Address: 1991 Randi Drive		
City and Zip Code: Aurora 60504		
County: Kane	Health Service Area: 008	Health Planning Area: 089

Applicant /Co-Applicant Identification**[Provide for each co-applicant [refer to Part 1130.220].**

Exact Legal Name: The Alden Group, Ltd.
Address: 4200 West Peterson Avenue, Chicago, Illinois 60646
Name of Registered Agent: Mary Chelotti-Smith
Name of Chief Executive Officer: Floyd A. Schlossberg, President
CEO Address: 4200 West Peterson Avenue, Chicago, Illinois 60646
Telephone Number: (773) 286-3883

Type of Ownership (Applicant/Co-Applicants)

<input type="checkbox"/> Non-profit Corporation	<input type="checkbox"/> Partnership	
<input checked="" type="checkbox"/> For-profit Corporation	<input type="checkbox"/> Governmental	
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Name: John P. Kniery
Title: Health Care Consultant
Company Name: Foley & Associates, Inc.
Address: 133 South 4th Street, Suite 200, Springfield, Illinois 62701
Telephone Number: (217) 544-1551
E-mail Address: jkniery@foleyandassociates.com
Fax Number: (217) 544-3615

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

Name: Randi Schullo
Title: President
Company Name: Alden Realty Services, Inc.
Address: 4200 West Peterson Avenue, Chicago, Illinois 60646
Telephone Number: (773) 724-6324
E-mail Address: Randi.schullo@thealdennetwork.com
Fax Number: (773) 286-1562

Facility/Project Identification

Facility Name: Alden Courts of Waterford		
Street Address: 1991 Randi Drive		
City and Zip Code: Aurora 60504		
County: Kane	Health Service Area: 008	Health Planning Area: 089

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

Exact Legal Name: Alden Courts of Waterford, LLC
Address: 4200 West Peterson Avenue, Chicago, Illinois 60646
Name of Registered Agent: Mary Chelotti-Smith
Name of Chief Executive Officer: Randi Schullo, Manager
CEO Address: 4200 West Peterson Avenue, Chicago, Illinois 60646
Telephone Number: (773) 724-6324

Type of Ownership (Applicant/Co-Applicants)

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

- Corporations and limited liability companies must provide an **Illinois certificate of good standing**.
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Title: Health Care Consultant
Company Name: Foley & Associates, Inc.
Address: 133 South 4th Street, Suite 200, Springfield, Illinois 62701
Telephone Number: (217) 544-1551
E-mail Address: jkniery@foleyandassociates.com
Fax Number: (217) 544-3615

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Name: Randi Schullo
Title: President
Company Name: Alden Realty Services, Inc.
Address: 4200 West Peterson Avenue, Chicago, Illinois 60646
Telephone Number: (773) 724-6324
E-mail Address: Randi.schullo@thealdennetwork.com
Fax Number: (773) 286-1562

Post Permit Contact

[Person to receive all correspondence subsequent to permit issuance. **This person must be an employee of the applicant.**]

Name: Randi Schullo
Title: President
Company Name: Alden Realty Services, Inc.
Address: 4200 West Peterson Avenue, Chicago, Illinois 60646
Telephone Number: (773) 724-6324
E-mail Address: randi.schullo@thealdennetwork.com
Fax Number: (773) 286-1562

Site Ownership

[Provide this information for each applicable site]

Exact Legal Name of Site Owner: Waterford Rehab & Courts, LLC
Address of Site Owner: 4200 West Peterson Avenue, Chicago, Illinois 60646
Street Address or Legal Description of Site: 1991-2021 Randi Drive, Aurora, Illinois 60504
Proof of ownership or control of the site is to be provided as . 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: Alden Courts of Waterford, LLC
Address: 4200 West Peterson Avenue, Chicago, Illinois 60646
<input type="checkbox"/> Non-profit Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> For-profit Corporation <input type="checkbox"/> Governmental <input checked="" type="checkbox"/> Limited Liability Company <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Other
<ul style="list-style-type: none"> ○ Corporations and limited liability companies must provide an Illinois Certificate of Good Standing. ○ 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. ○ Persons with 5 percent or greater interest in the licensee must be identified with the % of ownership.
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 or 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.

State Agency Submittals

The following submittals are up- to- date, as applicable:

- All formal document requests such as IDPH Questionnaires and Annual Bed Reports been submitted
- All reports regarding outstanding permits

If the applicant fails to submit updated information for the requirements listed above, the application for permit will be deemed incomplete.

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 manger 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 Waterford Rehab & Courts, 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.

BY: [Signature]
SIGNATURE
JOAN CARL
PRINTED NAME
CO-MANAGER
PRINTED TITLE

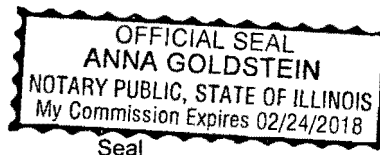
[Signature]
SIGNATURE
LARA SCHULTE
PRINTED NAME
Co-Manager
PRINTED TITLE

Notarization:
Subscribed and sworn to before me
this 15 day of July, 2015

Notarization:
Subscribed and sworn to before me
this 15 day of July, 2015

[Signature]
Signature of Notary

[Signature]
Signature of Notary



*Insert EXACT legal name of the applicant

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BY: Joan Carl
SIGNATURE
JOAN CARL
PRINTED NAME
CO-MANAGER
PRINTED TITLE

Randi Schullb
SIGNATURE
RANDI SCHULLB
PRINTED NAME
Co-Manager
PRINTED TITLE

Notarization:
Subscribed and sworn to before me
this 15 day of July, 2015

[Signature]
Signature of Notary

Notarization:
Subscribed and sworn to before me
this 15 day of July, 2015

[Signature]
Signature of Notary



*Insert EXACT legal name of the applicant

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By: Joan Carl
SIGNATURE
JOAN CARL
PRINTED NAME
V.P.
PRINTED TITLE

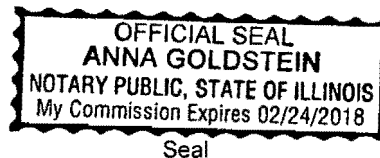
Andr Schullb
SIGNATURE
ANDR SCHULLB
PRINTED NAME
Vice President
PRINTED TITLE

Notarization:
Subscribed and sworn to before me
this 15 day of July, 2015

[Signature]
Signature of Notary

Notarization:
Subscribed and sworn to before me
this 15 day of July, 2015

[Signature]
Signature of Notary



*Insert EXACT legal name of the applicant

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BY: Joan Carl
SIGNATURE
JOAN CARL
PRINTED NAME
Co-MANAGER
PRINTED TITLE

[Signature]
SIGNATURE
ANAST SCHULTZ
PRINTED NAME
PRINTED TITLE

Notarization:
Subscribed and sworn to before me
this 14 day of July, 2015

[Signature]
Signature of Notary

Notarization:
Subscribed and sworn to before me
this 16 day of July, 2015

[Signature]
Signature of Notary



*Insert EXACT legal name of the applicant

**SECTION II – PURPOSE OF THE PROJECT, AND ALTERNATIVES –
INFORMATION REQUIREMENTS**

This Section is applicable to ALL projects.

Criterion 1125.320 – Purpose of the Project

READ THE REVIEW CRITERION and provide the following required information:

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.
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-10, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM. Each item (1-6) must be identified in Attachment 10.

Criterion 1125.330 – Alternatives

READ THE REVIEW CRITERION and provide the following required information:

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-11, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

SECTION III – BED CAPACITY, UTILIZATION AND APPLICABLE REVIEW CRITERIA

This Section is applicable to all projects proposing establishment, expansion or modernization of LTC 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 LTC 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:

Criterion 1125.510 – Introduction**Bed Capacity**

Applicants proposing to establish, expand and/or modernize General Long Term Care must submit the following information:

Indicate bed capacity changes by Service:

Category of Service	Total # Existing Beds*	Total # Beds After Project Completion
<input checked="" type="checkbox"/> General Long-Term Care	66- Sheltered	44- Sheltered & 20 Nursing
<input type="checkbox"/> Specialized Long-Term Care		
<input type="checkbox"/>		

*Existing number of beds as authorized by IDPH and posted in the "LTC Bed Inventory" on the HFSRB website (www.hfrsb.illinois.gov). PLEASE NOTE: ANY bed capacity discrepancy from the Inventory will result in the application being deemed incomplete.

Utilization

Utilization for the most current CALENDAR YEAR:

Category of Service	Year	Admissions	Patient Days
<input checked="" type="checkbox"/> General Long Term Care	2017	66	6,570
<input type="checkbox"/> Specialized Long-Term Care		NA	NA

Applicable Review Criteria - Guide

The review criteria listed below must be addressed, per the LTC rules contained in 77 Ill. Adm. Code 1125. See HFSRB's website to view the subject criteria for each project type - (<http://hfsrb.illinois.gov>). To view LTC rules, click on "Board Administrative Rules" and then click on "77 Ill. Adm. Code 1125".

READ THE APPLICABLE REVIEW CRITERIA OUTLINED BELOW and submit the required documentation for the criteria, as described in SECTIONS IV and V:

GENERAL LONG-TERM CARE

PROJECT TYPE	REQUIRED REVIEW CRITERIA	
	Section	Subject
Establishment of Services or Facility	.520	Background of the Applicant
	.530(a)	Bed Need Determination
	.530(b)	Service to Planning Area Residents
	.540(a) or (b) + (c) + (d) or (e)	Service Demand – Establishment of General Long Term Care
	.570(a) & (b)	Service Accessibility
	.580(a) & (b)	Unnecessary Duplication & Maldistribution
	.580(c)	Impact of Project on Other Area Providers
	.590	Staffing Availability
	.600	Bed Capacity
	.610	Community Related Functions
	.620	Project Size
	.630	Zoning
	.640	Assurances
	.800	Estimated Total Project Cost
Appendix A	Project Costs and Sources of Funds	
Appendix B	Related Project Costs	
Appendix C	Project Status and Completion Schedule	
Appendix D	Project Status and Completion Schedule	

Expansion of Existing Services	.520	Background of the Applicant
	.530(b)	Service to Planning Area Residents
	.550(a) + (b) or (c)	Service Demand – Expansion of General Long-Term Care
	.590	Staffing Availability
	.600	Bed Capacity
	.620	Project Size
	.640	Assurances
	.560(a)(1) through (3)	Continuum of Care Components
	.590	Staffing Availability
	.600	Bed Capacity
	.610	Community Related Functions

	.630	Zoning
	.640	Assurances
	.800	Estimated Total Project Cost
	Appendix A	Project Costs and Sources of Funds
	Appendix B	Related Project Costs
	Appendix C	Project Status and Completion Schedule
	Appendix D	Project Status and Completion Schedule

Continuum of Care – Establishment or Expansion	.520	Background of the Applicant
	.560(a)(1) through (3)	Continuum of Care Components
	.590	Staffing Availability
	.600	Bed Capacity
	.610	Community Related Functions
	.630	Zoning
	.640	Assurances
	.800	Estimated Total Project Cost
	Appendix A	Project Costs and Sources of Funds
	Appendix B	Related Project Costs
	Appendix C	Project Status and Completion Schedule
	Appendix D	Project Status and Completion Schedule

Defined Population – Establishment or Expansion	.520	Background of the Applicant
	.560(b)(1) & (2)	Defined Population to be Served
	.590	Staffing Availability
	.600	Bed Capacity
	.610	Community Related Functions
	.630	Zoning
	.640	Assurances
	.800	Estimated Total Project Cost
	Appendix A	Project Costs and Sources of Funds
	Appendix B	Related Project Costs
	Appendix C	Project Status and Completion Schedule
	Appendix D	Project Status and Completion Schedule

Modernization	.650(a)	Deteriorated Facilities
	.650(b) & (c)	Documentation
	.650(d)	Utilization
	.600	Bed Capacity
	.610	Community Related Functions
	.620	Project Size
	.630	Zoning
	.800	Estimated Total Project Cost
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	Appendix B	Related Project Costs
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	Appendix D	Project Status and Completion Schedule

SPECIALIZED LONG-TERM CARE

PROJECT TYPE	REQUIRED REVIEW CRITERIA	
	Section	Subject
Establishment of LTC Developmentally Disabled – (Adult)	.720(a)	Facility Size
	.720(b)	Community Related Functions
	.720(c)	Availability of Ancillary and Support Programs
	.720(d)	Recommendations from State Departments
	.720(f)	Zoning
	.720(g)	Establishment of Beds – Developmentally Disable -Adult
	.720(j)	State Board Consideration of Public Hearing Testimony
	.800	Estimated Total Project Cost
	Appendix A	Project Costs and Sources of Funds
	Appendix B	Related Project Costs
	Appendix C	Project Status and Completion Schedule
	Appendix D	Project Status and Completion Schedule

Establishment of LTC Developmentally Disabled - Children	.720(a)	Facility Size
	.720(b)	Community Related Functions
	.720(c)	Availability of Ancillary and Support Programs
	.720(d)	Recommendations from State Departments
	.720(f)	Zoning
	.720(j)	State Board Consideration of Public Hearing Testimony
	.800	Estimated Total Project Cost
		Appendix A
	Appendix B	Related Project Costs
	Appendix C	Project Status and Completion Schedule
	Appendix D	Project Status and Completion Schedule

Establishment of Chronic Mental Illness	.720(a)	Facility Size
	.720(b)	Community Related Functions
	.720(c)	Availability of Ancillary and Support Programs
	.720(f)	Zoning
	.720(g)	Establishment of Chronic Mental Illness
	.720(j)	State Board Consideration of Public Hearing Testimony
	.800	Estimated Total Project Cost

	Appendix A	Project Costs and Sources of Funds
	Appendix B	Related Project Costs
	Appendix C	Project Status and Completion Schedule
	Appendix D	Project Status and Completion Schedule

Establishment of Long Term Medical Care for Children	.720(a)	Facility Size
	.720(b)	Community Related Functions
	.720(c)	Availability of Ancillary and Support Programs
	.720(e)	Long-Term Medical Care for Children-Category of Service
	.720(f)	Zoning
	.720(j)	State Board Consideration of Public Hearing Testimony
	.800	Estimated Total Project Cost
	Appendix A	Project Costs and Sources of Funds
	Appendix B	Related Project Costs
	Appendix C	Project Status and Completion Schedule
	Appendix D	Project Status and Completion Schedule

SECTION IV - SERVICE SPECIFIC REVIEW CRITERIA**GENERAL LONG-TERM CARE****Criterion 1125.520 – Background of the Applicant****BACKGROUND OF APPLICANT**

The applicant shall provide:

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-12, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM. EACH ITEM (1-4) MUST BE IDENTIFIED IN ATTACHMENT 11.

Criterion 1125.530 - Planning Area Need

1. Identify the calculated number of beds needed (excess) in the planning area. See HFSRB website (<http://hfsrb.illinois.gov>) and click on "Health Facilities Inventories & Data".
2. Attest that the primary purpose of the project is to serve residents of the planning area and that at least 50% of the patients will come from within the planning area.
3. Provide letters from referral sources (hospitals, physicians, social services and others) that attest to total number of prospective residents (by zip code of residence) who have received care at existing LTC facilities located in the area during the 12-month period prior to submission of the application. Referral sources shall verify their projections and the methodology used, as described in Section 1125.540.

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

Criterion 1125.540 - Service Demand – Establishment of General Long Term Care

<ul style="list-style-type: none"> • If the applicant is an existing facility wishing to establish this category of service or a new facility, #1 – 4 must be addressed. Requirements under #5 must also be addressed if applicable.
<ul style="list-style-type: none"> • If the applicant is not an existing facility and proposes to establish a new general LTC facility, the applicant shall submit the number of annual projected referrals.
<ol style="list-style-type: none"> 1. Document the number of referrals to other facilities, for each proposed category of service, for each of the latest two years. Documentation of the referrals shall include: resident/patient origin by zip code; name and specialty of referring physician or identification of another referral source; and name and location of the recipient LTC facility. 2. Provide letters from referral sources (hospitals, physicians, social services and others) that attest to total number of prospective residents (by zip code of residence) who have received care at existing LTC facilities located in the area during the 12-month period prior to submission of the application. Referral sources shall verify their projections and the methodology used. 3. Estimate the number of prospective residents whom the referral sources will refer annually to the applicant's facility within a 24-month period after project completion. Please note: <ul style="list-style-type: none"> • The anticipated number of referrals cannot exceed the referral sources' documented historical LTC caseload. • The percentage of project referrals used to justify the proposed expansion cannot exceed the historical percentage of applicant market share, within a 24-month period after project completion • Each referral letter shall contain the referral source's Chief Executive Officer's notarized signature, the typed or printed name of the referral source, and the referral source's address 4. Provide verification by the referral sources that the prospective resident referrals have not been used to support another pending or approved Certificate of Need (CON) application for the subject services. 5. If a projected demand for service is based upon rapid population growth in the applicant facility's existing market area (as experienced annually within the latest 24-month period), the projected service demand shall be determined as follows: <ol style="list-style-type: none"> a. The applicant shall define the facility's market area based upon historical resident/patient origin data by zip code or census tract; b. Population projections shall be produced, using, as a base, the population census or estimate for the most recent year, for county, incorporated place, township or community area, by the U.S. Bureau of the Census or IDPH; c. Projections shall be for a maximum period of 10 years from the date the application is submitted; d. Historical data used to calculate projections shall be for a number of years no less

than the number of years projected;

- e. Projections shall contain documentation of population changes in terms of births, deaths and net migration for a period of time equal to or in excess of the projection horizon;
- f. Projections shall be for total population and specified age groups for the applicant's market area, as defined by HFSRB, for each category of service in the application (see the HFSRB Inventory); and
- g. Documentation on projection methodology, data sources, assumptions and special adjustments shall be submitted to HFSRB.

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

Criterion 1125.550 - Service Demand – Expansion of General Long-Term Care

The applicant shall document #1 and either #2 or #3:

1. Historical Service Demand
 - a. An average annual occupancy rate that has equaled or exceeded occupancy standards for general LTC, as specified in Section 1125.210(c), for each of the latest two years.
 - b. If prospective residents have been referred to other facilities in order to receive the subject services, the applicant shall provide documentation of the referrals, including completed applications that could not be accepted due to lack of the subject service and documentation from referral sources, with identification of those patients by initials and date.
2. Projected Referrals

The applicant shall provide documentation as described in Section 1125.540(d).
3. **If a projected demand for service is based upon rapid population growth in the applicant facility's existing market area** (as experienced annually within the latest 24-month period), the projected service demand shall be determined as described in Section 1125.540 (e).

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

Criterion 1125.560 - Variances to Computed Bed Need – THIS ITEM IS NOT APPLICABLE Continuum of Care:

The applicant proposing a continuum of care project shall demonstrate the following:

1. The project will provide a continuum of care for a geriatric population that includes independent living and/or congregate housing (such as unlicensed apartments, high rises for the elderly and retirement villages) and related health and social services. The housing complex shall be on the same site as the health facility component of the project.
2. The proposal shall be for the purposes of and serve only the residents of the housing complex

and shall be developed either after the housing complex has been established or as a part of a total housing construction program, provided that the entire complex is one inseparable project, that there is a documented demand for the housing, and that the licensed beds will not be built first, but will be built concurrently with or after the residential units.

3. The applicant shall demonstrate that:
 - a. The proposed number of beds is needed. Documentation shall consist of a list of available patients/residents needing the proposed project. The proposed number of beds shall not exceed one licensed LTC bed for every five apartments or independent living units;
 - b. There is a provision in the facility's written operational policies assuring that a resident of the retirement community who is transferred to the LTC facility will not lose his/her apartment unit or be transferred to another LTC facility solely because of the resident's altered financial status or medical indigency; and
 - c. Admissions to the LTC unit will be limited to current residents of the independent living units and/or congregate housing.

Defined Population:

The applicant proposing a project for a defined population shall provide the following:

1. The applicant shall document that the proposed project will serve a defined population group of a religious, fraternal or ethnic nature from throughout the entire health service area or from a larger geographic service area (GSA) proposed to be served and that includes, at a minimum, the entire health service area in which the facility is or will be physically located.
2. The applicant shall document each of the following:
 - a. A description of the proposed religious, fraternal or ethnic group proposed to be served;
 - b. The boundaries of the GSA;
 - c. The number of individuals in the defined population who live within the proposed GSA, including the source of the figures;
 - d. That the proposed services do not exist in the GSA where the facility is or will be located;
 - e. That the services cannot be instituted at existing facilities within the GSA in sufficient numbers to accommodate the group's needs. The applicant shall specify each proposed service that is not available in the GSA's existing facilities and the basis for determining why that service could not be provided.
 - f. That at least 85% of the residents of the facility will be members of the defined population group. Documentation shall consist of a written admission policy insuring that the requirements of this subsection (b)(2)(F) will be met.
 - g. That the proposed project is either directly owned or sponsored by, or affiliated with, the religious, fraternal or ethnic group that has been defined as the population to be served by the project. The applicant shall provide legally binding documents that prove ownership, sponsorship or affiliation.

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

Criterion 1125.570 - Service Accessibility – THIS ITEM IS NOT APPLICABLE**1. Service Restrictions**

The applicant shall document that **at least one** of the following factors exists in the planning area, as applicable:

- The absence of the proposed service within the planning area;
- Access limitations due to payor status of patients/residents, including, but not limited to, individuals with LTC coverage through Medicare, Medicaid, managed care or charity care;
- Restrictive admission policies of existing providers; or
- The area population and existing care system exhibit indicators of medical care problems, such as an average family income level below the State average poverty level, or designation by the Secretary of Health and Human Services as a Health Professional Shortage Area, a Medically Underserved Area, or a Medically Underserved Population.

2. Additional documentation required:

The applicant shall provide the following documentation, as applicable, concerning existing restrictions to service access:

- a. The location and utilization of other planning area service providers;
- b. Patient/resident location information by zip code;
- c. Independent time-travel studies;
- d. Certification of a waiting list;
- e. Admission restrictions that exist in area providers;
- f. An assessment of area population characteristics that document that access problems exist;
- g. Most recently published IDPH Long Term Care Facilities Inventory and Data (see www.hfsrb.illinois.gov).

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

Criterion 1125.580 - Unnecessary Duplication/Maldistribution – THIS ITEM IS NOT APPLICABLE

1. The applicant shall provide the following information:
 - a. A list of all zip code areas that are located, in total or in part, within 30 minutes normal travel time of the project's site;
 - b. The total population of the identified zip code areas (based upon the most recent population numbers available for the State of Illinois); and
 - c. The names and locations of all existing or approved LTC facilities located within 30 minutes normal travel time from the project site that provide the categories of bed service that are proposed by the project.
2. The applicant shall document that the project will not result in maldistribution of services.
3. The applicant shall document that, within 24 months after project completion, the proposed project:
 - a. Will not lower the utilization of other area providers below the occupancy standards specified in Section 1125.210(c); and
 - b. Will not lower, to a further extent, the utilization of other area facilities that are currently (during the latest 12-month period) operating below the occupancy standards.

APPEND DOCUMENTATION AS ATTACHMENT- 18, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

Criterion 1125.590 - Staffing Availability

1. For each category of service, document that relevant clinical and professional staffing needs for the proposed project were considered and that licensure and JCAHO staffing requirements can be met.
2. Provide the following documentation:
 - a. The name and qualification of the person currently filling the position, if applicable; and
 - b. Letters of interest from potential employees; and
 - c. Applications filed for each position; and
 - d. Signed contracts with the required staff; or
 - e. A narrative explanation of how the proposed staffing will be achieved.

APPEND DOCUMENTATION AS ATTACHMENT- 19, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

Criterion 1125.600 Bed Capacity

The maximum bed capacity of a general LTC facility is 250 beds, unless the applicant documents that a larger facility would provide personalization of patient/resident care and documents provision of quality care based on the experience of the applicant and compliance with IDPH's licensure standards (77 Ill. Adm. Code: Chapter I, Subchapter c (Long-Term Care Facilities)) over a two-year period.

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

Criterion 1125.610 - Community Related Functions

The applicant shall document cooperation with and the receipt of the endorsement of community groups in the town or municipality where the facility is or is proposed to be located, such as, but not limited to, social, economic or governmental organizations or other concerned parties or groups. Documentation shall consist of copies of all letters of support from those organizations.

APPEND DOCUMENTATION AS ATTACHMENT- 21, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

Criterion 1125.620 - Project Size

The applicant shall document that the amount of physical space proposed for the project is necessary and not excessive. The proposed gross square footage (GSF) cannot exceed the GSF standards as stated in Appendix A of 77 Ill. Adm. Code 1125 (LTC rules), unless the additional GSF can be justified by documenting one of the following:

1. Additional space is needed due to the scope of services provided, justified by clinical or operational needs, as supported by published data or studies;
2. 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 A;
3. The project involves the conversion of existing bed space that results in excess square footage.

APPEND DOCUMENTATION AS ATTACHMENT- 22, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

Criterion 1125.630 - Zoning

The applicant shall document **one** of the following:

1. The property to be utilized has been zoned for the type of facility to be developed;
2. Zoning approval has been received; or
3. A variance in zoning for the project is to be sought.

APPEND DOCUMENTATION AS ATTACHMENT- 23, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

Criterion 1125.640 - Assurances

1. The applicant representative who signs the CON application shall submit a signed and dated statement attesting to the applicant's understanding that, by the second year of operation after the project completion, the applicant will achieve and maintain the occupancy standards specified in Section 1125.210(c) for each category of service involved in the proposal.
2. For beds that have been approved based upon representations for continuum of care (Section 1125.560(a)) or defined population (Section 1125.560(b)), the facility shall provide assurance that it will maintain admissions limitations as specified in those Sections for the life of the facility. To eliminate or modify the admissions limitations, prior approval of HFSRB will be required.

APPEND DOCUMENTATION AS ATTACHMENT- 24, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

Criterion 1125.650 - Modernization

1. If the project involves modernization of a category of LTC bed service, the applicant shall document that the bed areas to be modernized are deteriorated or functionally obsolete and need to be replaced or modernized, due to such factors as, but not limited to:
 - a. High cost of maintenance;
 - b. non-compliance with licensing or life safety codes;
 - c. Changes in standards of care (e.g., private versus multiple bed rooms); or
 - d. Additional space for diagnostic or therapeutic purposes.
2. Documentation shall include the most recent:
 - a. IDPH and CMMS inspection reports; and
 - b. Accrediting agency reports.
3. Other documentation shall include the following, as applicable to the factors cited in the application:
 - a. Copies of maintenance reports;
 - b. Copies of citations for life safety code violations; and
 - c. Other pertinent reports and data.
4. Projects involving the replacement or modernization of a category of service or facility shall meet or exceed the occupancy standards for the categories of service, as specified in Section 1125.210(c).

APPEND DOCUMENTATION AS ATTACHMENT- 25, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

SPECIALIZED LONG-TERM CARE**Criterion 1125.720 - Specialized Long-Term Care – Review Criteria**

This section is applicable to all projects proposing specialized long-term care services or beds.

1. Community Related Functions

Read the criterion and submit the following information:

- a. a description of the process used to inform and receive input from the public including those residents living in close proximity to the proposed facility's location;
- b. letters of support from social, social service and economic groups in the community;
- c. letters of support from municipal/elected officials who represent the area where the project is located.

2. Availability of Ancillary and Support Services

Read the criterion, which applies only to ICF/DD 16 beds and fewer facilities, and submit the following:

- a. a copy of the letter, sent by certified mail return receipt requested, to each of the day programs in the area requesting their comments regarding the impact of the project upon their programs and any response letters;
- b. a description of the public transportation services available to the proposed residents;
- c. a description of the specialized services (other than day programming) available to the residents;
- d. a description of the availability of community activities available to the facility's residents.
- e. documentation of the availability of community workshops.

3. Recommendation from State Departments

Read the criterion and submit a copy of the letters sent, including the date when the letters were sent, to the Departments of Human Services and Healthcare and Family Services requesting these departments to indicate if the proposed project meets the department's planning objectives regarding the size, type, and number of beds proposed, whether the project conforms or does not conform to the department's plan, and how the project assists or hinders the department in achieving its planning objectives.

4. Long-term Medical Care for Children Category of Service

Read the criterion and submit the following information:

- a. a map outlining the target area proposed to be served;
- b. the number of individuals age 0-18 in the target area and the number of individuals in the target area that require the type of care proposed, include the source documents for this estimate;
- c. any reports/studies that show the points of origin of past patients/residents admissions to the facility;

- d. describe the special programs or services proposed and explain the relationship of these programs to the needs of the specialized population proposed to be served.
- e. indicate why the services in the area are insufficient to meet the needs of the area population;
- f. documentation that the 90% occupancy target will be achieved within the first full year of

5. Zoning

Read the criterion and provide a letter from an authorized zoning official that verifies appropriate zoning.

6. Establishment of Chronic Mental Illness

Read the criterion and provide the following:

- a. documentation of how the resident population has changed making the proposed project necessary.
- b. indicate which beds will be closed to accommodate these additional beds.
- c. the number of admissions for this type of care for each of the last two years.

7. Variance to Computed Bed Need for Establishment of Beds for Developmentally Disabled Placement of Residents from DHS State Operated Beds

Read this criterion and submit the following information:

- a. documentation that all of the residents proposed to be served are now residents of a DHS facility;
- b. documentation that each of the proposed residents has at least one interested family member who resides in the planning area or at least one interested family member that lives out of state but within 15 miles of the planning area boundary where the facility is or will be located;
- c. if the above is not the case then you must document that the proposed resident has lived in a DHS operated facility within the planning area in which the proposed facility is to be located for more than 2 years and that the consent of the legal guardian has been obtained;
- d. a letter from DHS indicating which facilities in the planning area have refused to accept referrals from the department and the dates of any refusals and the reasons cited for each refusal;
- e. a copy of the letter (sent certified--return receipt requested) to each of the underutilized facilities in the planning area asking if they accept referrals from DHS-operated facilities, listing the dates of each past refusal of a referral, and requesting an explanation of the basis for each refusal;
- f. documentation that each of the proposed relocations will save the State money;
- g. a statement that the facility will only accept future referrals from an area DHS facility if a bed is available;
- h. an explanation of how the proposed facility conforms with or deviates from the DHS comprehensive long range development plan for developmental disabilities services.

APPEND DOCUMENTATION AS ATTACHMENT-26, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

SECTION V – FINANCIAL AND ECONOMIC FEASIBILITY REVIEW

Criterion 1125.800 Estimated Total Project Cost

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):

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

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:**

<u>\$484,742</u>	a.	Cash and Securities – statements (e.g., audited financial statements, letters from financial institutions, board resolutions) as to: <ol style="list-style-type: none"> 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;
_____	d.	Debt – a statement of the estimated terms and conditions (including the debt time period, variable or permanent interest rates over the debt time period, and the anticipated repayment schedule) for any interim and for the permanent financing proposed to fund the project, including: <ol style="list-style-type: none"> 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;
_____	g. All Other Funds and Sources - verification of the amount and type of any other funds that will be used for the project.
\$484,742	TOTAL FUNDS AVAILABLE

APPEND DOCUMENTATION AS ATTACHMENT-27, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

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 – THIS ITEM IS NOT GERMANE

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-28, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

1. 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.

THIS ITEM IS NOT GERMANE

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 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 29, IN NUMERICAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

Economic Feasibility

This section is applicable to all projects

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 1.5 times for LTC 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:

Identify each 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 SERVICE									
Area (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)	
Nursing- Clinical		\$27.02			6,953			\$187,837	\$187,837
Contingency		\$ 2.70			6,953			\$ 18,784	\$ 18,784
Clinical total		\$29.72			6,953			\$206,621	\$206,621
Nursing-Total		\$27.02			9,254			\$250,000	\$250,000
Contingency- Total		\$ 2.70			9,254			\$ 25,000	\$ 25,000
TOTALS		\$29.72			9,254			\$275,000	\$275,000

* 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 - 30, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

APPENDIX A**Project Costs and Sources of Funds**

Complete the following table listing all costs 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			
Off Site Work			
New Construction Contracts			
Modernization Contracts	187,837	62,163	250,000
Contingencies	18,784	6,216	25,000
Architectural/Engineering Fees	28,927	9,573	38,500
Consulting and Other Fees	41,324	13,676	55,000
Movable or Other Equipment (not in construction contracts)	79,825	26,417	106,242
Bond Issuance Expense (project related)			
Net Interest Expense During Construction (project related)			
Fair Market Value of Leased Space or Equipment			
Other Costs To Be Capitalized	7,514	2,486	10,000
Acquisition of Building or Other Property (excluding land)			
TOTAL USES OF FUNDS	364,211	120,531	484,742
SOURCE OF FUNDS	CLINICAL	NON-CLINICAL	TOTAL
Cash and Securities	364,211	120,531	484,742
Pledges			
Gifts and Bequests			
Bond Issues (project related)			
Mortgages			
Leases (fair market value)			
Governmental Appropriations			
Grants			
Other Funds and Sources			
TOTAL SOURCES OF FUNDS	364,211	120,531	484,742

APPENDIX 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: \$	<u>N/A</u>	
Fair Market Value: \$	<u>N/A</u>	

The project involves the establishment of a new facility or a new category of service
 Yes No

If yes, provide the dollar amount of all **non-capitalized** 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 \$ 0.00

APPENDIX C

Project Status and Completion Schedules

Indicate the stage of the project's architectural drawings:

- None or not applicable
- Preliminary
- Schematics
- Final Working

Anticipated project completion date (refer to Part 1130.140): 12/31/2016

Indicate the following with respect to project expenditures or to obligation (refer to Part 1130.140):

- Purchase orders, leases or contracts pertaining to the project have been executed.
- Project obligation is contingent upon permit issuance. Provide a copy of the contingent "certification of obligation" document, highlighting any language related to CON Contingencies
- Project obligation will occur after permit issuance.

APPENDIX D**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
CLINICAL							
Nursing	\$272,018	15,163	5,193		5,193	9,970	
Living / Dining / Activity	\$61,549	5,323	1,175		1,175	4,148	
Kitchen / Food Service	\$7,648	587	146		146	441	
Laundry	\$4,191	519	80		80	439	
Beauty / Barber	\$0	108				108	
Janitor Closets	\$4,243	243	81		81	162	
Clean / Soiled Utility	\$14,562	834	278		278	556	
TOTAL CLINICAL	\$364,211	22,777	6,953		6,953	15,824	
NON CLINICAL							
Corridor / Public Toilet	\$117,755	4,816	2,248		2,248	2,568	
Administration / Admitting / Social Services	\$0	844				844	
Employee Lounge & Facilities	\$2,776	119	53		53	66	
Stairs	\$0	453				453	
Lobby	\$0	595				595	
Interior Court	\$0	1,512				1,512	
Elevators / Equipment Room	\$0	472				472	
Library	\$0	306				306	
Soda	\$0	396				396	
Basement (Including Link)	\$0	6,500				6,500	
Connecting Tunnel	\$0	1,083				1,083	
All Other Support	\$0	245				245	
TOTAL NON-CLINICAL	\$120,531	17,341	2,301		2,301	15,040	
TOTAL	\$484,742	40,118	9,254		9,254	30,864	

*Please note: All existing space is Sheltered Care, not nursing care.

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:

INDEX OF ATTACHMENTS		
ATTACHMENT NO.		PAGES
1	Applicant/Co-applicant Identification including Certificate of Good Standing	39-43
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3	Operating Identity/Licensee	47-49
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5	Flood Plain Requirements	59-60
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10	Purpose of the Project	63-183
11	Alternatives to the Project	184-194
	Service Specific - General Long-Term Care	
12	Background of the Applicant	195-239
13	Planning Area Need	240-245
14	Establishment of General LTC Service or Facility	
15	Expansion of General LTC Service or Facility	246-247
16	Variances	
17	Accessibility	
18	Unnecessary Duplication/Maldistribution	
19	Staffing Availability	248-254
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	Service Specific - Specialized Long-Term Care	
26	Specialized Long-Term Care – Review Criteria	
	Financial and Economic Feasibility:	
27	Availability of Funds	276-279
28	Financial Waiver	280
29	Financial Viability	
30	Economic Feasibility	281-284
	APPENDICES	
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B	Related Project Costs	35
C	Project Status and Completion Schedule	36
D	Cost/Space Requirements	37

SECTION I – IDENTIFICATION, GENERAL INFORMATION, AND CERTIFICATION
Continued i

Applicant /Co-Applicant Identification

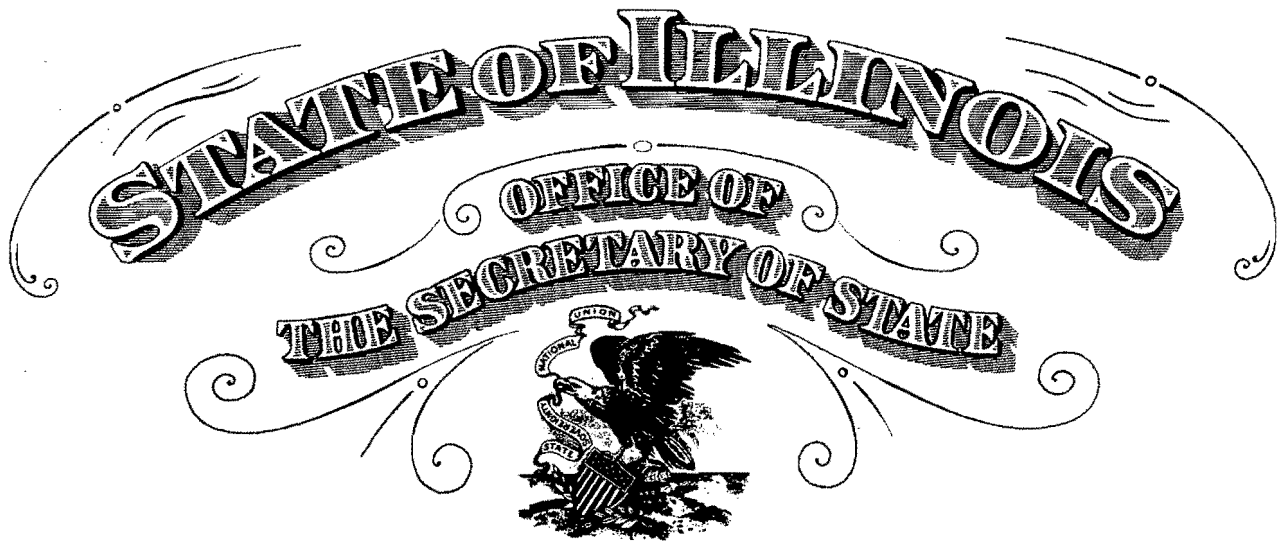
[Provide for each co-applicant [refer to Part 1130.220].

- Corporations and limited liability companies must provide an **Illinois certificate of good standing.**

The Applicants for the proposed project, Alden Courts of Waterford, are **Waterford Rehab & Courts, LLC** (owner) and **Alden Courts of Waterford, LLC** (operator/Licensee).

The owner of both the ownership and operating entities is **Alden of Waterford Investments, LLC**, with the parent entity being **The Alden Group, Ltd.** Collectively, these entities are the Applicant. The entities' Illinois Certificates of Good Standing are appended as **ATTACHMENT-1A.**

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 I am the keeper of the records of the Department of Business Services. I certify that

WATERFORD REHAB AND COURTS, L.L.C., HAVING ORGANIZED IN THE STATE OF ILLINOIS ON DECEMBER 23, 2009, 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.

In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 8TH day of JULY A.D. 2015 .

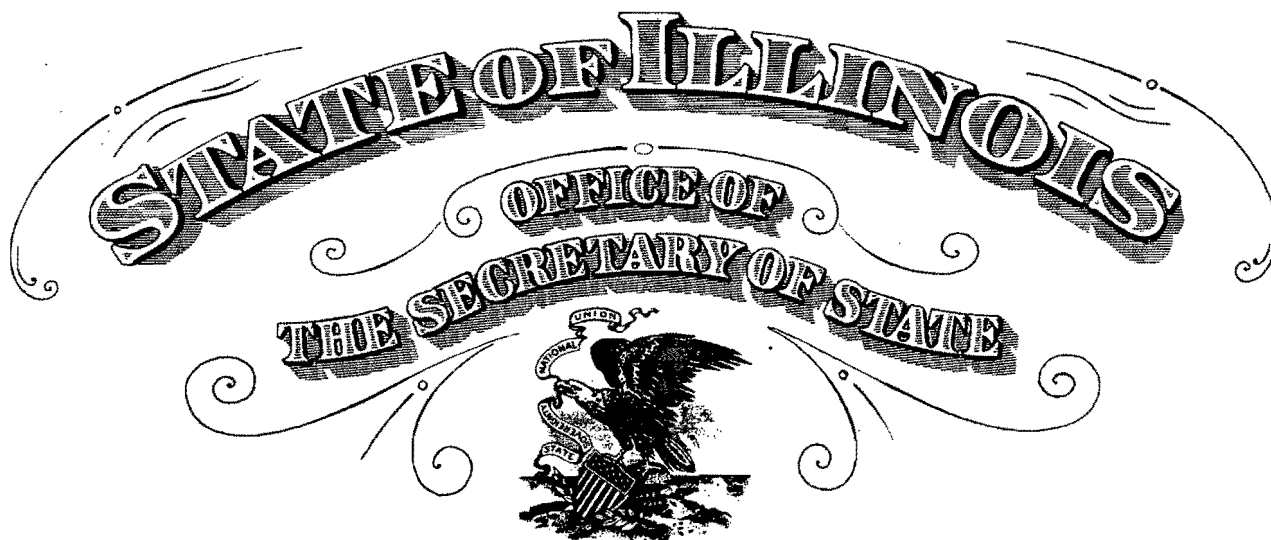


Authentication #: 1518902886 verifiable until 07/08/2016
Authenticate at: <http://www.cyberdriveillinois.com>

Jesse White

SECRETARY OF STATE

ATTACHMENT-1A



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

ALDEN COURTS OF WATERFORD, L.L.C., HAVING ORGANIZED IN THE STATE OF ILLINOIS ON OCTOBER 13, 1999, 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.

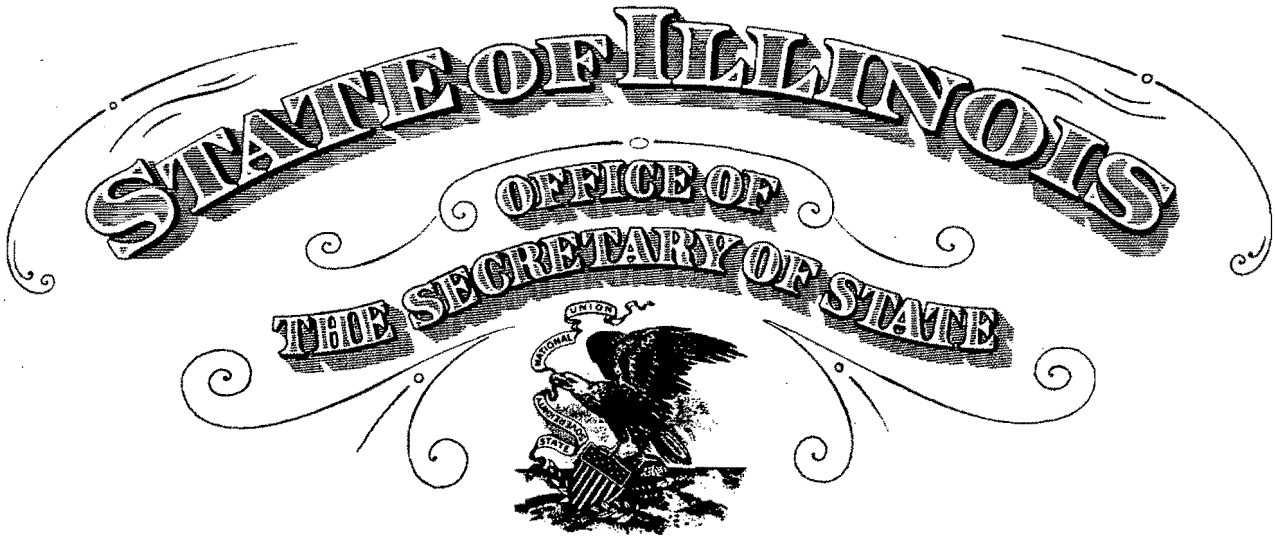
In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 8TH day of JULY A.D. 2015 .



Jesse White

SECRETARY OF STATE

ATTACHMENT-1A



To all to whom these Presents Shall Come, Greeting:

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ALDEN OF WATERFORD INVESTMENTS, L.L.C., HAVING ORGANIZED IN THE STATE OF ILLINOIS ON SEPTEMBER 22, 1999, 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.

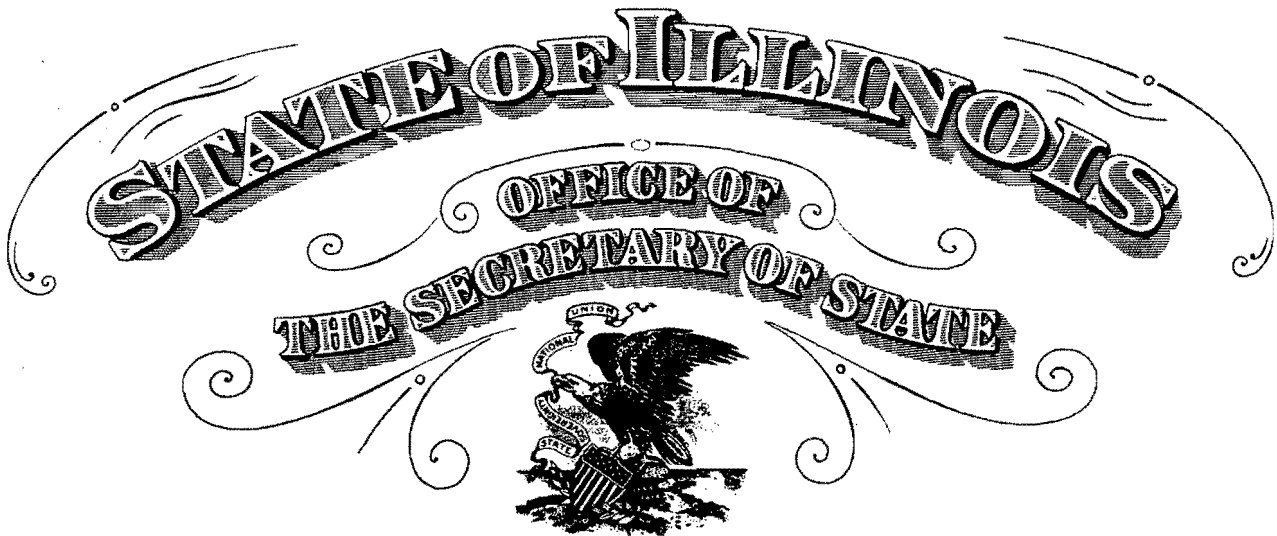


In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 8TH day of JULY A.D. 2015 .

Jesse White

SECRETARY OF STATE

ATTACHMENT-1A



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

THE ALDEN GROUP, LTD., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON MAY 20, 1980, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.

In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 8TH day of JULY A.D. 2015 .



Authentication #: 1518902946 verifiable until 07/08/2016
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Jesse White

SECRETARY OF STATE

ATTACHMENT-1A

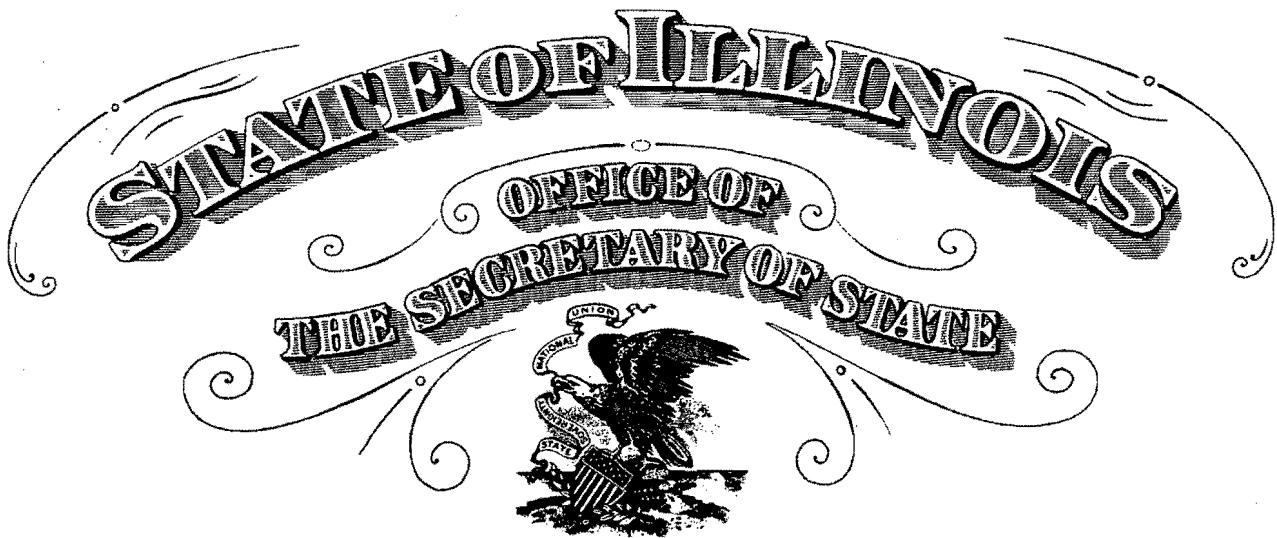
SECTION I – IDENTIFICATION, GENERAL INFORMATION, AND CERTIFICATION
Continued ii

Site Ownership

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.

The owner of the existing building and site is **Waterford Rehab & Courts, LLC**. The entity's Illinois Certificate of Good Standing is appended as **ATTACHMENT-2A**. As an existing ongoing business, the most recent property tax document serves as proof of site ownership, appended as **ATTACHMENT-2B**.

ATTACHMENT-2



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

WATERFORD REHAB AND COURTS, L.L.C., HAVING ORGANIZED IN THE STATE OF ILLINOIS ON DECEMBER 23, 2009, 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.

In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 8TH day of JULY A.D. 2015 .



Authentication #: 1518902886 verifiable until 07/08/2016
Authenticate at: <http://www.cyberdriveillinois.com>

Jesse White

SECRETARY OF STATE

ATTACHMENT-2A



David J. Rickert Kane County Treasurer

Make Checks Payable to: Kane County Treasurer
Please remit to: P.O. Box 4025 Geneva IL 60134-4025

Parcel Number:

15-36-202-005



1st 2014

WATERFORD REHAB & COURTS LLC
4200 W PETERSON AVENUE STE 140
CHICAGO IL 60646-6819



1ST INSTALLMENT FOR 2014
DUE ON OR BEFORE 06/01/15

\$51,889.98

ABATEMENT

PENALTY

OTHER FEES

TOTAL DUE

1536202005100051889980601154

Remove stub and remit with payment.

00171239



David J. Rickert Kane County Treasurer

Make Checks Payable to: Kane County Treasurer
Please remit to: P.O. Box 4025 Geneva IL 60134-4025

Parcel Number:

15-36-202-005



2nd 2014

WATERFORD REHAB & COURTS LLC
4200 W PETERSON AVENUE STE 140
CHICAGO IL 60646-6819

2ND INSTALLMENT FOR 2014
DUE ON OR BEFORE 09/01/15

\$51,889.98

ABATEMENT

PENALTY

OTHER FEES

TOTAL DUE

1536202005200051889980901151

Remove stub and remit with payment.

Table with columns: Rate 2013, Tax 2013, Taxing District, Rate 2014, Tax 2014, Parcel Number, TIF BASE, N/A. Includes a 'Late Payment Schedule' section with dates and amounts, and a 'Mall To:' section with address details.

2014 Kane County Real Estate Tax Bill
David J. Rickert, County Treasurer
716 S. Boland Avenue, Bldg. A
Geneva, IL 60134

SECTION I – IDENTIFICATION, GENERAL INFORMATION, AND CERTIFICATION
Continued iii

Operating Identity/Licensee

- Corporations and limited liability companies must provide an Illinois Certificate of Good Standing.
- Persons with 5 percent or greater interest in the licensee must be identified with the % of ownership.

The operator/Licensee of the existing Alden Courts of Waterford is **Alden Courts of Waterford, LLC**. The entity's Illinois Certificate of Good Standing is appended as **ATTACHMENT-3A**. Please note that the sole shareholder is **Alden of Waterford Investments, LLC**. An Illinois Certificate of Good Standing for this entity is appended as **ATTACHMENT-3B**.

ATTACHMENT-3



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

ALDEN COURTS OF WATERFORD, L.L.C., HAVING ORGANIZED IN THE STATE OF ILLINOIS ON OCTOBER 13, 1999, 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.

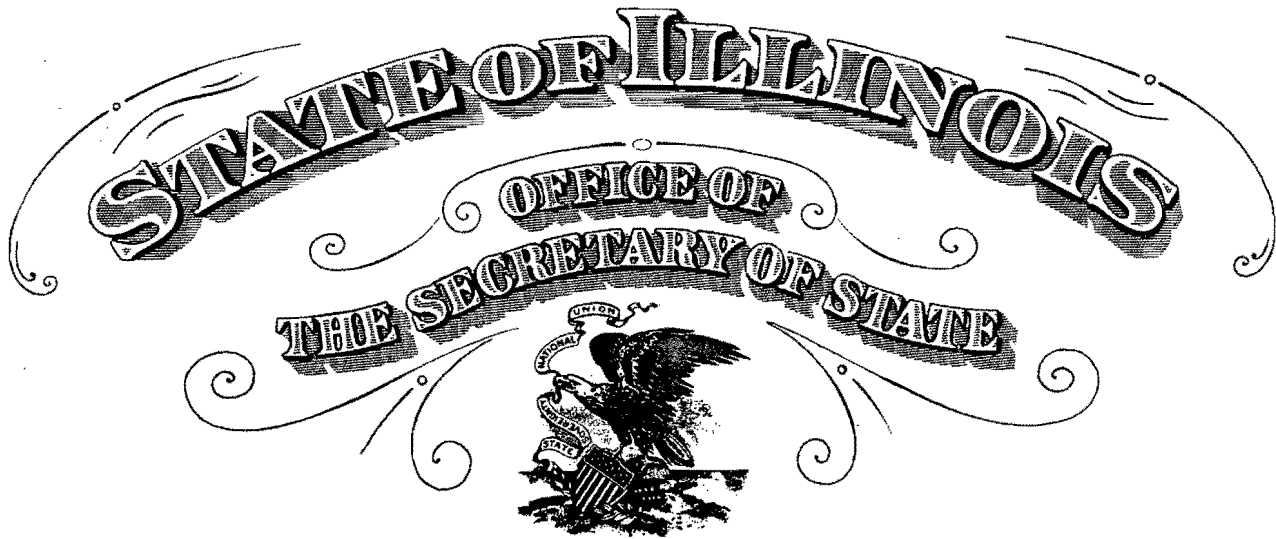


In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 8TH day of JULY A.D. 2015 .

Jesse White

SECRETARY OF STATE

ATTACHMENT-3A



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In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 8TH day of JULY A.D. 2015 .



Jesse White

SECRETARY OF STATE

ATTACHMENT-3B

SECTION I – IDENTIFICATION, GENERAL INFORMATION, AND CERTIFICATION
Continued iv

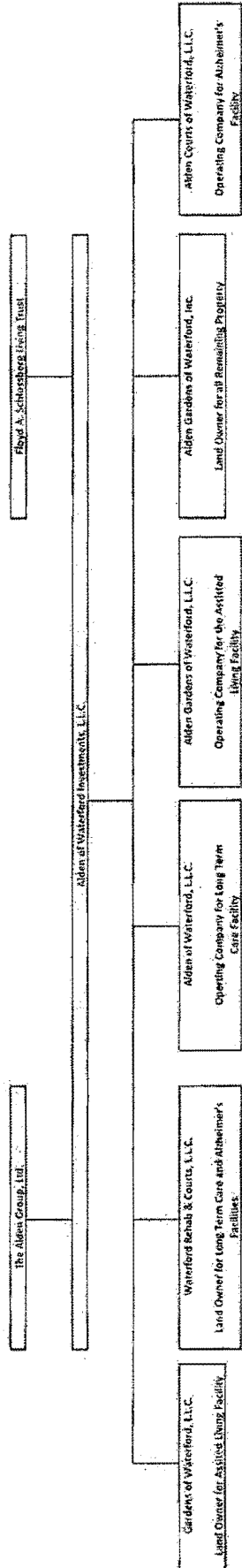
Organizational Relationships

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.

Appended as **ATTACHMENT-4A**, is the organizational chart for Alden’s total Waterford project in Aurora, Illinois. It should be known that Alden Courts of Waterford is an existing, 66-bed sheltered care facility. Also on the Alden of Waterford campus are two additional licensed facilities, Alden of Waterford, a 99-bed nursing facility that shares the land owner (**Waterford Rehab & Courts, LLC**) with the Subject facility and Alden Gardens of Waterford, a 121-bed general sheltered care facility which shares the parent entities with the Subject facility. There are other related “Alden” facilities through the parental entities that should be disclosed. Appended as **ATTACHMENT-4B** is a listing of all facilities in which **The Alden Group, Ltd.** (the ultimate parent) has interest. Appended as **ATTACHMENT-4C**, is the Illinois Secretary of State Certificate of Good Standing for **The Alden Group, Ltd.** who is also considered a co-Applicant.

ATTACHMENT-4

Allen Organizational Chart





- [Who Regulates Nursing Homes?](#)
- [A Listing of Illinois Nursing Homes](#)
- [How to Select a Nursing Home](#)
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- [Nursing Home Care Act](#)
- [Illinois Health Care Worker Registry](#)
- [Centers for Medicare and Medicaid Services Nursing Home Quality Initiative](#)

Facility Information

ALDEN COURTS OF WATERFORD

1991 RANDI DRIVE
AURORA IL 60505

ADMINISTRATOR: LAUREN PAC
TELEPHONE: 630-851-1466

Licensee ID	:0044180
Facility ID	:6015507
Skilled beds	:0
Intermediate beds	:0
Icf-dd beds	:0
Shelter Care beds	:66
Community Living beds	:0
Under 22 beds	:0
Medicare beds	:0
Medicare/Medicaid beds	:0
Medicaid beds	:0
Fax	:630-585-1008
County	:Kane
Medicare Certification Number	:
Medicare Skilled Certification Number	:
Medicaid ICF/DD Certification Number	:
Medicaid DD Certification Number	:
Medicaid Swing Bed Certification Number	:

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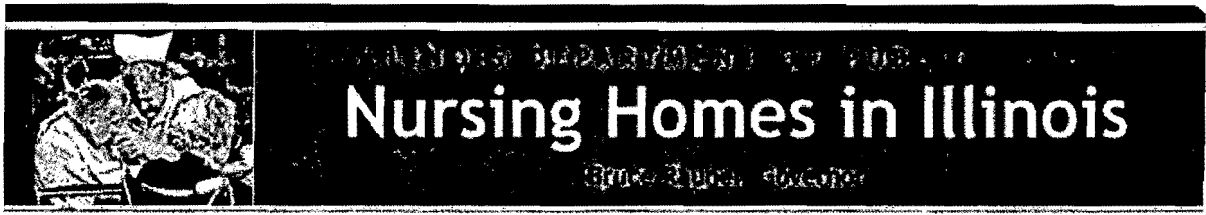
Residents

- [Primary Diagnosis](#)
- [Age Gender & Level of Care](#)
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Patient Days

- [Level of Care](#)
- [Payment Source](#)
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[idph online home](#)  [nursing homes in illinois](#) 



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- [Centers for Medicare and Medicaid Services Nursing Home Quality Initiative](#)

Ownership Information

ALDEN COURTS OF WATERFORD
 1991 RANDI DRIVE
 AURORA IL 60505
 ADMINISTRATOR: LAUREN PAC
 TELEPHONE: 630-851-1466

Licensee Name:
ALDEN COURTS OF WATERFORD, L.L.C.

Persons with 5 percent or greater interest in licensee:

Name	% of Ownership
LAURENMAGNUSSON	13.35
RANDISCHLOSSBERG-SCH	13.35
FLOYDASCHLOSSBERG	35.70
AUDRAELISCO	13.35

Ownership Type:
 LIMITED LIABILITY CO

Click on individual's name to see other ownership interests.

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- [Centers for Medicare and Medicaid Services Nursing Home Quality Initiative](#)

Ownership Information

ALDEN COURTS OF WATERFORD

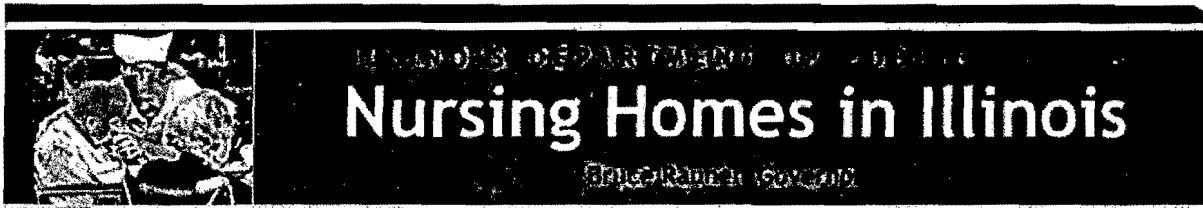
1991 RANDI DRIVE
AURORA IL 60505

ADMINISTRATOR LAUREN PAC
TELEPHONE 630-851-1466

LAUREN MAGNUSSON
has ownership interest in the following long term care entities

Facility	Percentage Owned
ALDEN VILLAGE NORTH	20.77
ALDEN POPLAR CREEK REHAB & HCC	20.77
ALDEN VILLAGE HEALTH FACILITY	20.77
ALDEN ESTATES OF BARRINGTON	20.77
HEATHER HEALTH CARE CENTER	20.77
ALDEN LAKELAND REHAB & HCC	20.77
ALDEN LONG GROVE REHAB & HCC	20.77
ALDEN ESTATES OF SKOKIE	20.77
ALDEN ESTATES OF NAPERVILLE	20.77
ALDEN TERRACE OF MCHENRY REHAB	20.77
ALDEN LINCOLN REHAB & H C CTR	20.77
ALDEN WENTWORTH REHAB & HCC	20.77
ALDEN PRINCETON REHAB & HCC	20.77
ALDEN TOWN MANOR REHAB & HCC	20.77
ALDEN ESTATES OF EVANSTON	20.77
ALDEN NORTHMOOR REHAB & HCC	20.77
ALDEN DES PLAINES REHAB & HC	20.77
ALDEN NORTH SHORE REHAB & HCC	20.77
ALDEN OF WATERFORD	20.77
ALDEN TRAILS	20.77
ALDEN OF OLD TOWN EAST	20.77
ALDEN OF OLD TOWN WEST	20.77
ALDEN ORLAND PARK REHAB & HCC	20.77
ALDEN COURTS OF WATERFORD	13.35
ALDEN GARDENS OF WATERFORD	13.35
ALDEN GARDEN CTS OF DESPLAINES	20.77
ALDEN SPRINGS	20.77
ALDEN ESTATES OF SHOREWOOD	20.77

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- [Centers for Medicare and Medicaid Services Nursing Home Quality Initiative](#)

Ownership Information

ALDEN COURTS OF WATERFORD

1991 RANDI DRIVE
AURORA IL 60505

ADMINISTRATOR LAUREN PAC
TELEPHONE 630-851-1466

RANDI SCHLOSSBERG-SCH

has ownership interest in the following long term care entities

Facility	Percentage Owned
ALDEN VILLAGE NORTH	20.77
ALDEN POPLAR CREEK REHAB & HCC	20.77
ALDEN VILLAGE HEALTH FACILITY	20.77
ALDEN ESTATES OF BARRINGTON	20.77
HEATHER HEALTH CARE CENTER	20.77
ALDEN LAKELAND REHAB & HCC	20.77
ALDEN LONG GROVE REHAB & HCC	20.77
ALDEN ESTATES OF SKOKIE	20.77
ALDEN ESTATES OF NAPERVILLE	20.77
ALDEN TERRACE OF MCHENRY REHAB	20.77
ALDEN LINCOLN REHAB & H C CTR	20.77
ALDEN WENTWORTH REHAB & HCC	20.77
ALDEN PRINCETON REHAB & HCC	20.77
ALDEN TOWN MANOR REHAB & HCC	20.77
ALDEN ESTATES OF EVANSTON	20.77
ALDEN NORTHMOOR REHAB & HCC	20.77
ALDEN DES PLAINES REHAB & HC	20.77
ALDEN NORTH SHORE REHAB & HCC	20.77
ALDEN OF WATERFORD	20.77
ALDEN TRAILS	20.77
ALDEN OF OLD TOWN EAST	20.77
ALDEN OF OLD TOWN WEST	20.77
ALDEN ORLAND PARK REHAB & HCC	20.77
ALDEN COURTS OF WATERFORD	13.35
ALDEN GARDENS OF WATERFORD	13.35
ALDEN GARDEN CTS OF DESPLAINES	20.77
ALDEN SPRINGS	20.77
ALDEN ESTATES OF SHOREWOOD	20.77

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Patient Days

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- [Private Payment Rates](#)



- [Who Regulates Nursing Homes?](#)
- [A Listing of Illinois Nursing Homes](#)
- [How to Select a Nursing Home](#)
- [Centers for Medicare and Medicaid Services Nursing Home Database](#)
- [Quarterly Reports of Nursing Home Violation](#)
- [Illinois Law on Advance Directives](#)
- [Nursing Homes with No Certification Deficiencies](#)
- [Nursing Home Care Act](#)
- [Illinois Health Care Worker Registry](#)
- [Centers for Medicare and Medicaid Services Nursing Home Quality Initiative](#)

Ownership Information

ALDEN COURTS OF WATERFORD

1991 RANDI DRIVE
AURORA IL 60505

ADMINISTRATOR LAUREN PAC
TELEPHONE 630-851-1466

FLOYD A SCHLOSSBERG

has ownership interest in the following long term care entities

Facility	Percentage Owned
<u>ALDEN PARK STRATHMOOR</u>	90.51
<u>ALDEN OF WATERFORD</u>	35.70
<u>ALDEN COURTS OF WATERFORD</u>	35.70
<u>ALDEN GARDENS OF WATERFORD</u>	35.70

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- Who Regulates Nursing Homes?
- A Listing of Illinois Nursing Homes
- How to Select a Nursing Home
- Centers for Medicare and Medicaid Services Nursing Home Database
- Quarterly Reports of Nursing Home Violation
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- Nursing Homes with No Certification Deficiencies
- Nursing Home Care Act
- Illinois Health Care Worker Registry
- Centers for Medicare and Medicaid Services Nursing Home Quality Initiative

Ownership Information

ALDEN COURTS OF WATERFORD

1991 RANDI DRIVE
AURORA IL 60505

ADMINISTRATOR LAUREN PAC
TELEPHONE 630-851-1466

AUDRA ELISCO

has ownership interest in the following long term care entities

Facility	Percentage Owned
<u>ALDEN VILLAGE NORTH</u>	20.77
<u>ALDEN POPLAR CREEK REHAB & HCC</u>	20.77
<u>ALDEN VILLAGE HEALTH FACILITY</u>	20.77
<u>ALDEN ESTATES OF BARRINGTON</u>	20.77
<u>HEATHER HEALTH CARE CENTER</u>	20.77
<u>ALDEN LAKELAND REHAB & HCC</u>	20.77
<u>ALDEN ESTATES OF SKOKIE</u>	20.77
<u>ALDEN ESTATES OF NAPERVILLE</u>	20.77
<u>ALDEN TERRACE OF MCHENRY REHAB</u>	20.77
<u>ALDEN LINCOLN REHAB & H C CTR</u>	20.77
<u>ALDEN WENTWORTH REHAB & HCC</u>	20.77
<u>ALDEN PRINCETON REHAB & HCC</u>	20.77
<u>ALDEN TOWN MANOR REHAB & HCC</u>	20.77
<u>ALDEN ESTATES OF EVANSTON</u>	20.77
<u>ALDEN NORTHMOOR REHAB & HCC</u>	20.77
<u>ALDEN DES PLAINES REHAB & HC</u>	20.77
<u>ALDEN NORTH SHORE REHAB & HCC</u>	20.77
<u>ALDEN OF WATERFORD</u>	20.77
<u>ALDEN TRAILS</u>	20.77
<u>ALDEN OF OLD TOWN EAST</u>	20.77
<u>ALDEN OF OLD TOWN WEST</u>	20.77
<u>ALDEN ORLAND PARK REHAB & HCC</u>	20.77
<u>ALDEN COURTS OF WATERFORD</u>	13.35
<u>ALDEN GARDENS OF WATERFORD</u>	13.35
<u>ALDEN GARDEN CTS OF DESPLAINES</u>	20.77
<u>ALDEN SPRINGS</u>	20.77
<u>ALDEN ESTATES OF SHOREWOOD</u>	20.77

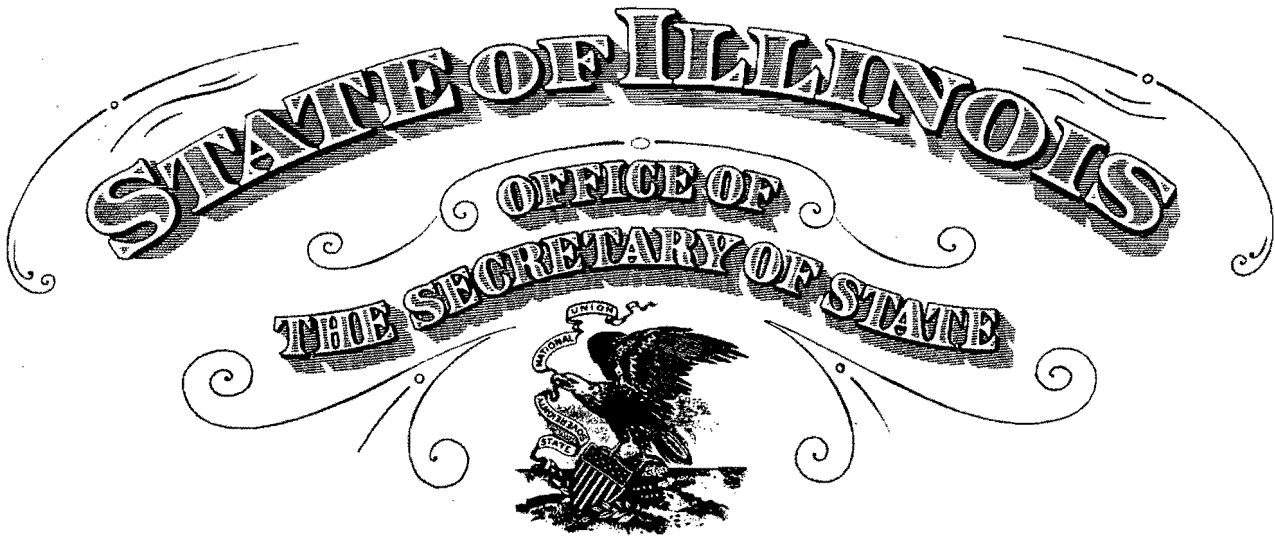
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- Payment Source
- Private Payment Rates



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

THE ALDEN GROUP, LTD., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON MAY 20, 1980, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.

In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 8TH day of JULY A.D. 2015 .



Authentication #: 1518902946 verifiable until 07/08/2016
Authenticate at: <http://www.cyberdriveillinois.com>

Jesse White

SECRETARY OF STATE

ATTACHMENT-4C

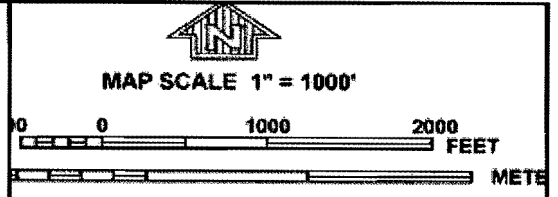
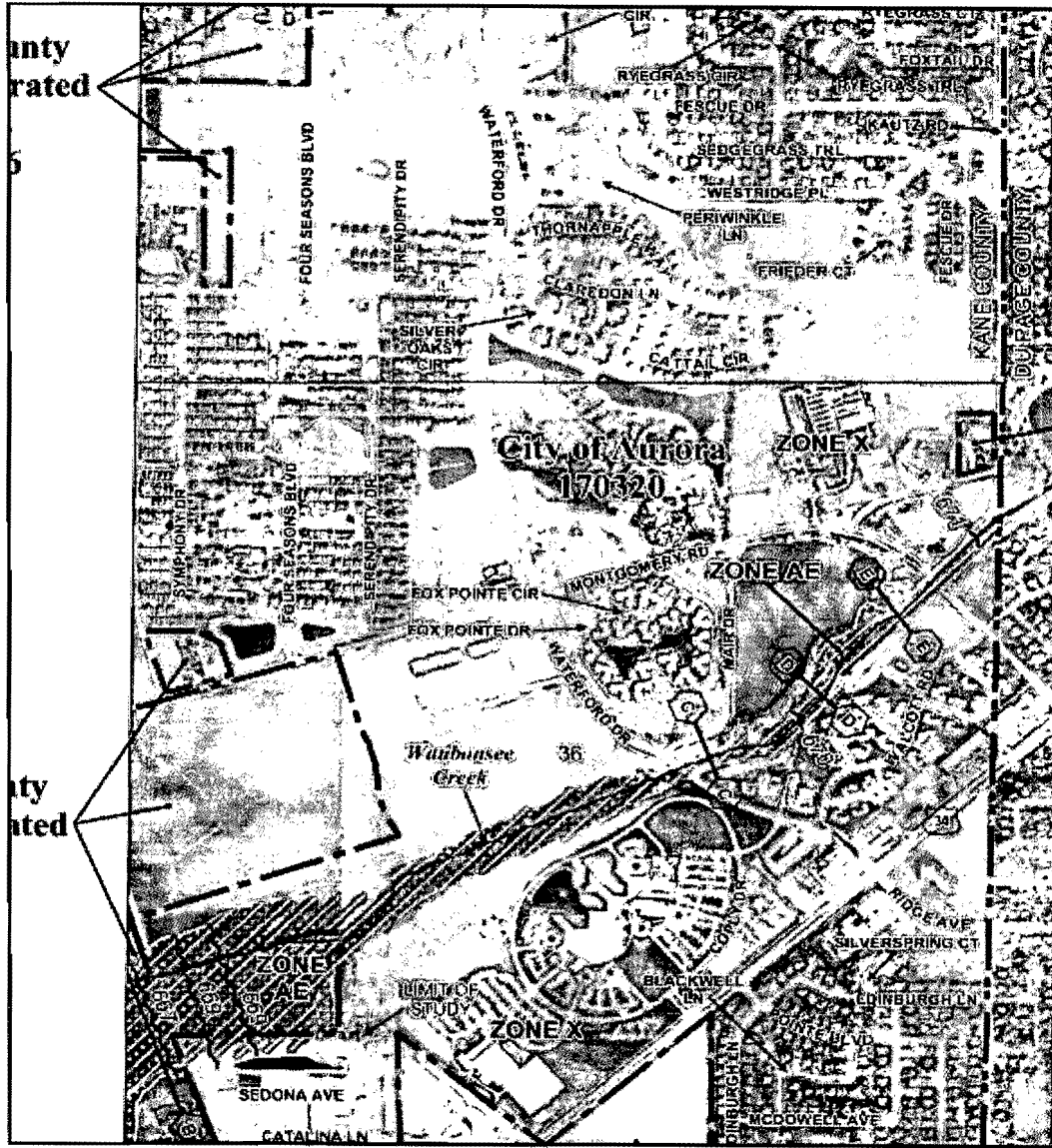
SECTION I – IDENTIFICATION, GENERAL INFORMATION, AND CERTIFICATION
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Flood Plain Requirements

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 or 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>).

The proposed project is the conversion of one of Alden Courts' existing 22-bed sheltered care units into a 20-bed nursing unit. A FIRM map identifying that the area is not within a special flood zone area is appended as ATTACHMENT-5A.

ATTACHMENT-5



PANEL 0410H

FIRM
FLOOD INSURANCE RATE MAP
KANE COUNTY,
ILLINOIS
AND INCORPORATED AREAS

PANEL 410 OF 410
 (SEE MAP INDEX FOR FIRM PANEL LAYOUT)

CONTAINS:

COMMUNITY	NUMBER	SHEET	SHEET
AURORA CITY OF	170320	0410	H
KANE COUNTY	112690	0410	H

Notice to User: The Map Number shown below should be used with the Map Index. The Community Number shown below should be used on insurance applications for the subject community.

MAP NUMBER
17089C0410H

MAP REVISED
AUGUST 3, 2009

Federal Emergency Management Agency

This is an official copy of a portion of the above referenced flood map. It was contracted using FIRM 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

SECTION I – IDENTIFICATION, GENERAL INFORMATION, AND CERTIFICATION
Continued vi

Historic Resources Preservation Act Requirements

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

Appended as **ATTACHMENT-6A**, is a letter from the Illinois Historic Preservation Agency's Rachel Leibowitz, Ph. D., Deputy State Historic Preservation Officer dated July 22, 2015 stating that "no historic, architectural or archaeological sites exist within the project area".

ATTACHMENT-6



**Illinois Historic
Preservation Agency**

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

FAX (217) 524-7525

www.illinoishistory.gov

Kane County

Aurora

CON - Rehabilitation for Conversion of Sheltered Care Beds to Long-Term Care Beds, Alden Courts of Waterford

1991 Randi Dr.

IHPA Log #008070915

July 22, 2015

Kathy Harris

Foley and Associates, Inc.

133 S. 4th St., Suite 200

Springfield, IL 62701

Dear Ms. Harris:

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 217/785-5031.

Sincerely,

Rachel Leibowitz, Ph.D.

Deputy State Historic

Preservation Officer

ATTACHMENT-6A

SECTION IV – SERVICE SPECIFIC REVIEW CRITERIA Continued i

Criterion 1125.320 – Purpose of the Project

1. Document that the project will provide health services that improve the health care or well-being of the market area population to be served.

This project is to establish a 20-bed nursing category of care at Alden Courts of Waterford, a 66-bed sheltered care facility for those with memory impairment. Connected to Alden Courts is Alden of Waterford, a 99-bed nursing facility and Alden Gardens of Waterford, a 121-bed general sheltered care facility. Therefore, this project is more accurately an expansion, or redistribution of services, to better care and treat persons with Alzheimer's Disease and Related Dementia (ADRD). Specifically, residents with memory impairment progress slowly through the stages of memory loss and it is best practices to allow elderly to age-in-place regardless of diagnosis. Moreover, it is also best practices to care for general geriatric residents separately from those with dementia. The rationale for this is more about providing the appropriate physical plant environment to nurture residents with ADRD and to minimize confusion, which can lead to frustration, confrontation and acting out. These are all behaviors that can be harmful to the resident presenting the behavior as well as the residents around them and/or staff to include family members.

This project is a result of years of experience in having residents who's medical needs outweigh the programmatic needs dealing with memory impairment, yet the resident cannot remain in a sheltered care facility when they are in need of nursing care, nor can they be appropriately placed in the general nursing care facility when they still need programming for memory care issues. This project proposes to address that gap in care to improve the health care accessibility of this specific population who have memory impairment yet require a nursing level of care.

ATTACHMENT-10

SECTION IV – SERVICE SPECIFIC REVIEW CRITERIA Continued ii

The market area population to be served has a catchment area of a traditional 30-minute travel time from the Subject site. Refer to the Subject facility's patient origin data appended as **ATTACHMENT-10A**. Moreover, the historical admissions of the Subject facility, Alden Courts of Waterford, illustrates that residents are aging-in-place as they should be. The majority (55.8%) of the admissions into the Courts building come from within the campus. This is indicative of the Applicant's experience in demand for the proposed level of care. Alden Courts of Waterford (memory sheltered care) and Alden of Waterford (general nursing) have consistently had to refer potential residents in need of this level of care to out of area facilities as the Waterford Campus did not have the appropriate level of care to accommodate. This referral out of the retirement community is the issue that this project is addressing.

2. Define the planning area or market area, or other, per the applicant's definition.

The primary market area is a 30-minute drive time from the Applicant's facility. In a recent zip code analysis for all admissions during the most recent 24 month period, 80.8% were from within the 30-minute market area. It is important to note that 55.8% of the admissions came from within the campus. This is representative of how a true CCRC is intended to work with residents being able to age-in-place.

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

There is an internal demand for the nursing level of care within the memory care setting. Moreover, assisted living is not Medicare or Medicaid eligible. As residents medical needs outweigh their programmatic needs and nursing care is the only option, residents have to be discharged out of the memory care building in order for their Medicare or Medicaid benefits to be used. This leads to residents being discharged out to facilities that do not have this level of

ATTACHMENT-10

SECTION IV – SERVICE SPECIFIC REVIEW CRITERIA Continued iii

specialized memory care. Over the past two years Alden Courts of Waterford has transferred 12 people out of the building for a higher level of care, a few who were Medicaid eligible. The nursing facility (Alden of Waterford) averaged 2 prospective residents a month that were denied due to elopement/memory care risks. Therefore, this proposed project would allow those residents in need of nursing services to remain in, or to transfer within, the campus even with a decline in their financial situation allowing them to remain on campus as Medicaid eligible residents.

4. Cite the sources of the information provided as documentation.

Appended as **ATTACHMENT-10A**, is the patient origin for all admissions by zip code to the Subject facility.

Appended as **ATTACHMENT-10B**, is the Microsoft MapPoint North America 2009 map identifying the primary service area of 30-minute market contour and all zip codes within said market area.

Appended as **ATTACHMENT-10C**, are two letters, one from Alden Courts of Waterford (Subject facility) and the second from Alden of Waterford (nursing unit) both documenting the number of residents discharged (12) and potential admissions referred on (24) due to not having the service (nursing &/or Medicaid) available to address resident needs.

Appended as **ATTACHMENT-10D**, is a Market Study, commissioned by the Applicant and performed by Laurel Research Associates, exploring demand for the proposed service.

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

The proposed project will allow residents needing to move from sheltered care to nursing care to remain in a memory care specific environment. Existing and future residents will be able

ATTACHMENT-10

SECTION IV – SERVICE SPECIFIC REVIEW CRITERIA Continued iv

to fully and completely age-in-place. The added benefit of the nursing level of care to treat residents with memory care is that should residents be Medicaid eligible or concurrently need Medicaid (rehabilitative) services, the proposed facility will not have to discharge residents.

The Applicant also commissioned a market study (performed by Laurel Research Associates) that found the proposed project would require a capture rate of only 0.3%, and a total inventory penetration rate of 7%, both well within industry norms. It also concluded expanding need and demand for memory care and nursing services within a five year projected population. Thus, with a modest 20-bed establishment being proposed, patient access to nursing services for those with memory care issues would be improved and needed.

6. Provide goals with quantified and measurable objectives, with specific timeframes that relate to achieving the stated goals as appropriate.

The Applicant's goal is to offer a complete continuum of care throughout its entire campus. Quantitatively, this can be gauged through the Applicant's ability to again reach and maintain the State's target utilization rate of 90% by the second full year of operation after project completion.

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.

Alden Courts of Waterford was approved by the Illinois Health Facilities and Services Review Board (then Illinois Health Facilities Planning Board) on August 22, 1997 as a 66-bed sheltered care facility and construction was completed in 2001. As a nearly 15 year old building, it is relatively new as compared to traditional long-term care facilities in Illinois. Moreover, the parent company, **The Alden Group**, is a premier provider especially in terms of physical plant environment. Together, this facility is in excellent industry standard condition and the modernization of the project is only to bring the one unit up from sheltered care standards to

ATTACHMENT-10

SECTION IV – SERVICE SPECIFIC REVIEW CRITERIA *Continued v*

skilled standards to meet all applicable IDPH licensure requirements. This will result in losing two beds. This opportunity also allows the Applicant to replace the existing furniture that is necessary due to normal wear and tear. Therefore, this modernization is not a result of physical plant deficiencies but rather solely due to the change in licensure category.

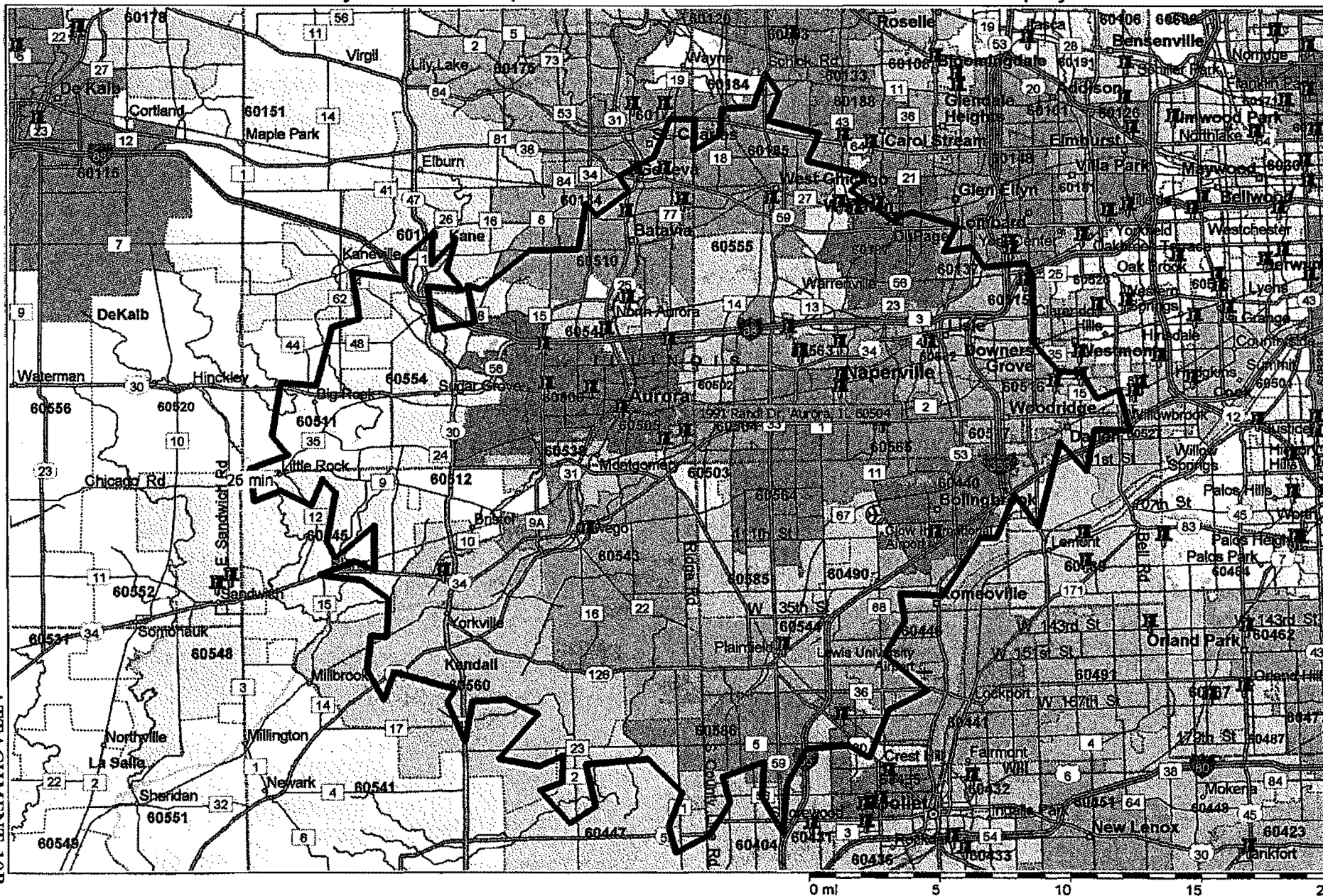
ATTACHMENT-10

Alden Courts of Waterford
Admissions by Zip Code
7/2013 - 6/2015

<u>Initials</u>	<u>Zip code</u>	<u>From where</u>	<u>Total Admits</u>	<u>Within 30 Min</u>	<u>Within the Waterford Campus</u>
ES	60126	Home	1		
JK	60134	Geneva Care Center			
KK	60134	Geneva Care Center	2		
PM	60190	CDH	1	1	
DT	60435	St. Joe's joliet			
JT	60435	St. Joe's Joliet	2		
RF	60450	Home	1		
MA	60503	Home	1	1	
AB	60504	Gardens of Waterford			
AP	60504	Gardens of Waterford			
BB	60504	Gardens of Waterford			
BE	60504	Gardens of Waterford			
BR	60504	Gardens of Waterford			
CL	60504	Alden Rehabilitation			
DK	60504	Gardens of Waterford			
EH	60504	Gardens of Waterford			
FT	60504	Gardens of Waterford			
GH	60504	Gardens of Waterford			
GH	60504	Gardens of Waterford			
HA	60504	Gardens of Waterford			
IM	60504	Alden Rehabilitation			
JS	60504	Gardens of Waterford			
JS	60504	Gardens of Waterford			
KM	60504	Gardens of Waterford			
KR	60504	Gardens of Waterford			
LS	60504	Alden Rehabilitation			
MF	60504	Gardens of Waterford			
MR	60504	Gardens of Waterford			
MS	60504	Alden Rehabilitation			
MS	60504	Alden Rehabilitation			
MW	60504	Alden Rehabilitation			
RD	60504	Gardens of Waterford			
RJ	60504	Gardens of Waterford			
RP	60504	Gardens of Waterford			
LP	60504	Gardens of Waterford			
TM	60504	Gardens of Waterford			
WH	60504	Gardens of Waterford	29	29	29
DS	60505	Sunnymere	1	1	
LT	60506	Presence Mercy Hospital			
JN	60506	Mercy Hospital	2	2	
ND	60507	Home	1		
EL	60510	McCauley Manor			
MG	60510	McCauley Manor	2	2	
RH	60521	Hinsdale Hospital	1	0	
GB	60540	Sunrise			
HF	60540	Edward Hospital	2	2	
EM	60543	Home	1	1	
DN	60551	Home	1		
JG	60563	Home			
TB	60563	Community Rehabilitation	2	2	
MD	60586	Home	1	1	
PG	85712	Handmaker- AZ	1		
			Total Admits	Within 30 Min	Within the Waterford Campus
			52	42	29

% Admits Within 30-Min	80.8%
% Within the Waterford Campus	55.8%

30 min adj drive time MapPoint-Alden Courts of Waterford conversion project



69

ATTACHMENT-10B

ALDEN Courts of Waterford

August 4, 2015

Ms. Courtney Avery, Administrator
Health Facilities and Services Review Board
Illinois Department of Public Health
5252 W. Jefferson Street, Second Floor
Springfield, IL 62761

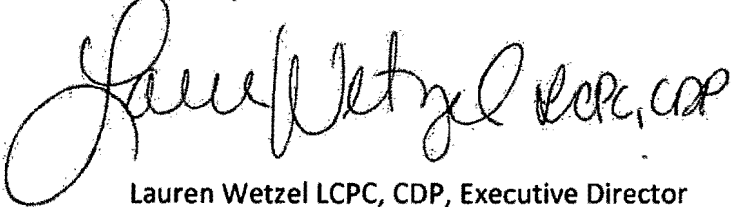
RE: Application for Certificate of Need for Alden Courts of Waterford
1991 Randi Drive
Aurora, IL

Dear Ms. Avery,

We have transferred 12 people out of our building over the past two years for a higher level of care or for financial reasons. We currently have two residents awaiting outside placement, one due to a higher level of care and one for financial reasons. It is unfortunate because residents diagnosed with dementia often experience considerable decline when their environment changes.

While we do not collect data from all inquiries that need Medicare/Medicaid, we do turn away a significant number of potential residents because we do not accept it on a monthly basis.

Sincerely,



Lauren Wetzel LCPC, CDP, Executive Director

Alden Courts of Waterford

Alden Courts Memory Care Assisted Living
1991 Randi Drive Aurora, IL 60504 tel: (630)851-1466 fax: (630)585-1008

www.thealdennetwork.com

ATTACHMENT-10C



A member of the Alden network



August 6, 2015

Ms. Courtney Avery, Administrator
Health Facilities and Services Review Board
Illinois Department of Public Health
525 W. Jefferson Street, Second Floor
Springfield, IL. 62761

RE: Application for Certificate of Need for Alden Courts of Waterford
1991 Randi Drive
Aurora, Illinois 60504

Dear Ms. Avery,

On average, approximately two prospective residents per month are denied admittance to our facility due to elopement risk. We do not have a secured unit, therefore, the risk is much too great to admit these particular residents. Instead, we refer to other facilities which are located farther away in distance and may cause a burden on the family. Alden Courts of Waterford currently has secure units and the conversion to twenty skilled memory care beds would significantly aid in assisting these residents.

Over the course of the past two years, we have had to transfer approximately twenty five residents from our Alden of Waterford Rehabilitation facility to other memory care facilities for their long term care. These residents had increased cognitive deficits but due to financial reasons, were unable to be admitted to Alden Courts of Waterford. The need for skilled nursing beds at Alden Courts of Waterford is vital, as we can continue the continuity of care here on the Alden Campus.

I strongly support the need for this conversion and thank you for your consideration.

A handwritten signature in cursive script, appearing to read "Tracy Pell".

Tracy Pell, MPH, LNHA
Administrator, Alden of Waterford



Alden Courts of Waterford

**MARKET STUDY
FOR A PROPOSED
NURSING CARE EXPANSION
IN
AURORA, ILLINOIS**

Prepared By:

LAUREL RESEARCH ASSOCIATES

133 South 4th Street
Springfield, Illinois 62701

June, 2015

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Attachment 1. Maps of Market Area (With Location of Existing Facilities)

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Attachment 3. Nursing Care Demand and Need Calculations

Attachment 4. Site Plan and Floor Plans of Proposed Modifications

Attachment 5. IDPH Population Projections

Attachment 6. Scan/US Demographic Study

I PROPOSED DEVELOPMENT

- A. Developer: The developer of the proposed Skilled Nursing Care Expansion in Aurora, Illinois is:

Alden Realty Services, Inc.
 Randi Schlossberg-Schullo, President
 4200 West Peterson Avenue
 Chicago, Illinois 60646

- B. General Description: The Alden Group is considering the expansion, modification and repositioning of some portions of its Waterford Continuing Care Retirement Center (CCRC). The developer expects to fund these changes from the operations of its existing senior living facilities and the proceeds from previous financing arrangements.

One component of the Waterford CCRC is the Alden Courts of Waterford Sheltered Care Facility. To improve the marketability and efficiency of that component a repositioning of a portion of the Sheltered Care facility is being considered. The function of one wing at Alden Courts will be changed from providing memory care for residents at the sheltered care level to providing memory care at the skilled nursing level. This conversion will provide 20 spaces to serve those in the later stages of Alzheimer's Disease and Related Dementia (ADRD).

The net result of these changes to the CCRC will be an increased capacity of 20 nursing care beds devoted to memory care, and a decrease of 22 units of memory care at the sheltered care level. The purpose of this study is to determine if the Waterford market will support the increase in skilled nursing beds.

- C. General Location: The site for the proposed development is the campus of the Alden Waterford CCRC. It is located at Waterford Drive and Montgomery Road in the southwestern part of Aurora, Kane County, Illinois. The campus is located in a modern suburban area that has grown and matured rapidly over the past 20 years. The Waterford campus is located just north of the Ogden Avenue (US Route 34) through-way, which is one of the major east-west commercial streets in the western portion of the Chicago Metropolitan Area. It is also just about 4 miles from the 188 East/West Toll Way to the north and also, about 4 miles from the Fox River corridor to the west. A map showing the location of the proposed project is included in Attachment 1 in the Appendix to this study report.

Aurora is located 37 miles west of Chicago, 53 miles southwest of Rockford, and 20 miles northwest of Joliet, IL. It is the west-central anchor of the State's largest Metropolitan Statistical Area.

- D. Site Description: The proposed site for the changes in memory care units is the current Campus of the Alden Waterford CCRC. The CCRC is a well established and successful continuing care facility providing residential and healthcare services ranging from independent living villas through skilled nursing care. The current configuration of the CCRC includes The Lakes of Waterford Independent Living (IL) villas, the Alden Horizons IL apartments, the Alden Gardens Assisted Living Community, the 66 bed Alden Courts memory care facility and the Alden of Waterford 99 bed Skilled Nursing Facility. The modifications that are being proposed do not contemplate any new building construction.
- E. Description of Site Improvements: The changes being proposed for the CCRC are all modifications to the existing memory care building. The "A" wing will be reconfigured to 12 one-bed rooms and 4 two-bed rooms of skilled nursing care. The skilled nursing area will replace the current 12 one-bed rooms and 5 two-bed rooms of sheltered care capacity. A summary of modifications and floor plans of the proposed changes are provided in Attachment 4 of the Appendix.

II MARKET AREA CHARACTERISTICS

- A. Market Area: The primary market area for the proposed Skilled Nursing Facility is defined by the area reached in a 30 minute drive from the existing site of Alden Courts of Waterford. These drive times were initially determined by use of the Scan/US Market Mapping software that is designed for that purpose. The drive times were then confirmed by application of other mapping software such as MapQuest. They were further validated by test drives between existing SNFs in the market area. These methods are consistent with techniques used by the staff of the Illinois Health Facilities and Services Review Board in their proceedings to determine a need for skilled nursing services. Such a market area definition is considered reasonable in an urban area like Aurora because it represents the distance from which potential tenants for the Alden Waterford nursing memory care unit would likely be drawn.

The chosen market area contains parts of the Illinois Counties of Kane, Kendall, DuPage and Will. It includes a sizeable part of the southwestern quadrant of the Chicago, Illinois Metropolitan Area. It is an economically robust commercial and residential area as will be illustrated by the following demographic data. A map depicting the primary market area for this study is contained in Attachment 1 of the Appendix. Maps are also included that show locations for existing Skilled Nursing Facilities and for Assisted Living, Sheltered Care and Supportive Living (SLF) establishments that specifically provide memory care for their residents.

- B. Population/Demographic Characteristics: Laurel Research Associates analyzed demographic data for the City of Aurora, Kane County, Kendall County, DuPage County, Will County and the 30 minute market area surrounding Alden Courts of Waterford. This analysis utilized U.S. Census data and Scan/US Market Statistics Estimates. Results of that analysis are as follows:

1. Population: The population of Aurora and the surrounding areas have been increasing over the past 20 years. The primary market area, composed of the 30 minute drive geography selected earlier, has increased from a population of 630,536 in 2000 to a projected 837,257 in 2019. The population of Kane County is expected to increase from 404,119 to 537,799, DuPage County is expected to increase from 904,151 to 943,336, Kendall County is expected to increase from 54,544 to 122,473, and Will County is expected to increase from 502,288 to 697,177 over the same period.

These municipalities have averaged an increase in size of over 45% in the last 20 years. Table 1 shows the population of the relevant geographic areas for the years 2000, 2010, 2014 and 2019.

Table 1 - POPULATION

	2000	2010	2014 Estimate	2019 Projection
Aurora	144,226	198,477	200,909	206,385
Kane County	404,119	515,269	522,567	537,799
DuPage County	904,151	916,924	923,978	943,336
Kendall County	54,544	114,736	117,204	122,473
Will County	502,288	677,560	680,392	697,177
Primary Market Area	630,536	807,738	815,794	837,257

Source: U.S. Census 2000/2010, Scan/US 2014/2019

2. Market Area Population: Scan/US estimates that the 2014 population of the primary market area was 815,794 with a projected increase of 2.6% to 837,257 by the year 2019.
3. Number of Households: Based on Scan/US, the number of households in the primary market area in 2000 was 217,237 with a projected increase of 33.6% to 290,299 by the year 2019. The average household size in the market area in 2014 is estimated to be 2.86 and to remain virtually unchanged over the entire 20 years being considered in this study.
4. Population by Relevant Group: The following chart provides Scan/US information on population of the primary market area by the age groups most often used to estimate the need for nursing care services.

Table 2 - POPULATION BY IMPORTANT AGE GROUPS: 2014 AND 2019

PRIMARY MARKET	2014	2019	2014-2019 Change	
Age 00-64	730,919	727,058	-3,861	- 0.53%
Age 65-74	50,011	66,459	16,448	32.9%
Age 75 Plus	34,852	43,730	8,878	25.5%

Source: Scan/US

This data shows that the market area population is aging rapidly. The older age groups are increasing their numbers by more than 5% per year. These are the most relevant age groups for the providers of skilled nursing care.

4. Population By Age: Table 3 shows the Scan/US estimated population in the primary market area by age cohort for the years 2014 and 2019.

Table 3 - POPULATION BY AGE: 2014 AND 2019

	2014 estimated	2019 projected	% Change 2014-2019	
<5 years	55,424	55,017	-407	-0.734%
5-9 years	62,494	54,023	-8471	-13.555%
10-14 years	65,416	61,394	-4019	-6.143%
15-19 years	62,704	66,938	4234	6.752%
20-24 years	50,255	61,424	11169	22.224%
25-34 years	102,417	94,618	-7799	-7.615%
35-44 years	119,224	108,634	-10590	-8.883%
45-54 years	120,315	119,529	-786	-.6532%
55-64 years	92,670	105,481	12811	13.824%
65-74 years	50,011	66,459	16448	32.888%
75-84 years	23,251	29,373	6122	26.33%
85+ years	11,601	14,537	2756	23.756%
Median Age	39.4	40.9	1.0	2.71%

Source: Scan/US

Based on these statistics, there will be a decrease in of the age cohorts (<5 years, 5-9 years, 10-14 years, 25-34 years, 35-44 years, and 45-54 years). An increase is expected in the age cohorts 15-19 years, 20-24 years and all cohorts above 55 years. This pattern represents a definite aging trend. It is the age cohorts above 55 years in which one might expect to find potential tenants for the proposed project. All of the more senior cohorts over 55 years old are expected to have large increases and that will result in the median age increasing by a full year in the five year period.

5. Illinois Department of Public Health (IDPH) Population Projections: In an effort to provide better planning information to state health regulators, the IDPH has recently released internally generated population projections for all Illinois counties and the various community areas of Chicago. While this information does not directly translate to a population projection for this study's selected market area, it does serve to illustrate the conservative

nature of the Scan/US projections used in the study. IDPH projections of relevant age group populations for the four counties surrounding the Waterford CCRC campus are presented in Table 4.

Table 4 - IDPH POPULATION BY IMPORTANT AGE GROUPS

DuPage County	2015	2020	2025
Age 00-64	793924	773195	748341
Age 65-74	79748	101221	118829
Age 75 Plus	53480	64600	83778
Kane County	2015	2020	2025
Age 00-64	484057	504865	520050
Age 65-74	39085	50008	59249
Age 75 Plus	24802	30513	39997
Kendall County	2015	2020	2025
Age 00-64	117696	127610	136547
Age 65-74	7448	9625	11896
Age 75 Plus	4058	5584	7745
Will County	2015	2020	2025
Age 00-64	655017	692271	724019
Age 65-74	50577	64507	79212
Age 75 Plus	30814	39384	50363

Source: Illinois Department of Public Health

- Household Income: Illinois residents who enter a long-term institution face one of the most expensive experiences of their lifetime. By definition, this expense is a lasting one. This is especially true of those with Alzheimer's Disease, where it is likely to be a lifetime event. Sheltered care in Illinois is solely paid for by individuals or families with no government subsidies. On the other hand, the Medicaid program provides a financial safety net for those using nursing care. Thus, the sustained income of potential residents at the Alden Courts of Waterford is an important consideration when determining what services to offer for memory care. Table 5 presents information concerning household incomes of those over 65 years old in the study market area.

Table 5 - INCOME OF HOUSEHOLDS WITH AGE OF HOUSEHOLDER 65 AND OLDER

	2014 Estimated	2019 Projected	Change 2014-2019	
<\$10,000	1,829	2,193	364	19.9%
\$10,000-\$19,999	4,161	4,018	-143	-3.44%
\$20,000-\$29,999	5,521	4,538	-983	-17.80%
\$30,000-\$39,999	5,883	5,201	-682	-11.6%
\$40,000-\$49,999	5,249	7,844	2595	49.44%
\$50,000-\$59,999	4,041	4,993	952	23.56%
\$60,000-\$74,999	4,786	5,563	777	16.23%
\$75,000-\$99,999	5,455	8,248	2793	51.2%
\$100,000-\$124,999	3,499	4,989	1490	42.6%
\$125,000-\$149,999	2,496	3,405	909	36.42%
\$150,000-\$199,999	3,099	3,593	494	15.9%
\$200,000 Plus	3,454	9,363	5909	171.0%

Source: Scan/US

- C. Economic Characteristics: Laurel Research Associates analyzed economic data for the City of Aurora, Kane County, Kendall County, DuPage County, Will County and the study market area surrounding Alden Courts of Waterford. This analysis suggests a market area that is prosperous and enduring. It includes such prominent suburban municipalities as Aurora, Naperville, Wheaton, Batavia, Oswego and Plainfield. It is home to several major hospital medical Centers, one of the Illinois river boat casino sites, many important manufacturing and financial industry companies and, most importantly, homes for nearly a million residents. Those residents are served by a myriad of commercial, service and recreational establishments.

The Waterford CCRC's market area is on the western edge of the Chicago Metropolitan Area. It is linked to the city by the Illinois Toll-way system of Interstate Highways and the Burlington Railroad. Both of these transportation systems serve as major commuting arteries to the commercial and cultural centers of Chicago and traverse the high-tech research corridor that has developed along Interstate 88 between Aurora and the Chicago Beltway.

Some of the key characteristics of the study market area are enumerated here.

1. Major Employers in the Market Area: Some of the major employers in this study's market area are shown in Table 6.

Table 6 - MAJOR EMPLOYERS IN ALDEN COURTS MARKET

Employer	Industry	Employees
Caterpillar, Inc.	Heavy Equipment	3,000
Farmers Insurance	Insurance	1,700
School District 129	Education	1,500
School District 131	Education	1,320
Rush-Copley MC	Health Care	1,300
City of Aurora	Government	1,280
LTD Commodities	Distribution	1,200
Provena Mercy MC	Health Care	1,200
Fox Valley Park District	Recreation	1,072
Dreyer Medical Clinic	Health Care	1,020
Hollywood Casino	Gaming	1,009
Metropolitan Life	Insurance	760
Federal Aviation Administration	Air Traffic Cont.	750
Westell	Electronic	650
Hartford Financial	Insurance	650

Source: Illinois Department of Commerce and Economic Opportunity

2. Unemployment Rate: The unemployment rate in the study market area counties has historically tended to track State and U.S. trends. The county rates were usually between the Illinois and national rates, with the state rate being significantly higher than the national rate. This data indicates that since the last big recession the entire State of Illinois has been troubled by high unemployment, but that the counties containing this study's market area have suffered less than the state average. Table 7 shows the unemployment rates for recent years for the market area counties, Illinois and the U.S.

Table 7-MARKET AREA COUNTIES, ILLINOIS AND NATIONAL UNEMPLOYMENT RATES

	2010	2011	2012	2013	2014	2015 (APR)
DuPage County	8.9%	8.1%	7.5%	7.4%	5.6%	4.7%
Kane County	11.0%	9.8%	8.9%	8.7%	7.0%	4.8%
Kendall County	10.2%	9.2%	8.3%	8.3%	6.3%	5.1%
Will County	11.1%	10.5%	9.7%	9.7%	7.4%	6.1%
Illinois	10.4%	9.7%	9.0%	9.1%	7.1%	6.0%
U.S.	9.6%	8.9%	8.1%	7.4%	6.2%	5.4%

Source: Illinois Department of Employment Security

3. General Affluence: In general, the study market area has a thriving economy that produces a high level of affluence for its residents. Below are some indicators of this fact as they were estimated by the Scan/US Demographic software for the year 2014:
- The median income of households in the market area is \$88,046 and over 31,000 households have income in excess of \$200,000. The State of Illinois has a median household income of \$56,957.
 - 77.5% of the market's households are home owners compared to 67.9% in Illinois as a whole. Only 4% of the market's housing units are vacant.
 - Median age of the market area population is 39.4 years compared to the Illinois median age of 37.3 years.
 - Of persons more than 25 years old in the market area, 43.8% have a college degree or higher education while the comparable number in the statewide population is 30.9%.
 - Market area households have an average of 1.94 vehicles available and 68.5% of its households have 2 or more vehicles available.
 - Population density is 2,534.8 people per square mile in the market area producing an aggregate income per square mile of \$90.4 million. The State of Illinois produces aggregate income per Square mile of \$6.9 million.
 - Market area residents over age 75 are 4.3% of the area's populace and nearly 40% of that age cohort have household income exceeding \$50,000. Only 33% have household income below \$30,000.

III SKILLED NURSING MARKET CHARACTERISTICS

- A. General Market Characteristics: Skilled nursing care in Illinois is a licensed service that can be provided only by licensed providers in a state approved Skilled Nursing Facility. Thus, while the Waterford market area is served by a number of different nursing facilities of varying ages and levels of proficiency, the basic components of skilled nursing care are defined and controlled by the licensing process of The Illinois Department of Public Health (IDPH).

Similarly, the actual number and size of skilled nursing facilities is controlled by a Certificate of Need (CON) program overseen by the Illinois Health Facilities and Services Review Board (IHFSRB). The IHFSRB periodically publishes the Inventory of Health Care Facilities and Need Determinations (The Inventory). This inventory and need data is used by the IHFSRB in deliberating whether to issue the permit that is necessary before beginning any changes to facilities providing skilled nursing services. A CON application is being made for the conversion of wing "A" of Alden Courts of Waterford to a Skilled Nursing Care license.

There is a sizeable nursing care industry that currently serves the area surrounding the Waterford CCRC. The Inventory for 2010 - the latest, published in 2013- reveals that in the four counties containing parts of the Waterford market area there are a total of 89 SNFs with 12,122 licensed beds that provided 3,297,082 patient days of nursing service during 2010. The data for each of the four counties follows:

<u>County</u>	<u>Facilities</u>	<u>Beds</u>	<u>Patient Days</u>
Kane	28	3,064	708,235
DuPage	41	6,033	1,739,030
Kendall	2	185	51,814
Will	<u>18</u>	<u>2,840</u>	<u>798,003</u>
Total	89	12,122	3,297,082

In general, the nursing care market is beginning to change character as the "Baby Boomer" generation reaches ages where they are entering that market in larger numbers. Alden's Waterford CCRC has found that shorter stays including more intensive rehabilitation are becoming the norm for nursing care. Along with this change, there is a noticeable increase in demand for larger and more home-like accommodations in the SNF. The CCRC's existing SNF, Alden of Waterford, is designed and managed to care for this type of resident.

There is one type of long-term care patient that does not conform to the above

pattern of characteristics. This is the person with ADRD or other memory disorders. This resident is normally of longer tenancy and their care primarily concerned with comfort and quality of life issues. They are seldom involved in rehabilitation. The Alden Courts of Waterford is the CCRC's component that is designed, staffed and managed to provide the needs of this class of resident.

The Alden Courts of Waterford is licensed for Sheltered Care by the Illinois Department of Public Health. While this license has been adequate to provide appropriate care for most of its residents, the Waterford CCRC has found two problems when trying to provide memory care to all of its residents.

The first of these problems is that Alzheimer's is a progressive disease that increases in severity with the passage of time. It is frequently experienced that the progression of ADRD results in debilitation so pronounced that appropriate care is not available under a sheltered care license.

The second problem area at Alden Courts of Waterford is a financial one. Illinois does not provide any financial assistance for the purchase of Sheltered Care. Thus it is possible for a resident of Alden Courts of Waterford to exhaust all of their financial resources and not be able to qualify for an existing government safety net.

There are frequent occasions when residents have had to leave the Waterford CCRC for one or both of the above reasons. The managers of Waterford feel that a repositioning of a portion of the Alden Courts of Waterford bed to skilled nursing care would solve both the above problems and allow it to provide a more complete continuum of care to its residents.

B. Current Inventory Analysis:

1. Comparable Facilities: The Primary Market Area selected for this study contains 31 Skilled Nursing Facilities providing 4,307 beds for nursing care. These facilities range in age from less than 2 years to more than 40 years and, in size, from 20 beds to more than 300 beds. Other than all being licensed to conduct nursing care, they have few characteristics in common. On the other hand, this means that the potential nursing care patient has a wide selection of facilities and services available. As indicated in the current Long-Term Care Inventory, there are sufficient nursing care spaces available to provide for the needs of the market area's current population. However, as will be shown in the next section, by the year 2019, that will no longer be the case. Therefore, it is anticipated that the selection of a suitable source for nursing care will be decidedly more difficult by that time.

Since there is such a large group of existing facilities in the market area, individual facility information will not be presented in detail. More complete information for representative nursing care and memory care providers is contained in Attachment 2 of the Appendix.

2. Comparable Facilities-Memory Care: There are 20 providers offering long-term care that is devoted to memory care in the Waterford CCRC market area. These will be summarized in this section and more detailed information is provided in Attachment 2 of the Appendix. The facilities providing memory care total 452 spaces for those with ADRD. The vast majority of those spaces are licensed at an assisted living level of care and only 4 providers are authorized to do memory care at the skilled nursing level. One of the market area's memory care providers is part of a pilot program for memory care in Supportive Living Facilities (SLFs). The Asbury Garden SLF would be available to ADRD suffers needing financial assistance from the Medicaid program. Even with this pilot program, the market area has less than 100 spaces that might qualify for a government financial safety net.

IV DEMAND/NEED

- A. IHFSRB Need Methodology: The Inventory of Health Care Facilities and Need Determinations publishes to the nursing care industry and its regulators the approved method of determining how many nursing beds are needed in a particular area. The method that IHFSRB uses for this determination is based on the calculation of a historical use rate for Health Service Areas (HSA) and Health Planning Areas (PSA). The method then uses that use rate - defined as the number of patient days of service for each one thousand persons in a relevant age group - to estimate the number of beds needed at some future level of population.

The number of beds needed by a PSA is presented in The Inventory as a table showing the result of the above calculations. The calculation of the published bed need for PSA 7-C (DuPage County), PSA Kane County, PSA Kendall County and PSA Will County is provided in Attachment 3 of the Appendix and is summarized below:

PUBLISHED BED NEED

<u>PSA</u>	<u>2015 BED NEED</u>	<u>EXISTING BEDS</u>	<u>DIFFERENCE</u>
Kane	2,816	3,064	-248
DuPage(7-C)	5,913	6,033	-120
Kendall	279	185	94
Will	<u>2,671</u>	<u>2,840</u>	<u>-169</u>
Total	11,679	12,122	-443

These data from the published inventory of nursing beds indicate that the counties (PSAs) surrounding Waterford CCRC will have a surplus of 443 nursing beds in 2015. However the Waterford CCRC's realignment of its nursing care capacity is intended for use subsequent to 2015. Since the IHFSRB inventory does not provide guidance beyond 2015, Laurel Research Associates will use the IHFSRB need methodology and the population data presented in Section III to project bed need requirements for the Waterford market areas in 2019/2020. These calculations are contained in Attachment 3 of the Appendix.

- B. Surrounding Counties Nursing Bed Need: In order to estimate nursing care demand in 2019, LRA has used the IHFSRB need methodology with the assumption that their published use rates and population projections for the market area are those that actually occur in 2015. However, since the publication of the current bed need and inventory, the new Department of Public Health populations estimates have been released. They have a remarkable effect on bed need for PSA Kane County, PSA Kendall County, PSA Will County and PSA 7-C (Dupage County). A

calculation of bed need for these PSAs using different population estimates is provided in Attachment 3 of the Appendix and is summarized in Table 8 below:

Table 8-SURROUNDING COUNTIES NURSING BED NEED COMPARISON

PSA	2010	2014/ 2015	2019/ 2020	2010 Beds	2020 Add Need
DuPage County:					
Published Inventory	5294	5912	N/A	6033	N/A
IDPH Projections		6040	7092	6033	1059
Scan/US Software		5920	7069	6033	1036
Kane County:					
Published Inventory	2584	2816	N/A	3064	N/A
IDPH Projections		2938	3470	3064	406
Scan/US Software		2860	3373	3064	309
Kendall County:					
Published Inventory	157	279	N/A	185	N/A
IDPH Projections		294	374	185	189
Scan/US Software		273	346	185	161
Will County:					
Published Inventory	2429	2671	N/A	2840	N/A
IDPH Projections		2824	3403	2840	563
Scan/US Software		2676	3192	2840	352
Total Four Counties:					
Published Inventory	10464	11678	N/A	12122	N/A
IDPH Projections		12096	14339	12122	2217
Scan/US Software		11729	13980	12122	1858

Source: IDPH Inventory and Need Determination of Nursing Care Beds (2013) and LRA Bed Need Calculations, Attachment 3 of the Appendix

This comparison of nursing bed need in the vicinity of Waterford CCRC reveals not only that the bed need is heavily dependent on the accuracy of population projections, but also that the current published bed need is more conservative than would be the case if either the newly released IDPH projection of population, or those available in the Scan/US Market Mapping software, were used in calculating the need. The total bed need published for 2015, in the four counties of interest to the Waterford CCRC, is 3.5% less than the need calculated using the new IDPH projections. It is also about 0.5% less than the Scan/US populations would yield. These facts indicate that the Scan/US data used in this study is a reasonably

conservative method of estimating the future population of the Alden Courts of Waterford PMA.

- C. Primary Market Area Demand: In order to estimate nursing care demand in this study's PMA, LRA has used the IHFSRB need methodology with the assumption that their published use rates and population projections for the surrounding counties are those that actually occur in 2015. The calculation of the 2019 bed need for the Primary Market Area, derived by measuring 30 minutes driving time from the Waterford CCRC campus, applies Scan/US population projections to the IHFSRB need methodology. The detail of this calculation is included in Attachment 3 of the Appendix and the results are summarized below:

CALCULATED FUTURE BED NEED

<u>PMA</u>	<u>2019 BED NEED</u>	<u>EXISTING BEDS</u>	<u>ADDITIONAL NEED</u>
30 Min. Drive Area	4,929	4,307	622

- D. Memory Care Demand: The Alden Courts of Waterford are devoted to the care of those suffering from the effects of Alzheimer's Disease and Related Dementia (ADRD). This type of specialization has become known as "memory care". In order to estimate the number of living units that should be allocated to memory care in the study market area, additional factors must be considered.

Research has shown that the prevalence of Alzheimer's Disease varies mostly with age and increases dramatically at ages above 75. We will use the normally accepted prevalence rates and the demographic data of Attachment 6 to estimate the number of ADRD cases, and their financial qualification for care, that are likely to occur in the study market area. The results of that analysis is presented in Table 9.

Table 9 - ADRD CASES WITH REQUIRED INCOME

Age Group	Population	Rate	Cases	With Income
65-74	66,459	3.0%	1,994	1,103
75-84	29,373	18.7%	5,493	1,845
85 Plus	14,357	47.2%	6,777	2,276
Total	110,189		14,263	5,224

Alden Courts of Waterford currently operates a Sheltered Care Facility (SCF) at the site of the Waterford CCRC. Its management reports that this SCF and other sister

facilities that are in or near the study market area and have memory care capability, are normally fully occupied. They further report that significant numbers of residents are forced to leave the SCF because their care needs have exceeded sheltered care standards or because their financial resources have been exhausted. The CCRC management believes that both of these current limitations of Alden Courts can be eliminated by adding a skilled nursing care capability to the SCF.

Considering the factors enumerated above, LRA made a calculation of the potential market for memory care in the Waterford CCRC market area. The details of those calculation are contained in Attachment 3 of the Appendix and are used in the following table to report the potential market, required capture rate and total inventory penetration rate for the market area. Also considered in compiling Table 10 is the finding by LRA that, in similar projects, approximately half of the identified ADRD cases will be cared for in non institutional settings such as private homes.

Table 10 - MARKET CAPTURE AND PENETRATION RATES

Item	Memory Care
Potential Market - 50% of Cases	7,132
Less Existing Units	452
Net Need in Market	6,680
Max Proposed Project Size	20
Required Capture Rate	0.3%
Total Inventory Penetration Rate	7%

As can be seen in the above table, the proposed project does not represent a significant proportion of the potential market for memory care in the Waterford CCRC market area. Also noted, is the small total inventory penetration rate of memory care providers in the market. Both of these findings indicate that additional memory care capacity would be readily accepted by the market.

V CONCLUSIONS AND RECOMMENDATIONS

- A. Conclusions: Based on a survey of existing nursing and memory care facilities in the 30 minute drive market area of Waterford CCRC and interviews with managers of the CCRC, LRA found a need for additional capacity in both categories of long-term care. Although Waterford CCRC currently offers both skilled nursing care and memory care, the current services do constitute a complete continuum of care. The SNF concentrates on shorter care stays with more emphasis on rehabilitation, while the memory care is offered only under the CCRC's Sheltered Care license. No memory care is available at the skilled nursing care level. Therefore, the Waterford CCRC management is proposing to remodel one wing of the Alden Courts building and license it for skilled nursing that will then be devoted to memory care.

LRA also identified a rapidly growing and prosperous suburban residential and commercial market area for the Waterford CCRC. The extent of the market area is defined by the area included in a 30 minute drive from the CCRC campus. LRA's demographic study conducted by use of Scan/US Market Mapping Software indicated continued growth and aging of the market area population over the next five years. This finding was confirmed by population projections recently issued by the Illinois Department of Public Health. Although, the selected market area of Waterford CCRC is currently served by a sizeable long-term care industry, the need analysis conducted here indicates that still more senior services will be required in the future.

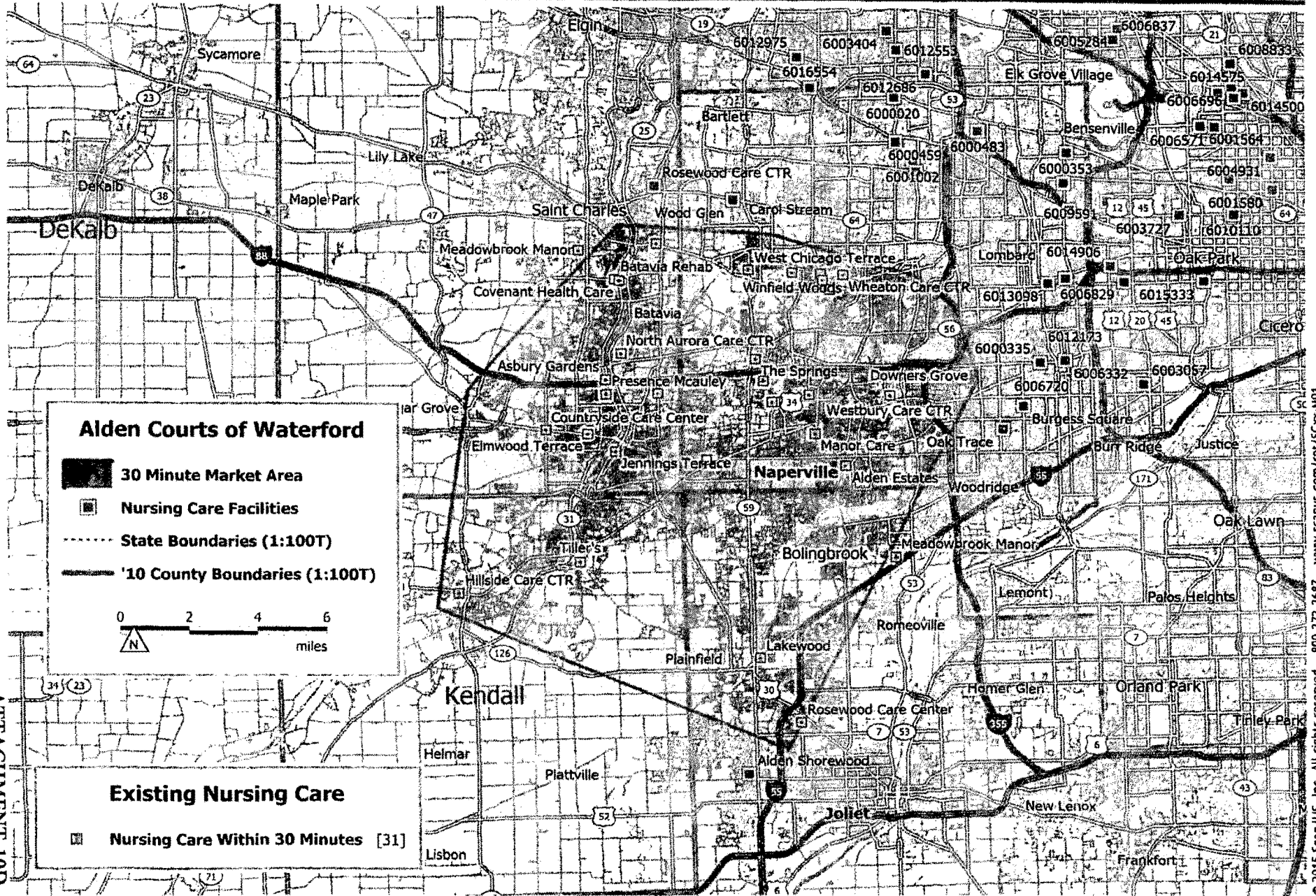
Since the population of the study market area is both growing and ageing, LRA predicts that demand for skilled nursing beds in the market area could increase by about 622 in 2019. Similarly, we believe that memory care demand could increase by several hundred beds in the same time period. The proposed project is consistent with social needs associated with these trends.

- B. Recommendation: Based on the findings of this Market Study, it is recommended that the proposed conversion of Sheltered Care capacity to Skilled Nursing Care capacity at the Alden Courts of Waterford in Aurora, Illinois be pursued. In light of the indicators revealed by this study, these changes to nursing care services at Waterford CCRC seem appropriate and are likely to be quickly absorbed by Waterford's primary market area.

VI APPENDIX

- Attachment 1. Maps of Market Area (With Location of Existing Facilities)
- Attachment 2. Existing Inventory Details
- Attachment 3. Nursing Care Demand and Need Calculations
- Attachment 4. Site Plan and Floor Plans of Proposed Modifications
- Attachment 5. IDPH Population Projections
- Attachment 6. Scan/US Demographic Study

Attachment 1. Maps of Market Area (With Location of Existing Facilities)



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ATTACHMENT-10D

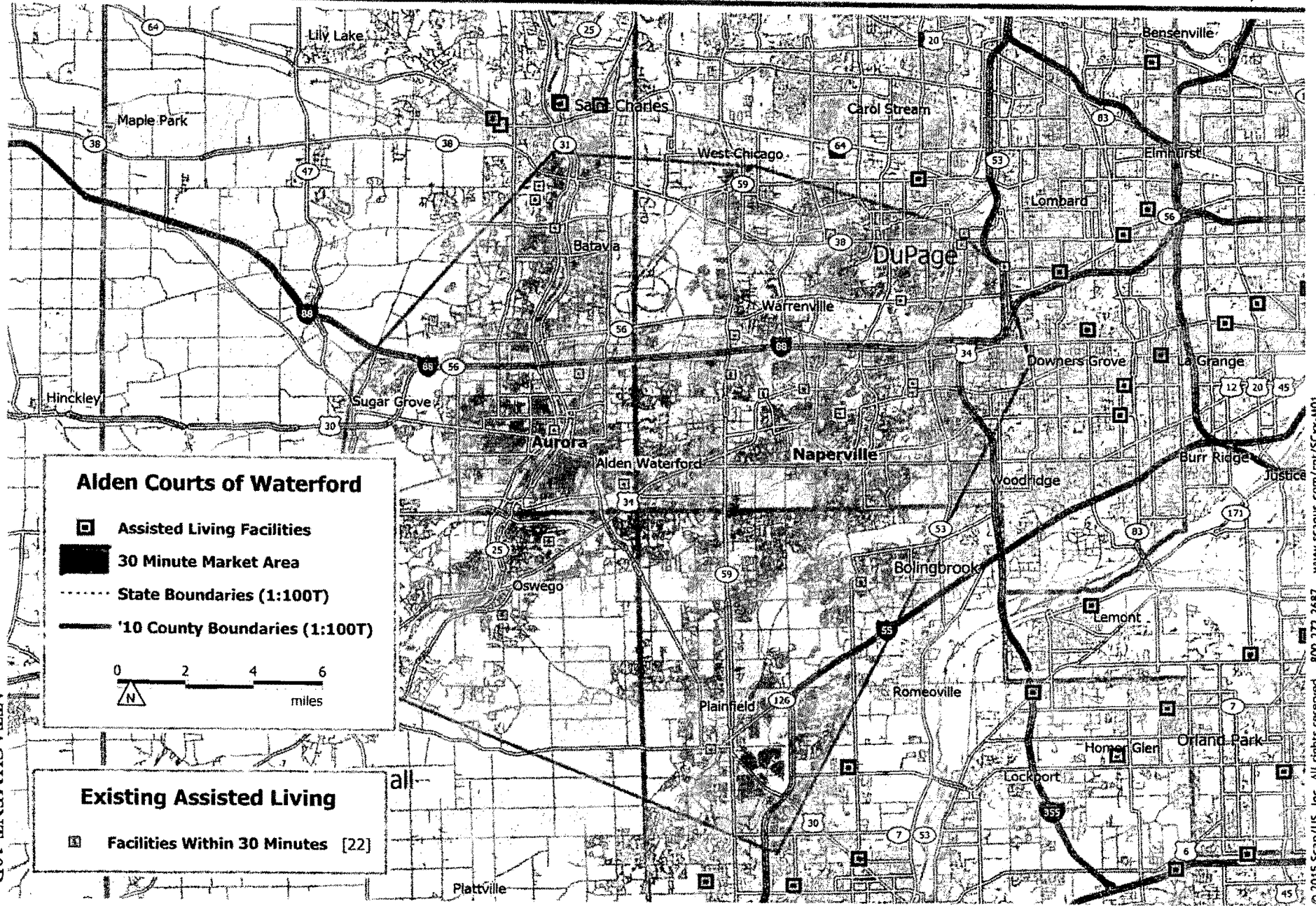
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Existing Nursing Care Facilities Within 30 Minutes

key:Object name:Object name
#Loc0096 Alden Waterford
#Loc0097 Jennings Terrace
#Loc0098 The Grove
#Loc0099 Tiller's
#Loc0100 Elmwood Terrace
#Loc0101 Presence Mcauley
#Loc0102 St. Patrick's Residence
#Loc0103 Manor Care
#Loc0104 Asbury Gardens
#Loc0105 Taber Hills
#Loc0106 Countryside Care Center
#Loc0107 North Aurora Care CTR
#Loc0108 Meadowbrook Manor
#Loc0109 Community Nsg CTR
#Loc0110 Alden Estates
#Loc0111 The Springs
#Loc0112 Lakewood
#Loc0113 Covenant Health Care
#Loc0114 Hillside Care CTR
#Loc0115 Batavia Rehab
#Loc0116 Westbury Care CTR
#Loc0117 West Chicago Terrace
#Loc0118 Bria Of Geneva
#Loc0119 Meadowbrook Manor
#Loc0120 Rosewood Care Center
#Loc0121 Wynscape
#Loc0122 MarianJoy Rehab
#Loc0123 Meadowbrook Manor
#Loc0124 Dupage County Home
#Loc0125 Winfield Woods
#Loc0126 Wheaton Care CTR

Alden Courts of Waterford

Scan/US, Inc.

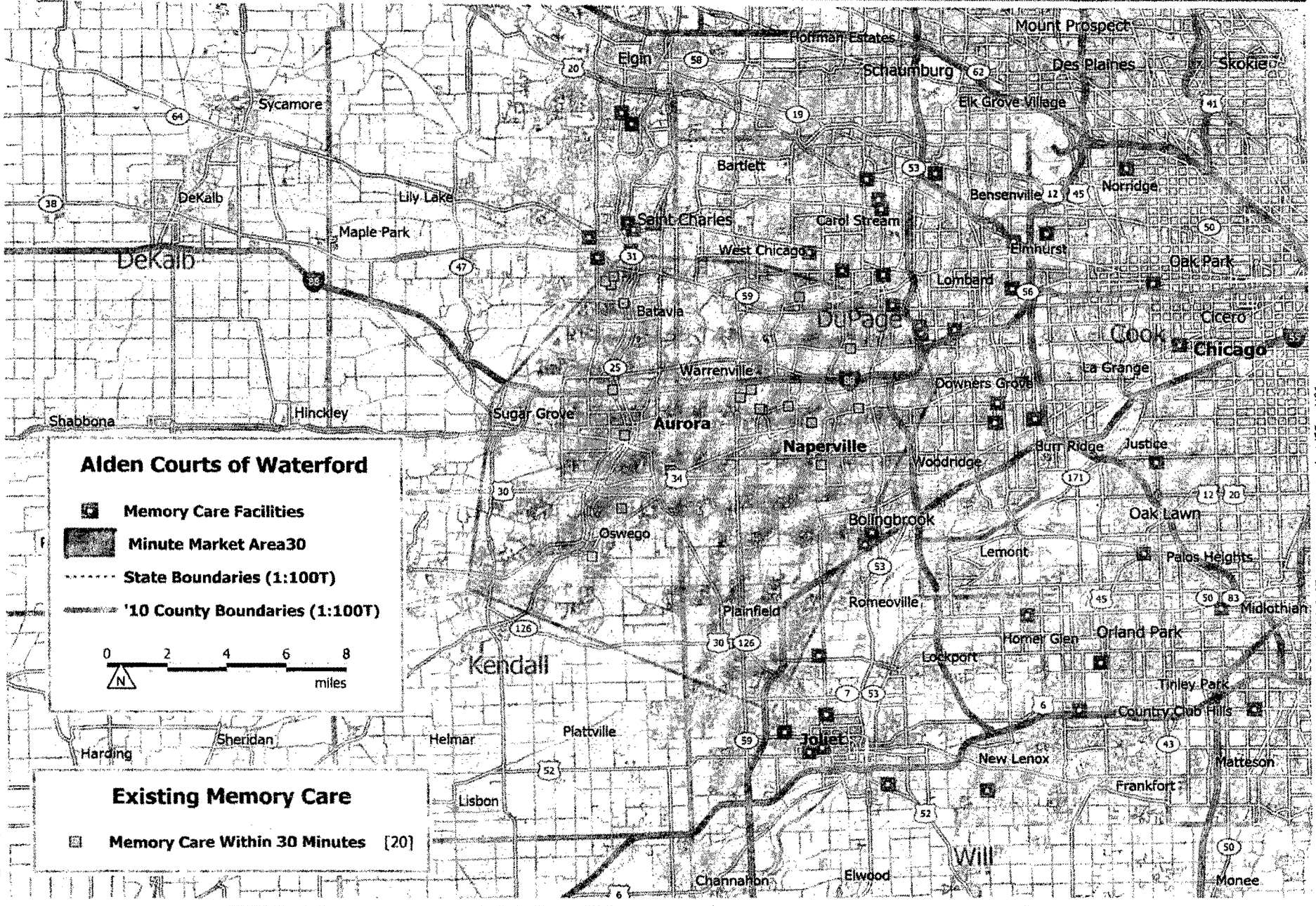


95

ATTACHMENT-10D

Assisted Living Facilities Within 30 Minutes of Alden Courts of Waterford

key:Object name:Object name
#Loc0054 Harbor Chase
#Loc0063 Autumn Leaves
#Loc0064 Bickford Cottage
#Loc0065 Neighbors
#Loc0066 Fox Knoll
#Loc0067 Harry Ekstam
#Loc0069 Robin's Nest
#Loc0070 Greenfields
#Loc0081 Autumn Leaves
#Loc0087 Atria Park
#Loc0089 Brookdale
#Loc0092 Brookdale
#Loc0093 Lexington Square
#Loc0095 Silverado
#Loc0096 Spring Meadows
#Loc0097 Springs at Monarch
#Loc0098 Sunrise
#Loc0099 Sunrise North
#Loc0101 Brighton Gardens
#Loc0102 Westbridge
#Loc0104 Alden Courts



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ATTACHMENT-10D

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Memory Care Facilities Within 30 Minutes of Alden Courts of Waterford

key:Object name:Object name
#Loc0012 Alden Courts
#Loc0024 DuPage Convalescent
#Loc0025 Tabor Hills
#Loc0026 Meadowbrook Manor
#Loc0027 Alden Estates
#Loc0033 Asbury Gardens SLF
#Loc0036 Sunrise
#Loc0039 Spring Meadfows
#Loc0041 Brighton Gardens
#Loc0044 Sunrise
#Loc0048 Silverado
#Loc0049 Villa St. Benedict
#Loc0051 Harry Ekstam AL
#Loc0053 Fox Knoll
#Loc0055 Greenfields
#Loc0059 Robin's Nest
#Loc0060 Robin's Nest
#Loc0061 Autumn Leaves
#Loc0062 Bickford Cottage
#Loc0066 Harbor Chase

Attachment 2. Existing Inventory Details

Comparable Property Details

Development Name and Address	# Units	Unit Type	Size	Avg. Cost	Occ. %
<i>Jennings Terrace 275 S. LaSalle St. Aurora, IL 60505</i>	60 nsg	1-Bedroom (IL)		\$1265-\$1400	78.02%
	103 IL/AL	2-Bedroom (IL)		\$2800-\$3000	61.09%
		Nursing Care Semi-Private		\$5868	
		Nursing Care Private		\$6410	
		1-Bedroom (AL)		\$1960	
		2-Bedroom (AL)		\$2410	
		Nursing Unit (AL)		\$3960	

Phone: (630) 897-6947

Contact: Diane Beukelman (Development Director)
beukelman@jenningsterrace.com

Unit Amenities: Furnished rooms; Private showers centrally located; Free Direct TV hook-up & WiFi; Small refrigerators can be provided by residents for in-room use; In-room phone service is optional.

Project Amenities: Around the clock supervision and security; Three home-style prepared meals; housekeeping, laundry services, linen and towel services; Computer & color printer; Courtesy van with lift; Exercise room and fitness programs; Directed group activities, special entertainment events and social parties; Game areas with pool table, large screen TVs and numerous lounges; Microwaves and refrigerators in lounges; Shaded patios and walkways; Gas Weber grills; Books, games, puzzles, VHS tapes, DVDs; Non-denominational daily Bible Reading, Sunday services and guest Ministers; Catholic rosary daily, Sunday communion service and monthly mass in Chapel; Private off-street parking; On-site Barber/Beauty Shop and Resident Store; US Mail and newspaper services.

Comments: One-story facility located on eleven acres of land in a residential area. Capacity for 103 residents in Independent/Assisted Living area and 60 in Nursing Care.



Jennings Terrace
275 S. LaSalle St.
Aurora, IL 60505

Phone: 773-569-3971 ext. 12

Fax: 630-897-6949

E-mail: Diane Beukelman, Development Director
dbeukelman@jenningsterrace.com

Welcome to Jennings Terrace

Jennings Terrace is a non-profit charitable corporation dedicated to providing quality, safe, affordable housing and health care services in a community setting for adults age 50+. Since being established in 1943, we have valued safety, comfort and respect of our residents. We excel in continuous care for our seniors needing long term nursing and memory care. We provide the helping hand to those who need assistance with activities of daily living but not in need of nursing health care. Retired individuals can live independently and relax with no worries about fixing meals or managing a household. Through our short-term (Respite) provision, caregivers can take a "break" and rely on us for specialized care of their family member. Support from our dedicated staff, Auxiliary and volunteers gives all our seniors an opportunity to appreciate social and physical activities, entertainment, free-time to visit with family, rediscover old friends and make new friends. **Extraordinary care is our reputation and exceptional rates are our tradition.** Visit or contact us today!

Independent Living

One Private Room with shared half bath \$1,265/month

One Private Room with private full bath \$1,400/month

Two-Room floor plan suite, with private half bath \$1,665/month

Two-Room floor plan suite, with private full bath \$1,865/month

Short-Term Stay (Respite Service) \$92/day

Each private room or the bedroom of the two-room plan is furnished with a twin bed, chest of drawers, dressing table/desk combination with mirror and a desk chair and bedside table. Residents may choose to use any or all of the provided furniture or bring their own. Private shower/bathing rooms are centrally located for individual resident use.

- Weekly housekeeping, laundry, linen and towel services are included.
- Hot-water heat provides toasty-warm room comfort in the winter.
- Residents can elect to have their own window air conditioners installed for the summer months.
- Free Direct TV hook-up and wireless Internet access in every room.
- Small refrigerators can be provided by residents for in-room use.
- In-room phone service is optional.
- Courtesy Van with lift is available for appointments.

Jennings Terrace is a one-story facility located on eleven acres of beautifully landscaped grounds in a quiet residential area. We have the capacity to serve 103 residents in our Independent/Assisted Living area and 60 in Nursing Care. Our highly trained Licensed Nurses, Certified Nurse Aides, Activity Aides, Dietary personnel and Administrators is responsive in every effort to meet the current and changing needs of our residents.

- Around the clock supervision and security.
- Three delicious, home-style prepared meals are served restaurant style Mon.–Sat.*
- Furnished rooms.
- Private showers are centrally located for individual resident use.
- Weekly housekeeping, laundry services, linen and towel services are provided.
- Free Direct TV hook-up & wireless Internet access.
- Computer & color printer available in Lounge area.
- In-room phone service is optional.
- Courtesy van with lift is available for appointments and resident group outings.
- Exercise room and fitness programs.
- Directed group activities, special entertainment events and social parties.
- Game areas with pool table, large screen TVs and numerous lounges for resident enjoyment.
- Microwaves and refrigerators are available in our lounges for personal use.
- Small refrigerators can be provided by residents for in-room use.
- Shaded patios and walkways are excellent for leisure outdoor time and visiting.
- Gas Weber grill available for family use.
- Books, games, puzzles, VHS tapes, DVDs are on-hand for residents.
- Non-denominational daily Bible Reading, Sunday services and guest Ministers.
- Catholic rosary daily, Sunday communion service and monthly mass in Chapel.
- Private off-street parking.
- On-site Barber/Beauty Shop and Resident Store.
- US Mail and newspaper services.

*On Sundays we feature a Buffet from 9AM – 5PM. Residents can dine as many times as they wish throughout the day. It's also a great day for family and friends to join Residents for an enjoyable meal. Visitors age 75 years or more and children under 12 years are \$4.00; all other adults are \$6.50. Guests may join Residents for any other meal for \$5.00.

ACTIVITIES are developed to engage our residents in programs that can stimulate body, mind and soul. Our professional Activity Director implements a variety programs to fit many interests. BINGO is always popular as well as our Bean-Bag Baseball team that competes regularly with other senior groups. Once a month we host a Billiard Tournament for residents and guests with a traveling trophy to the winning team. Other popular activities include build-a-word, discussion groups, craft sessions, bus riding tours, reminiscing, cook-outs, birthday/holiday celebrations and dining feasts.

Group exercise includes chair exercises that can be adapted to anyone's range of mobility. Specialized individual

programs using stationary bikes, treadmills, light weights and walking can be designed to help a resident regain or maintain strength, flexibility or endurance to their recommended range.

As a non-profit, Jennings is fortunate to have a volunteer Auxiliary and additional individual volunteers to help with activities. Church and school groups share their talents and time with our residents for entertainment, sing-alongs, craft and other interactive and inter-generational programs.

Nursing Care

Jennings Terrace Nursing facility is dedicated to meeting the medical, personal and social needs of seniors who can no longer completely care for themselves.

Kemmerer Annex is our 60-bed nursing and health care facility offering long-term nursing healthcare services and memory care. Each resident is encouraged to regain or maintain their individual level of independence through rehabilitation or long-term support. Our professional nursing staff of Registered Nurses, Licensed Practical Nurses and Certified Nurse Aides (CNAs) provide twenty-four hour nursing care services under the direction of the resident's physician. Our room accommodations and facility amenities create a safe, comfortable setting for our residents and their visitors.

Residents are served three home-style prepared meals daily. Residents and visitors are invited to enjoy our Sunday Buffet 9AM – 5PM in our Independent Dining Room. Attending the Sunday Buffet with your loved one offers a nice change for them without the worry of leaving the facility.

Our fitness team, which serves our residents at no additional charge, develops individual rehabilitation and restorative programs based on diagnosis and prognosis. Social Services help identify the appropriate stimuli for residents to achieve their highest psychosocial level and counsels families on supportive resident care. The Activity Department engages residents in programs that stimulate the body, mind and soul. We also have standing partnerships with local doctors, laboratory, pharmaceutical services, medical supply companies, rehabilitation services and hospice care. We welcome you to visit us to experience our **extraordinary care and compare our exceptional rates**. Contact us today.

Jennings Terrace is a one-story facility located on eleven acres of beautifully landscaped grounds in a quiet residential area. We have the capacity to serve 103 residents in our Independent/Assisted Living area and 60 in Nursing Care. Our highly trained staff of Nurses, Certified Nurse Aides, Activity Aides, Dietary personnel and Administrators is responsive in every effort to meet the current and changing needs of our residents.

- Around the clock supervision and security.
- Three delicious, home-cooked meals are served restaurant style daily.*
- Furnished rooms.
- Fully assisted bathing care with Whirlpool spa bathing station and showers.
- Weekly housekeeping, laundry services, linen and towel services are provided.
- Free Direct TV hook-up & wireless Internet access.
- Lounges and multi-use room available for relaxing and visiting.
- Computer available in main lobby.
- In-room phone service is optional.

- Courtesy van with lift is available for appointments.
- Physical Therapy Room.
- Directed group activities, special entertainment events and social parties.
- Enclosed shaded patio and garden area ideal for leisure outdoor time and visiting.
- Books, games, puzzles, VHS tapes, DVDs are on-hand for residents.
- Non-denominational Sunday services and Sunday communion service for Catholics.
- On-site Barber/Beauty Shop and Resident Store.
- US Mail and newspaper services.

*On Sundays we feature a Buffet from 9AM – 5PM. Nursing Residents are encouraged to attend with family and friends for a change of pace from their normal dining. Visitors age 75 years or more and children under 12 years are \$4.00; all other adults are \$6.50. Guests may join Residents for any other meal for \$5.00.

Activity Programs

Jennings Terrace has designed specialized activity programs to help with memory care, sensory stimulation and socialization. Popular activities include group exercise, BINGO, build-a-word, discussion groups, craft sessions, reminiscing, cook-outs, birthday/holiday celebrations and dining feasts. As a non-profit, Jennings is fortunate to have a volunteer Auxiliary and additional individual volunteers to help with activities. Church and school groups share their talents and time with our residents for entertainment, sing-alongs, craft and other interactive and inter-generational programs.

Assisted Living

Residents in our Assisted Service program will enjoy a range of specific amenities meant to ensure safety, comfort, security, socialization and health well-being. It is our intention to fill a much needed gap between independent living and skilled nursing home care. We adjust our assisted service to meet an individuals needs, instead of our seniors having to adapt to limited available services.

You have a choice of room accommodations to fit your needs and lifestyle. Having an additional room may be just what you need, while others may require a single room with more services or a location that accomodates routine wheelchair use.

Our community setting and varied activities give seniors the opportunity to reconnect or continue a full social life with no limitations. Meal time is one opportunity that always goes better with conversation. Residents are served three delicious, home-cooked meals, restaurant style in our spacious dining room Monday–Saturday. And on Sunday keep your family get together going with family and friends, when we feature a casual buffet for residents, guests and the public. Spend time in the dining room or reserve an entire lounge.

Our numerous spacious lounges, lobbies and out-door settings offer plenty of room to roam, congregate or enjoy some solitude. Our building security system allows for easy access to most locations and includes out-door lighting, well-lit parking lots and walkways.

Our Licensed Nurses and Certified Nursing Aides (CNAs) provide planned 24 hour supervision and assistance with Activities of Daily Living (ADLs) as needed.

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- Around the clock supervision and security.
- Three delicious, home-style prepared meals are served restaurant style Mon.–Sat.*
- Furnished rooms.
- Private showers are centrally located for individual resident use.
- Weekly housekeeping, laundry services, linen and towel services are provided.
- Free Direct TV hook-up & wireless Internet access.
- Computer & color printer available in Lounge area.
- In-room phone service is optional.
- Courtesy van with lift is available for appointments and resident group outings.
- Exercise room and fitness programs.
- Directed group activities, special entertainment events and social parties.
- Game areas with pool table, large screen TVs and numerous lounges for resident enjoyment.
- Microwaves and refrigerators are available in our lounges for personal use.
- Small refrigerators can be provided by residents for in-room use.
- Shaded patios and walkways are excellent for leisure outdoor time and visiting.
- Gas Weber grill available for family use.
- Books, games, puzzles, VHS tapes, DVDs are on-hand for residents.
- Non-denominational daily Bible Reading, Sunday services and guest Ministers.
- Catholic rosary daily, Sunday communion service and monthly mass in Chapel.
- Private off-street parking.
- On-site Barber/Beauty Shop and Resident Store.
- US Mail and newspaper services.

*On Sundays we feature a Buffet from 9AM – 5PM. Residents can dine as many times as they wish throughout the day. It's also a great day for family and friends to join Residents for an enjoyable meal. Visitors age 75 years or more and children under 12 years are \$4.00; all other adults are \$6.50. Guests may join Residents for any other meal for \$5.00.

ACTIVITIES are developed to engage our residents in programs that can stimulate body, mind and soul. Our professional Activity Director implements a variety programs to fit many interests. BINGO is always popular as well as our Bean-BagBaseball team that competes regularly with other senior groups. Once a month we host a Billiard Tournament for residents and guests with a traveling trophy to the winning team. Other popular activities include build-a-word, discussion groups, craft sessions, bus riding tours, reminiscing, cook-outs, birthday/holiday celebrations and dining feasts.

Group exercise includes chair exercises that can be adapted to anyone's range of mobility. Specialized individual

programs using stationary bikes, treadmills, light weights and walking can be designed to help a resident regain or maintain strength, flexibility or endurance to their recommended range.

As a non-profit, Jennings is fortunate to have a volunteer Auxiliary and additional individual volunteers to help with activities. Church and school groups share their talents and time with our residents for entertainment, sing-alongs, craft and other interactive and inter-generational programs.

Comparable Property Details

Development Name and Address	# Units	Unit Type	Size	Avg. Cost	Occ. %
<i>The Grove of Fox Valley</i>	158	Private		\$210/daily	81.03%
<i>1601 N. Farnsworth</i>		Semi-Private		\$160/daily	
<i>Aurora, IL 60505</i>					

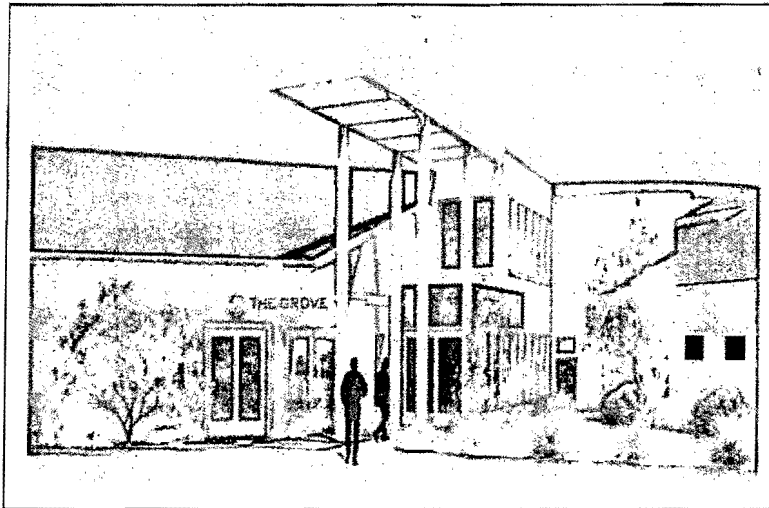
Phone: (630) 898-1180

Contact:

Unit Amenities: Spacious private suites with private bathroom & shower; In-room refrigerators; Large, wall-mounted flat screen TVs.

Project Amenities: On-site spa and salon services; high-speed Wi-Fi; family lounges; activity programs; certified dietician services; exercise program; meal service; room service available; transportation to medical appointments; daily newspaper delivery; meals from local restaurants; escorted home visits.

Comments: Located in a quiet Aurora Neighborhood, located close to many of the area's leading hospitals and physicians' offices.



The Fox Valley's Most Advanced *Post-Hospital Rehabilitation*

The Grove Fox Valley offers the latest advancements in post-hospital rehabilitation and combines it with a long list of stylish comforts and amenities. This unique combination allows us to offer guests the best possible care in a warm, comfortable environment that promotes the quickest possible recovery.

Our dedicated physicians and experienced medical staff, working side-by-side with the area's most prestigious physicians and hospitals, have earned an unmatched reputation for their ability to help patients achieve the most complete recovery, as quickly as possible.

Guests of The Grove Fox Valley can rely on:

- State-of-the-art physical therapy equipment & pain management
- One of the largest rehab facilities in the Fox Valley
- Physical, occupational & speech therapy offered 7 days a week
- 20 full-time therapists on staff
- Independent living skills taught in a real world environment
- Discharge planning – includes a home visit to assess accommodations, arrange for any necessary equipment, & training of family members or other caregivers who may assist, if necessary, upon the patient's return home

Experience The Grove Difference

- Our primary goal is to help guests recover their strength and restore their confidence and independence. Our comprehensive and therapeutic approach to post-hospital rehabilitation is specifically designed to help reduce their pain, improve their living skills, and enjoy greater functionality overall.
- We offer the area's highest patient-to-therapist ratio, large state-of-the-art rehab gyms and a supervised level of personalized therapy 7-days a week. This comprehensive approach to physical rehabilitation and therapy often allows our guests to return home in as little as 3 weeks.

On The Path To A Faster, More Complete Recovery

- Whether you're recovering from a hip or knee replacement, spine or other orthopedic surgeries, you can count on The Grove to provide you with a highly customized care plan that will get you up and on with your life as quickly as possible.
- Working closely with our guests and their physicians, our therapists create an intensive physical and occupational rehabilitation plan designed to meet the specific needs of each individual guest. Our physiatrists, physical medicine doctors, consult regularly with the rest of our therapy team to assess each guest's recovery and provide treatment goals.

Specialty Therapy Programs At The Grove Fox Valley

- To assist our guests in their recovery from recent surgery, illness or injury, The Grove Fox Valley offers a wide range of specialty therapy programs. Our clinical facilities feature the latest ancillary and diagnostic equipment, eliminating the inconvenience of traveling between physician offices or hospitals for tests or treatment. ¶¶The specialized therapy programs we offer include, but are not limited to:
 - *Physical Therapy*
 - Enhancing lower body strength, gait rehabilitation, transfer and balance training, with the goal of improving balance, coordination and strength through a range of motion exercises.
 - *Orthopedic Rehabilitation*
 - Addresses the need for guests to get up and moving as soon as possible to prevent any loss of mobility due to recent hip, knee and other replacement surgeries; as well as spine or back surgeries.

- *Speech/Language Therapy*
- This program evaluates and treats impairments in communication skills, cognition and/or swallowing with the overall goal of restoring the patient's abilities.
- *Occupational Therapy*
- A program of motion exercises and upper body strengthening and coordination drills designed to maximize the patient's abilities to perform the activities of daily living, such as bathing, grooming and dressing.

Offering You The Quickest Possible Recovery

Recovering from surgery or a serious illness often requires additional time and specialized rehabilitation in a post-hospital setting. Additional assistance with pain management, and close monitoring of any chronic medical conditions may also be required.

At The Grove Fox Valley, we are proud to provide the care and therapy our guests need to transition back to independent living.

This is why we offer a level of personalized attention and care combined with a clinical sophistication that few other rehabilitation centers can match. Our physician-supervised, round-the-clock approach allows us to offer each guest a uniquely personalized level of treatment and program of care.

Our in-depth medical expertise extends across an extensive range of patient needs, including:

- Cardiac care
- Stroke & other neurological conditions
- Pulmonary care
- Orthopedic care
- Oncology care
- Specialized wound care
- Post-surgical rehabilitation of all kinds

Specialized Wound Care

- Our multi-system approach to chronic wound care takes advantage of the most advanced therapies and treatments, including: E-Stim, ultrasound, ultraviolet therapy, debridement and negative pressure therapies.
- A certified wound care specialist supervises each step in our innovative and interdisciplinary approach to the treatment of chronic wounds. All consultations are conducted onsite and every element of care is supported by our own certified wound care nurses.

Innovative Pulmonary Care At The Grove Fox Valley

Our unique, team approach to pulmonary rehabilitation is designed to help patients with complex lung disease and other chronic progressive respiratory problems.

By combining exercise, education, breathing retraining, nutritional counseling, as well as psychosocial support, the dedicated staff at The Grove can help to optimize our guests' physical abilities, while simultaneously impeding the progression and the debilitating symptoms of pulmonary disorders. These disorders include, but are not limited to:

- Chronic Obstructive Pulmonary Disease (COPD)
- Cystic fibrosis
- Emphysema
- Asthma
- Chronic bronchitis

- Neuromuscular disorders

Advanced Cardiac Care At The Grove

- At The Grove Fox Valley, our goal is to help guests and their physicians limit the physical effects of cardiac illness and improve overall cardiovascular health.
- Each guest receives a cardiac rehabilitation program designed specifically for them, implemented and supervised by a team of cardiac specialists, including: physicians, nurses, physical and occupational therapists, and consulting nutritional professionals.

Everything That Surrounds You Supports Your Recovery

- At The Grove Fox Valley, we believe a relaxing, nurturing environment is an essential part of a quality rehabilitation regimen. And to that end, we've designed every aspect of The Grove to offer a truly high-end experience.
- From our large, stylishly appointed guest rooms and private suites, to our long list of amenities, one of our key goals is to make sure our guests and their visitors are as comfortable as possible.

Unmatched Service

Guests at The Grove Fox Valley are encouraged to take advantage of our full range of amenities throughout their stay. These amenities include, but are not limited to:

- Spacious private suites with private bathroom & shower
- In-room refrigerators
- On-site spa & salon services
- Large, wall-mounted flat screen TVs with 80 cable channels
- High-speed Wi-Fi
- Inviting family lounges

Food That Is Both Inviting And Nourishing

- At The Grove Fox Valley, you'll find dining options are often as innovative and inviting as your surroundings. Meals are thoughtfully prepared using fresh ingredients and healthy recipes. Our certified dietitian ensures that meals are nutritionally balanced and that medical and faith-based food requirements are also met.
- Guests have their choice of dining in the privacy of their room, or in our dining lounge, where cold beverages and fresh, hot coffee and are served throughout the day.

Complete Concierge Coverage™

Another way the Grove is changing the nature of post-hospital care is by offering a range of amenities and a level of personal service that rivals the best of many hotels. These complimentary services are designed to help you both manage your needs and make your stay more enjoyable. They include, but are not limited to:

- Escorted round-trip transportation to medical appointments
- Daily newspaper delivery
- Meals brought in from local restaurants
- Escorted visits home
- Free transportation for families

Comparable Property Details

<u>Development Name and Address</u>	<u># Units</u>	<u>Unit Type</u>	<u>Size</u>	<u>Avg. Cost</u>	<u>Occ. %</u>
<i>The Tiller's Nursing & Rehab Center</i>	106 Total	Private		\$225/day	87.61%
<i>4390 Route 71</i>		Semi-Private		\$175/day	
<i>Oswego, IL 60543</i>					

Phone: (630) 554-1001

Contact:

Unit Amenities: Bed, bedside dresser, clothes dresser, over-bed table, guest chair; TV/DVD; telephone services;

Project Amenities: Garden path with gazebo, arbor, picnic tables, benches; library with computer & printer, daily newspapers & puzzles; lounge that may be reserved for private parties; screened-in porch

Comments:



The top choice for families for over 40 years

The Tillers provides the best in skilled and intermediate care with services that include: wound care management, IV therapy, rehabilitation therapy (physical, occupational and speech), and more. We provide long-term care, short-term rehabilitation and respite care. Our support services include: beauty/barber, dental, vision and podiatry services.

We offer many amenities to its residents both inside their individual rooms and throughout the building.

The Tillers provides the residents the opportunity to enjoy a roommate. The rooms are equipped to provide each resident with a bed, bedside dresser, clothes dresser, over-bed table, guest chair, closet, TV/DVD for each resident. Telephone services are offered.

One of The Tillers' best kept secrets is the award-winning Garden Path which extends around a large portion of the building and features a gazebo, arbor, picnic tables, benches, and many trees, shrubs, and flowers to view throughout the year.

The library is a quiet space for reading or visiting with guests. The library is equipped with a computer and printer for resident use. You will also find daily newspapers, books and puzzles in the library.

The 300 Lounge is the perfect place to gather with friends and family in a more secluded area. This room can be reserved by families for birthday parties or other such gatherings. The screened-in porch overlooks the garden path. Fresh air and a beautiful sense of the outdoors make this a wonderful place to pass the time.

We invite you to come and see for yourself why The Tillers has been the top choice for families for over forty years.

Our Services

Cardiac Rehabilitation

The Tillers Cardiac Rehabilitation Program is a clinically driven and supervised program designed specifically to help patients recover from various cardiac conditions such as heart attacks, congestive heart failure, cardiac arrhythmia, as well as patients with post cardiac related surgeries such as stenting or angioplasty.

Through a nutritional and multidisciplinary team approach, this program is designed to optimize recovery and quality of life by improving cardiovascular fitness and overall health while managing daily symptoms and encouraging patient education.

Our Cardiac Rehabilitation Program includes:

- Clinical evaluation to determine patient's individual needs and limitations
- Ongoing clinical assessments to tailor program to each patient
- Maintaining an aggressive physical therapy approach while monitoring heart rate, blood pressure, and oxygen saturation levels
- Patient education and family counseling to better understand and manage cardiac condition
- Onsite chest x-rays
- Oversight by our multidisciplinary team including physicians (primary care physician, cardiologist, surgeon, physiatrist), nurses, physical and occupational therapists, dietician, psychologist, and care management/discharge planning

Diabetic Management

The Tillers Nursing and Rehabilitation offers a Diabetic Management Program that is designed to assist and educate patients who have recently been diagnosed with diabetes, had a change in their treatment regimen, or are having difficulty maintaining glycerin control.

Diabetes is a disease that can have serious side effects on the body and many of those effects are permanent. If left untreated, diabetes can lead to heart and kidney disease, amputations, vision loss, and other serious problems.

Our Diabetic Management Program includes:

- Multidisciplinary approach
- Individualized treatment plan
- Education and counseling
- Nutrition counseling
- Weight management
- Physical activity
- Medication management
- Blood glucose monitoring
- Blood pressure monitoring and control
- Foot care
- Psychological support
- In house dietician

Hospice and Palliative Care

There is often confusion between the terms hospice and palliative Care. What most people don't know is that palliative care is provided by hospice and serves as a "bridge" to hospice care. The differences between palliative care and hospice care are as follows:

	Hospice Care	Palliative Care
Definition	Provides medical services, emotional support, and spiritual resources for patients who are in the last stages of their disease. Focus is on enhancing patient's quality of life by keeping them as comfortable as possible through pain and symptom management.	Specialized medical care for people with serious diseases. It is a team approach to care between specialists, patients, family and The Tillers. It focuses on providing patients with relief from symptoms, pain and stress with the goal of improving quality of life for the patient and family.
Timing	Must have terminal diagnosis with life expectancy of 6 months or less.	There are no time restrictions. Can be received by patients at any stage of an illness, regardless of whether disease is terminal.
Treatment	Patients concentrate on comfort and may not seek life-prolonging treatment.	Patients concentrate on comfort to improve quality of life while seeking curative treatments.
Payment	Hospice is covered by most private insurance plans, HMO's, Medicare, Medicaid.	Most insurance plans cover part or all of the palliative treatment, including Medicare and Medicaid.

Infusion Therapy

Infusion therapy is a type of medical treatment in which medications are delivered directly into the body via a blood vessel, the spinal cord or a muscle. This type of therapy is used when treating a condition when oral medication is not an option.

Infusion therapy may be given for dehydration, cancer, renal failure, infections, nutritional deficiencies and pain management.

Our program includes:

- IV Fluids
- IV Antibiotics
- IV Meds (furosemide, steroids, ant-seizure and peptide)
- PICC line management
- Total Parental Nutrition (TPN)
- Analgesic pump for pain management

Joint Replacement Program

As part of The Tillers Orthopedic Rehabilitation Program, we offer a comprehensive and specialized post surgical program for those patients recovering from various joint replacement surgeries most commonly hip and knee replacement surgery.

The Joint Replacement Program focuses on effectively managing pain, increasing strength and range of motion for muscles and joints, transfer training, and independence with activities of daily living such as bathing, dressing, and toileting.

Our Joint Replacement Program includes:

- Customized, goal directed treatment plan
- Multi-disciplinary approach
- Our own in-house physical, occupational, and speech therapists up to 7 days a week
- Therapy Director on site daily to coordinate multi-disciplinary team
- Physiatrist to oversee program and round weekly
- Outcome driven using evidenced based treatments
- Leading edge technologies and adaptive techniques
- Counseling and education for a safe return home
- Case manager to coordinate the patient's stay and discharge plan

Neurological Rehabilitation

Our Neurological Rehabilitation Program provides treatment for patients who are experiencing difficulties from a stroke, traumatic brain injury, spinal cord injury, tumors, cerebral palsy, Guillian-Barre, meningitis or encephalitis.

Neurological difficulties may cause problems related to cognition, motor planning and execution, visual perception, speech and language and swallowing difficulties. A combination of physical, occupational and speech therapy may be required to properly treat these issues.

Our Neurological Rehabilitation Program includes:

- Customized, goal directed treatment plan
- Multi-disciplinary approach
- Outcome driven using evidenced based treatments
- In-house staff of physical, occupational and speech therapists
- Therapists available up to 7 days per week
- Therapy Director on site daily to direct multi-disciplinary team
- Physiatrist to oversee rehab program and round weekly
- Vision Therapy Program with physician specialist to round weekly
- Counseling and education

Occupational Therapy

Occupational therapy is the use of treatments to develop, recover, or maintain daily living skills of patients with physical, mental or developmental conditions. It is often used in conjunction with physical therapy. Occupational Therapy interventions focus on adapting the environment, modifying the task, teaching the skill, and educating the patient as well as family in order to increase participation and performance of daily activities.

The occupational therapy program at The Tillers is over seen by Dr. Dennis Keane, MD, a physiatrist who specializes in rehab medicine. Dr. Keane makes rounds twice per week in the facility.

Our Occupational Therapy program includes:

- In-house staff of occupational therapists and occupational therapy assistants
- Therapy Director on site daily to direct multi-disciplinary team
- Therapists available up to 7 days per week
- Multi-disciplinary, team approach
- Customized, goal directed treatment plan
- Outcome driven results using evidenced based treatments
- Pain management • Leading edge technologies and adaptive equipment
- Counseling and education
- Occupational therapists that specialize in vision therapy

Orthopedic Rehabilitation

The Tillers offers a comprehensive Orthopedic Rehabilitation Program to individuals who are recovering from various orthopedic conditions or surgery, such as hip or knee replacement and spinal fusions.

Our Orthopedic Rehabilitation program is designed to:

- Restore physical function and enhance the skills needed to perform daily activities
- Build strength and endurance
- Improve balance and regain mobility
- Optimize independence

The program includes:

- Goal directed, individualized treatment plan
- Our own in-house physical and occupational therapists up to 7 days/wk
- Rehab Medical Director to oversee program and round weekly
- Case manager to coordinate the patient's stay and discharge plan
- Evidenced based treatment
- Leading edge technologies and adaptive techniques



- Joint Replacement Program
- Multi-disciplinary team including primary and orthopedic physician, nurses, physical and orthopedic therapists, dietician, psychologist, and case manager

Dr. Dennis Keane, MD, a highly respected area physician, is the Rehabilitation Medical Director for The Tillers. He is currently part of the Marianjoy Medical Group and serves as the Chief of Staff at Rush Copley Medical Center in Aurora.

Pain Management

Pain management employs a multi-disciplinary approach to ease the suffering and improve the overall quality of life for those living in pain.

Dr. Dennis Keane, MD, a physiatrist that specializes in rehab medicine and pain control, oversees the rehab program and rounds twice per week in the facility.

Pain can be either acute or chronic. Acute pain can be due to surgery, injury and other temporary conditions. Pain that continues becomes chronic in nature. Treatment approaches include medications, physical and/or occupational therapy, physical exercise, application of cold/heat and psychological interventions.

Our program includes:

- Comprehensive pain assessment upon admission
- Pain assessment per shift using 0-10 pain scale
- Multi-disciplinary approach
- Physical and occupational therapy
- Physician specialists (physiatrist, wound care, psychiatrist)
- Infusion pain pumps
- Psychological treatment
- Medication management
- Kinesio taping
- Pain management education for patient/family prior to discharge

Physical Therapy

Physical therapy is an integral part of treatment for patients with pain and /or movement dysfunction resulting from disability or disease. Services are designed for patients to develop, maintain and restore maximum movement and functional ability.

The physical therapy program at The Tillers is over seen by Dr. Dennis Keane, MD, a physiatrist who specializes in rehab medicine. Dr. Keane makes rounds twice per week in the facility.

Our Physical therapy program includes:

- In-house staff of physical therapists and physical therapy assistants
- Therapy Director on site daily to direct multi-disciplinary team
- Therapists available up to 7 days per week
- Multi-disciplinary, team approach
- Customized, goal directed treatment plan
- Outcome driven results using evidenced based treatments
- Pain management
- Leading edge technologic and adaptive equipment

- Counseling and education

Pulmonary & Respiratory Rehabilitation

Our Pulmonary & Respiratory Rehabilitation Program is designed to help restore our patients to their highest functional level with the goal of enhancing their overall quality of life while dealing with chronic respiratory problems such as, but not limited to COPD, asthma, emphysema, cystic fibrosis, pneumonia, and chronic bronchitis. The Tillers comprehensive program has a multi-disciplinary approach including primary care and pulmonology specialist, nurses, respiratory therapist, physical and occupational therapists, dietician, psychologist, and care manager. The team focuses on the assessment, diagnostic evaluation, education, prevention and care of our patients with heart and lung disorders.

The services provided under the Pulmonary & Respiratory Program include:

- Individualized goals and assessments to show clinical improvements on reducing shortness of breath and increasing exercise tolerance
- Consulting respiratory therapist and pulmonologist
- CPAP/BIPAP training and education for sleep breathing disorders
- Dysphasia management
- Pulse oximetry and arterial blood gas monitoring
- Medication Management
- Onsite chest x-rays
- Implementation of energy conserving techniques and breathing strategies to help reduce symptoms, improve endurance and muscle strength
- Respiratory treatments to enhance oxygenation, i.e. nebulizer treatments
- Psychological counseling and support services
- Nutritional counseling and education pertaining specifically to patient's respiratory condition
- Specific education to help each patient better understand how to manage their disease and return home

Restorative Nursing

The Tillers Nursing and Rehabilitation Center offers a Restorative Nursing Program which serves as a link between therapy and nursing. The goal of restorative nursing is to ensure the functional gains made in physical and occupational therapy are successfully maintained. The Tillers therapists work with nurses as consultants in designing individualized restorative programs for each patient.

The need for rehabilitation therapy is generally triggered by an acute illness or injury. Restorative nursing bases treatment on restoring or compensating for skills lost through chronic disease or lack of use.

The Tillers Restorative Nursing Programs includes:

- Walking programs
- Bed mobility
- Training with dressing and grooming
- Eating, swallowing training
- Strengthening techniques
- Range of motion exercises
- Splint or brace application
- instruction in safe transferring
- Bowel and Urinary toilet training

Speech Therapy

Speech therapy is a treatment that focuses on improving the patient's ability to communicate effectively and to eat or swallow safely. Problems that may be treated by a speech therapist include stroke, Parkinson's disease and other neurological disorders, speech articulation disorders, apraxia, dysphasia, cognitive issues and swallowing difficulties.

The speech therapy program at The Tillers is overseen by Dr. Dennis Keane, MD, a physiatrist who specializes in rehab medicine. Dr. Keane rounds twice per week in the facility.

Our Occupational Therapy program includes:

- In-house staff of speech therapists
- Therapy Director on site daily to direct multi-disciplinary team
- Therapists available up to 7 days per week
- Multi-disciplinary, team approach
- Customized, goal directed treatment plan
- Outcome driven results using evidenced based treatments
- Pain management
- Leading edge technologies and adaptive equipment, including Vital Stim
- Counseling and education

Vision Therapy

The Tillers Nursing and Rehabilitation Center is leading the industry in the implementation of a Vision Therapy Program. Vision therapy has been proven to help address the overall treatment and recovery of those patients specifically suffering from neurological disorders or dealing with symptoms of change/loss of vision due to traumatic fall or stroke. This approach is very unique to the skilled nursing and rehabilitation setting, and The Tillers is the only facility in the area to offer this service to their patients. When vision therapy is addressed during the rehabilitation process, there is an increased ability for patients to improve upon their mobility, self care, and have a faster rehab potential to return home.

The Vision Therapy Program includes:

- Direct physician oversight with weekly rounding by an optometrist in the facility
- Individual treatment plans for patients with neurological disorders, changes or loss in their vision, and/or trauma to the nervous system from a fall or stroke
- Training for the entire visual system including the eyes, brain, and body
- Individualized plan with the set goals to improve visual fields
- Methods to retrain the brain with the use of prisms and therapeutic lenses
- Patient education and counseling from specialized Occupational Therapists in vision therapy

Dr. David Martin, O.D. is a highly regarded optometrist who oversees the Vision Therapy Program at The Tillers. He works in conjunction with our Occupational Therapists who manage the program on a daily basis, while he rounds on a weekly basis in the facility. Dr. Martin's home office is based out of Aurora and he has been practicing since 2005.

Wound Care

The Tillers is committed to providing compassionate and comprehensive care involving the treatment, management, and timely healing of acute and chronic wounds through our specialized Wound Care Program.

This program is designed to address the highest standards of wound management protocol for patients who require extensive treatment. Through a nutritional and multidisciplinary team approach, our goal is to provide positive outcomes which restore skin health and prevents future wound and skin complications.

Our program includes:

- Weekly rounds by specialized Wound Care Physician
- Individualized treatment plans implemented upon admission
- Minimizing pressure on compromised areas
- Preventative skin care and hygiene
- Diabetes and peripheral vascular disease management
- Proper hydration and nutrition management
- Regular monitoring, assessment, and measurement of wounds
- Pain management
- Preventative care and patient education

The Tillers provides wound care and skin management for the following conditions:

- Surgical wounds, i.e.: open non-healing wounds, localized incisions
- Pressure Ulcers, stages I-IV
- Diabetic Ulcers
- Traumatic Wounds
- Amputations
- Burn Wounds
- Osteomyelitis
- Ischemic Ulcers
- Venous Stasis Ulcers



Dr. William Asihene, MD, PhD, FACS, provides direct oversight to the wound care program and rounds weekly at The Tillers. Dr. Asihene is a board certified general surgeon with over 17 years experience.

Comparable Property Details

Development Name and Address	# Units	Unit Type	Size	Avg. Cost	Occ. %
<i>Meadowbrook Manor</i>	298	Private		\$195/day	92.96%
<i>431 West Remington Blvd</i>		Semi-Private		\$186/day	
<i>Bolingbrook, IL 60440</i>					

Phone: (630) 759-1112

Contact:

Unit Amenities: Private and semi-private suites; Electric bed and specialty mattress; Homelike furnishings; Private bathroom; TVs and telephones in our rehabilitation unit rooms; WiFi Services; Private phone line; Custom Desk, workstation and wardrobe

Project Amenities: Restaurant and buffet-style dining; Upscale salon services; Daily housekeeping, laundry and linen services; Elegant library and lounge; Leisure and social activities; Entertainment and religious programs.

Comments:



Short Term Care

It is our goal for our patients to succeed through treatment and return home to an independent life. Our guest-centered facility has been staffed with nurses, therapists, and area physicians who will deliver quick recovery with the results you should expect. The focus of this program is to achieve the highest level of recovery through individually designed rehabilitation care plans created with our interdisciplinary care team.

- Orthopedic surgery and joint replacement
- Pain management
- Post surgical recovery
- Heart conditions and cardiac procedures
- Pulmonary disease, including pneumonia
- Neurological conditions
- Stroke rehabilitation
- Diabetes education and management
- Intravenous and nutritional therapy
- Chronic renal disease
- Wound care

Pulmonary Rehabilitation

Meadowbrook Manor has developed a pulmonary program designed to meet the needs of patients with chronic and acute respiratory illnesses. Our Pulmonary Rehabilitation Program is tailored to meet each individual's needs and manages such illnesses as:

- COPD
- Emphysema
- Pneumonia
- Lung Disease
- Pulmonary Hypertension
- Monitored by a board certified pulmonologist, the Pulmonary Rehabilitation Program is designed to control symptoms through proper medication management, disease specific exercise programs, and education on diet restrictions.
- In-House Hemodialysis

Meadowbrook Manor in LaGrange offers an in house dialysis suite for those guests who need hemodialysis during their rehabilitation stay. Our unit is overseen by a Board Certified Nephrologist who specializes in kidney disease and the management of patients who suffer from end stage renal disease. Meadowbrook Manor in Bolingbrook and Naperville offer Bed Side Dialysis. Please call our Directors of Admissions for further details on our Bed Side Dialysis Program.

Wound Care

For the treatment and management of complex wound care including nutrition intervention, electronic stimulation, ultrasound, pulse lavage, and debridement. Our program also features-

- Treatment Nurses and Therapists
- Wound Certified Physician Consultations
- Wound Vac Treatment

- Infusion Therapy
- IV antibiotics
- IV Hydration
- IV Pain Medication

Cardiac Management Program

Meadowbrook Manor has an innovative Cardiac Management Program which focuses on patients who have coronary artery disease, congestive heart failure, post bypass surgery, and heart attacks. Our program features:

- Consultation by a Board Certified Cardiologist
- On-site Coumadin management, EKG, and labs

Nurse and nurses aides trained in cardiac disease

Health Care Solutions

Hospice/Palliative Care

Our interdisciplinary team will work together to establish an individualized plan of care to meet each patient and families individual needs.

- In patient hospice contracts with various hospice companies throughout the area
- Pain Management
- Discharge plan to home arranged by our social services if desired by the family and patient

Compassionate, Customized Long-Term Care

At all of our locations, you'll find our long-term care is completely customized to our residents' needs. This is because we begin with a comprehensive assessment that's completed and reviewed by our interdisciplinary team from nursing and therapy to dietary, activities and social services. The result? Customized health care that increases your loved one's strengths and capabilities.

Complimentary Health Care Services

At no additional cost, some of the services Meadowbrook Manor provides include wound care, respiratory supplies, oxygen, wheel chair, walker, cane, eating assistance, special diets and Alzheimer's assessments.

Respite

As a devoted caregiver, you may find times when you need a temporary break, whether you're planning a weekend getaway or a much-needed vacation — Respite Care at Meadowbrook Manor can give you the relief you need. Even if you're staying with us for your own rehabilitation, you can trust Meadowbrook Manor to provide your loved one with personalized attention and comfort — while you take care of yourself.

Attentive 24-Hour Care

While you're away, you can rest easy knowing your loved one is receiving individualized, around-the-clock attention from compassionate experts. Our experienced staff includes some of the area's top physicians, as well as registered nurses and specialists in geriatrics who all work together to make sure your loved one's physical, social and emotional needs are met.

Memory Care

Meadowbrook offers a safe and secure environment for individuals with Alzheimer's or Dementia. Our unit boasts a variety of activities, specially trained staff, and a sense of comfort you will grow to rely on.

Our Philosophy

Human dignity and personal pride do not diminish with age or illness, but continue throughout the life cycle. Recognition of this, in each individual, is the priority of Butterfield Health Care Group. Our goal - the creation of a supportive environment in which each person is motivated to regain and/or retain the maximum level of function, both physically and mentally, with continuing concern for the quality of life underscores all our efforts.

Dedicated, experienced staff

You'll find the area's most experienced and loyal health care professionals at Meadowbrook Manor. Since many of our team members have been with us for more than 20 years, you can count on highly dedicated experts to provide consistent, personalized and effective care - 24 hours a day.

What's more, our board-certified Medical Directors, Director of Nursing, Nurses, Licensed Therapists, Social Services Director and Activity Director all work together to make sure all physical, social and emotional needs are completely met. Plus, residents receive visits from doctors specializing in podiatry, optometry, psychology, psychiatry and dental services.

Our dedicated experts also keep you, the concerned family member, informed about your loved one's well-being through our care-plan conferences.

Accommodations, amenities & leisure activities

Each comfortable room at Meadowbrook Manor includes elegant furnishings. Your loved one's stay with us includes such amenities as:

- High-speed wireless Internet (WiFi)
- Restaurant and buffet-style dining
- Upscale salon services from the Cut and Curl Spa at Meadowbrook Manor
- Daily housekeeping, laundry and linen services
- Elegant library and lounge ideal for conversation or relaxation
- Leisure and social activities
- Entertainment and religious programs

Buffet-style dining

Meadowbrook Manor offers chef-prepared meals that are fresh and nutritious. Plus, we accommodate special and therapeutic diets to fit a complete range of dietary needs. Meadowbrook Manor also offers holiday meals and cook-outs throughout the year that residents and their families can share together.

Comparable Property Details

Development Name and Address	# Units	Unit Type	Size	Avg. Cost	Occ. %
<i>Brookdale Lisle</i>	55 nsg				84.79%
<i>Formerly: Westbury Care Center</i>	27 SC				95.26%
<i>1800 Robin Lane</i>					
<i>Lisle, IL 60532</i>					

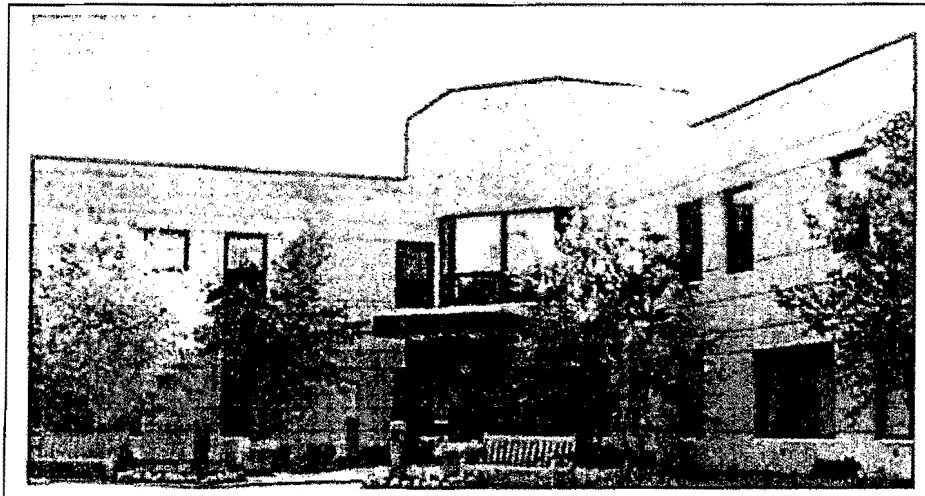
Phone: (630) 984-6139

Contact:

Unit Amenities:

Project Amenities: Located on the campus of The Devonshire Lisle which offers Alzheimer's and Dementia Care; 24-hour nursing care; Activities; events and entertainment programs; Arts & Crafts studio; Assistance with personal care needs; Beauty/Barber shop; Dental and podiatry care, Dental, Podiatry, and Optometry Services; Educational and cultural programs; Housekeeping and linen services; Library; Outdoor garden area; Personal laundry services; Pharmacy services; Physical, Occupational, and Speech Therapies; Physicians that specialize in Geriatric Care, Recreational programs; Restaurant style dining; Three meals daily with allowances for special dietary needs.

Comments:



Brookdale Lisle, formerly known as Westbury Care Center, is among the premier Lisle, IL Nursing Homes providing *Skilled Nursing Care* services for seniors. We are located on the campus of The *Devonshire of Lisle*, which offers *Alzheimers and Dementia Care*.

Our care center was purpose-built to respond to the unique health care and lifestyle needs of older adults who can no longer live on their own, yet desire to retain their dignity and personal lifestyle choices without compromise. We help residents achieve their full potential and renew self-esteem with...

- Short-term rehabilitation/therapy
- Respite care
- Sheltered Alzheimer's and dementia care
- Longer-term nursing/supportive care

The Brookdale Lisle's approach to rehabilitation is a holistic one, encompassing the entire interdisciplinary care team of physicians, nurses, therapists, nutritionists, residents and families. We create an individualized care plan to meet the unique needs of each resident as we help them to achieve optimal health after injury, stroke, surgery or illness. The therapies we use are designed to meet each individual's needs and help them attain their highest level of independence and self esteem.

We offer four distinctive types of rehabilitation at Brookdale Lisle:

- Physical Therapy to improve mobility and muscle strength and foster independence with gait training, lower extremity functioning, balance, orthotics/prosthetics and wound care.
- Occupational Therapy to improve skills that enable patients to complete daily tasks at the highest functional level, including activities of daily living (ADLs), homemaking skills, functional transfers, upper extremity strengthening and splinting/orthotics.
- Speech Therapy for patients with speech, language, communication and swallowing disorders.
- Restorative Nursing, an individualized maintenance program to ensure each resident maintains their maximum potential.

Our professional, caring staff understands how to provide the living experiences to support the physical, emotional and intellectual needs of each resident in a spirit of compassion

Comparable Property Details

Development Name and Address	# Units	Unit Type	Size	Avg. Cost	Occ. %
<i>Alden Estates of Naperville</i>	203 Total	Private		\$316/day	74.64%
<i>1525 Oxford Lane</i>		Semi-Private		\$313/day	
<i>Naperville, IL 60565</i>					

Phone: (630) 983-0300

Contact:

Unit Amenities: Private and deluxe semi-private rooms; Custom-made furniture and décor; Flat screen TVs; Complimentary WiFi; En suite bathroom.

Project Amenities: Luxurious accommodations; Five-star restaurant dining; Four-course meals at lunch and dinner; Complimentary WiFi; Laptop and iPad loaner program; Newspaper delivery; Ice cream parlor; Hair/nail salon.

Comments:



POST-ACUTE CARE

The therapists and staff at Alden Estates of Naperville realize recovering from post-acute orthopedic procedures, strokes and cardiac procedures can be emotionally and physically challenging. That is why we have developed an extensive rehabilitation program that takes into account your medical history, lifestyle, normal daily activities and goals you have for when you return home.

Ensuring Top-Notch Care

Alden Estates of Naperville's post-acute rehabilitation program offers state-of-the-art technology and advanced rehabilitation techniques to help our patients achieve maximum function and independence. The result is an outcome-driven environment that offers the most efficient and effective care.

Rigorous staff education and training and required certification in post-acute rehabilitation pathways and protocols ensure highly skilled professionals ready to serve patients with complex medical needs. Our nursing team has the knowledge to assist in making the transition to Alden Estates of Naperville as smooth as possible and our staff is able to provide a similar level of quality, clinical and operational care and services found in the hospital setting.

Transitional Care Unit

The recent implementation of advanced rehabilitation training programs for nurses in our Transitional Care Unit increases our ability to deliver high-quality, person-centered care. Our highly trained nursing staff offers patients a new level of care and service not offered at most rehabilitation centers. Patients greatly benefit from a hands-on, individualized approach to their plan of care.

Comprehensive Therapy Services

Alden Estates of Naperville provides a full array of therapy services to improve mobility, increase flexibility and achieve maximum functionality. Therapy services include Physical, Occupational and Speech Therapies; Orthopedic Recovery; Cardiac Services; NeuroRehabilitation; and Pulmonary Care.

ACCOMMODATIONS

With suites as well as private and semi-private deluxe accommodations in a state-of-the-art short-term rehabilitation center, Alden Estates of Naperville provides an exclusive setting conducive to recovery.

Luxurious Accommodations offer:

- Private and deluxe semi-private rooms
- Custom-made furniture and décor
- Flat screen televisions
- Complimentary WiFi throughout the building
- En suite bathroom

Alden Estates of Naperville combines a distinct style and modern conveniences with personalized service to create an inviting setting. From the Laptop and iPad Loaner Program to complimentary WiFi, we offer exceptional amenities and a memorable experience during your stay with us.

AMENITIES

At Alden Estates of Naperville, we do our best to provide patients with a setting and surroundings that are conducive to recovery. We believe the environment of care plays an important role in your recovery and, as a result, we offer a pleasant setting so all our patients have to do is focus on doing well in their therapy and getting back home.

Amenities include:

- Luxurious accommodations
- Five-star restaurant dining
- Four-course meals at lunch and dinner
- Complimentary WiFi
- Laptop and iPad Loaner Program
- Full activity program daily
- Newspaper delivery
- Ice cream parlor
- Hair/nail salon

Comparable Property Details

Development Name and Address	# Units	Unit Type	Size	Avg. Cost	Occ. %
<i>Tabor Hills Senior Living Campus</i> 1347 Crystal Ave Naperville, IL 60563	211 Total	Private Semi-Private		\$210/day \$183/day	78.78%

Phone: (630) 778-6677

Contact:

Unit Amenities: Wi-Fi; cable television

Project Amenities: Specialized mid and late-stage dementia care; wandering safeguard system; gift shop; beauty/barber shop; buffet style dining with personalized table service; planned activities and outings; private courtyard & gardens; ice cream parlor; dentist/ optometrist/podiatrist on-site; wheelchair accessible transportation

Comments: Located just south of Interstate 88, and 1 mile east of Route 59, off Raymond Dr; Conveniently close to shopping and restaurants; Less than 3 miles from Downtown Naperville and Edward Hospital.



Tabor Hills Independent Living Community

Our Independent Living Community offers 104 homes for active adults 55 and over. The homes are set into six cul-de-sacs creating a warm and friendly neighborhood. Our two or four-plex units offer a variety of sizes and styles.

Home Features:

- Refundable Entrance Agreement*
- Brick, Ranch Style Construction
- Security Monitoring Systems
- Emergency Response Systems
- Attached Garage
- Kitchen Appliances including Refrigerator/Stove/Microwave/Dishwasher
- Utility rooms complete with Washer/Dryer/Washtub
- Cathedral ceilings in Living Rooms
- Mature Landscaping with Spacious Common Areas
- Walk-out Patios with Garden Space and Walking Paths



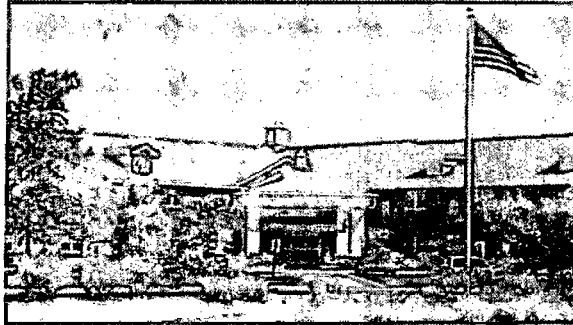
Services Included in the Monthly Fee*:

- Landscaping and Grounds Maintenance
- Snow and Trash Removal
- Water and Sewer
- Maintenance of the Home Appliances
- Non-exclusive Use of Semerad Pavilion
 - Planned Activities
 - Library
 - Great Room
 - Game and Craft Room

Additional Services Available (not included in monthly fee):

- Exercise/Fitness Program
- Planned Meal Delivery
- Beauty/Barber Shop on Campus

Tabor Hills Supportive Living Community



The Supportive Living Community, an affordable assisted living model administered by the Department of Healthcare and Family Services, for individuals 65 and over is located at 1439 McDowell Road, on the west end of the Tabor Hills campus.

Features Include:

- An Affordable Assisted Living Community
- Monthly Rental
- Studio, One and Two-Bedroom Units
- Three Meals Served Daily
- On-site 24 Hour Emergency Response
- Comfortable Great Room with Fireplace
- General Store
- Library and Computer Rooms
- Serene Bird and Butterfly Garden
- Planned Activities and Outings
- Beauty/Barber Shop
- Exercise and Fitness Program
- Medication Reminders
- Laundry Facilities
- Housekeeping and Maintenance
- Medicaid Certified

Additional Programs Available:

- Wheelchair Accessible Transportation
- Physical, Occupational and Speech Therapy
- Wi-Fi
- Cable Television

Tabor Hills Healthcare Facility

Our Skilled Healthcare and Rehabilitation Center offers Person Centered Skilled Nursing Care for 211 residents with a focus on restoring individuals to their highest potential.

Features Include:

- Skilled and Intermediate Nursing Care
- Medicare Certified
- Rehabilitation
- Daily Private Pay *
- Specialized Mid and Late-stage Dementia Care
- Wandering Safeguard System
- Physical, Occupational and Speech Therapy on Staff
- Gift Shop
- Beauty/Barber Shop
- Buffet Style Dining with Personalized Table Service
- Planned Activities and Outings
- Private Courtyard with Waterfall and Nature Garden
- Therapeutic Garden
- Ice Cream Parlor
- Medicaid Certified

Additional Programs Available:

- Dentist/Optometrlist/Podiatrist On-Site
- Wheelchair Accessible Transportation
- Wi-Fi
- Cable Television

Outpatient Therapy:

Available upon completion of your Medicare Stay with Physician Order

Attachment 3. Nursing Care Demand and Need Calculations

ALDEN COURTS-30 MINUTE MARKET AREA-2014 ESTIMATE

AGE GR	RES %	PT DAYS	POP 10	AREA USE
00-64	22.0%	271322	466.2	582.0
65-74	13.1%	99809	28.4	3514.4
75 YR+	64.9%	477785	21.7	22017.7
Total	100.00%	848916	516.3	

ALDEN COURTS-30 MINUTE MARKET AREA-2014 ESTIMATE

AGE GR	MIN	AREA USE	MAX	PROJ USE	Scan/US POP 14	PROJ PD
00-64	276.4	582.0	737	581.99	730.9	425374
65-74	2030.3	3514.4	5414.1	3514.40	50.0	175720
75 YR+	13150.1	22017.7	35066.9	22017.74	34.9	768419
Total					815.8	1369513
PLAN PD		AVG CENS	OCC FACT	BED NEED	EX BEDS	NEED
1369513		3752.1	90%	4169	4307	-138

ALDEN COURTS-30 MINUTE MARKET AREA-2019 PROJECTION

AGE GR	RES %	PT DAYS	POP 10	AREA USE
00-64	22.0%	271322	466.2	582.0
65-74	13.1%	99809	28.4	3514.4
75 YR+	64.9%	477785	21.7	22017.7
Total	100.00%	848916	516.3	

ALDEN COURTS-30 MINUTE MARKET AREA-2019 PROJECTION

AGE GR	MIN	AREA USE	MAX	PROJ USE	Scan/US POP 19	PROJ PD
00-64	276.4	582.0	737	581.99	727.1	423162
65-74	2030.3	3514.4	5414.1	3514.40	66.5	233708
75 YR+	13150.1	22017.7	35066.9	22017.74	43.7	962175
Total					837.3	1619045
PLAN PD		AVG CENS	OCC FACT	BED NEED	EX BEDS	NEED
1619045		4435.7	90%	4929	4307	622

Calculated Nursing Bed Need With Current Published Bed Need and Scan/US Population Projections

KANE COUNTY - PUBLISHED INVENTORY

AGE GR	RES %	PT DAYS	POP 10	AREA USE
00-64	22.0%	271322	466.2	582.0
65-74	13.1%	99809	28.4	3514.4
75 YR+	64.9%	477785	21.7	22017.7
Total	100.00%	848916	516.3	

KANE COUNTY - PUBLISHED INVENTORY

AGE GR	MIN	AREA USE	MAX	PROJ USE	POP 15	PROJ PD
00-64	276.4	582.0	737	581.99	472.7	275105
65-74	2030.3	3514.4	5414.1	3514.40	37.1	130384
75 YR+	13150.1	22017.7	35066.9	22017.74	23.6	519619
PLAN PD		AVG CENS	OCC FACT	Total	533.4	925108
925108		2534.5	90%	BED NEED	EX BEDS	NEED
				2816	3064	-248

KANE COUNTY - WITH SCAN/US 2014 ESTIMATE

AGE GR	RES %	PT DAYS	POP 10	AREA USE
00-64	13.3%	271322	466.2	582.0
65-74	4.9%	99809	28.4	3514.4
75 YR+	23.4%	477785	21.7	22017.7
	T/B	848916	516.3	

KANE COUNTY - WITH SCAN/US 2014 ESTIMATE

AGE GR	MIN	AREA USE	MAX	PROJ USE	Scan/US	POP 14	PROJ PD
00-64	276.4	581.986272	737	581.9863		462.5	269169
65-74	2030.3	3514.40141	5414.1	3514.401		35.4	124410
75 YR+	13150.1	22017.7419	35066.9	22017.74		24.8	546040
PLAN PD		AVG CENS	OCC FACT	Total	522.7		
939619		2574	90%	BED NEED	EX BEDS	NEED	
				2860	3064		-204

KANE COUNTY - WITH SCAN/US 2019 PROJECTION

AGE GR	RES %	PT DAYS	POP 10	AREA USE
00-64	13.3%	271322	466.2	582.0
65-74	4.9%	99809	28.4	3514.4
75 YR+	23.4%	477785	21.7	22017.7
	T/B	848916	516.3	

KANE COUNTY - WITH SCAN/US 2019 PROJECTION

AGE GR	MIN	AREA USE	MAX	PROJ USE	Scan/US	POP 19	PROJ PD
00-64	276.4	581.986272	737	581.9863		462.3	269052
65-74	2030.3	3514.40141	5414.1	3514.401		44.5	156391
75 YR+	13150.1	22017.7419	35066.9	22017.74		31.0	682550
PLAN PD		AVG CENS	OCC FACT	Total	537.8		
1107993		3036	90%	BED NEED	EX BEDS	NEED	
				3373	3064		309

KENDALL COUNTY - PUBLISHED INVENTORY

AGE GR	RES %	PT DAYS	POP 10	AREA USE
00-64	2.6%	1364	106.8	12.8
65-74	13.8%	7158	5.2	1376.5
75 YR+	83.6%	43292	3.3	13118.8
Total	1	51814	115.3	

KENDALL COUNTY - PUBLISHED INVENTORY

AGE GR	MIN	AREA USE	MAX	PROJ USE	POP 15	PROJ PD
00-64	242	12.77154	645	242	110.8	26814
65-74	1949	1376.538	5197	1949	7.0	13643
75 YR+	12577	13118.79	33539	13118.79	3.9	51163
Total				Total	121.7	91620.0
PLAN PD		AVG CENS	OCC FACT	BED NEED	EX BEDS	NEED
91620		251	90%	279	185	94

KENDALL COUNTY - WITH SCAN/US 2014 ESTIMATE

AGE GR	RES %	PT DAYS	POP 10	AREA USE
00-64	2.6%	1364	106.8	12.8
65-74	13.8%	7158	5.2	1376.5
75 YR+	83.6%	43292	3.3	13118.8
Total	1	51814	115.3	

KENDALL COUNTY - WITH SCAN/US 2014 ESTIMATE

AGE GR	MIN	AREA USE	MAX	PROJ USE	Scan/US POP 14	PROJ PD
00-64	242	12.77154	645	242	106.7	25821
65-74	1949	1376.538	5197	1949	6.6	12863
75 YR+	12577	13118.79	33539	13118.79	3.9	51163
Total				Total	117.2	89847.0
PLAN PD		AVG CENS	OCC FACT	BED NEED	EX BEDS	NEED
89847		246	90%	273	185	88

KENDALL COUNTY - WITH SCAN/US 2019 PROJECTION

AGE GR	RES %	PT DAYS	POP 10	AREA USE
00-64	2.6%	1364	106.8	12.8
65-74	13.8%	7158	5.2	1376.5
75 YR+	83.6%	43292	3.3	13118.8
Total	1	51814	115.3	

KENDALL COUNTY - WITH SCAN/US 2019 PROJECTION

AGE GR	MIN	AREA USE	MAX	PROJ USE	Scan/US POP 19	PROJ PD
00-64	242	12.77154	645	242	108.7	26305
65-74	1949	1376.538	5197	1949	8.4	16372
75 YR+	12577	13118.79	33539	13118.79	5.4	70841
Total				Total	122.5	113518.0
PLAN PD		AVG CENS	OCC FACT	BED NEED	EX BEDS	NEED
113518		311	90%	346	185	161

WILL COUNTY - PUBLISHED INVENTORY

AGE GR	RES %	PT DAYS	POP 10	AREA USE
00-64	26.7%	212704	615.4	345.6
65-74	13.9%	110722	36.9	3000.6
75 YR+	59.5%	474577	26.6	17841.2
Total	1	798003	678.9	

WILL COUNTY - PUBLISHED INVENTORY

AGE GR	MIN	AREA USE	MAX	PROJ USE	POP 15	PROJ PD
00-64	242	345.6354	645	345.6354	615.3	212669
65-74	1949	3000.596	5197	3000.596	47.3	141928
75 YR+	12577	17841.24	33539	17841.24	29.3	522748
Total				Total	691.9	877345.0
PLAN PD		AVG CENS	OCC FACT	BED NEED	EX BEDS	NEED
877345		2404	90%	2671	2840	-169

WILL COUNTY - WITH SCAN/US 2014 ESTIMATE

AGE GR	RES %	PT DAYS	POP 10	AREA USE
00-64	26.7%	212704	615.4	345.6
65-74	13.9%	110722	36.9	3000.6
75 YR+	59.5%	474577	26.6	17841.2
Total	1	798003	678.9	

WILL COUNTY - WITH SCAN/US 2014 ESTIMATE

AGE GR	MIN	AREA USE	MAX	PROJ USE	Scan/US POP 14	PROJ PD
00-64	242	345.6354	645	345.6354	605.8	209386
65-74	1949	3000.596	5197	3000.596	44.7	134127
75 YR+	12577	17841.24	33539	17841.24	30.0	535237
Total				Total	680.5	878750.0
PLAN PD		AVG CENS	OCC FACT	BED NEED	EX BEDS	NEED
878750		2408	90%	2676	2840	-164

WILL COUNTY - WITH SCAN/US 2019 PROJECTION

AGE GR	RES %	PT DAYS	POP 10	AREA USE
00-64	26.7%	212704	615.4	345.6
65-74	13.9%	110722	36.9	3000.6
75 YR+	59.5%	474577	26.6	17841.2
Total	1	798003	678.9	

WILL COUNTY - WITH SCAN/US 2019 PROJECTION

AGE GR	MIN	AREA USE	MAX	PROJ USE	Scan/US POP 19	PROJ PD
00-64	242	345.6354	645	345.6354	603.2	208487
65-74	1949	3000.596	5197	3000.596	56.4	169234
75 YR+	12577	17841.24	33539	17841.24	37.6	670831
Total				Total	697.2	1048552.0
PLAN PD		AVG CENS	OCC FACT	BED NEED	EX BEDS	NEED
1048552		2873	90%	3192	2840	352

Calculated Nursing Bed Need

With Current Published Bed Need and Scan/US Population Projections

PA -7C - PUBLISHED INVENTORY

AGE GR	RES %	PT DAYS	POP 2010	AREA USE
00-64	17.7%	308396	810.8	380.4
65-74	12.6%	219393	58.2	3,769.6
75 YR+	69.7%	1211241	49.0	24,719.2
	1	1739030	918.0	

PA -7C - PUBLISHED INV

AGE GR	MIN	AREA USE	MAX	PROJ USE	POP 2015	PROJ PD
00-64	454.6	380.4	1,212.4	454.6	809.4	367953
65-74	2,772.9	3,769.6	7,394.5	3,769.6	78.6	296294
75 YR+	13,483.3	24,719.2	35,955.5	24,719.2	51.7	1277983

PLAN PD	AVG CENS	OCC FACT	BED NEED	EX BEDS	NEED
1942230	5321	90%	5912	6033	-121

PA-7C - WITH Scan/US 2014 ESTIMATE

AGE GR	RES %	PT DAYS	POP 2010	AREA USE
00-64	17.7%	308396	810.8	380.4
65-74	12.6%	219393	58.2	3,769.6
75 YR+	69.7%	1211241	49.0	24,719.2
	1	1739030	403831	918.0

PA-7C - WITH Scan/US 2014 ESTIMATE

AGE GR	MIN	AREA USE	MAX	PROJ USE	SCAN/US POP 2014	PROJ PD
00-64	454.6	380.4	1,212.4	454.6	799.6	363498
65-74	2,772.9	3,769.6	7,394.5	3,769.6	71.3	268775
75 YR+	13,483.3	24,719.2	35,955.5	24,719.2	53.1	1312590

PLAN PD	AVG CENS	OCC FACT	BED NEED	EX BEDS	NEED
1944863	5328	90%	5920	6033	-113

PA-7C - WITH Scan/US 2019 PROJECTION

AGE GR	RES %	PT DAYS	POP 2010	AREA USE
00-64	17.7%	308396	810.8	380.4
65-74	12.6%	219393	58.2	3,769.6
75 YR+	69.7%	1211241	49	24,719.2
Total	1	1739030	403831	918.0

PA-7C - WITH Scan/US 2019 PROJECTION

AGE GR	MIN	AREA USE	MAX	PROJ USE	SCAN/US POP 2019	PROJ PD
00-64	454.6	380.4	1,212.4	454.6	785.0	356861
65-74	2,772.9	3,769.6	7,394.5	3,769.6	93.1	350953
75 YR+	13,483.3	24,719.2	35,955.5	24,719.2	65.3	1614164

PLAN PD	AVG CENS	OCC FACT	BED NEED	EX BEDS	NEED
2321978	6362	90%	7069	6033	1036

Calculated Nursing Bed Need

With Current Published Bed Need and New State
Population Projections

WILL COUNTY - PUBLISHED INVENTORY

AGE GR	RES %	PT DAYS	POP 10	AREA USE
00-64	26.7%	212704	615.4	345.6
65-74	13.9%	110722	36.9	3000.6
75 YR+	59.5%	474577	26.6	17841.2
Total	1	798003	678.9	

WILL COUNTY - PUBLISHED INVENTORY

AGE GR	MIN	AREA USE	MAX	PROJ USE	POP 15	PROJ PD
00-64	242	345.6354	645	345.6354	615.3	212669
65-74	1949	3000.596	5197	3000.596	47.3	141928
75 YR+	12577	17841.24	33539	17841.24	29.3	522748
Total				Total	691.9	877345.0
PLAN PD		AVG CENS	OCC FACT	BED NEED	EX BEDS	NEED
877345		2404	90%	2671	2840	-169

WILL COUNTY - WITH NEW STATE 2015 ESTIMATE

AGE GR	RES %	PT DAYS	POP 10	AREA USE
00-64	26.7%	212704	615.4	345.6
65-74	13.9%	110722	36.9	3000.6
75 YR+	59.5%	474577	26.6	17841.2
Total	1	798003	678.9	

WILL COUNTY - WITH NEW STATE 2015 ESTIMATE

AGE GR	MIN	AREA USE	MAX	PROJ USE	New State POP 15	PROJ PD
00-64	242	345.6354	645	345.6354	655.0	226391
65-74	1949	3000.596	5197	3000.596	50.6	151830
75 YR+	12577	17841.24	33539	17841.24	30.8	549510
Total				Total	736.4	927731.0
PLAN PD		AVG CENS	OCC FACT	BED NEED	EX BEDS	NEED
927731		2542	90%	2824	2840	-16

WILL COUNTY - WITH NEW STATE 2020 PROJECTION

AGE GR	RES %	PT DAYS	POP 10	AREA USE
00-64	26.7%	212704	615.4	345.6
65-74	13.9%	110722	36.9	3000.6
75 YR+	59.5%	474577	26.6	17841.2
Total	1	798003	678.9	

WILL COUNTY - WITH NEW STATE 2020 PROJECTION

AGE GR	MIN	AREA USE	MAX	PROJ USE	New State POP 20	PROJ PD
00-64	242	345.6354	645	345.6354	692.3	239283
65-74	1949	3000.596	5197	3000.596	64.5	193538
75 YR+	12577	17841.24	33539	17841.24	38.4	685104
Total				Total	795.2	1117925.0
PLAN PD		AVG CENS	OCC FACT	BED NEED	EX BEDS	NEED
1117925		3063	90%	3403	2840	563

Calculated Nursing Bed Need

With Current Published Bed Need and New State
Population Projections

KENDALL COUNTY - PUBLISHED INVENTORY

AGE GR	RES %	PT DAYS	POP 10	AREA USE
00-64	2.6%	1364	106.8	12.8
65-74	13.8%	7158	5.2	1376.5
75 YR+	83.6%	43292	3.3	13118.8
Total	1	51814	115.3	

KENDALL COUNTY - PUBLISHED INVENTORY

AGE GR	MIN	AREA USE	MAX	PROJ USE	POP 15	PROJ PD
00-64	242	12.77154	645	242	110.8	26814
65-74	1949	1376.538	5197	1949	7.0	13643
75 YR+	12577	13118.79	33539	13118.79	3.9	51163
Total				Total	121.7	91620.0

PLAN PD	AVG CENS	OCC FACT	BED NEED	EX BEDS	NEED
91620	251	90%	279	185	94

KENDALL COUNTY - WITH NEW STATE 2015 ESTIMATE

AGE GR	RES %	PT DAYS	POP 10	AREA USE
00-64	2.6%	1364	106.8	12.8
65-74	13.8%	7158	5.2	1376.5
75 YR+	83.6%	43292	3.3	13118.8
Total	1	51814	115.3	

KENDALL COUNTY - WITH NEW STATE 2015 ESTIMATE

AGE GR	MIN	AREA USE	MAX	PROJ USE	New State POP 15	PROJ PD
00-64	242	12.77154	645	242	117.6	28459
65-74	1949	1376.538	5197	1949	7.5	14618
75 YR+	12577	13118.79	33539	13118.79	4.1	53787
Total				Total	129.2	96864.0

PLAN PD	AVG CENS	OCC FACT	BED NEED	EX BEDS	NEED
96864	265	90%	294	185	109

KENDALL COUNTY - WITH NEW STATE 2020 PROJECTION

AGE GR	RES %	PT DAYS	POP 10	AREA USE
00-64	2.6%	1364	106.8	12.8
65-74	13.8%	7158	5.2	1376.5
75 YR+	83.6%	43292	3.3	13118.8
Total	1	51814	115.3	

KENDALL COUNTY - WITH NEW STATE 2020 PROJECTION

AGE GR	MIN	AREA USE	MAX	PROJ USE	New State POP 20	PROJ PD
00-64	242	12.77154	645	242	127.6	30879
65-74	1949	1376.538	5197	1949	9.6	18710
75 YR+	12577	13118.79	33539	13118.79	5.6	73465
Total				Total	142.8	123054.0

PLAN PD	AVG CENS	OCC FACT	BED NEED	EX BEDS	NEED
123054	337	90%	374	185	189

Calculated Nursing Bed Need

With Current Published Bed Need and New State
Population Projections

KANE COUNTY - PUBLISHED INVENTORY

AGE GR	RES %	PT DAYS	POP 10	AREA USE
00-64	22.0%	271322	466.2	582.0
65-74	13.1%	99809	28.4	3514.4
75 YR+	64.9%	477785	21.7	22017.7
Total	100.00%	848916	516.3	

KANE COUNTY - PUBLISHED INVENTORY

AGE GR	MIN	AREA USE	MAX	PROJ USE	POP 15	PROJ PD
00-64	276.4	582.0	737	581.99	472.7	275105
65-74	2030.3	3514.4	5414.1	3514.40	37.1	130384
75 YR+	13150.1	22017.7	35066.9	22017.74	23.6	519619
Total					533.4	925108
PLAN PD		AVG CENS	OCC FACT	BED NEED	EX BEDS	NEED
925108		2534.5	90%	2816	3064	-248

KANE COUNTY - WITH NEW STATE 2015 ESTIMATE

AGE GR	RES %	PT DAYS	POP 10	AREA USE
00-64	13.3%	271322	466.2	582.0
65-74	4.9%	99809	28.4	3514.4
75 YR+	23.4%	477785	21.7	22017.7
	T/B	848916	516.3	

KANE COUNTY - WITH NEW STATE 2015 ESTIMATE

AGE GR	MIN	AREA USE	MAX	PROJ USE	New State POP 15	PROJ PD
00-64	276.4	581.9863	737	581.9863	484.0	281681
65-74	2030.3	3514.401	5414.1	3514.401	39.1	137413
75 YR+	13150.1	22017.74	35066.9	22017.74	24.8	546040
Total					547.9	
PLAN PD		AVG CENS	OCC FACT	BED NEED	EX BEDS	NEED
965134		2644	90%	2938	3064	-126

KANE COUNTY - WITH NEW STATE 2020 PROJECTION

AGE GR	RES %	PT DAYS	POP 10	AREA USE
00-64	13.3%	271322	466.2	582.0
65-74	4.9%	99809	28.4	3514.4
75 YR+	23.4%	477785	21.7	22017.7
	T/B	848916	516.3	

KANE COUNTY - WITH NEW STATE 2020 PROJECTION

AGE GR	MIN	AREA USE	MAX	PROJ USE	New State POP 20	PROJ PD
00-64	276.4	581.9863	737	581.9863	502.9	292681
65-74	2030.3	3514.401	5414.1	3514.401	50.0	175720
75 YR+	13150.1	22017.74	35066.9	22017.74	30.5	671541
Total					583.4	
PLAN PD		AVG CENS	OCC FACT	BED NEED	EX BEDS	NEED
1139942		3123	90%	3470	3064	406

Calculated Nursing Bed Need

With Current Published Bed Need and New State
Population Projections

PA -7C - PUBLISHED INVENTORY

AGE GR	RES %	PT DAYS	POP 2010
00-64	17.7%	308396	810.8
65-74	12.6%	219393	58.2
75 YR+	69.7%	1211241	49.0
	1	1739030	918.0

AREA USE
380.4
3,769.6
24,719.2

PA -7C - PUBLISHED INVENTORY

AGE GR	MIN	AREA USE	MAX
00-64	454.6	380.4	1,212.4
65-74	2,772.9	3,769.6	7,394.5
75 YR+	13,483.3	24,719.2	35,955.5

PROJ USE	POP 2015	PROJ PD
454.6	809.4	367953
3,769.6	78.6	296294
24,719.2	51.7	1277983
	939.7	

PLAN PD	AVG CENS	OCC FACT
1942230	5321	90%

BED NEED	EX BEDS	NEED
5912	6033	-121

PA-7C - WITH NEW STATE 2015 ESTIMATE

AGE GR	RES %	PT DAYS	POP 2010
00-64	17.7%	308396	810.8
65-74	12.6%	219393	58.2
75 YR+	69.7%	1211241	49.0
	1	1739030	403831

AREA USE
380.4
3,769.6
24,719.2

918.0

PA-7C - WITH NEW STATE 2015 ESTIMATE

AGE GR	MIN	AREA USE	MAX
00-64	454.6	380.4	1,212.4
65-74	2,772.9	3,769.6	7,394.5
75 YR+	13,483.3	24,719.2	35,955.5

PROJ USE	POP 2015	PROJ PD
454.6	793.9	360907
3,769.6	79.8	300817
24,719.2	53.5	1322477
Total	927.2	1984201.0

PLAN PD	AVG CENS	OCC FACT
1984201	5436	90%

BED NEED	EX BEDS	NEED
6040	6033	7

PA-7C - WITH NEW STATE 2020 PROJECTION

AGE GR	RES %	PT DAYS	POP 2010
00-64	17.7%	308396	810.8
65-74	12.6%	219393	58.2
75 YR+	69.7%	1211241	49
Total	1	1739030	403831

AREA USE
380.4
3,769.6
24,719.2

918.0

PA-7C - WITH NEW STATE 2020 PROJECTION

AGE GR	MIN	AREA USE	MAX
00-64	454.6	380.4	1,212.4
65-74	2,772.9	3,769.6	7,394.5
75 YR+	13,483.3	24,719.2	35,955.5

PROJ USE	POP 2020	PROJ PD
454.6	773.2	351497
3,769.6	101.2	381487
24,719.2	64.6	1596861
	939.0	

PLAN PD	AVG CENS	OCC FACT
2329845	6383	90%

BED NEED	EX BEDS	NEED
7092	6033	1059

ILLINOIS LONG-TERM CARE DATA SUMMARY-CALENDAR YEAR 2013

LTC PLANNING AREA

Kane

HEALTH SERVICE AREA	008	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	30	Aggressive/Anti-Social	DIAGNOSIS
HOSPITAL BASED UNITS	0	Chronic Alcoholism	Neoplasms
FREE STANDING FACILITIES	30	Developmentally Disabled	Endocrine/Metabolic
FACILITIES LICENSED FOR:		Drug Addiction	Blood Disorders
NURSING CARE BEDS ONLY	21	Medicaid Recipient	Nervous System Non Alzheimer
DD CARE BEDS ONLY	8	Medicare Recipient	Alzheimer Disease
MULTI-LICENSED FACILITIES	1	Mental Illness	Mental Illness
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Ambulatory	Developmental Disability
GOVERNMENTAL OWNERSHIP	0	Non-Mobile	Circulatory System
NON-PROFIT OWNERSHIP	15	Public Aid Recipient	Respiratory System
FOR PROFIT OWNERSHIP	15	Under 65 Years Old	Digestive System
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	2	Unable to Self-Medicate	Genitourinary System Disorders
	2	Ventilator Dependent	Skin Disorders
		Infectious Disease w/ Isolation	Musculo-skeletal Disorders
		Other Restrictions	Injuries and Poisonings
		No Restrictions	Other Medical Conditions
			Non-Medical Conditions
			TOTALS
Reported Identified Offenders	44		2,151
		Total Residents Diagnosed with Mental Illness	492

LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 2013	
									Residents on 1/1/2013	Residents on 12/31/2013
Nursing Care	2,429	2,364	2,179	2,364	1,982	447	1717	1861	2,163	2,163
Skilled Under 22	0	0	0	0	0	0	0	0	5,064	5,064
Intermediate DD	128	127	124	127	124	4		96	5,063	5,063
Sheltered Care	103	103	68	103	45	58			2,164	2,164
TOTAL BEDS	2,660	2,594	2,371	2,594	2,151	509	1717	1957		

FACILITY UTILIZATION - 2013

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

LEVEL OF CARE	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL Pat. days	Licensed Beds Occ. Pct.	Peak Beds Set Up Occ. Pct.
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days			
Nursing Care	115,464	18.4%	450,491	66.1%	9,171	19,193	127,679	78	722,076	81.2%	83.5%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			44,071	125.4%	0	0	730	0	44,801	95.6%	96.4%
Sheltered Care					0	0	22,965	0	22,965	60.9%	60.9%
TOTALS	115,464	18.4%	494,562	69.0%	9,171	19,193	151,374	78	789,842	81.1%	83.2%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2013

AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	28	14	0	0	35	41	0	0	63	55	118
45 to 59	134	97	0	0	12	29	2	1	148	127	275
60 to 64	68	61	0	0	1	2	2	0	71	63	134
65 to 74	151	179	0	0	2	1	2	3	155	183	338
75 to 84	158	324	0	0	1	0	3	8	162	332	494
85+	158	610	0	0	0	0	4	20	162	630	792
TOTALS	697	1,285	0	0	51	73	13	32	761	1,390	2,151

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE						TOTALS	AVERAGE DAILY PAYMENT RATES		
	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care		LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	283	1,238	27	45	389	0	1,982	Nursing Care	270	226
Skilled Under 22	0	0	0	0	0	0	0	Skilled Under 22	0	0
ICF/DD		122	0	0	2	0	124	Intermediate DD	215	224
Sheltered Care			0	0	45	0	45	Shelter	42	0
TOTALS	283	1,360	27	45	436	0	2,151			

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	RESIDENTS BY RACIAL/ETHNICITY GROUPING					Totals
	Nursing Care	Skilled Under 22	ICF/DD	Sheltered Care	Totals	
Asian	23	0	8	0	31	
American Indian	0	0	0	0	0	
Black	125	0	15	0	140	
Hawaiian/Pacific Isl.	6	0	0	0	6	
White	1,785	0	101	45	1,931	
Race Unknown	43	0	0	0	43	
Total	1,982	0	124	46	2,151	

ETHNICITY	RESIDENTS BY RACIAL/ETHNICITY GROUPING					Totals
	Nursing Care	Skilled Under 22	ICF/DD	Sheltered Care	Totals	
Hispanic	94	0	6	1	101	
Non-Hispanic	1,857	0	118	44	2,019	
Ethnicity Unknown	31	0	0	0	31	
Total	1,982	0	124	45	2,151	

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	25.30
Physicians	42.63
Director of Nursing	24.50
Registered Nurses	300.65
LPN's	168.57
Certified Aides	864.88
Other Health Staff	125.11
Non-Health Staff	800.17
Totals	2351.81

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care	Charity Care Expense as % of Total Net Revenue
32.4%	43.5%	1.3%	4.2%	18.7%	100.0%	Expense*	
49,341,554	66,261,074	2,044,655	6,365,750	28,436,705	152,449,738	63,625	0.0%

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	007	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	42	Aggressive/Anti-Social	DIAGNOSIS
HOSPITAL BASED UNITS	0	Chronic Alcoholism	Neoplasms
FREE STANDING FACILITIES	42	Developmentally Disabled	Endocrine/Metabolic
FACILITIES LICENSED FOR:		Drug Addiction	Blood Disorders
NURSING CARE BEDS ONLY	30	Medicaid Recipient	Nervous System Non Alzheimer
DD CARE BEDS ONLY	7	Medicare Recipient	Alzheimer Disease
MULTI-LICENSED FACILITIES	5	Mental Illness	Mental Illness
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Ambulatory	Developmental Disability
GOVERNMENTAL OWNERSHIP	1	Non-Mobile	Circulatory System
NON-PROFIT OWNERSHIP	9	Public Aid Recipient	Respiratory System
FOR PROFIT OWNERSHIP	32	Under 65 Years Old	Digestive System
CONTINUING CARE COMMUNITY	7	Unable to Self-Medicare	Genitourinary System Disorders
LIFE CARE FACILITY	9	Ventilator Dependent	Skin Disorders
		Infectious Disease w/ Isolation	Musculo-skeletal Disorders
		Other Restrictions	Injuries and Poisonings
		No Restrictions	Other Medical Conditions
			Non-Medical Conditions
			TOTALS
Reported Identified Offenders	52		5,056
		Total Residents Diagnosed with Mental Illness	1,126

LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 2013	
									Residents on 1/1/2013	5,038
Nursing Care	5,745	5,519	4,913	5,423	4,543	1,202	4381	3888	Total Admissions 2013	14,450
Skilled Under 22	156	147	147	147	143	13		156	Total Discharges 2013	14,335
Intermediate DD	164	164	164	164	156	8		164	Residents on 12/31/2013	5,153
Sheltered Care	316	254	222	254	212	104				
TOTAL BEDS	6,381	6,084	5,446	5,988	5,054	1,327	4381	4208		

FACILITY UTILIZATION - 2013

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	331,468	20.7%	852,080	59.9%	82,311	52,475	358,797	2,435	1,679,566	79.9%	83.1%
Skilled Under 22			52,312	91.6%	0	0	332	0	52,644	92.2%	97.8%
Intermediate DD			23,017	38.3%	0	0	365	0	23,382	39.0%	39.0%
Sheltered Care					0	0	79,362	0	79,362	68.6%	85.4%
TOTALS	331,468	20.7%	927,409	60.2%	82,311	52,475	438,856	2,435	1,834,954	78.6%	82.4%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2013

AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	
Under 18	0	0	21	10	0	0	0	0	21	10	31
18 to 44	75	41	38	35	27	20	0	0	140	96	236
45 to 59	239	184	13	15	36	36	0	1	288	236	524
60 to 64	130	143	3	2	10	14	0	0	143	159	302
65 to 74	266	366	3	2	6	4	2	5	277	377	654
75 to 84	354	740	0	1	3	0	11	53	368	794	1,162
85+	446	1,561	0	0	0	0	28	112	474	1,673	2,147
TOTALS	1,510	3,035	78	65	82	74	41	171	1,711	3,345	5,056

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	PAYMENT SOURCE						TOTALS	AVERAGE DAILY PAYMENT RATES		
	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care		LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	978	2,310	63	138	1,056	5	4,550	Nursing Care	278	235
Skilled Under 22	0	142	0	0	1	0	143	Skilled Under 22	337	281
ICF/DD		155	0	0	1	0	156	Intermediate DD	0	211
Sheltered Care			0	0	212	0	212	Shelter	131	0
TOTALS	978	2,607	63	138	1,270	5	5,061			

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing Care	Skilled Under 22	ICF/DD	Sheltered Care	Totals
Asian	119	5	4	0	128
American Indian	3	0	0	0	3
Black	221	43	19	1	284
Hawaiian/Pacific Isl.	196	18	2	1	217
White	3,961	67	125	210	4,363
Race Unknown	45	10	6	0	61
Total	4,545	143	156	211	5,056

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	44.00
Physicians	9.50
Director of Nursing	40.00
Registered Nurses	677.42
LPN's	401.60
Certified Aides	1850.53
Other Health Staff	492.89
Non-Health Staff	1676.40
Totals	5192.34

ETHNICITY	Nursing Care	Skilled Under 22	ICF/DD	Sheltered Care	Totals
Hispanic	156	21	6	0	183
Non-Hispanic	4,207	118	146	158	4,629
Ethnicity Unknown	182	4	4	54	244
Total	4,545	143	156	212	5,056

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
40.6%	34.0%	0.4%	4.7%	20.3%	100.0%	775,581	0.2%
178,113,698	148,896,463	1,936,373	20,486,733	88,850,825	438,284,092		

*Charity Expense does not include expenses which may be considered a community benefit.

ILLINOIS LONG-TERM CARE DATA SUMMARY-CALENDAR YEAR 2013

LTC PLANNING AREA

Will

HEALTH SERVICE AREA	009	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	29	Aggressive/Anti-Social	20
HOSPITAL BASED UNITS	0	Chronic Alcoholism	20
FREE STANDING FACILITIES	29	Developmentally Disabled	8
FACILITIES LICENSED FOR:		Drug Addiction	22
NURSING CARE BEDS ONLY	15	Medicaid Recipient	0
DD CARE BEDS ONLY	12	Medicare Recipient	0
MULTI-LICENSED FACILITIES	2	Mental Illness	5
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Ambulatory	4
GOVERNMENTAL OWNERSHIP	1	Non-Mobile	4
NON-PROFIT OWNERSHIP	12	Public Aid Recipient	3
FOR PROFIT OWNERSHIP	16	Under 65 Years Old	2
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	3	Unable to Self-Medicare	4
Reported Identified Offenders	76	Ventilator Dependent	27
		Infectious Disease w/ Isolation	13
		Other Restrictions	3
		No Restrictions	2
		TOTALS	2,288
		Total Residents Diagnosed with Mental Illness	705

LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 2013	
									Residents on 1/1/2013	2,281
Nursing Care	2,740	2,647	2,311	2,595	2,120	620	2175	2431	Total Admissions 2013	4,436
Skilled Under 22	0	0	0	0	0	0	0	0	Total Discharges 2013	4,394
Intermediate DD	144	143	138	143	135	9	9	144	Residents on 12/31/2013	2,323
Sheltered Care	56	56	39	56	30	26				
TOTAL BEDS	2,940	2,846	2,488	2,794	2,285	655	2175	2575		

FACILITY UTILIZATION - 2013

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

LEVEL OF CARE	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL Pat. days	Licensed Beds	Peak Beds Set Up
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days		Occ. Pct.	Occ. Pct.
Nursing Care	142,008	17.8%	517,154	58.1%	6,102	10,994	223,207	994	900,459	89.8%	92.9%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			49,546	94.0%	416	0	0	0	49,962	94.8%	95.5%
Sheltered Care					0	0	12,116	0	12,116	59.1%	59.1%
TOTALS	142,008	17.8%	566,700	60.1%	6,518	10,994	235,323	994	962,537	89.5%	92.4%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2013

AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	40	27	0	0	32	16	0	0	72	43	115
45 to 59	147	96	0	0	39	19	0	0	186	115	301
60 to 64	89	75	0	0	8	6	0	0	97	81	178
65 to 74	151	186	0	0	6	6	0	2	157	194	351
75 to 84	161	346	0	0	1	2	2	8	164	356	520
85+	187	618	0	0	0	0	1	17	188	635	823
TOTALS	775	1,348	0	0	86	49	3	27	864	1,424	2,288

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE						AVERAGE DAILY PAYMENT RATES			
	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS	LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	362	1,399	6	28	324	4	2,123	Nursing Care	230	196
Skilled Under 22	0	0	0	0	0	0	0	Skilled Under 22	0	0
ICF/DD		134	0	0	1	0	135	Intermediate DD	191	203
Sheltered Care			0	0	30	0	30	Shelter	139	163
TOTALS	362	1,533	6	28	355	4	2,288			

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	RESIDENTS BY RACIAL/ETHNICITY GROUPING					Totals
	Nursing Care	Skilled Under 22	ICF/DD	Sheltered Care	Totals	
Asian	24	0	2	0	26	
American Indian	0	0	0	0	0	
Black	342	0	26	0	368	
Hawaiian/Pacific Isl.	1	0	0	0	1	
White	1,743	0	104	30	1,877	
Race Unknown	13	0	3	0	16	
Total	2,123	0	135	30	2,288	

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	25.00
Physicians	3.00
Director of Nursing	20.00
Registered Nurses	307.36
LPN's	231.00
Certified Aides	916.34
Other Health Staff	158.20
Non-Health Staff	955.53
Totals	2616.43

ETHNICITY	RESIDENTS BY RACIAL/ETHNICITY GROUPING					Totals
	Nursing Care	Skilled Under 22	ICF/DD	Sheltered Care	Totals	
Hispanic	95	0	7	0	102	
Non-Hispanic	2,028	0	128	30	2,186	
Ethnicity Unknown	0	0	0	0	0	
Total	2,123	0	135	30	2,288	

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
36.1%	44.2%	0.5%	4.0%	15.3%	100.0%		
50,302,029	61,625,213	701,271	5,568,275	21,294,056	139,490,844	199,361	0.1%

*Charity Expense does not include expenses which may be considered a community benefit.

ILLINOIS LONG-TERM CARE DATA SUMMARY-CALENDAR YEAR 2013

LTC PLANNING AREA

Kendall

HEALTH SERVICE AREA	009	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	2	Aggressive/Anti-Social	2
HOSPITAL BASED UNITS	0	Chronic Alcoholism	1
FREE STANDING FACILITIES	2	Developmentally Disabled	1
FACILITIES LICENSED FOR:		Drug Addiction	1
NURSING CARE BEDS ONLY	2	Medicaid Recipient	0
DD CARE BEDS ONLY	0	Medicare Recipient	0
MULTI-LICENSED FACILITIES	0	Mental Illness	1
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Ambulatory	0
GOVERNMENTAL OWNERSHIP	0	Non-Mobile	0
NON-PROFIT OWNERSHIP	0	Public Aid Recipient	0
FOR PROFIT OWNERSHIP	2	Under 65 Years Old	0
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Unable to Self-Medicare	0
	0	Ventilator Dependent	2
		Infectious Disease w/ Isolation	0
		Other Restrictions	0
		No Restrictions	0
		TOTALS	152
Reported Identified Offenders	1	Total Residents Diagnosed with Mental Illness	1

LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS

LEVEL OF CARE	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	ADMISSIONS AND DISCHARGES - 2013	
									Residents on 1/1/2013	TOTAL
Nursing Care	185	185	171	185	152	33	169	62	Residents on 1/1/2013	141
Skilled Under 22	0	0	0	0	0	0	0	0	Total Admissions 2013	689
Intermediate DD	0	0	0	0	0	0	0	0	Total Discharges 2013	678
Sheltered Care	0	0	0	0	0	0	0	0	Residents on 12/31/2013	152
TOTAL BEDS	185	185	171	185	152	33	169	62		

FACILITY UTILIZATION - 2013

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

LEVEL OF CARE	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL Pat. days	Licensed Beds	Peak Set Up
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days		Occ. Pct.	Occ. Pct.
Nursing Care	22,212	35.9%	10,867	47.9%	1,983	5,207	16,017	0	56,286	83.1%	83.1%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	22,212	35.9%	10,867	47.9%	1,983	5,207	16,017	0	56,286	83.1%	83.1%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2013

AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	2	0	0	0	0	0	0	0	2	0	2
45 to 59	1	4	0	0	0	0	0	0	1	4	5
60 to 64	2	1	0	0	0	0	0	0	2	1	3
65 to 74	6	18	0	0	0	0	0	0	6	18	24
75 to 84	16	24	0	0	0	0	0	0	16	24	40
85+	16	62	0	0	0	0	0	0	16	62	78
TOTALS	43	109	0	0	0	0	0	0	43	109	152

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE						TOTALS	AVERAGE DAILY PAYMENT RATES		
	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care		LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	67	27	5	16	37	0	152	Nursing Care	302	201
Skilled Under 22	0	0	0	0	0	0	0	Skilled Under 22	0	0
ICF/DD		0	0	0	0	0	0	Intermediate DD	0	0
Sheltered Care			0	0	0	0	0	Shelter	0	0
TOTALS	67	27	5	16	37	0	152			

RESIDENTS BY RACIAL/ETHNICITY GROUPING

STAFFING

RACE	Nursing Care	Skilled Under 22	ICF/DD	Sheltered Care	Totals
Asian	0	0	0	0	0
American Indian	0	0	0	0	0
Black	1	0	0	0	1
Hawaiian/Pacific Isl.	0	0	0	0	0
White	148	0	0	0	148
Race Unknown	3	0	0	0	3
Total	152	0	0	0	152

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	2.00
Physicians	0.00
Director of Nursing	2.00
Registered Nurses	50.00
LPN's	8.00
Certified Aides	84.00
Other Health Staff	2.00
Non-Health Staff	67.00
Totals	215.00

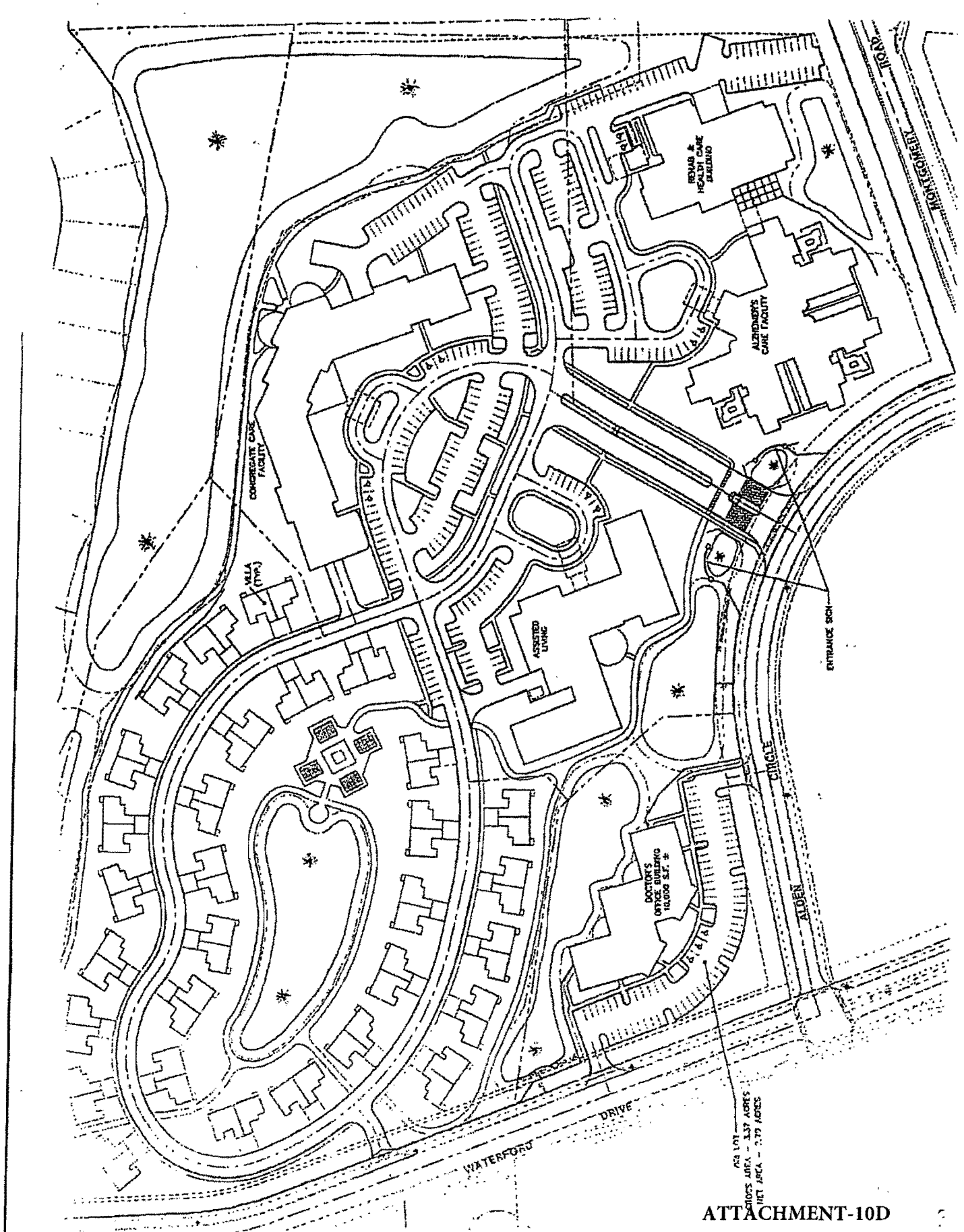
ETHNICITY	Nursing Care	Skilled Under 22	ICF/DD	Sheltered Care	Totals
Hispanic	4	0	0	0	4
Non-Hispanic	147	0	0	0	147
Ethnicity Unknown	1	0	0	0	1
Total	152	0	0	0	152

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
62.0%	6.3%	1.0%	12.4%	18.4%	100.0%	0	0.0%
11,928,551	1,206,334	192,000	2,392,716	3,534,290	19,253,891		

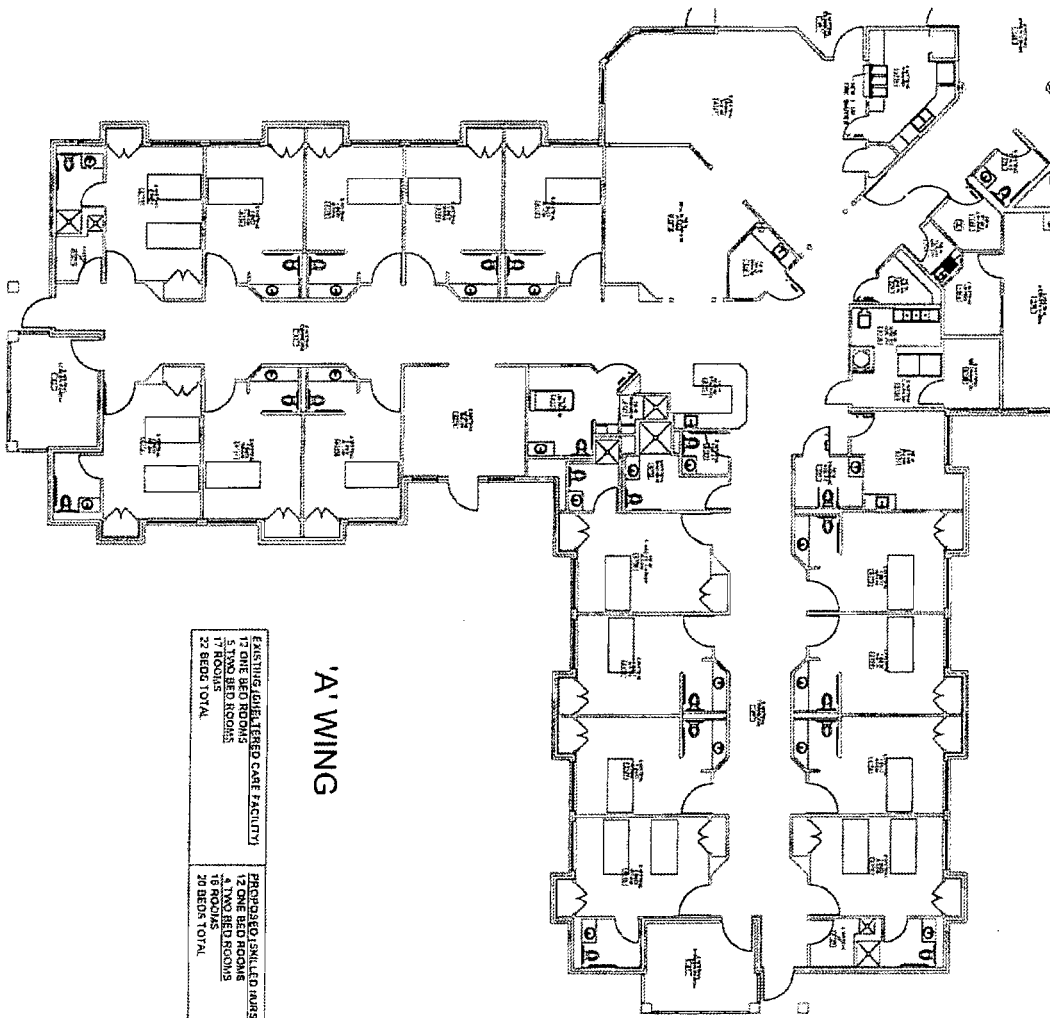
*Charity Expense does not include expenses which may be considered a community benefit.

Attachment 4. Site Plan and Floor Plans of Proposed Modifications



ASR LOT
GROSS AREA - 1.37 ACRES
NET AREA - 0.79 ACRES

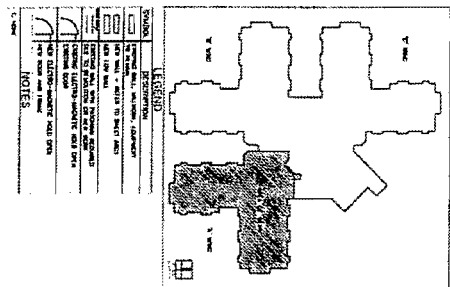
ATTACHMENT-10D



'A' WING

EXISTING (OR ALTERED) CARE FACILITY	PROPOSED SKILLED NURSING FACILITY
5 TWIN BED ROOMS	12 ONE BED ROOMS
17 ROOMS	18 ROOMS
22 BEDS TOTAL	20 BEDS TOTAL

1 PROPOSED PARTIAL FIRST FLOOR PLAN

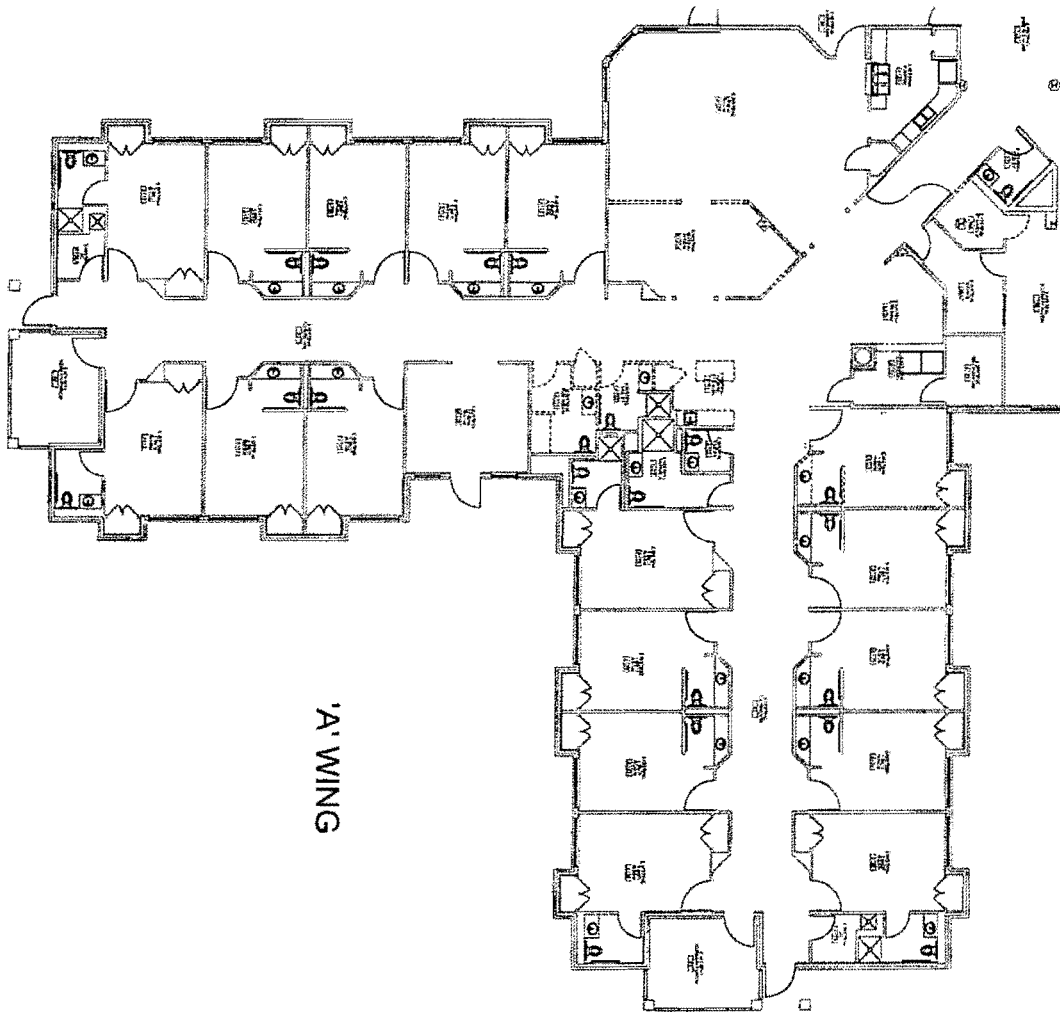


A101

ADG ALDEN DESIGN GROUP, INC.
 ARCHITECTS
 100 N. WASHINGTON ST.
 SUITE 200
 WATERFORD, IL 60594-4757
 TEL: 618-241-1100
 FAX: 618-241-1101
 WWW.ADGARCHITECTS.COM

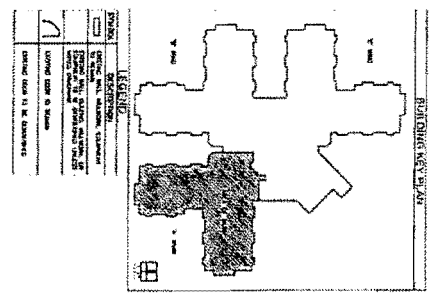
PROPOSED PARTIAL FIRST FLOOR PLAN

Alden Courts of Waterford
 SKILLED NURSING FACILITY WING CONVERSION
 1261 Rand Drive
 WATERFORD, IL 60594-4757



'A' WING

1 PARTIAL EXISTING FIRST FLOOR DEMOLITION PLAN



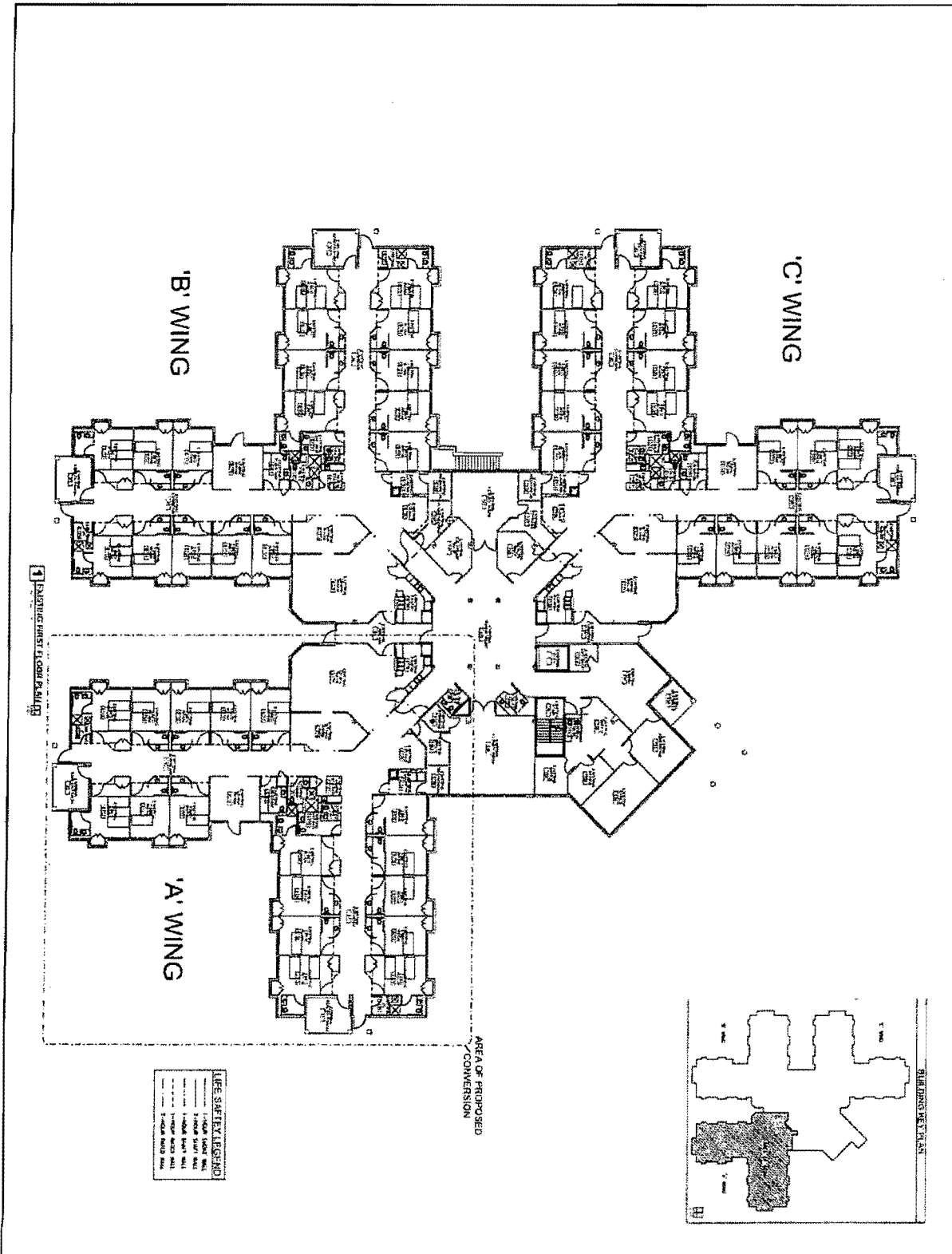
D100

ADG ALDEN DESIGN GROUP, INC.
ARCHITECTS

PARTIAL FIRST FLOOR DEMOLITION PLAN

Alden Courts of Waterford
SKILLED NURSING FACILITY WING CONVERSION

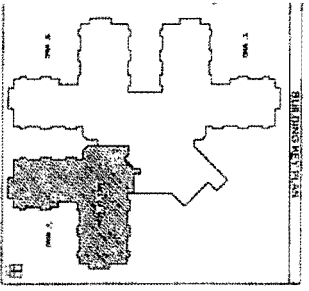
1801 Rand Drive
Aurora, IL 60504-4757



↑ PARKING FIRST FLOOR PLAZA

LIFE SAFETY EQUIPMENT
 - FIRE ALARM BELL
 - FIRE EXTINGUISHER
 - FIRE ESCAPE
 - FIRE EXTINGUISHER
 - FIRE EXTINGUISHER
 - FIRE EXTINGUISHER
 - FIRE EXTINGUISHER

AREA OF PROPOSED CONVERSION



A100

ADG ALDEN DESIGN GROUP, INC.
 ARCHITECTS
 100 N. PLYMOUTH ST.
 PLAZA 770-880-0400
 770-880-4800

NO.	DATE	DESCRIPTION

Alden Courts of Waterford
 SKILLED NURSING FACILITY WING CONVERSION
 1001 Rand Drive
 Aurora, IL 60504-4757

EXISTING FIRST FLOOR PLAN

Attachment 5. IDPH Population Projections



Illinois Department of Public Health
Office of Health Informatics
Illinois Center for Health Statistics

Illinois Health Facilities and Services Review Board

Population Projections

Illinois, Chicago and Illinois Counties by Age and Sex:
July 1, 2010 to July 1, 2025
(2014 Edition)

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Affiliations:

Illinois Department of Public Health, Office of Health Informatics, Illinois Center for Health Statistics

Illinois Health Facilities and Services Review Board

Released February 2015

ATTACHMENT-10D

IDPH Population Projections

KANE COUNTY

IDPH Population by Age

	<u>2015</u>	<u>2020</u>	<u>2025</u>
<5	36965	43593	46931
5-9	41016	37958	44611
10-14	43697	43713	38610
15-19	42111	44077	42106
20-24	36169	40394	42681
25-29	30931	37353	41525
30-34	35649	32879	39159
35-39	37437	37166	34228
40-44	38289	38044	37745
45-49	38648	38475	38242
50-54	38800	38608	38453
55-59	35023	38361	38202
60-64	29322	34244	37557
65-69	23381	28147	32910
70-74	15704	21861	26339
75-79	10394	14038	19493
80-84	7051	8390	11308
85+	7357	8085	9196
TOTAL	547944	585386	619296
0-64	484057	504865	520050
65-74	39085	50008	59249
75+	24802	30513	39997
TOTAL	547944	585386	619296

FIPS	County	Age Group	Males_2015	Females_2015	Total_2015	Males_2020	Females_2020	Total_2020	Males_2025	Females_2025	Total_2025
89	Kane	0-4	18,951	18,014	36,965	22,349	21,244	43,593	24,061	22,871	46,931
89	Kane	5-9	20,930	20,086	41,016	19,530	18,429	37,958	22,931	21,680	44,611
89	Kane	10-14	22,538	21,158	43,697	21,357	20,356	41,713	19,926	18,684	38,610
89	Kane	15-19	21,721	20,390	42,111	22,878	21,199	44,077	21,683	20,424	42,106
89	Kane	20-24	18,744	17,425	36,169	20,798	19,595	40,394	22,126	20,556	42,681
89	Kane	25-29	16,054	14,877	30,931	19,375	17,978	37,353	21,394	20,131	41,525
89	Kane	30-34	18,069	17,581	35,649	16,957	15,921	32,879	20,212	18,947	39,159
89	Kane	35-39	18,804	18,633	37,437	18,911	18,255	37,166	17,706	16,522	34,228
89	Kane	40-44	19,069	19,220	38,289	19,135	18,909	38,044	19,222	18,523	37,745
89	Kane	45-49	19,431	19,217	38,648	19,089	19,387	38,475	19,166	19,076	38,242
89	Kane	50-54	19,260	19,540	38,800	19,301	19,307	38,608	18,975	19,478	38,453
89	Kane	55-59	17,449	17,574	35,023	18,854	19,507	38,361	18,923	19,279	38,202
89	Kane	60-64	14,237	15,086	29,322	16,915	17,328	34,244	18,309	19,248	37,557
89	Kane	65-69	11,284	12,097	23,381	13,541	14,606	28,147	16,121	16,789	32,910
89	Kane	70-74	7,208	8,496	15,704	10,379	11,481	21,861	12,481	13,858	26,339
89	Kane	75-79	4,741	5,653	10,394	6,289	7,749	14,038	9,050	10,443	19,493
89	Kane	80-84	2,907	4,144	7,051	3,675	4,716	8,390	4,868	6,440	11,308
89	Kane	85+	2,540	4,817	7,357	2,946	5,139	8,085	3,563	5,633	9,196
	Total		273,935	274,007	547,942	292,280	291,106	583,386	310,716	308,581	619,296

IDPH Population Projections

DUPAGE COUNTY

IDPH Population by Age

	<u>2015</u>	<u>2020</u>	<u>2025</u>
<5	53715	53299	53744
5-9	55383	52672	52614
10-14	61732	55126	52651
15-19	62642	59232	53140
20-24	59440	58067	55478
25-29	56870	61928	60445
30-34	60517	57249	62524
35-39	56245	59964	56969
40-44	58255	55565	59604
45-49	65042	57414	55014
50-54	72546	63660	56386
55-59	71642	70351	61939
60-64	59895	68668	67833
65-69	47573	56800	65589
70-74	32175	44421	53240
75-79	20741	28647	39654
80-84	15072	17352	23782
85+	17667	18601	20342
TOTAL	927152	939016	950948
0-64	793924	773195	748341
65-74	79748	101221	118829
75+	53480	64600	83778
TOTAL	927152	939016	950948

FIPS	County	Age Group	Males_2015	Females_2015	Total_2015	Males_2020	Females_2020	Total_2020	Males_2025	Females_2025	Total_2025
43	DuPage	0-4	27,468	26,247	53,715	27,255	26,044	53,299	27,482	26,261	53,744
43	DuPage	5-9	28,332	27,050	55,383	27,067	25,604	52,672	27,020	25,594	52,614
43	DuPage	10-14	31,175	30,557	61,732	28,043	27,083	55,126	26,921	25,730	52,651
43	DuPage	15-19	32,122	30,520	62,642	30,021	29,211	59,232	27,136	26,004	53,140
43	DuPage	20-24	31,038	28,402	59,440	29,684	28,383	58,067	28,010	27,468	55,478
43	DuPage	25-29	29,214	27,656	56,870	32,094	29,835	61,928	30,703	29,742	60,445
43	DuPage	30-34	30,715	29,802	60,517	29,421	27,828	57,249	32,405	30,119	62,524
43	DuPage	35-39	28,000	28,245	56,245	30,313	29,651	59,964	29,174	27,796	56,969
43	DuPage	40-44	28,646	29,609	58,255	27,688	27,877	55,565	30,151	29,453	59,604
43	DuPage	45-49	31,687	33,355	65,042	28,208	29,206	57,414	27,394	27,620	55,014
43	DuPage	50-54	34,682	37,863	72,546	30,911	32,749	63,660	27,617	28,769	56,386
43	DuPage	55-59	34,524	37,118	71,642	33,474	36,877	70,351	29,946	31,994	61,939
43	DuPage	60-64	28,873	31,022	59,895	32,752	35,916	68,668	31,948	35,884	67,833
43	DuPage	65-69	22,654	24,919	47,573	26,960	29,841	56,800	30,830	34,759	65,589
43	DuPage	70-74	14,792	17,383	32,175	20,688	23,732	44,421	24,772	28,469	53,240
43	DuPage	75-79	9,229	11,512	20,741	12,788	15,858	28,647	17,973	21,681	39,654
43	DuPage	80-84	5,978	9,093	15,072	7,268	10,085	17,352	10,061	13,721	23,782
43	DuPage	85+	5,622	12,045	17,667	6,076	12,524	18,601	6,977	13,365	20,342
	Total		454,751	472,398	927,150	460,711	478,304	939,015	466,521	484,427	950,948

IDPH Population Projections

KENDALL COUNTY

IDPH Population by Age

	<u>2015</u>	<u>2020</u>	<u>2025</u>
<5	9198	8614	9316
5-9	11035	10090	9413
10-14	11422	11720	10696
15-19	10237	11842	12136
20-24	7807	10303	11982
25-29	6133	8652	11156
30-34	8876	7106	9619
35-39	10883	9883	7962
40-44	11080	11546	10466
45-49	10214	11758	12188
50-54	8531	10599	12160
55-59	6784	8650	10745
60-64	5496	6847	8708
65-69	4400	5397	6730
70-74	3048	4228	5166
75-79	1871	2824	3889
80-84	1126	1544	2320
85+	1061	1216	1536
TOTAL	129202	142819	156188
0-64	117696	127610	136547
65-74	7448	9625	11896
75+	4058	5584	7745
TOTAL	129202	142819	156188

FIPS	County	Age Group	Males_2015	Females_2015	Total_2015	Males_2020	Females_2020	Total_2020	Males_2025	Females_2025	Total_2025
93	Kendall	0-4	4,728	4,470	9,198	4,428	4,186	8,614	4,788	4,527	9,316
93	Kendall	5-9	5,639	5,396	11,035	5,148	4,942	10,090	4,804	4,609	9,413
93	Kendall	10-14	5,855	5,567	11,422	5,937	5,782	11,720	5,412	5,284	10,696
93	Kendall	15-19	5,247	4,990	10,237	6,098	5,744	11,842	6,173	5,964	12,136
93	Kendall	20-24	4,080	3,727	7,807	5,308	4,995	10,303	6,195	5,788	11,982
93	Kendall	25-29	3,106	3,027	6,133	4,468	4,184	8,652	5,702	5,454	11,156
93	Kendall	30-34	4,259	4,618	8,876	3,616	3,489	7,106	4,975	4,644	9,619
93	Kendall	35-39	5,250	5,634	10,883	4,777	5,106	9,883	4,066	3,896	7,962
93	Kendall	40-44	5,381	5,699	11,080	5,532	6,014	11,546	5,025	5,441	10,466
93	Kendall	45-49	5,153	5,061	10,214	5,724	6,033	11,758	5,853	6,336	12,188
93	Kendall	50-54	4,290	4,240	8,531	5,320	5,278	10,599	5,895	6,265	12,160
93	Kendall	55-59	3,310	3,475	6,784	4,357	4,293	8,650	5,391	5,354	10,745
93	Kendall	60-64	2,642	2,854	5,496	3,297	3,551	6,847	4,336	4,373	8,708
93	Kendall	65-69	2,021	2,379	4,400	2,566	2,831	5,397	3,208	3,522	6,730
93	Kendall	70-74	1,474	1,574	3,048	1,908	2,320	4,228	2,409	2,757	5,166
93	Kendall	75-79	836	1,035	1,871	1,317	1,506	2,824	1,684	2,205	3,889
93	Kendall	80-84	456	670	1,126	641	903	1,544	1,006	1,315	2,320
93	Kendall	85+	351	710	1,061	405	811	1,216	532	1,005	1,536
	Total		64,077	65,125	129,201	70,848	71,970	142,818	77,454	78,736	156,190

IDPH Population Projections

WILL COUNTY

IDPH Population by Age

	<u>2015</u>	<u>2020</u>	<u>2025</u>
<5	42808	47792	54341
5-9	54131	47494	52042
10-14	59557	57514	50499
15-19	58628	60880	58799
20-24	50879	57575	60126
25-29	40363	54597	60974
30-34	45372	46549	60192
35-39	50060	50282	50925
40-44	55176	52962	52907
45-49	57303	56754	54414
50-54	55198	57851	57283
55-59	47995	54962	57616
60-64	37547	47059	53901
65-69	30150	36282	45351
70-74	20427	28225	33861
75-79	13472	19112	24898
80-84	8724	10774	14393
85+	8618	9498	11072
TOTAL	736408	796162	853594
0-64	655017	692271	724019
65-74	50577	64507	79212
75+	30814	39384	50363
TOTAL	736408	796162	853594

FIPS	County	Age Group	Males_2015	Females_2015	Total_2015	Males_2020	Females_2020	Total_2020	Males_2025	Females_2025	Total_2025
197	Will	0-4	21,905	20,903	42,808	24,455	23,337	47,792	27,806	26,535	54,341
197	Will	5-9	27,485	26,646	54,131	24,223	23,271	47,494	26,561	25,481	52,042
197	Will	10-14	30,551	29,007	59,557	29,189	28,325	57,514	25,739	24,761	50,499
197	Will	15-19	30,308	28,320	58,628	31,395	29,486	60,880	29,987	28,812	58,799
197	Will	20-24	26,456	24,423	50,879	29,841	27,734	57,575	31,064	29,062	60,126
197	Will	25-29	21,005	19,359	40,363	28,281	26,316	54,597	31,501	29,472	60,974
197	Will	30-34	22,762	22,610	45,372	24,154	22,395	46,549	31,113	29,079	60,192
197	Will	35-39	24,521	25,540	50,060	25,261	25,021	50,282	26,382	24,543	50,925
197	Will	40-44	27,217	27,959	55,176	26,096	26,866	52,962	26,681	26,226	52,907
197	Will	45-49	28,381	28,923	57,303	28,041	28,713	56,754	26,846	27,568	54,414
197	Will	50-54	27,584	27,615	55,198	28,528	29,323	57,851	28,185	29,099	57,283
197	Will	55-59	23,907	24,088	47,995	27,314	27,649	54,962	28,255	29,361	57,616
197	Will	60-64	18,296	19,251	37,547	23,188	23,872	47,059	26,515	27,386	53,901
197	Will	65-69	14,385	15,765	30,150	17,419	18,863	36,282	22,055	23,296	45,351
197	Will	70-74	9,647	10,779	20,427	13,225	15,000	28,225	15,971	17,890	33,861
197	Will	75-79	5,946	7,526	13,472	8,262	9,849	18,112	11,278	13,620	24,898
197	Will	80-84	3,571	5,153	8,724	4,479	6,295	10,774	6,205	8,188	14,393
197	Will	85+	2,810	5,808	8,618	3,225	6,273	9,498	3,895	7,177	11,072
	Total		366,735	369,672	736,406	396,575	398,586	795,161	426,040	427,556	853,596

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Attachment 6. Scan/US Demographic Study

2010 Demographics in brief

30 Minute Market Area

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Alden Waterford
[Pgn0001]

Population			Households			
	807,738	%		274,943	%	
in households	796,829	98.6	families	204,640	74.4	
in families	709,523	87.8	non-families	70,303	25.6	
in non-families	87,306	10.8	with persons under 18	117,528	42.7	
in group quarters	10,909	1.4	1 person households	56,778	20.7	
noninstitutional GQ	6,423	0.8	2 person households	78,719	28.6	
under age 18	233,573	28.9	3-4 person households	97,384	35.4	
male	398,285	49.3	5+ person households	42,045	15.3	
female	409,452	50.7	Household size	2.90	Family size	3.47
Age		%	Household income		%	cum %
under 5 years	59,391	7.4	under \$15,000	15,872	5.8	5.8
5 to 9 years	67,102	8.3	\$15,000 - 24,999	18,345	6.7	12.4
10 to 14 years	67,198	8.3	\$25,000 - 34,999	20,362	7.4	19.9
15 to 19 years	60,824	7.5	\$35,000 - 49,999	31,430	11.4	31.3
20 to 24 years	44,903	5.6	\$50,000 - 74,999	48,053	17.5	48.8
25 to 34 years	107,349	13.3	\$75,000 - 99,999	41,440	15.1	63.8
35 to 44 years	126,117	15.6	\$100,000 - 124,999	31,435	11.4	75.3
45 to 54 years	121,698	15.1	\$125,000 - 149,999	21,843	7.9	83.2
55 to 64 years	82,763	10.2	\$150,000 - 199,999	23,743	8.6	91.8
65 to 74 years	39,377	4.9	\$200,000 and over	22,043	8.0	99.9
75 years and over	30,533	3.8				
Median age	35.8	male 34.6	female 36.8			
Race		%				
white	600,577	74.4				
black	57,281	7.1				
American Indian	2,444	0.3				
Asian, Pacific Islander	61,583	7.6				
other, multi-racial	85,763	10.6				
Hispanic	161,357	20.0				
Education (pers. 25+)	508,172	%				
no high school diploma	52,824	10.4				
high school graduate	97,581	19.2				
some college	132,976	26.2				
college degree	138,643	27.3				
graduate/professional	86,148	17.0				
Employment (pers. 16+)	600,519	%				
in civilian labor force	433,542	72.2				
employed	391,411	90.3				
unemployed	42,131	9.7				
in Armed Forces	198	0.0				
not in labor force	166,779	27.8				
			Household income			
				Median	Average	
			Household income	\$80,101	\$95,716	
			Family income	\$93,131	\$109,122	
			Non-family income	\$48,394	\$56,693	
			Vehicles available		%	
			without vehicle	10,254	3.7	
			1 vehicle available	76,269	27.7	
			2 vehicles available	127,567	46.4	
			3+ vehicles available	60,619	22.0	
			vehicles/household	1.91		
			Density			
			households per sq. mile		850.83	
			household population per sq. mile		2,465.85	
			Housing units	290,203	%	
			owner occupied	212,759	73.3	
			renter occupied	62,184	21.4	
			vacant units	15,260	5.3	

2014 Demographics in brief

30 Minute Market Area

Page 1 of 1

Alden Waterford
[Pgn0001]

Population				Households					
		815,794	%			281,101	%		
in households		804,882	98.7	families		209,613	74.6		
in families		717,163	87.9	non-families		71,488	25.4		
in non-families		87,719	10.8	with persons under 18		120,363	42.8		
in group quarters		10,912	1.3	1 person households		58,078	20.7		
noninstitutional GQ		6,425	0.8	2 person households		80,502	28.6		
under age 18		223,671	27.4	3-4 person households		99,584	35.4		
male		402,341	49.3	5+ person households		42,924	15.3		
female		413,453	50.7	Household size		2.86	Family size		
							3.42		
Age				Household income					
			%			%	cum %		
under 5 years		55,424	6.8	under \$15,000		13,763	4.9		
5 to 9 years		62,494	7.7	\$15,000 - 24,999		14,501	5.2		
10 to 14 years		65,416	8.0	\$25,000 - 34,999		18,625	6.6		
15 to 19 years		62,704	7.7	\$35,000 - 49,999		35,129	12.5		
20 to 24 years		50,255	6.2	\$50,000 - 74,999		47,707	17.0		
25 to 34 years		102,417	12.6	\$75,000 - 99,999		36,473	13.0		
35 to 44 years		119,224	14.6	\$100,000 - 124,999		30,865	11.0		
45 to 54 years		120,315	14.7	\$125,000 - 149,999		21,481	7.6		
55 to 64 years		92,670	11.4	\$150,000 - 199,999		31,307	11.1		
65 to 74 years		50,011	6.1	\$200,000 and over		31,237	11.1		
75 years and over		34,852	4.3				100.0		
Median age		39.4							
male		38.5							
female		40.2							
Race				Median			Average		
			%						
white		607,389	74.5	Household income			\$88,046		
black		57,770	7.1	Family income			\$102,354		
American Indian		2,474	0.3	Non-family income			\$53,576		
Asian, Pacific Islander		61,710	7.6						
other, multi-racial		86,450	10.6						
Hispanic		169,638	20.8						
Education (pers. 25+)				Vehicles available					
			%			%			
no high school diploma		54,846	10.6	without vehicle		10,394		3.7	
high school graduate		100,130	19.3	1 vehicle available		78,107		27.8	
some college		136,858	26.3	2 vehicles available		130,348		46.4	
college degree		139,695	26.9	3+ vehicles available		62,020		22.1	
graduate/professional		87,913	16.9	vehicles/household		1.94			
Employment (pers. 16+)				Density					
			%						
in civilian labor force		441,284	71.8	households per sq.mile				873	
employed		398,818	90.4	household population per sq.mile				2,501	
unemployed		42,466	9.6						
in Armed Forces		203	0.0						
not in labor force		173,304	28.2						
Housing units				Housing units					
			%			292,770		%	
owner occupied						217,855		74.4	
renter occupied						63,246		21.6	
vacant units						11,647		4.0	

2019 Demographics in brief

30 Minute Market Area

Page 1 of 1

Alden Waterford
[Pgn0001]

Population				Households			
		837,257	%			290,299	%
in households		826,343	98.7	families		216,965	74.7
in families		736,739	88.0	non-families		73,334	25.3
in non-families		89,604	10.7	with persons under 18		124,626	42.9
in group quarters		10,914	1.3	1 person households		59,953	20.7
noninstitutional GQ		6,425	0.8	2 person households		83,128	28.6
under age 18		214,204	25.6	3-4 person households		102,865	35.4
male		413,059	49.3	5+ person households		44,341	15.3
female		424,198	50.7	Household size	2.85	Family size	3.40
Age			%	Household income		%	cum %
under 5 years		55,017	6.6	under \$15,000	12,725	4.4	4.4
5 to 9 years		54,023	6.5	\$15,000 - 24,999	11,051	3.8	8.2
10 to 14 years		61,394	7.3	\$25,000 - 34,999	16,324	5.6	13.8
15 to 19 years		66,938	8.0	\$35,000 - 49,999	37,901	13.1	26.9
20 to 24 years		61,424	7.3	\$50,000 - 74,999	43,638	15.0	41.9
25 to 34 years		94,618	11.3	\$75,000 - 99,999	39,672	13.7	55.6
35 to 44 years		108,634	13.0	\$100,000 - 124,999	30,083	10.4	65.9
45 to 54 years		119,529	14.3	\$125,000 - 149,999	19,697	6.8	72.7
55 to 64 years		105,481	12.6	\$150,000 - 199,999	23,741	8.2	80.9
65 to 74 years		66,459	7.9	\$200,000 and over	55,457	19.1	100.0
75 years and over		43,730	5.2				
Median age	40.9	male 39.5	female 42.0				
					Median	Average	
Race			%	Household income	\$96,971	\$112,026	
white		624,345	74.6	Family income	\$113,620	\$126,436	
black		59,206	7.1	Non-family income	\$57,940	\$69,395	
American Indian		2,533	0.3	Vehicles available		%	
Asian, Pacific Islander		62,760	7.5	without vehicle		10,743	3.7
other, multi-racial		88,412	10.6	1 vehicle available		80,536	27.7
Hispanic		182,832	21.8	2 vehicles available		134,720	46.4
				3+ vehicles available		64,076	22.1
Education (pers. 25+)		538,399	%	vehicles/household		1.94	
no high school diploma		56,986	10.6	Density			
high school graduate		103,836	19.3	households per sq.mile			902
some college		141,374	26.3	household population per sq.mile			2,568
college degree		145,194	27.0				
graduate/professional		91,009	16.9				
Employment (pers. 16+)		648,096	%	Housing units		302,718	%
in civilian labor force		466,948	72.0	owner occupied		225,294	74.4
employed		421,501	90.3	renter occupied		65,005	21.5
unemployed		45,447	9.7	vacant units		12,393	4.1
in Armed Forces		220	0.0				
not in labor force		180,928	27.9				

Demographics Trends 2000-2014-2019

population
households

1

30 Minute Market Area

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Alden Waterford
[Pgn0001]

	2000 Census		2014 Estimate		2019 Projection	
Population	630,536	%	815,794	%	837,257	%
in households	620,434	98.4	804,882	98.7	826,343	98.7
in families	542,754	87.5	717,163	89.1	736,739	89.2
in non-families	77,680	12.5	87,719	10.9	89,604	10.8
in group quarters	10,102	1.6	10,912	1.3	10,914	1.3
in noninstitutional group quarters	4,874	48.2	6,425	58.9	6,425	58.9
under age 18	187,442	29.7	223,671	27.4	214,204	25.6
age 55 and over	92,785	14.7	177,533	21.8	215,670	25.8
age 65 and over	48,115	7.6	84,863	10.4	110,189	13.2
age 75 and over	22,608	3.6	34,852	4.3	43,730	5.2
Per capita income	29,298		35,668		38,937	
Median age	33.9		39.4		40.9	
male	32.8		38.5		39.5	
female	34.9		40.2		42.0	
Race						
white	520,725.0	82.6	607,389.0	74.5	624,345.0	74.6
black	33,380.0	5.3	57,770.0	7.1	59,206.0	7.1
American Indian	1,247.0	0.2	2,474.0	0.3	2,533.0	0.3
Asian, Pacific Islander	30,613.0	4.9	61,710.0	7.6	62,760.0	7.5
other, multi-racial	44,469.0	7.1	86,450.0	10.6	88,412.0	10.6
Hispanic	83,255.0	13.2	169,638.0	20.8	182,832.0	21.8
Diversity index	36		48		48	
Households	217,237	%	281,101	%	290,299	%
families	162,050	74.6	209,613	74.6	216,965	74.7
with person under 18	94,790	58.5	119,781	57.1	124,024	57.2
non-families	55,187	25.4	71,488	25.4	73,334	25.3
with person under 18	502	0.9	582	0.8	602	0.8
Median household income	71,100		88,046		96,971	
median family income	80,810		102,354		113,620	
median non-family income	43,964		53,576		57,940	
Household size	2.86		2.86		2.85	
family size	3.35		3.42		3.40	
non-family size	1.41		1.23		1.22	
Housing Units	225,565	%	292,770	%	302,718	%
owner-occupied	169,848	75.3	217,855	74.4	225,294	74.4
renter-occupied	47,389	21.0	63,246	21.6	65,005	21.5
vacant units	8,328	3.7	11,647	4.0	12,393	4.1

Alden Waterford
[Pgn0001]

	2000 Census		2014 Estimate		2019 Projection	
Household income	(households)	%	(households)	%	(households)	%
under \$10,000	6,432	3.0	8,878	3.2	8,774	3.0
\$10,000 - 14,999	5,477	2.5	4,885	1.7	3,951	1.4
\$15,000 - 19,999	5,860	2.7	6,671	2.4	6,133	2.1
\$20,000 - 24,999	6,968	3.2	7,830	2.8	4,918	1.7
\$25,000 - 29,999	8,200	3.8	9,426	3.4	8,050	2.8
\$30,000 - 34,999	8,689	4.0	9,199	3.3	8,274	2.9
\$35,000 - 39,999	9,084	4.2	13,201	4.7	9,663	3.3
\$40,000 - 44,999	9,719	4.5	11,059	3.9	16,701	5.8
\$45,000 - 49,999	9,712	4.5	10,869	3.9	11,537	4.0
\$50,000 - 59,999	20,183	9.3	19,044	6.8	18,667	6.4
\$60,000 - 74,999	28,887	13.3	28,663	10.2	24,971	8.6
\$75,000 - 99,999	36,934	17.0	36,473	13.0	39,672	13.7
\$100,000 - 124,999	24,632	11.3	30,865	11.0	30,083	10.4
\$125,000 - 149,999	12,804	5.9	21,481	7.6	19,697	6.8
\$150,000 - 199,999	12,066	5.6	31,307	11.1	23,741	8.2
\$200,000 and over	10,879	5.0	31,237	11.1	55,457	19.1
Aggregate income (\$M)	18,394		29,021		32,521	
Average income	\$84,671		\$103,242		\$112,026	
Median income	\$71,100		\$88,046		\$96,971	
Household size		%		%		%
All households	217,237		281,101		290,299	
1 person	44,645	20.6	58,078	20.7	59,953	20.7
2 persons	63,798	29.4	80,502	28.6	83,128	28.6
3 to 4 persons	77,952	35.9	99,584	35.4	102,865	35.4
5+ persons	30,713	14.1	42,924	15.3	44,341	15.3
Owner households	169,848	78.2	217,855	77.5	225,294	77.6
1 person	26,384	15.5	36,173	16.6	38,788	17.2
2 persons	50,651	29.8	64,257	29.5	70,451	31.3
3 to 4 persons	66,228	39.0	82,573	37.9	82,147	36.5
5+ persons	26,390	15.5	34,845	16.0	33,909	15.1
Renter households	47,389	21.8	63,246	22.5	65,005	22.4
1 person	18,261	38.5	21,905	34.6	21,165	32.6
2 persons	13,147	27.7	16,245	25.7	12,677	19.5
3 to 4 persons	11,724	24.7	17,011	26.9	20,718	31.9
5+ persons	4,323	9.1	8,079	12.8	10,432	16.0

**Alden Waterford
[Pgn0001]**

	2000 Census		2014 Estimate		2019 Projection	
Age, total population	630,536	%	815,794	%	837,257	%
under 5 years	53,597	8.5	55,424	6.8	55,017	6.6
5 to 9 years	54,340	8.6	62,494	7.7	54,023	6.5
10 to 14 years	50,775	8.1	65,416	8.0	61,394	7.3
15 to 19 years	43,940	7.0	62,704	7.7	66,938	8.0
20 to 24 years	35,855	5.7	50,255	6.2	61,424	7.3
25 to 34 years	96,947	15.4	102,417	12.6	94,618	11.3
35 to 44 years	114,673	18.2	119,224	14.6	108,634	13.0
45 to 54 years	86,700	13.8	120,315	14.7	119,529	14.3
55 to 64 years	44,670	7.1	92,670	11.4	105,481	12.6
65 to 74 years	25,507	4.0	50,011	6.1	66,459	7.9
75 to 84 years	16,510	2.6	23,251	2.9	29,373	3.5
85 years and over	6,098	1.0	11,601	1.4	14,357	1.7
Median age	33.9		39.4		40.9	
Age, male population	313,323	%	402,341	%	413,059	%
under 5 years	27,435	8.8	28,473	7.1	28,352	6.9
5 to 9 years	28,009	8.9	31,905	7.9	27,750	6.7
10 to 14 years	26,142	8.3	33,298	8.3	31,374	7.6
15 to 19 years	23,075	7.4	32,284	8.0	34,082	8.3
20 to 24 years	18,482	5.9	25,878	6.4	31,729	7.7
25 to 34 years	48,383	15.4	51,070	12.7	48,268	11.7
35 to 44 years	56,814	18.1	58,501	14.5	53,353	12.9
45 to 54 years	43,033	13.7	59,052	14.7	58,580	14.2
55 to 64 years	22,223	7.1	44,954	11.2	51,167	12.4
65 to 74 years	11,533	3.7	23,392	5.8	31,181	7.5
75 to 84 years	6,244	2.0	9,768	2.4	12,504	3.0
85 years and over	1,478	0.5	3,761	0.9	4,713	1.1
Median age	32.8		38.5		39.5	
Age, female population	317,231	%	413,453	%	424,198	%
under 5 years	26,162	8.2	26,951	6.5	26,665	6.3
5 to 9 years	26,331	8.3	30,589	7.4	26,273	6.2
10 to 14 years	24,633	7.8	32,118	7.8	30,020	7.1
15 to 19 years	20,865	6.6	30,420	7.4	32,856	7.7
20 to 24 years	17,373	5.5	24,377	5.9	29,695	7.0
25 to 34 years	48,564	15.3	51,347	12.4	46,350	10.9
35 to 44 years	57,859	18.2	60,723	14.7	55,281	13.0
45 to 54 years	43,667	13.8	61,263	14.8	60,949	14.4
55 to 64 years	22,447	7.1	47,716	11.5	54,314	12.8
65 to 74 years	13,974	4.4	26,619	6.4	35,278	8.3
75 to 84 years	10,266	3.2	13,483	3.3	16,869	4.0
85 years and over	4,620	1.5	7,840	1.9	9,644	2.3
Median age	34.9		40.2		42.0	

Alden Waterford
[Pgn0001]

	2000 Census		2014 Estimate		2019 Projection	
Education <small>persons age 25+</small>	391,526	%	519,442	%	538,399	%
no high school diploma	44,188	11.3	54,846	10.6	56,986	10.6
high school graduate	76,555	19.6	100,130	19.3	103,836	19.3
some college	81,225	20.7	99,920	19.2	102,974	19.1
associate degree	25,590	6.5	36,938	7.1	38,400	7.1
college degree	106,927	27.3	139,695	26.9	145,194	27.0
graduate/professional degree	57,041	14.6	87,913	16.9	91,009	16.9
Labor Force <small>persons age 16+</small>	461,816	%	614,791	%	648,096	%
in labor force	333,624	72.2	441,284	71.8	466,948	72.0
employed	321,493	96.4	398,818	90.4	421,501	90.3
unemployed	12,131	3.6	42,466	9.6	45,447	9.7
in Armed Forces	155	0.0	203	0.0	220	0.0
not in labor force	128,037	27.7	173,304	28.2	180,928	27.9
Vehicles available <small>households</small>	217,237	%	281,101	%	290,299	%
without vehicles	8,176	3.8	10,394	3.7	10,743	3.7
1 vehicle available	60,744	28.0	78,107	27.8	80,536	27.7
2 vehicles available	107,878	49.7	130,348	46.4	134,720	46.4
3 or more vehicles available	40,299	18.6	62,020	22.1	64,076	22.1
Average vehicles per household	1.90		1.94		1.94	
Total vehicles available	412,633		546,012		563,972	
Density						
Area (sq.miles)	315.70		321.83		321.83	
Population/sq mile	1,997.26		2,534.84		2,601.53	
Households/sq mile	688.11		873.44		902.02	
Household population/sq mile	1,965.26		2,500.94		2,567.62	
Aggregate income (M)/sq mile	58.52		90.41		101.30	
Aggregate household income(M)/sq mile	58.26		90.18		101.05	
Vehicles available/sq mile	1,307.04		1,696.57		1,752.38	

Minor category percent shares are based on the next higher category.

2014 Income by age of householder

30 Minute Market Area

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Alden Waterford
[Pgn0001]

Households	281,101	%	Median income	Percent of households with income above...				
				\$50,000	\$75,000	\$100,000	\$125,000	\$150,000
Age of householder								
under 25 years	7,125	2.5	\$49,638	38.5	22.0	13.7	9.4	6.8
25 to 34 years	42,700	15.2	\$70,354	62.8	42.3	27.5	17.5	12.1
35 to 44 years	60,873	21.7	\$104,399	79.7	63.3	49.4	36.5	26.7
45 to 54 years	66,002	23.5	\$110,832	82.8	67.8	54.1	40.1	29.6
55 to 64 years	52,882	18.8	\$97,605	72.4	56.4	43.6	33.2	27.1
65 to 74 years	29,607	10.5	\$75,647	61.7	43.5	31.1	22.6	15.9
75 years and over	21,797	7.8	\$49,475	39.3	23.5	15.3	10.9	8.4

Income by age of householder

Households	Total households		Householders <25 yrs		Householders 25 - 34 yrs		Householders 35 - 44 yrs	
	281,101	%	7,125	%	42,700	%	60,873	%
under \$10,000	8,831	3.1	651	9.1	1,766	4.1	1,083	1.8
\$10,000 - 19,999	11,464	4.1	582	8.2	1,758	4.1	1,473	2.4
\$20,000 - 29,999	17,112	6.1	927	13.0	3,131	7.3	1,840	3.0
\$30,000 - 39,999	22,290	7.9	1,004	14.1	4,396	10.3	3,280	5.4
\$40,000 - 49,999	21,770	7.7	989	13.9	3,951	9.3	3,915	6.4
\$50,000 - 59,999	18,978	6.8	439	6.2	3,712	8.7	4,003	6.6
\$60,000 - 74,999	28,633	10.2	739	10.4	5,061	11.9	5,938	9.8
\$75,000 - 99,999	36,744	13.1	587	8.2	6,304	14.8	8,511	14.0
\$100,000 - 124,999	30,813	11.0	305	4.3	4,265	10.0	7,825	12.9
\$125,000 - 150,000	21,444	7.6	185	2.6	2,312	5.4	5,963	9.8
\$150,000 - 199,999	31,262	11.1	324	4.5	3,060	7.2	8,281	13.6
\$200,000 and over	31,298	11.1	164	2.3	2,104	4.9	7,972	13.1

Households	Householders 45 - 54 yrs		Householders 55 - 64 yrs		Householders 65 - 74 yrs		Householders 75+ yrs	
	66,002	%	52,882	%	29,607	%	21,797	%
under \$10,000	1,539	2.3	1,770	3.3	679	2.3	1,150	5.3
\$10,000 - 19,999	1,038	1.6	2,008	3.8	1,310	4.4	2,851	13.1
\$20,000 - 29,999	1,794	2.7	2,833	5.4	2,312	7.8	3,209	14.7
\$30,000 - 39,999	2,846	4.3	3,624	6.9	3,032	10.2	2,851	13.1
\$40,000 - 49,999	3,348	5.1	3,361	6.4	2,975	10.0	2,274	10.4
\$50,000 - 59,999	3,372	5.1	3,015	5.7	2,363	8.0	1,678	7.7
\$60,000 - 74,999	6,574	10.0	5,464	10.3	3,014	10.2	1,772	8.1
\$75,000 - 99,999	9,045	13.7	6,780	12.8	3,673	12.4	1,782	8.2
\$100,000 - 124,999	9,220	14.0	5,518	10.4	2,537	8.6	962	4.4
\$125,000 - 150,000	6,934	10.5	3,203	6.1	1,962	6.6	534	2.4
\$150,000 - 199,999	9,724	14.7	6,537	12.4	2,344	7.9	755	3.5
\$200,000 and over	9,799	14.8	7,795	14.7	2,372	8.0	1,082	5.0

2019 Income by age of householder

30 Minute Market Area

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Alden Waterford
[Pgn0001]

Households	290,299	%	Median income	Percent of households with income above...				
Age of householder				\$50,000	\$75,000	\$100,000	\$125,000	\$150,000
under 25 years	7,669	2.6	\$59,801	45.2	29.8	19.9	14.7	11.6
25 to 34 years	39,885	13.7	\$78,033	65.1	47.2	30.7	20.6	15.8
35 to 44 years	54,883	18.9	\$116,366	82.1	68.2	53.3	41.2	32.6
45 to 54 years	62,873	21.7	\$122,567	85.7	72.3	57.4	44.3	35.0
55 to 64 years	58,679	20.2	\$110,243	75.5	61.2	47.7	37.3	32.1
65 to 74 years	38,367	13.2	\$92,227	70.1	53.8	40.1	31.0	24.0
75 years and over	27,753	9.6	\$61,766	47.8	32.2	21.4	16.2	13.6

Income by age of householder

Households	Total households		Householders <25 yrs		Householders 25 - 34 yrs		Householders 35 - 44 yrs	
	290,299	%	7,669	%	39,885	%	54,883	%
under \$10,000	8,717	3.0	572	7.5	1,704	4.3	917	1.7
\$10,000 - 19,999	10,010	3.4	462	6.0	1,411	3.5	1,071	2.0
\$20,000 - 29,999	12,878	4.4	701	9.1	2,231	5.6	1,083	2.0
\$30,000 - 39,999	17,817	6.1	896	11.7	3,261	8.2	2,008	3.7
\$40,000 - 49,999	28,075	9.7	1,253	16.3	4,538	11.4	4,022	7.3
\$50,000 - 59,999	18,589	6.4	511	6.7	3,220	8.1	3,180	5.8
\$60,000 - 74,999	25,050	8.6	666	8.7	3,917	9.8	4,460	8.1
\$75,000 - 99,999	39,868	13.7	759	9.9	6,558	16.4	8,173	14.9
\$100,000 - 124,999	29,996	10.3	402	5.2	4,044	10.1	6,623	12.1
\$125,000 - 150,000	19,672	6.8	234	3.1	1,936	4.9	4,701	8.6
\$150,000 - 199,999	23,698	8.2	376	4.9	2,034	5.1	5,518	10.1
\$200,000 and over	55,427	19.1	516	6.7	4,250	10.7	12,395	22.6

Households	Householders 45 - 54 yrs		Householders 55 - 64 yrs		Householders 65 - 74 yrs		Householders 75+ yrs	
	62,873	%	58,679	%	38,367	%	27,753	%
under \$10,000	1,394	2.2	1,972	3.4	806	2.1	1,387	5.0
\$10,000 - 19,999	682	1.1	1,842	3.1	1,225	3.2	2,793	10.1
\$20,000 - 29,999	982	1.6	2,218	3.8	1,690	4.4	2,848	10.3
\$30,000 - 39,999	1,724	2.7	3,029	5.2	2,423	6.3	2,778	10.0
\$40,000 - 49,999	3,500	5.6	4,433	7.6	4,271	11.1	3,573	12.9
\$50,000 - 59,999	3,025	4.8	3,193	5.4	2,891	7.5	2,102	7.6
\$60,000 - 74,999	5,414	8.6	5,208	8.9	3,353	8.7	2,210	8.0
\$75,000 - 99,999	9,341	14.9	7,917	13.5	5,249	13.7	2,999	10.8
\$100,000 - 124,999	8,229	13.1	6,067	10.3	3,524	9.2	1,465	5.3
\$125,000 - 150,000	5,874	9.3	3,057	5.2	2,681	7.0	724	2.6
\$150,000 - 199,999	6,627	10.5	4,810	8.2	2,782	7.3	811	2.9
\$200,000 and over	15,367	24.4	14,040	23.9	6,412	16.7	2,951	10.6

2014 Demographics in brief

Alden Waterford CCRC Area

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Kane, IL
(County 17089)

Population	522,567	%
in households	515,780	98.7
in families	448,516	85.8
in non-families	67,264	12.9
in group quarters	6,787	1.3
noninstitutional GQ	3,409	0.7
under age 18	145,213	27.8
male	260,448	49.8
female	262,119	50.2

Households	174,623	%
families	131,592	75.4
non-families	43,031	24.6
with persons under 18	74,024	42.4
1 person households	34,649	19.8
2 person households	51,313	29.4
3-4 person households	58,131	33.3
5+ person households	30,530	17.5
Household size	2.95	Family size 3.41

Age		%
under 5 years	37,634	7.2
5 to 9 years	40,451	7.7
10 to 14 years	41,694	8.0
15 to 19 years	39,523	7.6
20 to 24 years	32,718	6.3
25 to 34 years	64,314	12.3
35 to 44 years	72,609	13.9
45 to 54 years	74,132	14.2
55 to 64 years	59,365	11.4
65 to 74 years	35,377	6.8
75 years and over	24,750	4.7
Median age	35.7	male 34.6 female 36.7

Household income		%	cum %
under \$15,000	10,564	6.0	6.0
\$15,000 - 24,999	10,936	6.3	12.3
\$25,000 - 34,999	14,867	8.5	20.8
\$35,000 - 49,999	24,970	14.3	35.1
\$50,000 - 74,999	31,876	18.3	53.4
\$75,000 - 99,999	22,803	13.1	66.4
\$100,000 - 124,999	17,351	9.9	76.4
\$125,000 - 149,999	11,601	6.6	83.0
\$150,000 - 199,999	15,344	8.8	91.8
\$200,000 and over	14,311	8.2	100.0

	Median	Average
Household income	\$70,728	\$87,772
Family income	\$81,470	\$98,304
Non-family income	\$43,272	\$55,564

Race		%
white	390,420	74.7
black	29,803	5.7
American Indian	2,922	0.6
Asian, Pacific Islander	18,259	3.5
other, multi-racial	81,163	15.5

Vehicles available		%
without vehicle	7,959	4.6
1 vehicle available	47,406	27.1
2 vehicles available	76,960	44.1
3+ vehicles available	42,298	24.2
vehicles/household	1.98	

Hispanic	165,227	31.6
Education (pers. 25+)	330,547	%
no high school diploma	54,706	16.6
high school graduate	79,909	24.2
some college	90,349	27.3
college degree	69,251	21.0
graduate/professional	36,332	11.0

Density	
households per sq.mile	336
household population per sq.mile	992

Employment (pers. 16+)	393,019	%
in civilian labor force	278,008	70.7
employed	247,424	89.0
unemployed	30,584	11.0
in Armed Forces	53	0.0
not in labor force	114,958	29.2

Housing units	182,528	%
owner occupied	134,676	73.8
renter occupied	39,947	21.9
vacant units	7,905	4.3

2019 Demographics in brief

Alden Waterford CCRC Area

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Kane, IL
(County 17089)

Population	537,799	%
in households	531,012	98.7
in families	461,761	85.9
in non-families	69,251	12.9
in group quarters	6,787	1.3
noninstitutional GQ	3,409	0.6
under age 18	141,971	26.4
male	268,037	49.8
female	269,762	50.2

Age		%
under 5 years	38,001	7.1
5 to 9 years	36,697	6.8
10 to 14 years	39,819	7.4
15 to 19 years	42,344	7.9
20 to 24 years	38,172	7.1
25 to 34 years	61,494	11.4
35 to 44 years	67,109	12.5
45 to 54 years	72,908	13.6
55 to 64 years	65,738	12.2
65 to 74 years	44,506	8.3
75 years and over	31,011	5.8

Median age 36.8 male 35.6 female 38.1

Race		%
white	402,417	74.8
black	30,612	5.7
American Indian	3,000	0.6
Asian, Pacific Islander	18,671	3.5
other, multi-racial	83,099	15.5

Hispanic 177,906 33.1

Education (pers. 25+)		%
no high school diploma	56,731	16.6
high school graduate	82,864	24.2
some college	93,687	27.3
college degree	71,806	20.9
graduate/professional	37,678	11.0

Employment (pers. 16+)		%
in civilian labor force	292,045	70.7
employed	259,917	89.0
unemployed	32,128	11.0
in Armed Forces	55	0.0
not in labor force	120,723	29.2

Households	180,172	%
families	136,315	75.7
non-families	43,857	24.3
with persons under 18	76,673	42.6
1 person households	35,751	19.8
2 person households	52,943	29.4
3-4 person households	59,979	33.3
5+ person households	31,499	17.5
Household size	2.95	Family size 3.39

Household income		%	cum %
under \$15,000	9,627	5.3	5.3
\$15,000 - 24,999	8,395	4.7	10.0
\$25,000 - 34,999	13,212	7.3	17.3
\$35,000 - 49,999	27,508	15.3	32.6
\$50,000 - 74,999	29,442	16.3	48.9
\$75,000 - 99,999	25,321	14.1	63.0
\$100,000 - 124,999	17,300	9.6	72.6
\$125,000 - 149,999	10,852	6.0	78.6
\$150,000 - 199,999	12,597	7.0	85.6
\$200,000 and over	25,918	14.4	100.0

	Median	Average
Household income	\$76,119	\$94,527
Family income	\$86,835	\$104,642
Non-family income	\$46,102	\$63,088

Vehicles available		%
without vehicle	8,250	4.6
1 vehicle available	48,981	27.2
2 vehicles available	79,348	44.0
3+ vehicles available	43,593	24.2
vehicles/household	1.97	

Density	
households per sq.mile	346
household population per sq.mile	1,021

Housing units	188,599	%
owner occupied	138,651	73.5
renter occupied	41,521	22.0
vacant units	8,427	4.5

2014 Demographics in brief

Alden Waterford CCRC Area

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DuPage, IL
(County 17043)

Population			Households			
	923,978	%		343,707	%	
in households	911,838	98.7	families	243,183	70.8	
in families	776,442	84.0	non-families	100,524	29.2	
in non-families	135,396	14.7	with persons under 18	122,371	35.6	
in group quarters	12,140	1.3	1 person households	83,358	24.3	
noninstitutional GQ	6,088	0.7	2 person households	106,163	30.9	
under age 18	216,840	23.5	3-4 person households	112,661	32.8	
male	452,799	49.0	5+ person households	41,525	12.1	
female	471,179	51.0	Household size	2.65	Family size	3.19
Age		%	Household income			
under 5 years	54,408	5.9	under \$15,000	17,169	5.0	5.0
5 to 9 years	58,870	6.4	\$15,000 - 24,999	18,478	5.4	10.4
10 to 14 years	62,555	6.8	\$25,000 - 34,999	25,043	7.3	17.7
15 to 19 years	65,350	7.1	\$35,000 - 49,999	45,798	13.3	31.0
20 to 24 years	57,489	6.2	\$50,000 - 74,999	58,868	17.1	48.1
25 to 34 years	116,124	12.6	\$75,000 - 99,999	44,102	12.8	60.9
35 to 44 years	120,072	13.0	\$100,000 - 124,999	35,302	10.3	71.2
45 to 54 years	140,234	15.2	\$125,000 - 149,999	24,500	7.1	78.3
55 to 64 years	124,478	13.5	\$150,000 - 199,999	35,322	10.3	88.6
65 to 74 years	71,314	7.7	\$200,000 and over	39,125	11.4	100.0
75 years and over	53,084	5.7				
Median age	39.0					
male	37.5					
female	40.5					
Race		%		Median	Average	
white	720,367	78.0	Household income	\$79,119	\$104,011	
black	42,655	4.6	Family income	\$97,544	\$123,233	
American Indian	2,430	0.3	Non-family income	\$47,495	\$57,510	
Asian, Pacific Islander	92,720	10.0				
other, multi-racial	65,806	7.1	Vehicles available			%
Hispanic	129,496	14.0	without vehicle		13,225	3.8
			1 vehicle available		107,957	31.4
			2 vehicles available		150,313	43.7
			3+ vehicles available		72,212	21.0
			vehicles/household		1.90	
Education (pers. 25+)	625,306	%	Density			
no high school diploma	50,168	8.0	households per sq.mile			1,049
high school graduate	123,505	19.8	household population per sq.mile			2,784
some college	165,934	26.5				
college degree	177,383	28.4				
graduate/professional	108,316	17.3				
Employment (pers. 16+)	732,083	%	Housing units	356,442	%	
in civilian labor force	519,725	71.0	owner occupied	257,584	72.3	
employed	476,582	91.7	renter occupied	86,123	24.2	
unemployed	43,143	8.3	vacant units	12,735	3.6	
in Armed Forces	124	0.0				
not in labor force	212,234	29.0				

2019 Demographics in brief

Alden Waterford CCRC Area

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DuPage, IL
(County 17043)

Population				Households				
		943,336	%			353,715	%	
in households		931,196	98.7	families		250,666	70.9	
in families		792,945	84.1	non-families		103,049	29.1	
in non-families		138,251	14.7	with persons under 18		126,132	35.7	
in group quarters		12,140	1.3	1 person households		85,785	24.3	
noninstitutional GQ		6,088	0.6	2 person households		109,254	30.9	
under age 18		206,882	21.9	3-4 person households		115,942	32.8	
male		462,315	49.0	5+ person households		42,734	12.1	
female		481,021	51.0	Household size		2.63	Family size	3.16
Age				Household income				
			%			%	cum %	
under 5 years		54,105	5.7	under \$15,000		15,807	4.5	4.5
5 to 9 years		53,605	5.7	\$15,000 - 24,999		13,806	3.9	8.4
10 to 14 years		58,441	6.2	\$25,000 - 34,999		22,023	6.2	14.6
15 to 19 years		64,387	6.8	\$35,000 - 49,999		49,788	14.1	28.7
20 to 24 years		65,394	6.9	\$50,000 - 74,999		53,338	15.1	43.8
25 to 34 years		110,582	11.7	\$75,000 - 99,999		48,890	13.8	57.6
35 to 44 years		115,236	12.2	\$100,000 - 124,999		34,474	9.7	67.3
45 to 54 years		127,765	13.5	\$125,000 - 149,999		22,608	6.4	73.7
55 to 64 years		135,520	14.4	\$150,000 - 199,999		26,485	7.5	81.2
65 to 74 years		93,052	9.9	\$200,000 and over		66,496	18.8	100.0
75 years and over		65,249	6.9					
Median age		40.6	male 38.9	female		42.2		
Race				Income				
			%			Median	Average	
white		736,495	78.1	Household income		\$85,113	\$111,842	
black		43,523	4.6	Family income		\$104,821	\$133,535	
American Indian		2,477	0.3	Non-family income		\$50,579	\$59,074	
Asian, Pacific Islander		93,941	10.0					
other, multi-racial		66,900	7.1					
Hispanic		139,163	14.8					
Education (pers. 25+)				Vehicles available				
			%			%		
no high school diploma		51,947	8.0	without vehicle		13,539	3.8	
high school graduate		127,862	19.7	1 vehicle available		110,864	31.3	
some college		171,803	26.5	2 vehicles available		154,836	43.8	
college degree		183,642	28.4	3+ vehicles available		74,476	21.1	
graduate/professional		112,150	17.3	vehicles/household		1.90		
Employment (pers. 16+)				Density				
			%					
in civilian labor force		540,371	71.0	households per sq.mile		1,080		
employed		495,501	91.7	household population per sq.mile		2,843		
unemployed		44,870	8.3					
in Armed Forces		129	0.0					
not in labor force		220,696	29.0					
Housing units				Housing units				
			%			367,227	%	
owner occupied		265,971	72.4					
renter occupied		87,744	23.9					
vacant units		13,512	3.7					

2014 Demographics in brief

Alden Waterford CCRC Area

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Kendall, IL
(County 17093)

Population			117,204	%	Households			39,366	%
in households			116,996	99.8	families		31,170	79.2	
in families			104,653	89.3	non-families		8,196	20.8	
in non-families			12,343	10.5	with persons under 18		18,871	47.9	
in group quarters			208	0.2	1 person households		6,446	16.4	
noninstitutional GQ			35	0.0	2 person households		11,354	28.8	
under age 18			34,997	29.9	3-4 person households		15,113	38.4	
male			58,044	49.5	5+ person households		6,453	16.4	
female			59,160	50.5	Household size	2.97	Family size	3.36	
Age				%	Household income		%	cum %	
under 5 years			8,852	7.6	under \$15,000	1,295	3.3	3.3	
5 to 9 years			10,100	8.6	\$15,000 - 24,999	1,680	4.3	7.6	
10 to 14 years			10,142	8.7	\$25,000 - 34,999	2,040	5.2	12.7	
15 to 19 years			8,769	7.5	\$35,000 - 49,999	4,625	11.7	24.5	
20 to 24 years			6,434	5.5	\$50,000 - 74,999	7,917	20.1	44.6	
25 to 34 years			15,262	13.0	\$75,000 - 99,999	6,272	15.9	60.5	
35 to 44 years			19,887	17.0	\$100,000 - 124,999	5,295	13.5	74.0	
45 to 54 years			16,265	13.9	\$125,000 - 149,999	3,519	8.9	82.9	
55 to 64 years			11,033	9.4	\$150,000 - 199,999	4,200	10.7	93.6	
65 to 74 years			6,553	5.6	\$200,000 and over	2,523	6.4	100.0	
75 years and over			3,907	3.3					
Median age	34.4	male 33.6	female 35.1						
Race				%					
white			98,017	83.6					
black			6,714	5.7					
American Indian			322	0.3					
Asian, Pacific Islander			3,557	3.0					
other, multi-racial			8,594	7.3					
Hispanic			19,060	16.3					
Education (pers. 25+)			72,907	%					
no high school diploma			5,523	7.6					
high school graduate			18,233	25.0					
some college			24,555	33.7					
college degree			16,499	22.6					
graduate/professional			8,097	11.1					
Employment (pers. 16+)			85,997	%					
in civilian labor force			64,654	75.2					
employed			58,446	90.4					
unemployed			6,208	9.6					
in Armed Forces			131	0.2					
not in labor force			21,212	24.7					
					Housing units	40,908		%	
					owner occupied	33,810		82.6	
					renter occupied	5,556		13.6	
					vacant units	1,542		3.8	
					Household income	Median	Average		
					Household income	\$82,047	\$93,453		
					Family income	\$92,569	\$101,356		
					Non-family income	\$53,059	\$63,397		
					Vehicles available			%	
					without vehicle		800	2.0	
					1 vehicle available		8,754	22.2	
					2 vehicles available		20,167	51.2	
					3+ vehicles available		9,645	24.5	
					vehicles/household		2.07		
					Density				
					households per sq.mile			123	
					household population per sq.mile			365	

2019 Demographics in brief

Alden Waterford CCRC Area

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Kendall, IL
(County 17093)

Population			Households			
	122,473	%		41,291	%	
in households	122,265	99.8	families	32,733	79.3	
in families	109,366	89.3	non-families	8,558	20.7	
in non-families	12,899	10.5	with persons under 18	19,818	48.0	
in group quarters	208	0.2	1 person households	6,761	16.4	
noninstitutional GQ	35	0.0	2 person households	11,909	28.8	
under age 18	33,924	27.7	3-4 person households	15,852	38.4	
male	60,655	49.5	5+ person households	6,769	16.4	
female	61,818	50.5	Household size	2.96	Family size	3.34
Age		%	Household income		% cum %	
under 5 years	8,403	6.9	under \$15,000	1,222	3.0 3.0	
5 to 9 years	8,726	7.1	\$15,000 - 24,999	1,269	3.1 6.0	
10 to 14 years	10,010	8.2	\$25,000 - 34,999	1,843	4.5 10.5	
15 to 19 years	10,061	8.2	\$35,000 - 49,999	4,749	11.5 22.0	
20 to 24 years	8,689	7.1	\$50,000 - 74,999	7,041	17.1 39.0	
25 to 34 years	12,868	10.5	\$75,000 - 99,999	7,174	17.4 56.4	
35 to 44 years	18,232	14.9	\$100,000 - 124,999	4,943	12.0 68.4	
45 to 54 years	18,529	15.1	\$125,000 - 149,999	3,613	8.8 77.1	
55 to 64 years	13,163	10.7	\$150,000 - 199,999	3,801	9.2 86.4	
65 to 74 years	8,373	6.8	\$200,000 and over	5,636	13.6 100.0	
75 years and over	5,419	4.4				
Median age	36.4	male 35.3 female 37.4				
Race		%		Median	Average	
white	102,515	83.7	Household income	\$87,442	\$99,580	
black	6,995	5.7	Family income	\$100,693	\$110,311	
American Indian	336	0.3	Non-family income	\$56,369	\$58,536	
Asian, Pacific Islander	3,691	3.0	Vehicles available		%	
other, multi-racial	8,936	7.3	without vehicle	837	2.0	
Hispanic	20,852	17.0	1 vehicle available	9,178	22.2	
			2 vehicles available	21,156	51.2	
			3+ vehicles available	10,120	24.5	
			vehicles/household	2.07		
Education (pers. 25+)	76,584	%	Density			
no high school diploma	5,802	7.6	households per sq.mile		129	
high school graduate	19,151	25.0	household population per sq.mile		382	
some college	25,795	33.7				
college degree	17,331	22.6				
graduate/professional	8,505	11.1				
Employment (pers. 16+)	92,901	%	Housing units	42,940	%	
in civilian labor force	69,858	75.2	owner occupied	35,483	82.6	
employed	63,152	90.4	renter occupied	5,808	13.5	
unemployed	6,706	9.6	vacant units	1,649	3.8	
in Armed Forces	142	0.2				
not in labor force	22,901	24.7				

2014 Demographics in brief

Alden Waterford CCRC Area

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Will, IL
(County 17197)

Population				Households			
680,392				229,706			
			%				%
in households	671,845		98.7	families	177,927		77.5
in families	595,933		87.6	non-families	51,779		22.5
in non-families	75,912		11.2	with persons under 18	101,314		44.1
in group quarters	8,547		1.3	1 person households	42,604		18.5
noninstitutional GQ	2,194		0.3	2 person households	65,449		28.5
under age 18	184,986		27.2	3-4 person households	83,942		36.5
male	337,946		49.7	5+ person households	37,711		16.4
female	342,446		50.3	Household size	2.92	Family size	3.35
Age			%	Household income		%	cum %
under 5 years	44,391		6.5	under \$15,000	11,606	5.1	5.1
5 to 9 years	50,502		7.4	\$15,000 - 24,999	13,270	5.8	10.8
10 to 14 years	55,293		8.1	\$25,000 - 34,999	16,158	7.0	17.9
15 to 19 years	53,977		7.9	\$35,000 - 49,999	28,751	12.5	30.4
20 to 24 years	43,487		6.4	\$50,000 - 74,999	41,095	17.9	48.3
25 to 34 years	77,561		11.4	\$75,000 - 99,999	32,541	14.2	62.4
35 to 44 years	98,438		14.5	\$100,000 - 124,999	27,362	11.9	74.3
45 to 54 years	104,632		15.4	\$125,000 - 149,999	18,046	7.9	82.2
55 to 64 years	77,487		11.4	\$150,000 - 199,999	23,869	10.4	92.6
65 to 74 years	44,665		6.6	\$200,000 and over	17,008	7.4	100.0
75 years and over	29,959		4.4				
Median age	36.6	male	35.5	female	37.6		
Race			%				
white	517,333		76.0				
black	75,882		11.2				
American Indian	1,707		0.3				
Asian, Pacific Islander	30,941		4.5				
other, multi-racial	54,529		8.0				
Hispanic	111,378		16.4				
Education (pers. 25+)	432,742		%				
no high school diploma	42,014		9.7				
high school graduate	121,362		28.0				
some college	133,530		30.9				
college degree	88,032		20.3				
graduate/professional	47,804		11.0				
Employment (pers. 16+)	517,471		%				
in civilian labor force	363,041		70.2				
employed	323,463		89.1				
unemployed	39,578		10.9				
in Armed Forces	83		0.0				
not in labor force	154,347		29.8				
				Household income			
				Median			
				Average			
				Household income	\$78,425		\$90,387
				Family income	\$89,109		\$99,233
				Non-family income	\$43,397		\$59,990
				Vehicles available			%
				without vehicle	9,234		4.0
				1 vehicle available	56,140		24.4
				2 vehicles available	106,085		46.2
				3+ vehicles available	58,247		25.4
				vehicles/household	2.03		
				Density			
				households per sq.mile			274
				household population per sq.mile			803
				Housing units			
				238,495			%
				owner occupied	191,632		80.4
				renter occupied	38,074		16.0
				vacant units	8,789		3.7

2019 Demographics in brief

Alden Waterford CCRC Area

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Will, IL
(County 17197)

Population			Households			
	697,177	%		237,548	%	
in households	688,630	98.8	families	184,252	77.6	
in families	610,822	87.6	non-families	53,296	22.4	
in non-families	77,808	11.2	with persons under 18	104,913	44.2	
in group quarters	8,547	1.2	1 person households	44,059	18.5	
noninstitutional GQ	2,194	0.3	2 person households	67,683	28.5	
under age 18	174,164	25.0	3-4 person households	86,808	36.5	
male	346,249	49.7	5+ person households	38,998	16.4	
female	350,928	50.3	Household size	2.90	Family size	3.32
Age		%	Household income		% cum %	
under 5 years	44,759	6.4	under \$15,000	10,625	4.5 4.5	
5 to 9 years	43,433	6.2	\$15,000 - 24,999	10,084	4.2 8.7	
10 to 14 years	49,791	7.1	\$25,000 - 34,999	15,047	6.3 15.1	
15 to 19 years	55,630	8.0	\$35,000 - 49,999	31,378	13.2 28.3	
20 to 24 years	53,553	7.7	\$50,000 - 74,999	36,229	15.3 43.5	
25 to 34 years	78,087	11.2	\$75,000 - 99,999	36,081	15.2 58.7	
35 to 44 years	84,954	12.2	\$100,000 - 124,999	26,059	11.0 69.7	
45 to 54 years	103,341	14.8	\$125,000 - 149,999	17,629	7.4 77.1	
55 to 64 years	89,605	12.9	\$150,000 - 199,999	19,163	8.1 85.2	
65 to 74 years	56,411	8.1	\$200,000 and over	35,253	14.8 100.0	
75 years and over	37,613	5.4				
Median age	37.9	male 36.3 female 39.4				
Race		%		Median	Average	
white	530,873	76.1	Household income	\$84,499	\$97,423	
black	77,448	11.1	Family income	\$96,026	\$106,738	
American Indian	1,747	0.3	Non-family income	\$46,209	\$65,220	
Asian, Pacific Islander	31,490	4.5	Vehicles available		%	
other, multi-racial	55,619	8.0	without vehicle	9,587	4.0	
Hispanic	120,093	17.2	1 vehicle available	58,131	24.5	
			2 vehicles available	109,653	46.2	
			3+ vehicles available	60,177	25.3	
Education (pers. 25+)	450,011	%	vehicles/household	2.03		
no high school diploma	43,698	9.7	Density			
high school graduate	126,184	28.0	households per sq.mile		284	
some college	138,869	30.9	household population per sq.mile		823	
college degree	91,543	20.3				
graduate/professional	49,717	11.0				
Employment (pers. 16+)	545,971	%	Housing units	246,924	%	
in civilian labor force	383,157	70.2	owner occupied	197,870	80.1	
employed	341,395	89.1	renter occupied	39,678	16.1	
unemployed	41,762	10.9	vacant units	9,376	3.8	
in Armed Forces	88	0.0				
not in labor force	162,726	29.8				

SECTION IV – SERVICE SPECIFIC REVIEW CRITERIA *Continued vi*

Criterion 1125.330 – 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.**

The problem this project is addressing is that residents in the sheltered care facility (Alden Courts), which is devoted to memory care, are requiring more care than can be provided in the sheltered care context. These residents are currently being transferred out of the campus for licensed nursing services. The campus's skilled facility (Alden of Waterford), as well as most free-standing nursing facilities, does not have the specialized memory care programming that these dementia residents require.

This project, the conversion of sheltered care beds into nursing beds through the establishment of the nursing category of care, has limited alternatives as it is predicated on the use of existing space in an existing ongoing operation, i.e., Alden Courts of Waterford. Moreover, this is not a freestanding facility where beds are to be converted between levels of care. Part of this project is the related and connected Alden of Waterford, a 99-bed skilled

ATTACHMENT-11

SECTION IV – SERVICE SPECIFIC REVIEW CRITERIA *Continued vii*

nursing facility, Alden Gardens of Waterford that is also a sheltered care licensed facility yet not specialized for dementia, and a variety of independent living options from apartments to villas and duplexes. One of the single most important determinants of alternatives is that the Alden Courts building is now, and will remain, for the care and service of those with memory impairment. As such, the alternatives to this project are limited to: continuing to discharge and transfer memory care residents out of the facility should their medical needs outweigh their programmatic needs; convert the entire building from sheltered care to nursing; and pursue the project as being proposed.

As the proposed project is not only in an existing licensed sheltered care building, but also within a campus setting, it is fair to assess the alternative of utilizing a portion of the existing nursing building, Alden of Waterford, for this nursing memory care unit. The foremost reason this was not considered is the fact that Alden of Waterford is a rehabilitative model of care, which is more short term in nature, and with the lower average length of stay there is more turn around, which produces higher peak census days than the overall average utilization indicates. Therefore, a total of 20 beds have not typically been available. Moreover, it has been Alden's approach to not provide one building that can do everything, but rather to develop a building around a more singular purpose as it has on its Waterford, DesPlaines, Shorewood and Huntley campuses. In each of these, the latest of the Alden developments, there is a nursing rehabilitative building and a separate memory care building. When possible and needed it has separate assisted living or independent living (low income/tax credit) buildings also. Specifically, at the Waterford campus it has sheltered care for the geriatric population, sheltered care for those with memory care issues and nursing care for the geriatric (rehabilitative/short term). The component missing is the nursing beds for those with memory care issues.

ATTACHMENT-11

SECTION IV – SERVICE SPECIFIC REVIEW CRITERIA Continued viii

Alden, through its more than 30 years of long-term care experience just in Illinois alone, has developed a model of health care delivery for today's seniors that is not a one size fits all. Alden has developed a program for each level of care and has then designed a type of building that best suits that program. Memory care units need to be locked units due to the greater propensity for elopement. These units are also typically in a one story building. Residents with memory issues are confused easily; the busier and noisier life in a rehabilitative unit would perpetuate and worsen agitation and sundowners, where residents with Alzheimer's Disease or Related Dementia (ADRD) become most confused, agitated or combative. Likewise, for general geriatric care residents to be in a smaller, locked unit may not promote the quick healing and recovery that is desired. Rehabilitative care is for residents who are trying to return home or to a lesser level of care. Memory care residents are much more long-term as ASRD is chronic and progressive. Shiny floors and bright rooms promote recovery for general geriatric residents while shiny floors or changing floor coverings can cause confusion for memory care residents. Changing lighting can also negatively influence mood and behavior in those with cognitive or memory care issues. In consideration of these issues, the rehabilitative nursing unit, Alden of Waterford, is a three story building designed for the betterment of recovery, and the Alden Courts of Waterford was designed all on one level with smaller households, turn-around areas for wanderers, secure outdoor areas for each household, and locked units. It should be pointed out that even though a resident's medical needs progress to need nursing care, should they have memory care issues, the benefit of a unit specifically designed for ADRD care and treatment is essential. As such, the conversion of beds from within the nursing building would not be easily accomplished with the larger unit sizes, and ultimately it does not follow Alden's model of delivering health care to both populations. With this understanding the following alternatives

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SECTION IV – SERVICE SPECIFIC REVIEW CRITERIA Continued ix

were considered.

ALTERNATIVE #1 Lesser Scope:

The alternative of lesser scope is to maintain the status quo of referring out our residents and potential admissions that are in need of nursing care yet suffer with memory care issues. The size of the proposed unit is only 20 beds and predicated on the fact that physical plant design was created into three distinct units. To apply for fewer beds would require dividing and already established small unit. Life safety and IDPH code requirements of dividing the unit would render the alternative of less than 20 beds not viable.

Cost

There are not any capital cost to this alternative.

Patient Access

The reason for the project is to improve access to memory care for residents who also need nursing level of care. An alternative of lesser scope would not improve patient access.

Quality

To refer residents and potential admissions out of the campus setting renders the Applicant powerless to influence quality. It should be known that Alden, through all of its related facilities, tries to follow best practices of not mixing transitional rehabilitative residents with memory impaired residents and similarly avoids combining populations with different needs in the lower level of care of assisted/sheltered care.

Financial Benefits

Continuing to refer residents and potential admissions outside of Alden Courts of Waterford and, therefore, out of Waterford CCRC campus, does not result in any financial benefits for the residents and displaces them from where they have been living.

ATTACHMENT-11

SECTION IV – SERVICE SPECIFIC REVIEW CRITERIA *Continued x*

ALTERNATIVE #2 Greater Scope:

The existing 66-bed Waterford Courts building is arranged as three wings with 22 beds each. The proposed project would convert one wing to a 20-bed nursing unit. A project of greater scope could convert two of the three sheltered care wings to skilled nursing care or convert the entire building. On all new projects Alden designs its memory care units as nursing from the start. This provides the greatest flexibility of care for every stage related to memory impairment.

Cost

The cost of the project would triple as the entire building, as opposed to a single unit, would have to meet skilled nursing home licensure and life safety standards. Thus, just to convert the three wings, not counting the core elements, could cost in excess of \$1,454,226 (3 times the project cost).

Patient Access

Patient accessibility is greatly improved anytime there is a higher level of care as it can easily accommodate the lesser levels of care without HFSRB or IDPH approvals. However, large nursing homes are not the answer as the long-term care industry has seen a significant reduction in beds over the past 5-10 years. As the population ages, the baby boomer population has a different outlook on what it wants and how care should be delivered. This population and their family members are more educated and need more personalization of care and less of a one size fits all approach.

Quality

From the Applicant's perspective, having the ability to provide an additional level of care within the entire continuum of care improves accessibility.

ATTACHMENT-11

SECTION IV – SERVICE SPECIFIC REVIEW CRITERIA *Continued xi*

Financial Benefits

As Alden Courts is an existing facility, it is important to recognize that historically the facility has effectively only operated two of the three sheltered care memory units, as it had an average daily census of 42.7 beds (31,224 total patient days for 24 months ending June 2015). Refer to **ATTACHMENT-11A** for the facility's patient days over the last 24 months. Therefore, there is no need, nor financial benefit, to convert any more than one unit if a true continuum is to be maintained. If the project was solely profit driven, then the entire building would be converted as it could admit more residents with needs for higher levels of care as those levels typically pay more than the lesser levels of care. As such, this Applicant will maintain caring for its existing resident population. For purposes of evaluating alternatives, a project of greater scope with the existing limitations of size and current resident population, there is neither financial gain nor loss for this alternative and no need.

ALTERNATIVE #3 Pursuing a Joint Venture or Utilizing Other Health Care Resources.

In many ways this project is part of a joint venture. There are three separately licensed facilities, although all owned by Alden, that are working together to provide the most appropriate level and type of care for residents. All three licensed facilities and two unlicensed entities are each best at their respective niche, yet jointly venturing to find the best fit to care for their residents. This alternative was considered and is more fully explored under alternative #4, the project as proposed.

ALTERNATIVE #4 Project As Proposed

The project as being proposed combines the utilization of an existing health care resource in a way that optimizes a minimal addition of nursing beds and the overall utilization of not only

ATTACHMENT-11

SECTION IV – SERVICE SPECIFIC REVIEW CRITERIA *Continued xii*

the existing health care resource, Alden Courts of Waterford, but also the entire Alden Waterford continuum of care retirement campus.

Cost

This project has a cost of \$484,742 for 20 nursing beds in 9,254 gross square feet. That equates to \$52.38 per gross square feet.

Patient Access

As documented, approximately 56% of the historical referrals to Alden Courts of Waterford have come from within the Waterford CCRC. The Applicant also states that 12 existing patients were discharged out of the campus to other area facilities within the most recent 12 months because the proposed specialized level of care is not available. Additionally, the Applicant has had to decline approximately 24 potential admissions due to the lack of this specialized level of care within the same time period. From the Applicant's experience, the proposed alternative would improve access. Refer to **ATTACHMENT-10C**.

The Applicant also commissioned a market study (performed by **Laurel Research Associates**) that found the proposed project would require a capture rate of only 0.3% and a total inventory penetration rate of 7%, both well within industry norms. It also concluded expanding need and demand for memory care and nursing services within a five year projected population. Thus, with a modest 20-bed establishment being proposed, patient access to nursing services for those with memory care issues would be improved and needed.

Quality

The issue as presented here is about accessibility and not quality. The Applicant states and continues to offer its commitment to the highest quality in care and in physical plant environment. This alternative would continue the high quality already provided at all the levels of care within the Alden Waterford CCRC.

ATTACHMENT-11

SECTION IV – SERVICE SPECIFIC REVIEW CRITERIA Continued xiii

Financial Benefits

Typically, when there is an establishment of a service it is new construction or a massive renovation project. As such, establishment project's need to be of a minimum size to effectively realize economies-of-scale, which historically is a minimum of 65-75 beds that can still afford to meet IDPH and life safety code standards. IDPH has a norm of between 435 - 713 gross square feet per bed and a norm of \$226 per gross square feet according to the 3rd quartile of the RS Means report (Michael Constantino, IHFSRB Chief of Project Review July 24, 2015). Appended as ATTACHMENT-11B, is a copy of this correspondence. Thus, even to construct a 20-bed facility could cost \$1,966,200 to \$3,222,760 just for construction and contingencies without any soft costs. Utilizing the existing available space provides many financial benefits beyond mere hard construction project costs.

Alternative Summary Matrix

Alternatives	Cost	Patient Access	Quality	Financial Benefit
Lesser Scope	\$0.00	No nursing services for residents with Memory issues within the Waterford campus and continues limited access overall to proposed services	No Change	No financial benefit as lesser scope equates to no additional nursing services for those with memory care issues.
Greater Scope	\$1,454,226	Greatly improves access with potential for not maintaining complete age-in-place concept.	Improves	Tremendous potential for benefit as nursing level of care is more expensive but this is at the expense of an age-in-place concept
Joint Venture	\$0.00	Continues limit on access as this alternative is similar to maintaining the status quo or that of lesser scope.	No Change	No financial benefit to continuing to transfer residents out for nursing care for those with memory care issues
Proposed Project	\$484,742	Improves access and improves CCRC's ability to allow residents with Memory care to age-in-place.	Improves	Balances financial benefit of adding this additional level of care with the ability to also allow for Medicaid/Medicare residents who have memory care issues an appropriate setting to receive those services

ATTACHMENT-11

SECTION IV – SERVICE SPECIFIC REVIEW CRITERIA Continued xiv

3. The applicant shall provide empirical evidence, including quantified outcome data that verifies improved quality of care, as available.

The issue as presented here is about accessibility and not quality. The Applicant states and continues to offer its commitment to the highest quality in care and in physical plant environment; therefore, this issue is not germane.

ATTACHMENT-11

Alden Courts of Waterford
Patient Days

3 Neighborhoods

A = Arboretum Highest level of care
 B = Botanical Middle stage
 C = Countryside Early stage

	A	B	C	Total
July 2013	400	534	375	1309
August 2013	398	534	374	1306
September 2013	389	537	345	1271
October 2013	485	519	337	1341
November 2013	557	505	362	1424
December 2013	510	558	377	1445
January 2014	428	531	347	1306
February 2014	336	462	308	1106
March 2014	372	568	350	1290
April 2014	363	523	419	1305
May 2014	351	490	519	1360
June 2014	330	467	531	1328
	4919	6228	4644	15791
July 2014	356	580	578	1514
August 2014	349	589	610	1548
September 2014	293	579	554	1426
October 2014	281	619	513	1413
November 2014	200	570	467	1237
December 2014	170	544	499	1213
January 2015	207	447	529	1183
February 2015	168	410	478	1056
March 2015	186	453	554	1193
April 2015	173	427	627	1227
May 2015	155	451	634	1240
June 2015	128	450	605	1183
	2666	6119	6648	15433
	A	B	C	TOTAL
July 2013 - June 2015	7585	12347	11292	31224

John Kniery

From: Constantino, Mike [Mike.Constantino@Illinois.gov]
Sent: Friday, July 24, 2015 1:19 PM
To: John Kniery
Subject: RE: Means for LTC

\$226 GSF

From: John Kniery [mailto:JKniery@foleyandassociates.com]
Sent: Friday, July 24, 2015 12:06 PM
To: Constantino, Mike
Subject: Means for LTC

Mike do you have the Means number for LTC for Kane County, Zip area 60504? Many thanks...!

John P. Kniery

Health Care Consultant
Foley & Associates, Inc.
133 So. Fourth Street, Suite 200
Springfield, Illinois 62701
217.544.1551 - Office
217.544.3615 - Facsimile
foley@foleyandassociates.com

jkniery@foleyandassociates.com

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GENERAL LONG-TERM CARE

Criterion 1125.520 – Background of the Applicant

The applicant shall provide:

1. A listing of all health care facilities owned or operated by the applicant, including licensing, and certification if applicable.

ATTACHMENT-12A identifies all nursing facilities owned and operated by the Applicant or its related entities. A copy of all the aforementioned facilities' licenses and certifications as applicable are appended under **ATTACHMENT-12B**.

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.

The required documentation with regards to adverse action, as required under 1125.520, c) 2, is appended as **ATTACHMENT-12C**. It should be noted that the ownership and operating entities of the proposed Alden Courts of Waterford do not have any adverse action taken against them.

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.**

The above requested authorization for the HFSRB and the DPH access to information is appended as **ATTACHMENT-12D**.

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.

The Applicant's have not submitted any other applications in calendar year 2015.

ATTACHMENT-12



- [Who Regulates Nursing Homes?](#)
- [A Listing of Illinois Nursing Homes](#)
- [How to Select a Nursing Home](#)
- [Centers for Medicare and Medicaid Services Nursing Home Database](#)
- [Quarterly Reports of Nursing Home Violation](#)
- [Illinois Law on Advance Directives](#)
- [Nursing Homes with No Certification Deficiencies](#)
- [Nursing Home Care Act](#)
- [Illinois Health Care Worker Registry](#)
- [Centers for Medicare and Medicaid Services Nursing Home Quality Initiative](#)

Facility Information

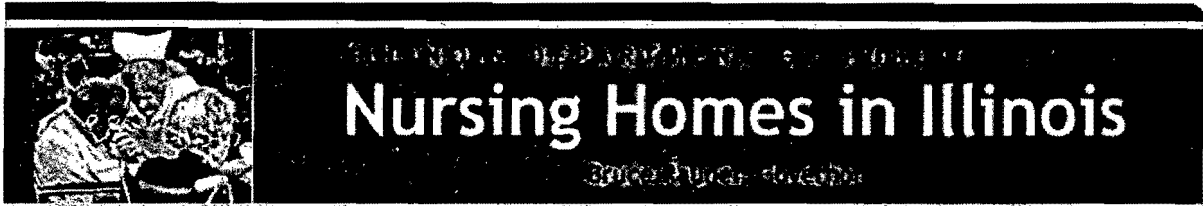
ALDEN COURTS OF WATERFORD **1991 RANDI DRIVE** **AURORA IL 60505**

ADMINISTRATOR: LAUREN PAC
 TELEPHONE: 630-851-1466

Licensee ID	:0044180
Facility ID	:6015507
Skilled beds	:0
Intermediate beds	:0
Icf-dd beds	:0
Shelter Care beds	:66
Community Living beds	:0
Under 22 beds	:0
Medicare beds	:0
Medicare/Medicaid beds	:0
Medicaid beds	:0
Fax	:630-585-1008
County	:Kane
Medicare Certification Number	:
Medicare Skilled Certification Number	:
Medicaid ICF/DD Certification Number	:
Medicaid DD Certification Number	:
Medicaid Swing Bed Certification Number	:

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- [Illinois Health Care Worker Registry](#)
- [Centers for Medicare and Medicaid Services Nursing Home Quality Initiative](#)

Ownership Information

ALDEN COURTS OF WATERFORD

1991 RANDI DRIVE
 AURORA IL 60506
 ADMINISTRATOR: LAUREN PAC
 TELEPHONE: 630-851-1466

Licensee Name:
ALDEN COURTS OF WATERFORD, L.L.C.

Persons with 5 percent or greater interest in licensee:

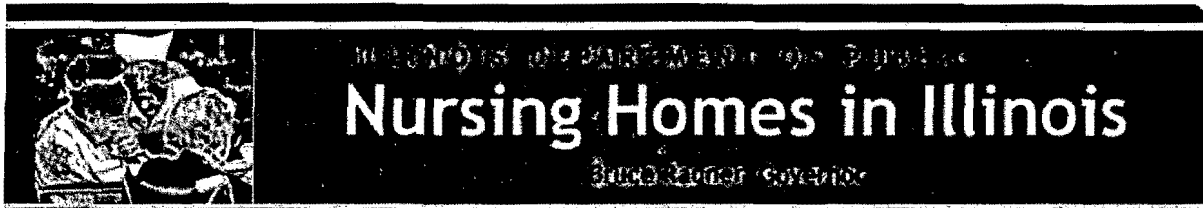
Name	% of Ownership
LAURENMAGNUSSON	13.35
RANDISCHLOSSBERG-SCH	13.35
FLOYDASCHLOSSBERG	35.70
AUDRAELISCO	13.35

Ownership Type:
 LIMITED LIABILITY CO

Click on individual's name to see other ownership interests.

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Ownership Information

ALDEN COURTS OF WATERFORD

1991 RANDI DRIVE
AURORA IL 60505

ADMINISTRATOR LAUREN PAC
TELEPHONE 630-851-1466

LAUREN MAGNUSSON

has ownership interest in the following long term care entities

Facility	Percentage Owned
<u>ALDEN VILLAGE NORTH</u>	20.77
<u>ALDEN POPLAR CREEK REHAB & HCC</u>	20.77
<u>ALDEN VILLAGE HEALTH FACILITY</u>	20.77
<u>ALDEN ESTATES OF BARRINGTON</u>	20.77
<u>HEATHER HEALTH CARE CENTER</u>	20.77
<u>ALDEN LAKELAND REHAB & HCC</u>	20.77
<u>ALDEN LONG GROVE REHAB & HCC</u>	20.77
<u>ALDEN ESTATES OF SKOKIE</u>	20.77
<u>ALDEN ESTATES OF NAPERVILLE</u>	20.77
<u>ALDEN TERRACE OF MCHENRY REHAB</u>	20.77
<u>ALDEN LINCOLN REHAB & H C CTR</u>	20.77
<u>ALDEN WENTWORTH REHAB & HCC</u>	20.77
<u>ALDEN PRINCETON REHAB & HCC</u>	20.77
<u>ALDEN TOWN MANOR REHAB & HCC</u>	20.77
<u>ALDEN ESTATES OF EVANSTON</u>	20.77
<u>ALDEN NORTHMOOR REHAB & HCC</u>	20.77
<u>ALDEN DES PLAINES REHAB & HC</u>	20.77
<u>ALDEN NORTH SHORE REHAB & HCC</u>	20.77
<u>ALDEN OF WATERFORD</u>	20.77
<u>ALDEN TRAILS</u>	20.77
<u>ALDEN OF OLD TOWN EAST</u>	20.77
<u>ALDEN OF OLD TOWN WEST</u>	20.77
<u>ALDEN ORLAND PARK REHAB & HCC</u>	20.77
<u>ALDEN COURTS OF WATERFORD</u>	13.35
<u>ALDEN GARDENS OF WATERFORD</u>	13.35
<u>ALDEN GARDEN CTS OF DESPLAINES</u>	20.77
<u>ALDEN SPRINGS</u>	20.77
<u>ALDEN ESTATES OF SHOREWOOD</u>	20.77

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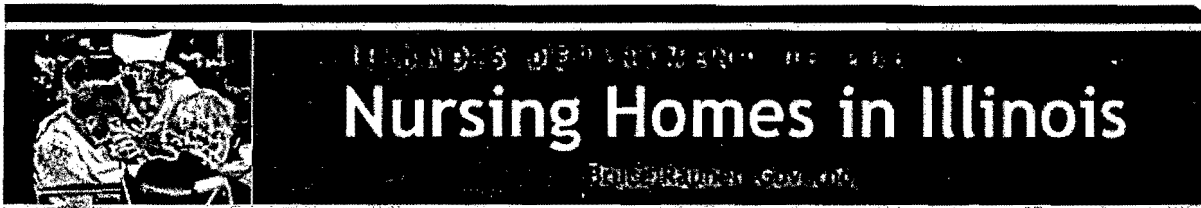
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Ownership Information

ALDEN COURTS OF WATERFORD

1991 RANDI DRIVE
AURORA IL 60505

ADMINISTRATOR LAUREN PAC
TELEPHONE 630-851-1466

RANDI SCHLOSSBERG-SCH

has ownership interest in the following long term care entities

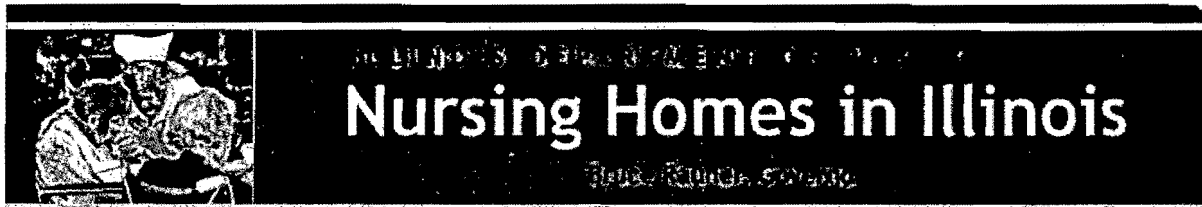
Facility	Percentage Owned
<u>ALDEN VILLAGE NORTH</u>	20.77
<u>ALDEN POPLAR CREEK REHAB & HCC</u>	20.77
<u>ALDEN VILLAGE HEALTH FACILITY</u>	20.77
<u>ALDEN ESTATES OF BARRINGTON</u>	20.77
<u>HEATHER HEALTH CARE CENTER</u>	20.77
<u>ALDEN LAKELAND REHAB & HCC</u>	20.77
<u>ALDEN LONG GROVE REHAB & HCC</u>	20.77
<u>ALDEN ESTATES OF SKOKIE</u>	20.77
<u>ALDEN ESTATES OF NAPERVILLE</u>	20.77
<u>ALDEN TERRACE OF MCHENRY REHAB</u>	20.77
<u>ALDEN LINCOLN REHAB & H C CTR</u>	20.77
<u>ALDEN WENTWORTH REHAB & HCC</u>	20.77
<u>ALDEN PRINCETON REHAB & HCC</u>	20.77
<u>ALDEN TOWN MANOR REHAB & HCC</u>	20.77
<u>ALDEN ESTATES OF EVANSTON</u>	20.77
<u>ALDEN NORTHMOOR REHAB & HCC</u>	20.77
<u>ALDEN DES PLAINES REHAB & HC</u>	20.77
<u>ALDEN NORTH SHORE REHAB & HCC</u>	20.77
<u>ALDEN OF WATERFORD</u>	20.77
<u>ALDEN TRAILS</u>	20.77
<u>ALDEN OF OLD TOWN EAST</u>	20.77
<u>ALDEN OF OLD TOWN WEST</u>	20.77
<u>ALDEN ORLAND PARK REHAB & HCC</u>	20.77
<u>ALDEN COURTS OF WATERFORD</u>	13.35
<u>ALDEN GARDENS OF WATERFORD</u>	13.35
<u>ALDEN GARDEN CTS OF DESPLAINES</u>	20.77
<u>ALDEN SPRINGS</u>	20.77
<u>ALDEN ESTATES OF SHOREWOOD</u>	20.77

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 - Racial / Ethnic Groups

- Patient Days
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- [Who Regulates Nursing Homes?](#)
- [A Listing of Illinois Nursing Homes](#)
- [How to Select a Nursing Home](#)
- [Centers for Medicare and Medicaid Services Nursing Home Database](#)
- [Quarterly Reports of Nursing Home Violation](#)
- [Illinois Law on Advance Directives](#)
- [Nursing Homes with No Certification Deficiencies](#)
- [Nursing Home Care Act](#)
- [Illinois Health Care Worker Registry](#)
- [Centers for Medicare and Medicaid Services Nursing Home Quality Initiative](#)

Ownership Information

ALDEN COURTS OF WATERFORD

1991 RANDI DRIVE
AURORA IL 60505

ADMINISTRATOR LAUREN PAC
TELEPHONE 630-851-1466

FLOYD A SCHLOSSBERG

has ownership interest in the following long term care entities

Facility	Percentage Owned
<u>ALDEN PARK STRATHMOOR</u>	90.51
<u>ALDEN OF WATERFORD</u>	35.70
<u>ALDEN COURTS OF WATERFORD</u>	35.70
<u>ALDEN GARDENS OF WATERFORD</u>	35.70

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- Who Regulates Nursing Homes?
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- Centers for Medicare and Medicaid Services Nursing Home Database
- Quarterly Reports of Nursing Home Violation
- Illinois Law on Advance Directives
- Nursing Homes with No Certification Deficiencies
- Nursing Home Care Act
- Illinois Health Care Worker Registry
- Centers for Medicare and Medicaid Services Nursing Home Quality Initiative

Ownership Information

ALDEN COURTS OF WATERFORD

1991 RANDI DRIVE
AURORA IL 60505

ADMINISTRATOR LAUREN PAC
TELEPHONE 630-851-1466

AUDRA ELISCO

has ownership interest in the following long term care entities

Facility	Percentage Owned
<u>ALDEN VILLAGE NORTH</u>	20.77
<u>ALDEN POPLAR CREEK REHAB & HCC</u>	20.77
<u>ALDEN VILLAGE HEALTH FACILITY</u>	20.77
<u>ALDEN ESTATES OF BARRINGTON</u>	20.77
<u>HEATHER HEALTH CARE CENTER</u>	20.77
<u>ALDEN LAKELAND REHAB & HCC</u>	20.77
<u>ALDEN ESTATES OF SKOKIE</u>	20.77
<u>ALDEN ESTATES OF NAPERVILLE</u>	20.77
<u>ALDEN TERRACE OF MCHENRY REHAB</u>	20.77
<u>ALDEN LINCOLN REHAB & H C CTR</u>	20.77
<u>ALDEN WENTWORTH REHAB & HCC</u>	20.77
<u>ALDEN PRINCETON REHAB & HCC</u>	20.77
<u>ALDEN TOWN MANOR REHAB & HCC</u>	20.77
<u>ALDEN ESTATES OF EVANSTON</u>	20.77
<u>ALDEN NORTHMOOR REHAB & HCC</u>	20.77
<u>ALDEN DES PLAINES REHAB & HC</u>	20.77
<u>ALDEN NORTH SHORE REHAB & HCC</u>	20.77
<u>ALDEN OF WATERFORD</u>	20.77
<u>ALDEN TRAILS</u>	20.77
<u>ALDEN OF OLD TOWN EAST</u>	20.77
<u>ALDEN OF OLD TOWN WEST</u>	20.77
<u>ALDEN ORLAND PARK REHAB & HCC</u>	20.77
<u>ALDEN COURTS OF WATERFORD</u>	13.35
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<u>ALDEN SPRINGS</u>	20.77
<u>ALDEN ESTATES OF SHOREWOOD</u>	20.77

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- Racial / Ethnic Groups

Patient Days

- Level of Care
- Payment Source
- Private Payment Rates



State of Illinois 2182266

Department of Public Health

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

The person, firm or corporation whose name appears on this certificate has complied with the provisions of the Illinois Statutes and/or rules and regulations and is hereby authorized to engage in the activity, as indicated below.

LA MAR HASBROUCK, MD, MPH
DIRECTOR

Issued under the authority of
The State of Illinois
Department of Public Health

EXPIRATION DATE	CATEGORY	ID NUMBER
07/31/2015	BG8E	0042036
LONG TERM CARE LICENSE SKILLED 099		
UNRESTRICTED 099 TOTAL BEDS		

BUSINESS ADDRESS
LICENSEE

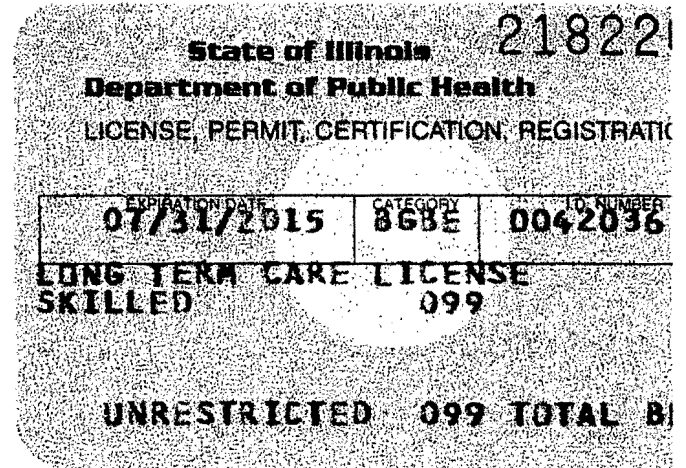
ALDEN OF WATERFORD, L.L.C.

ALDEN OF WATERFORD
2021 RANDI DRIVE
AURORA IL 60504
EFFECTIVE DATE: 08/01/14

The face of this license has a colored background. Printed by Authority of the State of Illinois - 4/97

← DISPLAY THIS PART IN A
CONSPICUOUS PLACE

REMOVE THIS CARD TO CARRY AS AN
IDENTIFICATION



REGION 7

07/24/14

ALDEN OF WATERFORD
2021 RANDI DRIVE
AURORA IL 60504

FEE RECEIPT NO.



State of Illinois 2177142

Department of Public Health

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

The person, firm or corporation whose name appears on this certificate has complied with the provisions of the Illinois Statutes and/or rules and regulations and is hereby authorized to engage in the activity as indicated below.

LA HAZ HANCOCK, MD, MPH
DIRECTOR

Issued under the authority of
The State of Illinois
Department of Public Health

EXPIRATION DATE	CATEGORY	IL NUMBER
12/05/2015	368E	0044180
LONG TERM CARE LICENSE SHELTERED 056		
UNRESTRICTED 056 TOTAL BEDS		

BUSINESS ADDRESS
LICENSEE

ALDEN COURTS OF WATERFORD, L.L.C.

ALDEN COURTS OF WATERFORD
1991 RANDI DRIVE
AURORA IL 60505

EFFECTIVE DATE: 12/05/13

The face of this license has a colored background. Printed by Authority of the State of Illinois - 487

State of Illinois
Department of Public Health

LICENSE PERMIT CERTIFICATION REGISTRATION

The purpose, term or expiration date of this certificate and registration shall be provided to the State Board of Health and registered in the State Board of Health in the manner as indicated below.

LA MAR HASBROUCK, MD, MPH
DIRECTOR

EXPIRES DATE	CATEGORY	ID NUMBER
10/28/2015	B6BE	0044891

LONG TERM CARE LICENSE SKILLED 268

UNRESTRICTED 268 TOTAL BEDS

BUSINESS ADDRESS LICENSEE

ALDEN - ALMA NELSON MANOR, INC.
ALDEN ALMA NELSON MANOR
550 SOUTH MULFORD AVENUE
ROCKFORD IL 61108
EFFECTIVE DATE: 10/27/13

The State of Illinois has a contract with the State Board of Health - 617

← **DISPLAY THIS PART IN A CONSPICUOUS PLACE**

REMOVE THIS CARD TO CARRY AS AN IDENTIFICATION

State of Illinois
Department of Public Health

LICENSE PERMIT CERTIFICATION REGISTRATION

2149064

EXPIRES DATE	CATEGORY	ID NUMBER
10/28/2015	B6BE	0044891

LONG TERM CARE LICENSE SKILLED 268

UNRESTRICTED 268 TOTAL BEDS

REGION 1

09/25/13

ALDEN ALMA NELSON MANOR
550 SOUTH MULFORD AVENUE
ROCKFORD IL 61108

FEE RECEIPT NO.

ATTACHMENT-12B



State of Illinois 2193112

Department of Public Health

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

The person, firm or corporation whose name appears on this certificate has complied with the provisions of the Illinois Statutes and/or rules and regulations and is hereby authorized to engage in the activity as indicated below.

LA MAR HASBROUCK, MD, MPH
DIRECTOR

Issued under the authority of
The State of Illinois
Department of Public Health

EXPIRATION DATE	CATEGORY	ID NUMBER
10/31/2016	B6BE	0046524
LONG TERM CARE LICENSE SKILLED 150		
UNRESTRICTED 150 TOTAL BEDS		

BUSINESS ADDRESS

LICENSEE

ALDEN ESTATES OF BARRINGTON, INC.

ALDEN ESTATES OF BARRINGTON
1420 SOUTH BARRINGTON ROAD
BARRINGTON IL 60010

Effective Date: 11/01/14
The State of Illinois, Department of Public Health, Authority of the State of Illinois - 4/97

← DISPLAY THIS PART IN A CONSPICUOUS PLACE

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State of Illinois 2193112
Department of Public Health
LICENSE, PERMIT, CERTIFICATION, REGISTRATION

EXPIRATION DATE	CATEGORY	ID NUMBER
10/31/2016	B6BE	0046524
LONG TERM CARE LICENSE SKILLED 150		
UNRESTRICTED 150 TOTAL B		

REGION 9

10/24/14

ALDEN ESTATES OF BARRINGTON
1420 SOUTH BARRINGTON ROAD
BARRINGTON IL 60010

FEE RECEIPT NO.



State of Illinois 2189104
Department of Public Health

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

The person, firm or corporation whose name appears on this certificate has complied with the provisions of the Illinois Statutes and/or rules and regulations and is hereby authorized to engage in the activity as indicated below.

LA MAR HASBROUCK, MD, MPH
DIRECTOR

Issued under the authority of
 The State of Illinois
 Department of Public Health

EXPIRATION DATE	CATEGORY	ID NUMBER
10/30/2016	3G8E	0042010
LONG TERM CARE LICENSE SKILLED 110		
UNRESTRICTED 110 TOTAL BEDS		

BUSINESS ADDRESS

LICENSEE

ALDEN - DES PLAINES REHABILITATION AND HEAL

ALDEN DES PLAINES REHAB & HC
1221 EAST GOLF ROAD
DES PLAINES IL 60018

EFFECTIVE DATE: 10/31/14
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State of Illinois 2152611
Department of Public Health

LICENSE, PERMIT CERTIFICATION, REGISTRATION

The person, firm or corporation whose name appears on this certificate has complied with the provisions of the Illinois Statutes and/or rules and regulations and is hereby authorized to engage in the activity as indicated below.

LA MAR HASBROUCK, MD, MPH
DIRECTOR

Issued under the authority of
 The State of Illinois
 Department of Public Health

EXPIRATION DATE	CATEGORY	ID NUMBER
11/27/2015	868E	0044529
LONG TERM CARE LICENSE SHELTERED 042		
UNRESTRICTED 042 TOTAL BEDS		

BUSINESS ADDRESS
LICENSEE

ALDEN-DES PLAINES REHABILITATION AND HEALTH

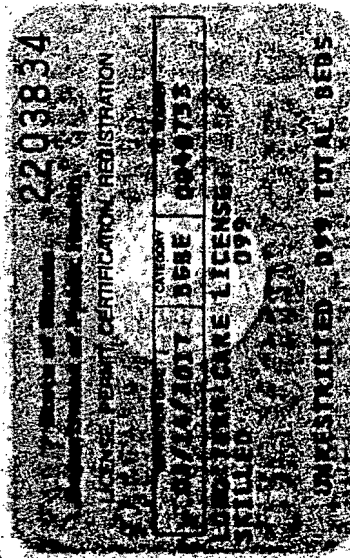
ALDEN GARDEN CTS OF DESPLAINES
1277 GOLF ROAD
DES PLAINES IL 60016

EFFECTIVE DATE: 11/29/13

The Seal of the State of Illinois is a cultural heritage symbol created by authority of the State of Illinois - 1777

DISPLAY THIS PART IN A CONSPICUOUS PLACE

REMOVE THIS CARD TO CARRY AS AN IDENTIFICATION



State of Illinois 2203834
Department of Public Health

LICENSE PERMIT CERTIFICATION REGISTRATION

The holder of this license is authorized to practice the profession of the holder and to use the title of the holder in the state of Illinois.

MIRAY B. STANLEY, M.D., D.P.M.
DIETITIAN

02/25/15	02/25/15	0000733
UNRESTRICTED CME LICENSE		
SKILLED		

UNRESTRICTED 099 TOTAL BEDS

BUSINESS ADDRESS
EVANSTON, IL

ALDEN ESTATES OF EVANSTON, INC.
ALDEN ESTATES OF EVANSTON
2520 GROSS POINT ROAD
EVANSTON, ILLINOIS 60201
ALDEN@ALDENESTATES.COM

REGION 9

02/25/15

ALDEN ESTATES OF EVANSTON
2520 GROSS POINT ROAD
EVANSTON, IL 60201

FEE RECEIPT NO.

State of Illinois 2206443
Department of Public Health

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

A person, firm or corporation whose name appears on this certificate has complied with the provisions of the Illinois Statutes and/or rules and regulations and is hereby authorized to engage in the activity as indicated below.

AV. D. SHAH, M.D., J.D.
DIRECTOR Issued under the authority of
 The State of Illinois
 Department of Public Health.

EXPIRATION DATE	CATEGORY	ID NUMBER
06/01/2016	BG9E	0023945

**LONG TERM CARE LICENSE
 SKILLED 173**

UNRESTRICTED 173 TOTAL BEDS

BUSINESS ADDRESS
LICENSEE
HEATHER HEALTH CARE CENTER, INC.
HEATHER HEALTH CARE CENTER
5800 SOUTH HONDRE STREET
HARVEY IL 60426
EFFECTIVE DATE: 06/02/15

in full of this license fee & license background. Printed by Authority of the State of Illinois - 4/97 -

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REMOVE THIS CARD TO CARRY AS AN IDENTIFICATION

State of Illinois 2206443
Department of Public Health

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

EXPIRATION DATE	CATEGORY	ID NUMBER
06/01/2016	BG9E	0023945

**LONG TERM CARE LICENSE
 SKILLED 173**

UNRESTRICTED 173 TOTAL BEDS

REGION 9
05/22/15
HEATHER HEALTH CARE CENTER
15800 SOUTH HONDRE STREET
HARVEY IL 60426

FEE RECEIPT NO.

209

ATTACHMENT-12B

State of Illinois 2149034
Department of Public Health

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

The person, firm or corporation whose name appears on this certificate has complied with the provisions of the Illinois Statutes and/or rules and regulations and is hereby authorized to engage in the activity as indicated below.

LA MAR HASBROUCK, MD, MPH Issued under the authority of
The State of Illinois
Department of Public Health
DIRECTOR

EXPIRATION DATE	CATEGORY	IL NUMBER
09/30/2015	BSBE	0017319
LONG TERM CARE LICENSE SKILLED 300		
UNRESTRICTED 300 TOTAL BEDS		

BUSINESS ADDRESS
 LICENSEE
ALDEN - LAKELAND REHABILITATION AND HEALTH
 ALDEN LAKELAND REHAB & HCC
 820 WEST LAWRENCE
 CHICAGO IL 60640
 EFFECTIVE DATE: 10/01/13

The fees for this license are a charge on your account by authority of the State of Illinois - 407 *

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REMOVE THIS CARD TO CARRY AS AN
 IDENTIFICATION

State of Illinois 2149034
Department of Public Health

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

EXPIRATION DATE	CATEGORY	IL NUMBER
09/30/2015	BSBE	0017319
LONG TERM CARE LICENSE SKILLED 300		
UNRESTRICTED 300 TOTAL BEDS		

REGION 8

09/25/13

ALDEN LAKELAND REHAB & HCC
 820 WEST LAWRENCE
 CHICAGO IL 60640

FEE RECEIPT NO.



State of Illinois 2152603

Department of Public Health

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

The person, firm or corporation whose name appears on this certificate has complied with the provisions of the Illinois Statutes and/or rules and regulations and is hereby authorized to engage in the activity as indicated below.

LA MAR HASBROCK, MD, MPH
DIRECTOR

Issued under the authority of
The State of Illinois
Department of Public Health

EXPIRATION DATE	CATEGORY	ID NUMBER
10/31/2015	868E	0040709
LONG TERM CARE LICENSE		
SKILLED	034	
INTERMEDIATE	062	
UNRESTRICTED 096 TOTAL BEDS		

BUSINESS ADDRESS:
LICENSEE

ALDEN - LINCOLN PARK REHABILITATION AND HEA

ALDEN LINCOLN REHAB & H.C. CTR.
504 WEST WELLINGTON AVENUE
CHICAGO IL 60657

EFFECTIVE DATE: 11/01/13

The Seal of the State of Illinois is a symbol of the State of Illinois • 4/87 •

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State of Illinois 2165549
Department of Public Health



LICENSE, PERMIT, CERTIFICATION, REGISTRATION

The person, firm, or corporation whose name appears on this certificate has complied with the provisions of the Illinois Statutes, and/or rules and regulations and is hereby authorized to engage in this activity as indicated below.

LA HAR HASBROUCK, MD, MPH
DIRECTOR

agent under the authority of
The State of Illinois
Department of Public Health

EXPIRATION DATE	CATEGORY	AL NUMBER
03/06/2016	BBBE	0040683
LONG TERM CARE LICENSE SKILLED 210 INTERMEDIATE 038		
UNRESTRICTED 248 TOTAL BEDS		

**BUSINESS ADDRESS
LICENSEE**

ALDEN - LONG GROVE REHABILITATION AND HEALTH

**ALDEN LONG GROVE REHAB & HCC
BOX 2308 RFD OLD HICKS ROAD
LONG GROVE IL 60047**

EFFECTIVE DATE: 03/07/14

The face of this license has a colored background printed by authority of the State of Illinois, § 487.

State of Illinois 216554
Department of Public Health
LICENSE, PERMIT, CERTIFICATION, REGISTRATION

EXPIRATION DATE	CATEGORY	AL NUMBER
03/06/2016	BBBE	0040683
LONG TERM CARE LICENSE SKILLED 210 INTERMEDIATE 038		
UNRESTRICTED 248 TOTAL BEDS		

REGION 1

02/25/14

**ALDEN LONG GROVE REHAB & HCC
BOX 2308 RFD OLD HICKS ROAD
LONG GROVE IL 60047**

FEE RECEIPT NO.



State of Illinois 2206752

Department of Public Health

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

The person, firm or corporation whose name appears on this certificate has complied with the provisions of the Illinois Statutes and/or rules and regulations and is hereby authorized to engage in the activity as indicated below.

NIRAV D. SHAH, M.D., J.D.
DIRECTOR

Issued under the authority of
The State of Illinois
Department of Public Health

EXPIRATION DATE	CATEGORY	ID NUMBER
07/13/2016	BGBE	0040691
LONG TERM CARE LICENSE SKILLED 316		
UNRESTRICTED 316 TOTAL BEDS		

BUSINESS ADDRESS
LICENSEE

ALDEN TERRACE OF MCHENRY REHABILITATION AND

ALDEN TERRACE OF MCHENRY REHAB
803 ROYAL DRIVE
MCHENRY IL 60050

EFFECTIVE DATE: 07/19/15

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State of Illinois 2193094

Department of Public Health

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

The person, firm or corporation whose name appears on this certificate has complied with the provisions of the Illinois Statutes and/or rules and regulations and is hereby authorized to engage in the activity as indicated below.

LA MAR HASBROUCK, MD, MPH
DIRECTOR

Issued under the authority of
The State of Illinois
Department of Public Health

EXPIRATION DATE	CATEGORY	ID NUMBER
11/08/2016	868E	0022509
LONG TERM CARE LICENSE SKILLED 203		
UNRESTRICTED 203 TOTAL BEDS		

BUSINESS ADDRESS

LICENSEE

ALDEN ESTATES DE NAPERVILLE, INC

ALDEN ESTATES OF NAPERVILLE
1525 SOUTH OXFORD LANE
NAPERVILLE IL 60565

EXPIRES DATE 11/08/16

The fee for this license is \$100.00. Issued under the authority of the State of Illinois - 4/97 -

← DISPLAY THIS PART IN A
CONSPICUOUS PLACE

REMOVE THIS CARD TO CARRY AS AN
IDENTIFICATION



State of Illinois 2193094
Department of Public Health
LICENSE, PERMIT, CERTIFICATION, REGISTRATION

EXPIRATION DATE	CATEGORY	ID NUMBER
11/08/2016	868E	0022509
LONG TERM CARE LICENSE SKILLED 203		
UNRESTRICTED 203 TOTAL BEDS		

REGION 7

10/24/14

ALDEN ESTATES OF NAPERVILLE
1525 SOUTH OXFORD LANE
NAPERVILLE IL 60565

FEE RECEIPT NO.

DISPLAY THIS PART IN A CONSPICUOUS PLACE

REMOVE THIS CARD TO CARRY AS AN IDENTIFICATION

State of Illinois
Department of Public Health
LICENSE PERMIT CERTIFICATION REGISTRATION

2165551

03/28/2016	06DE	0041277
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LONG TERM CARE LICENSE
 SKILLED

UNRESTRICTED 198 TOTAL BEDS

REGION 8
 02/25/14
 ALDEN NORTHWOOD REHAB & HCC
 5831 NORTH NORTHWEST HIGHWAY
 CHICAGO IL 60631

FEE RECEIPT NO.

State of Illinois 2165551
Department of Public Health

LICENSE PERMIT CERTIFICATION REGISTRATION

This card is the property of the State of Illinois. It is loaned to the licensee for identification purposes only. The licensee is responsible for its safekeeping and for its return to the Department of Public Health upon request.

LA MAR HASBROUCK, MD, MPH
 DIRECTOR

03/28/2016	06DE	0041277
------------	------	---------

LONG TERM CARE LICENSE
 SKILLED

UNRESTRICTED 198 TOTAL BEDS

BUSINESS ADDRESS LICENSEE

ALDEN - NORTHWOOD REHABILITATION AND HEALTH
 ALDEN NORTHWOODS REHAB & HCC
 5831 NORTH NORTHWEST HIGHWAY
 CHICAGO IL 60631
 EFFECTIVE DATE: 02/25/14

State of Illinois 2141874
Department of Public Health

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

The person, firm or corporation whose name appears on this certificate has complied with the provisions of the Illinois Statutes and/or rules and regulations, and is hereby authorized to engage in the activity as indicated below.

LA MAR HASBROUCK, MD, MPH Issued under the authority of
The State of Illinois
Department of Public Health
DIRECTOR

EXPIRATION DATE	CATEGORY	I.D. NUMBER
08/09/2015	BGBE	0042028
LONG TERM CARE LICENSE SKILLED 093		
UNRESTRICTED 093 TOTAL BEDS		

BUSINESS ADDRESS
LICENSEE
ALDEN - NORTH SHORE REHABILITATION AND HEAL
ALDEN NORTH SHORE REHAB & HCC
5050 WEST TOUHY AVENUE
SKOKIE IL 60077
EFFECTIVE DATE: 08/10/13

The State of Illinois Department of Public Health, 505 North Dearborn Street, Chicago, Illinois 60610 • 472 •

← **DISPLAY THIS PART IN A
CONSPICUOUS PLACE**

**REMOVE THIS CARD TO CARRY AS AN
IDENTIFICATION**

State of Illinois 2141874
Department of Public Health
LICENSE, PERMIT, CERTIFICATION, REGISTRATION

EXPIRATION DATE	CATEGORY	I.D. NUMBER
08/09/2015	BGBE	0042028
LONG TERM CARE LICENSE SKILLED 093		
UNRESTRICTED 093 TOTAL BEDS		

REGION 9

07/23/13

ALDEN NORTH SHORE REHAB & HCC
5050 WEST TOUHY AVENUE
SKOKIE IL 60077

FEE RECEIPT NO.



State of Illinois 2198464

Department of Public Health

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

The person, firm or corporation whose name appears on this certificate has complied with the provisions of the Illinois Statutes and/or rules and regulations and is hereby authorized to engage in the activity as indicated below.

LAMAR HASSBROUCK, MD, MPH
DIRECTOR

Issued under the authority of
The State of Illinois
Department of Public Health

EXPIRATION DATE	CATEGORY	I.D. NUMBER
01/07/2017	B68E	0042192
LONG TERM CARE LICENSE SKILLED 200		
UNRESTRICTED 200 TOTAL BEDS		

BUSINESS ADDRESS

LICENSEE

ALDEN - ORLAND PARK REHABILITATION AND HEAL

ALDEN ORLAND PARK REHAB & HCC
16450 SOUTH 97TH AVENUE
ORLAND PARK IL 60462

The State of Illinois Department of Public Health, by authority of the State of Illinois • 4/97 •

← DISPLAY THIS PART IN A
CONSPICUOUS PLACE

REMOVE THIS CARD TO CARRY AS AN
IDENTIFICATION



State of Illinois 2198464
Department of Public Health

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

EXPIRATION DATE	CATEGORY	I.D. NUMBER
01/07/2017	B68E	0042192

LONG TERM CARE LICENSE
SKILLED 200

UNRESTRICTED 200 TOTAL BED

REGION 9

12/22/14

ALDEN ORLAND PARK REHAB & HCC
16450 SOUTH 97TH AVENUE
ORLAND PARK IL 60462

FEE RECEIPT NO.



State of Illinois 2206755

Department of Public Health

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

The person, firm or corporation whose name appears on this certificate has complied with the provisions of the Illinois Statutes and/or rules and regulations and is hereby authorized to engage in the activity as indicated below.

NIRAV D. SHAR, M.D., J.D.
DIRECTOR

Issued under the authority of
The State of Illinois
Department of Public Health

EXPIRATION DATE	CATEGORY	I.D. NUMBER
07/25/2017	BGBE	0044909
LONG TERM CARE LICENSE SKILLED 189		
UNRESTRICTED 189 TOTAL BEDS		

BUSINESS ADDRESS

LICENSEE

ALDEN - PARK STRATHMOOR, INC.

ALDEN PARK STRATHMOOR
5668 STRATHMOOR DRIVE
ROCKFORD IL 61107

EFFECTIVE DATE: 07/26/15

The face of this license has a colored background. Printed by Authority of the State of Illinois • 4/97 •

← DISPLAY THIS PART IN A CONSPICUOUS PLACE

REMOVE THIS CARD TO CARRY AS AN IDENTIFICATION



State of Illinois 2206755

Department of Public Health

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

EXPIRATION DATE	CATEGORY	I.D. NUMBER
07/25/2017	BGBE	0044909
LONG TERM CARE LICENSE SKILLED 189		
UNRESTRICTED 189 TOTAL BEDS		

REGION 1

06/24/15

ALDEN PARK STRATHMOOR
5668 STRATHMOOR DRIVE
ROCKFORD IL 61107

FEE RECEIPT NO.



State of Illinois 2198450
Department of Public Health

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

The person, firm or corporation whose name appears on this certificate has complied with the provisions of the Illinois Statutes and/or rules and regulations and is hereby authorized to engage in the activity as indicated below.

LAMAR HASBROUCK, MD, MPH
DIRECTOR

Issued under the authority of
 The State of Illinois
 Department of Public Health

EXPIRATION DATE	CATEGORY	I.D. NUMBER
12/31/2016	BGBE	0032896
LONG TERM CARE LICENSE SKILLED 217		
UNRESTRICTED 217 TOTAL BEDS		

BUSINESS ADDRESS

LICENSEE

ALDEN - POPLAR CREEK REHABILITATION AND HEA

ALDEN POPLAR CREEK REHAB & HCC
1545 BARRINGTON ROAD
HOFFMAN ESTATES IL 60194

EFFECTIVE DATE 01/01/15
The State of Illinois, Department of Public Health, Authority of the State of Illinois - 4/97

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 CONSPICUOUS PLACE

REMOVE THIS CARD TO CARRY AS AN
 IDENTIFICATION

State of Illinois 2198450
Department of Public Health

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

EXPIRATION DATE	CATEGORY	I.D. NUMBER
12/31/2016	BGBE	0032896

LONG TERM CARE LICENSE
SKILLED 217

UNRESTRICTED 217 TOTAL BEDS

REGION 9

12/22/14

ALDEN POPLAR CREEK REHAB & HCC
1545 BARRINGTON ROAD
HOFFMAN ESTATES IL 60194

FEE RECEIPT NO.



State of Illinois 2206742

Department of Public Health

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

The person, firm or corporation whose name appears on this certificate has complied with the provisions of the Illinois Statutes and/or rules and regulations and is hereby authorized to engage in the activity as indicated below.

MIRAV D. SHAH, M.D., J.D.
DIRECTOR

Issued under the authority of
The State of Illinois
Department of Public Health

EXPIRATION DATE	CATEGORY	ID NUMBER
07/10/2016	BGBE	0036244
LONG TERM CARE LICENSE SKILLED 225		
UNRESTRICTED 225 TOTAL BEDS		

BUSINESS ADDRESS
LICENSEE

ALDEN - PRINCETON REHABILITATION AND HEALTH

ALDEN PRINCETON REHAB & HCC
255 WEST 69TH STREET
CHICAGO IL 60621

EFFECTIVE DATE: 07/11/15

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REMOVE THIS CARD TO CARRY AS AN
IDENTIFICATION



State of Illinois 2206742
Department of Public Health
LICENSE, PERMIT, CERTIFICATION, REGISTRATION

EXPIRATION DATE	CATEGORY	ID NUMBER
07/10/2016	BGBE	0036244
LONG TERM CARE LICENSE SKILLED 225		

UNRESTRICTED 225 TOTAL BEDS

REGION 8

06/24/15

ALDEN PRINCETON REHAB & HCC
255 WEST 69TH STREET
CHICAGO IL 60621

FEE RECEIPT NO.



State of Illinois 2203850

Department of Public Health

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

The person, firm or corporation whose name appears on this certificate has complied with the provisions of the Illinois Statutes and/or rules and regulations and is hereby authorized to engage in the activity as indicated below.

NIRAV D. SHAH, M.D., J.D.
DIRECTOR

Issued under the authority of
The State of Illinois
Department of Public Health

EXPIRATION DATE	CATEGORY	I.D. NUMBER
03/09/2015	B33E	0050781
LONG TERM CARE LICENSE SKILLED 100		
UNRESTRICTED 100 TOTAL BEDS		

BUSINESS ADDRESS
LICENSEE

ALDEN ESTATES OF SHOREWOOD, INC

ALDEN ESTATES OF SHOREWOOD
710 WEST BLACK ROAD
SHOREWOOD IL 60404

EFFECTIVE DATE: 03/09/15

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State of Illinois 2162046
Department of Public Health

LICENSE PERMIT CERTIFICATION REGISTRATION

The person, firm or corporation whose name appears on this certificate has complied with the provisions of the Illinois Statutes and/or rules and regulations and is hereby authorized to engage in the activity as indicated below.

LA NAR HASBROUCK, MD, MPH Issued under the authority of
DIRECTOR The State of Illinois
 Department of Public Health

EXPIRATION DATE	CATEGORY	TR. NUMBER
02/01/2016	BG8E	0050146
LONG TERM CARE LICENSE		
SKILLED 056		
UNRESTRICTED 056 TOTAL BEDS		

BUSINESS ADDRESS
 LICENSEE

ALDEN ESTATES OF SKOKIE, INC.
ALDEN ESTATES OF SKOKIE
4626 OLD ORCHARD ROAD
SKOKIE IL 60076
EFFECTIVE DATE: 02/02/14

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REMOVE THIS CARD TO CARRY AS AN
 IDENTIFICATION

State of Illinois 2162046
Department of Public Health

LICENSE PERMIT CERTIFICATION REGISTRATION

EXPIRATION DATE	CATEGORY	TR. NUMBER
02/01/2016	BG8E	0050146
LONG TERM CARE LICENSE		
SKILLED 056		
UNRESTRICTED 056 TOTAL BEDS		

REGION 9

01/23/14

ALDEN ESTATES OF SKOKIE
4626 OLD ORCHARD ROAD
SKOKIE IL 60076

FEE RECEIPT NO.



State of Illinois 2206187

Department of Public Health

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

The person, firm or corporation whose name appears on this certificate has complied with the provisions of the Illinois Statutes and/or rules and regulations and is hereby authorized to engage in the activity as indicated below.

NIRAV D. SHAH, M.D., J.D.
DIRECTOR

Issued under the authority of
The State of Illinois
Department of Public Health

EXPIRATION DATE	CATEGORY	ID NUMBER
05/01/2016	BGBE	0038000
LONG TERM CARE LICENSE SKILLED 237		
UNRESTRICTED 237 TOTAL BEDS		

BUSINESS ADDRESS

LICENSEE

ALDEN - TOWN MANOR REHABILITATION AND HEALT

ALDEN TOWN MANOR REHAB & HCC
6120 WEST OGDEN
CICERO IL 60804

EFFECTIVE DATE: 05/02/15
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REMOVE THIS CARD TO CARRY AS AN
IDENTIFICATION



State of Illinois 2206187
Department of Public Health
LICENSE, PERMIT, CERTIFICATION, REGISTRATION

EXPIRATION DATE	CATEGORY	ID NUMBER
05/01/2016	BGBE	0038000

LONG TERM CARE LICENSE
SKILLED 237

UNRESTRICTED 237 TOTAL BEDS

REGION 9

04/28/15

ALDEN TOWN MANOR REHAB & HCC
6120 WEST OGDEN
CICERO IL 60804

FEE RECEIPT NO.



State of Illinois 2152591

Department of Public Health

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

The person, firm or corporation whose name appears on this certificate has complied with the provisions of the Illinois Statutes and/or rules and regulations and is hereby authorized to engage in the activity as indicated below.

LA HAR HASBROUCK, MD, MPH
DIRECTOR

Issued under the authority of
The State of Illinois
Department of Public Health

EXPIRATION DATE	CATEGORY	ID NUMBER
10/31/2015	BGBE	0036640
LONG TERM CARE LICENSE SKILLED 207		
UNRESTRICTED 207 TOTAL BEDS		

BUSINESS ADDRESS
LICENSEE

ALDEN-VALLEY RIDGE REHABILITATION AND HEALTH

ALDEN VALLEY RIDGE REHAB & HCC
275 EAST ARMY TRAIL ROAD
BLOOMINGDALE IL 60108

EFFECTIVE DATE: 11/01/13

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CONSPICUOUS PLACE

REMOVE THIS CARD TO CARRY AS AN
IDENTIFICATION



State of Illinois 215259
Department of Public Health
LICENSE, PERMIT, CERTIFICATION, REGISTRATIC

EXPIRATION DATE	CATEGORY	ID NUMBER
10/31/2015	BGBE	0036640

LONG TERM CARE LICENSE
SKILLED 207

UNRESTRICTED 207 TOTAL BE

REGION 7

10/23/13

ALDEN VALLEY RIDGE REHAB & HC
275 EAST ARMY TRAIL ROAD
BLOOMINGDALE IL 60108

FEE RECEIPT NO.



State of Illinois 2186531

Department of Public Health

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

The person, firm or corporation whose name appears on this certificate has complied with the provisions of the Illinois Statutes and/or rules and regulations and is hereby authorized to engage in the activity as indicated below.

LA MAR HASBROUCK, MD, MPH
DIRECTOR

Issued under the authority of
The State of Illinois
Department of Public Health

EXPIRATION DATE	CATEGORY	I.D. NUMBER
09/16/2016	8G8E	0038455
LONG TERM CARE LICENSE UNDER 22 126		
UNRESTRICTED 126 TOTAL BEDS		

BUSINESS ADDRESS

LICENSEE

ALDEN VILLAGE HEALTH FACILITY FOR CHILDREN

ALDEN VILLAGE HEALTH FACILITY
267 EAST LAKE STREET
BLOOMINGDALE IL 60108

EFFECTIVE DATE: 09/17/16
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REMOVE THIS CARD TO CARRY AS AN
IDENTIFICATION

State of Illinois 2186531
Department of Public Health

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

EXPIRATION DATE	CATEGORY	I.D. NUMBER
09/16/2016	8G8E	0038455
LONG TERM CARE LICENSE UNDER 22 126		
UNRESTRICTED 126 TOTAL BEDS		

REGION 7

08/22/14

ALDEN VILLAGE HEALTH FACILITY
267 EAST LAKE STREET
BLOOMINGDALE IL 60108

FEE RECEIPT NO.

State of Illinois 2165567
Department of Public Health

LICENSE PERMIT CERTIFICATION REGISTRATION

The person, firm or corporation whose name appears on this certificate has complied with the provisions of the Illinois Statutes and/or rules and regulations and is hereby authorized to engage in the activity as indicated below.

LA MAR HASBROUCK, MD, MPH Issued under the authority of
The State of Illinois
Department of Public Health
DIRECTOR

EXPIRATION DATE	CATEGORY	ID NUMBER
02/28/2016	BG8E	0049122
LONG TERM CARE LICENSE UNDER 22 150		
UNRESTRICTED 150 TOTAL BEDS		

BUSINESS ADDRESS
LICENSEE
ALDEN VILLAGE NORTH, INC.
ALDEN VILLAGE NORTH
7464 N. SHERIDAN ROAD
CHICAGO IL 60626
EFFECTIVE DATE: 03/01/14

The State of Illinois, Department of Public Health, created by Authority of the State of Illinois - 481

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REMOVE THIS CARD TO CARRY AS AN
IDENTIFICATION

State of Illinois 2165567
Department of Public Health

LICENSE PERMIT CERTIFICATION REGISTRATION

EXPIRATION DATE	CATEGORY	ID NUMBER
02/28/2016	BG8E	0049122
LONG TERM CARE LICENSE UNDER 22 150		
UNRESTRICTED 150 TOTAL BEDS		

REGION 8
02/25/14
ALDEN VILLAGE NORTH
7464 N. SHERIDAN ROAD
CHICAGO IL 60626

FEE RECEIPT NO.

226

ATTACHMENT-12B



State of Illinois 2159306

Department of Public Health

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

The person, firm or corporation whose name appears on this certificate has complied with the provisions of the Illinois Statutes, rules and regulations and is hereby authorized to engage in the activity as indicated below:

LA MAR HASBROUCK, MD, MPH
DIRECTOR

Issued under the authority of
The State of Illinois
Department of Public Health

EXPIRATION DATE	CATEGORY	L.I. NUMBER
01/09/2016	868E	0044503
LONG TERM CARE LICENSE SHELTERED 121		
UNRESTRICTED 121 TOTAL BEDS		

BUSINESS ADDRESS

LICENSEE

ALDEN GARDENS OF WATERFORD, L.L.C.

ALDEN GARDENS OF WATERFORD
1955 RANDI DRIVE
AURORA IL 60504

Effective Date: 01/10/15

← DISPLAY THIS PART IN A
CONSPICUOUS PLACE

REMOVE THIS CARD TO CARRY AS AN
IDENTIFICATION

State of Illinois 215930

Department of Public Health

LICENSE, PERMIT, CERTIFICATION, REGISTRATIC

EXPIRATION DATE	CATEGORY	L.I. NUMBER
01/09/2016	868E	0044503
LONG TERM CARE LICENSE SHELTERED 121		
UNRESTRICTED 121 TOTAL B		

REGION 7

12/20/13

ALDEN GARDENS OF WATERFORD
1955 RANDI DRIVE
AURORA IL 60504

FEE RECEIPT NO.

ATTACHMENT-12B

DISPLAY THIS PART IN A CONSPICUOUS PLACE

REMOVE THIS CARD TO CARRY AS AN IDENTIFICATION

State of Illinois 2182253
Department of Public Health

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

The person, firm, or corporation whose name appears on this certificate has complied with the provisions of the Illinois Statutes and/or rules and regulations and is hereby authorized to engage in the activity as indicated below.

MAR HASBROUCK, MD, MPH
RECTOR

Issued under the authority of
The State of Illinois
Department of Public Health

EXPIRES ON	CATEGORY	ID NUMBER
08/02/2015	868E	0026435
LONG TERM CARE LICENSE SKILLED 300		
UNRESTRICTED 300 TOTAL BEDS		

**BUSINESS ADDRESS
LICENSEE**

JEN - NENWORTH REHABILITATION AND HEALTH
ALDEN WENWORTH REHAB & HCC
201 WEST 69TH STREET
CHICAGO, IL 60621
EFFECTIVE DATE: 08/03/14

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REGION 8

07/24/14

ALDEN WENWORTH REHAB & HCC
201 WEST 69TH STREET
CHICAGO IL 60621

FEE RECEIPT NO.



State of Illinois 2172233

Department of Public Health

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

The person, firm or corporation whose name appears on this certificate has complied with the provisions of the Illinois Statutes and/or rules and regulations and is hereby authorized to engage in the activity as indicated below.

LA MAR HASBROUCK, MD, MPH
DIRECTOR

Issued under the authority of
The State of Illinois
Department of Public Health

EXPIRATION DATE	CATEGORY	ID NUMBER
05/03/2016	B6BE	0042069
LONG TERM CARE LICENSE ICFDD 016		
UNRESTRICTED 016 TOTAL BEDS		

BUSINESS ADDRESS
LICENSEE

ALDEN OF OLD TOWN EAST, INC.

ALDEN OF OLD TOWN EAST
108 SOUTH FIRST STREET
BLOOMINGDALE IL 60108
EFFECTIVE DATE: 05/09/14

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REMOVE THIS CARD TO CARRY AS AN
IDENTIFICATION



State of Illinois 2172233
Department of Public Health
LICENSE, PERMIT, CERTIFICATION, REGISTRATION

EXPIRATION DATE	CATEGORY	ID NUMBER
05/03/2016	B6BE	0042069
LONG TERM CARE LICENSE ICFDD 016		
UNRESTRICTED 016 TOTAL BEDS		

UNRESTRICTED 016 TOTAL BEDS

REGION 7

04/24/14

ALDEN OF OLD TOWN EAST
108 SOUTH FIRST STREET
BLOOMINGDALE IL 60108

FEE RECEIPT NO.



State of Illinois 2172234

Department of Public Health

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

The person, firm or corporation whose name appears on this certificate has complied with the provisions of the Illinois Statutes and/or rules and regulations and is hereby authorized to engage in the activity as indicated below:

LA MAR HASBROUCK, MD, MPH
DIRECTOR

Issued under the authority of
The State of Illinois
Department of Public Health

EXPIRATION DATE	CATEGORY	ID NUMBER
05/13/2016	B63E	0042077
LONG TERM CARE LICENSE ICFDD 016		
UNRESTRICTED 016 TOTAL BEDS		

BUSINESS ADDRESS
LICENSEE

ALDEN OF OLD TOWN WEST, INC.

ALDEN OF OLD TOWN WEST
118 SOUTH BLOOMINGDALE ROAD
BLOOMINGDALE IL 60108
EFFECTIVE DATE: 05/19/14

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REMOVE THIS CARD TO CARRY AS AN
IDENTIFICATION



State of Illinois 2172234

Department of Public Health

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

EXPIRATION DATE	CATEGORY	ID NUMBER
05/13/2016	B63E	0042077

LONG TERM CARE LICENSE
ICFDD 016

UNRESTRICTED 016 TOTAL BEDS

REGION 7

04/24/14

ALDEN OF OLD TOWN WEST
118 SOUTH BLOOMINGDALE ROAD
BLOOMINGDALE IL 60108

FEE RECEIPT NO.

ATTACHMENT-12B



State of Illinois 2172232

Department of Public Health

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

The person, firm or corporation whose name appears on this certificate has complied with the provisions of the Illinois Statutes and/or rules and regulations and is hereby authorized to engage in the activity as indicated below.

LA MAR HASBROUCK, MD, MPH
DIRECTOR

Issued under the authority of
The State of Illinois
Department of Public Health

EXPIRATION DATE	CATEGORY	ID. NUMBER
05/18/2016	BGBE	0042051
LONG TERM CARE LICENSE ICFDD 016		
UNRESTRICTED 016 TOTAL BEDS		

BUSINESS ADDRESS
LICENSEE

ALDEN TRAILS, INC.

ALDEN TRAILS
273 ARMY TRAIL ROAD
BLOOMINGDALE IL 60108
EFFECTIVE DATE: 05/19/14

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REMOVE THIS CARD TO CARRY AS AN
IDENTIFICATION



State of Illinois 2172232

Department of Public Health

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

EXPIRATION DATE	CATEGORY	ID. NUMBER
05/18/2016	BGBE	0042051

LONG TERM CARE LICENSE
ICFDD 016

UNRESTRICTED 016 TOTAL BEDS

REGION 7

04/24/14

ALDEN TRAILS
273 ARMY TRAIL ROAD
BLOOMINGDALE IL 60108

FEE RECEIPT NO.

State of Illinois 2186542
Department of Public Health



LICENSE PERMIT CERTIFICATION REGISTRATION

This person, firm or corporation whose name appears on this certificate has complied with the provisions of the Illinois Statutes and/or rules and regulations which have been authorized to engage in the activity as indicated below.

LA MAR HASBROUCK, MD, MPH
DIRECTOR

Issued under the authority of
 The State of Illinois,
 Department of Public Health.

EXPIRES	CATEGORY	UN NUMBER
09/24/2016	1868E	0047191
LONG TERM CARE LICENSE ICFDD		
UNRESTRICTED 016 TOTAL BEDS		

BUSINESS ADDRESS
 LICENSEE

ALDEN SPRINGS, INC.

ALDEN SPRINGS
 207 EAST ARMY TRAIL ROAD
 BLOOMINGDALE IL 60108
 TELEPHONE: PALESTINE, IL 60125

Secretary of the State of Illinois - 4377



ALDEN COURTS OF WATERFORD
1991 RANDI DRIVE
AURORA, ILLINOIS 60504
(773) 286-3883

June 26, 2015

MS. Courtney Avery, Administrator
Health Facilities and Services Review Board
Illinois Department of Public Health
525 W. Jefferson Street, Second Floor
Springfield, Illinois 62761


Dear Ms. Avery:

Please be advised that no adverse actions as defined under 1130.140 have been taken against the Applicants (Alden Courts of Waterford, L.L.C.) within three years preceding the filing of the Certificate of Need Application.

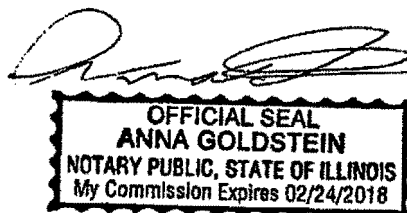
There are a few other Alden facilities that have received violations at the "A" level from the Illinois Department of Public Health. Notably, there are 31 Alden licensed long-term care facilities in the State of Illinois. Since June of 2012, only 4 of those facilities have received level "A" violations. Attached is a certified listing of facilities with level "A" violations, as well as a list of all Alden facilities that have had no type "A" violations filed against them within the past three (3) years.

Sincerely,

Alden Courts of Waterford, L.L.C.

By: 
Randi Schullo
Co-Manager

Enclosure(s)



ATTACHMENT-12C

**CERTIFIED LIST OF ALDEN LONG TERM CARE FACILITIES
WITH LEVEL "A" VIOLATIONS SINCE 2012**

Alden Estates of Shorewood: NH13 S0069

Alden-Princeton NH14 C0310 (hearing requested)

Alden Alma Nelson Type AA NH14 S0371 (hearing requested)

Alden-Long Grove NH15 S0018 (hearing requested)

ALDEN LONG TERM CARE FACILITIES
WITH NO TYPE "A" VIOLATIONS SINCE JUNE 2012

ALDEN ESTATES OF BARRINGTON
ALDEN DES PLAINES
ALDEN GARDENS COURTS DES PLAINES
ALDEN ESTATES OF EVANSTON
HEATHER HEALTH CARE CENTER
ALDEN LAKELAND
ALDEN LINCOLN PARK
ALDEN MCHENRY
ALDEN ESTATES OF NAPERVILLE
ALDEN NORTHMOOR
ALDEN NORTH SHORE
ALDEN OF OLD TOWN EAST
ALDEN OF OLD TOWN WEST
ALDEN ESTATES OF ORLAND PARK
ALDEN PARK STRATHMOOR
ALDEN POPLAR CREEK
ALDEN ESTATES OF SKOKIE
ALDEN SPRINGS
ALDEN TOWN MANOR
ALDEN TRAILS
ALDEN VALLEY RIDGE
ALDEN VILLAGE
ALDEN VILLAGE NORTH
ALDEN OF WATERFORD
ALDEN COURTS OF WATERFORD
ALDEN GARDENS OF WATERFORD
ALDEN WENTWORTH



WATERFORD REHAB & COURTS, LLC
4200 WEST PETERSON AVENUE
CHICAGO, ILLINOIS 60646
(773) 286-3883

June 29, 2015


Ms. Courtney Avery, Administrator
Health Facilities and Services Review Board
Illinois Department of Public Health
525 W. Jefferson Street, Second Floor
Springfield, IL 62761

Dear Ms. Avery:

I hereby authorize the Health Facilities Planning Board and the Illinois Department of Public Health (IDPH) access to any documents necessary to verify the information submitted, including, but not limited to: official records of IDPH or other State agencies; the licensing or certification records of other states, when applicable; and the records of nationally recognized accreditation organizations. I further authorize the Illinois Department of Public health to obtain any additional documentation or information that said agency deems necessary for the review of this Application as it pertains to 1125.520.(3).

Sincerely,

WATERFORD REHAB & COURTS, LLC

By: 
Randi Schullo Co manager



ALDEN OF WATERFORD INVESTMENTS, LLC
4200 WEST PETERSON AVENUE
CHICAGO, ILLINOIS 60646
(773) 286-3883

June 29, 2015

Ms. Courtney Avery, Administrator
Health Facilities and Services Review Board
Illinois Department of Public Health
525 W. Jefferson Street, Second Floor
Springfield, IL 62761

Dear Ms. Avery:

I hereby authorize the Health Facilities Planning Board and the Illinois Department of Public Health (IDPH) access to any documents necessary to verify the information submitted, including, but not limited to: official records of IDPH or other State agencies; the licensing or certification records of other states, when applicable; and the records of nationally recognized accreditation organizations. I further authorize the Illinois Department of Public Health to obtain any additional documentation or information that said agency deems necessary for the review of this Application as it pertains to 1125.520.(3).

Sincerely,

ALDEN OF WATERFORD INVESTMENTS, LLC

By: 
Randi Schullo
Co-manager



THE ALDEN GROUP, LTD
4200 WEST PETERSON AVENUE
CHICAGO, ILLINOIS 60646
(773) 286-3883

June 29, 2015

Ms. Courtney Avery, Administrator
Health Facilities and Services Review Board
Illinois Department of Public Health
525 W. Jefferson Street, Second Floor
Springfield, IL 62761

Dear Ms. Avery:

I hereby authorize the Health Facilities Planning Board and the Illinois Department of Public Health (IDPH) access to any documents necessary to verify the information submitted, including, but not limited to: official records of IDPH or other State agencies; the licensing or certification records of other states, when applicable; and the records of nationally recognized accreditation organizations. I further authorize the Illinois Department of Public health to obtain any additional documentation or information that said agency deems necessary for the review of this Application as it pertains to 1125.520.(3).

Sincerely,

THE ALDEN GROUP, LTD

By: 
Randi Schullo - Vice-President



ALDEN COURTS OF WATERFORD, L.L.C.
4200 WEST PETERSON AVENUE
CHICAGO, ILLINOIS 60646
(773) 286-3883

June 29, 2015


Ms. Courtney Avery, Administrator
Health Facilities and Services Review Board
Illinois Department of Public Health
525 W. Jefferson Street, Second Floor
Springfield, IL 62761

Dear Ms. Avery:

I hereby authorize the Health Facilities Planning Board and the Illinois Department of Public Health (IDPH) access to any documents necessary to verify the information submitted, including, but not limited to: official records of IDPH or other State agencies; the licensing or certification records of other states, when applicable; and the records of nationally recognized accreditation organizations. I further authorize the Illinois Department of Public health to obtain any additional documentation or information that said agency deems necessary for the review of this Application as it pertains to 1125.520.(3).

Sincerely,

ALDEN COURTS OF WATERFORD, L.L.C.

By: 
Randi Schullo
Co. Manager

SECTION IV – SERVICE SPECIFIC REVIEW CRITERIA Continued xvi

Criterion 1125.530 - Planning Area Need

1. Identify the calculated number of beds needed (excess) in the planning area. See HFSRB website (<http://hfsrb.illinois.gov>) and click on “Health Facilities Inventories & Data”.

According to the Update to the Inventory of Health Care Facilities and Services and Need Determinations – 2013 Long-Term Care Services dates June 15, 2015, the Board’s website (hard copy appended as **ATTACHMENT-13A**) identifies an excess of 248 nursing care beds in Health Service Area 8, Planning Area Kane. The existing bed need calculation is expected to be updated soon by the Board as the current five year projection is for Calendar Year 2015. This project is not the typical establishment of beds and services. The proposed 20 nursing beds are part of a CCRC campus consisting of 131 independent living units and three separately licensed facilities:

- Alden Courts – a 66-bed sheltered care facility devoted exclusively to memory care.
- Alden Gardens – a 121-bed sheltered care facility devoted to geriatric residents not needing memory care services.
- Alden of Waterford – a 99-bed skilled nursing facility for geriatrics patients without memory care requirements.

Appended as **ATTACHMENT-13B** is a site map of the entire Alden Waterford Campus illustrating all components within this extensive CCRC. This project is more of a repositioning of existing beds. Specifically, the 20 proposed nursing beds will also cater to those with memory impairment. As the calculated bed need does not differentiate between general nursing, short term rehabilitation and specialized memory care type of nursing beds, the Applicant solicited Laurel Research Associates to perform a market study for this conversion project. This study is

ATTACHMENT-13

SECTION IV – SERVICE SPECIFIC REVIEW CRITERIA Continued xvii

appended as **ATTACHMENT-10D**. It found that the 30-minute service area had a robust population that could support additional nursing beds and nursing beds specialized for memory care. This data supports the Applicant's experience of referring out existing residents and potential admissions for the proposed service to out of campus and out of area facilities for care.

2. Attest that the primary purpose of the project is to serve residents of the planning area and that at least 50% of the patients will come from within the planning area.

As the Alden Courts of Waterford patient origin data (appended as **ATTACHMENT-10A**) indicates nearly 81% of all admissions were derived from within the 30-minute travel time service area and over 50% (55.8%) were residents who aged-in-place from within the CCRC campus.

3. Provide letters from referral sources (hospitals, physicians, social services and others) that attest to total number of prospective residents (by zip code of residence) who have received care at existing LTC facilities located in the area during the 12-month period prior to submission of the application. Referral sources shall verify their projections and the methodology used, as described in Section 1125.540.

Appended as **ATTACHMENT-13C** are 2 hospital/physician referral letters providing 156 of the proposed and historical referrals. Collectively, these referral sources have identified 156 historical and potential annual referrals to Alden Courts of Waterford for the next two years.

ATTACHMENT-13

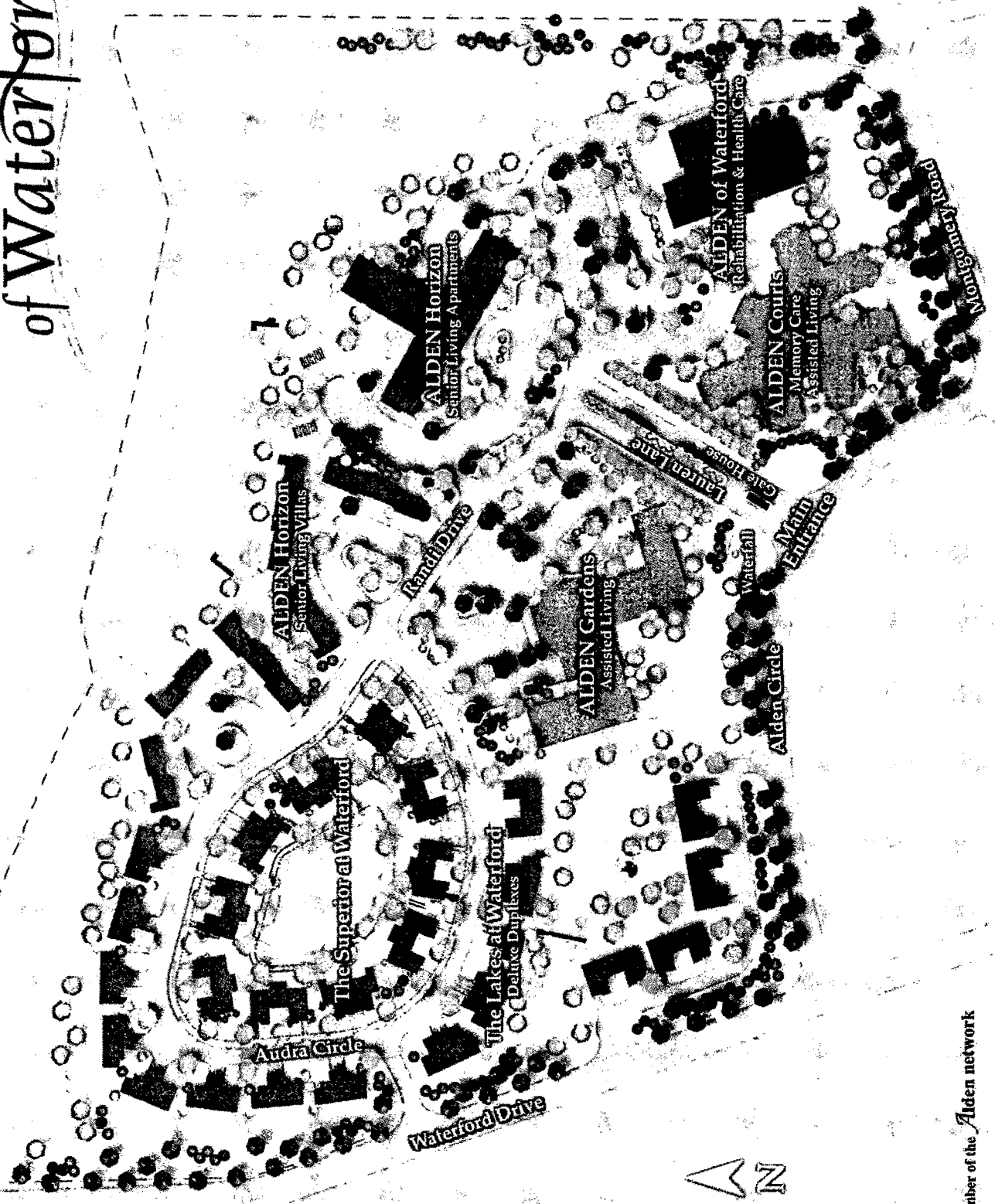
LONG-TERM CARE FACILITY UPDATES

6/15/2015

CALCULATED BED NEEDS

Planning Area	Calculated Beds Needed	Approved Beds	Additional Beds Needed or Excess Beds ()
HEALTH SERVICE AREA 7			
Planning Area 7-A	3769	3396	373
Planning Area 7-B	6268	6827	(559)
Planning Area 7-C	5913	5862	51
Planning Area 7-D	2590	2904	(314)
Planning Area 7-E	8247	9165	(918)
HEALTH SERVICE AREA 8			
Kane	2816	3064	(248)
Lake	4191	4663	(472)
McHenry	1095	997	98
HEALTH SERVICE AREA 9			
Grundy	268	265	3
Kankakee	1107	1368	(261)
Kendall	279	185	94
Will	2671	2790	(119)
HEALTH SERVICE AREA 10			
Henry	455	500	(45)
Mercer	167	172	(5)
Rock Island	1177	1214	(37)
HEALTH SERVICE AREA 11			
Clinton	353	357	(4)
Madison	1955	2212	(257)
Monroe	355	250	105
St. Clair	2011	2251	(240)
LONG-TERM CARE ICF/DD 16 AND UNDER BED NEED			
HSA 1	242	335	(93)
HSA 2	245	256	(11)
HSA 3	211	360	(149)
HSA 4	305	159	146
HSA 5	227	274	(47)
HSA 6, 7, 8, 9	3095	1037	2058
HSA 10	77	32	45
HSA 11	218	304	(86)

ALDEN of Waterford



A member of the Alden network



SANJAY THAKKAR, MD

Yorkville Internist SC
2720 E. New York Street, Suite 108, Aurora IL, 60502
Phone# 630-820-7045 Fax# 630-820-7047

June 1, 2015

Ms. Courtney Avery, Administrator
Health Facilities and Services Review Board
Illinois Department of Public Health
525 W. Jefferson Street, Second Floor
Springfield, IL 62761

RE: Application for Certificate of Need for Alden Courts of Waterford
1991 Randi Drive
Aurora, IL

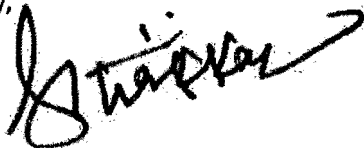
Dear Ms. Avery,

I am a physician who currently sees residents at Alden Courts of Waterford. The building is specifically designed to service residents who have been diagnosed with dementia. The residents currently living in this building receive great care and the staff is truly dedicated to their well-being.

There is a shortage of appropriate care for residents with dementia who receive Medicare and Medicaid benefits. I have had patients at Alden Courts who have had to transfer out to nursing homes for financial reasons and it is detrimental to their well-being. Over the years, I have referred approximately 5 patients per month to other facilities farther from home that were not as well equipped to care for our patients. Due to HIPPA compliance identifications of residents could not be provided. I could refer approximately 5 patients per month within a 24 month period after the project is completed. If Alden Courts were able to offer these services the residents could continue to receive quality care without interrupting their living situation. As the population continues to age in and around the Aurora area, these services are needed as much as ever. Please note that these patient referrals have not been used to support any other pending or approved certificate of need application for this area.

I encourage you to consider their application.


Sincerely,



Sanjay Thakkar, MD



ATTACHMENT-13C

 **CONVENTIONS PSYCHIATRY & COUNSELING**

1560 Wall street, Sulte 304, Naperville, IL 60563

PHONE: 630-416-8289

FAX: 630-416-8306

June 26, 2015

Ms. Courtney Avery, Administrator
Health Facilities and Services Review Board
Illinois Department of Public Health
525 W. Jefferson Street, Second Floor
Springfield, IL 62761

RE: Application for Certificate of Need for Alden Courts of Waterford
1991 Randi Drive
Aurora, IL

Dear Ms. Avery,

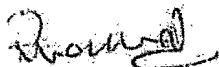
I am writing to express my support for Alden's proposed expansion of nursing memory care services which will be accomplished through the conversion of 22 sheltered care beds to 20 skilled care beds at Alden Courts of Waterford, which is currently a 66-bed sheltered memory facility in Aurora. Upon project completion, the facility will offer 44 sheltered care and 20 nursing care beds for all those with memory impairment. I have referred approximately eight patients a month to other facilities that were not as well equipped to care for our patients, due to HIPAA compliance identifications of residents cannot be provided. I would be able to refer at least 8 patients per month to Alden Courts within a 24 month period after project completion.

With the continuum of care community at Alden of Waterford there are residential services from independent villas and duplexes and apartments all the way through skilled rehabilitation services. As the population continues to age in and around the Aurora area, these services are needed as much as ever. Please note that these patient referrals have not been used to support any other pending or approved certificate of need application for this area.

Alden of Waterford has been part of the Aurora community for nearly 20 years. I hope that it will continue for another 20 years and continue to grow and evolve as it has been. As a community leader in senior health care, Alden of Waterford has provided educational discussions for the community, provided blood pressure checks, and entertained the community with various events.

I urge you to give Alden's certificate of need application every consideration.

Sincerely,



ATTACHMENT-13C

SECTION IV – SERVICE SPECIFIC REVIEW CRITERIA Continued xviii

Criterion 1125.550 - Service Demand – Expansion of General Long-Term Care

The applicant shall document #1 and either #2 or #3:

1. Historical Service Demand

- a. An average annual occupancy rate that has equaled or exceeded occupancy standards for general LTC, as specified in Section 1125.210(c), for each of the latest two years.

Alden Courts of Waterford is a sheltered care facility catering to those with memory impairments. As it is not a nursing care facility, it does not have an annual occupancy standard; therefore, this item is not germane.

- b. If prospective residents have been referred to other facilities in order to receive the subject services, the applicant shall provide documentation of the referrals, including completed applications that could not be accepted due to lack of the subject service and documentation from referral sources, with identification of those patients by initials and date.

The Applicant has needed to refer both existing residents (12 in past 12-months from Alden Courts of Waterford) and prospective residents (approximately 24 in past 12 months from Alden of Waterford) to other facilities not on its campus in order to receive nursing services for individuals with memory impairment. Refer to **ATTACHMENT-10C**.

2. Projected Referrals

The applicant shall provide documentation as described in Section 1125.540(d).

Appended as **ATTACHMENT-13C** are two (2) physician referral letters indicating that 156 annual referrals could be made to the facility upon project completion for the next two years. This project is only for 20 beds and with 156 referrals the resultant average length of stay would be only 42 days. This proposed population is not the short-term rehabilitative population. If the actual resultant average length of stay is only 100 days, which is still short for this population,

ATTACHMENT-15

SECTION IV – SERVICE SPECIFIC REVIEW CRITERIA Continued xix

then only 66 annual referrals would be necessary to maintain optimal utilization. Moreover, as over half of all admissions to Alden Courts of Waterford have come from within the campus (refer to ATTACHMENT-10A), it can be expected that the previously documented referrals will flow internally instead of to other area facilities. Therefore, it would appear that there is more than enough demand for the proposed beds and services.

In support of the Applicant's experienced demand for the proposed services, a market feasibility study was commissioned and performed. Laurel Research Associates determined that (using the State's new demographic estimates and projections) there was and will be a need for additional nursing care services that cater to Alzheimer's Disease and Related Disorders (ADRD). The study found the proposed project would require a capture rate of only 0.3% and a total inventory penetration rate of 7%, both well within industry norms. Thus, with a modest 20-bed establishment being proposed, patient access to nursing services for those with memory care issues would be improved and needed.

3. If a projected demand for service is based upon rapid population growth in the applicant facility's existing market area (as experienced annually within the latest 24-month period), the projected service demand shall be determined as described in Section 1125.540 (e).

This project is not based upon rapid population growth and as such, this item is not applicable.

SECTION IV – SERVICE SPECIFIC REVIEW CRITERIA Continued xx

Criterion 1125.590 - Staffing Availability

1. For each category of service, document that relevant clinical and professional staffing needs for the proposed project were considered and that licensure and JCAHO staffing requirements can be met.

Nursing care is the only category of service applicable. It should be known that this project includes the existing operations in good standing with IDPH and CMMS that meet all licensing requirements to include staffing. Moreover, upon project completion, the facility will maintain its good standing with IDPH and CMMS.

2. Provide the following documentation:
 - a. The name and qualification of the person currently filling the position, if applicable; and
 - b. Letters of interest from potential employees; and
 - c. Applications filed for each position; and
 - d. Signed contracts with the required staff; or
 - e. A narrative explanation of how the proposed staffing will be achieved.

Appended as **ATTACHMENT-19A**, is the existing and proposed staffing pattern for the existing 22-bed sheltered care unit and the proposed 20-bed nursing care unit, by position title at the Subject facility. This project will establish a new category of service resulting in an increase of full time equivalents from 36.5 full time equivalents to 45 full time equivalents, a net increase of 8.5 full time equivalents. The proposed staffing will be achieved in the following manner:

The Applicants are related to a much larger organization that operates several general and several specialized long-term care facilities. Therefore, the Applicant and its administrative service company have the resources of general long-term care facilities throughout Illinois. This organization also has several assisted living and independent living units within Illinois. It is

ATTACHMENT-19

SECTION IV – SERVICE SPECIFIC REVIEW CRITERIA Continued xxi

the policy of the organization to begin a comprehensive recruitment program for every new facility, or new category of service, approximately four to six months prior to the opening in order to insure that the new facility has all of the necessary positions filled with qualified personnel. Local advertising in the area newspaper and at area nursing schools has generally been sufficient in attracting the needed professional health care manpower.

Furthermore, it is the policy of the organization to promote from within their company whenever possible which allows the transfer of top professionals in their field to start-up facilities. The Applicant is closely related to Alden Management Services, Inc., the administrative services company, who recruits locally, regionally, and nationally for highly qualified staff.

1. A listing is obtained from the Illinois Board of Nurses in the geographic area of the proposed facility. Letters are mailed to announce the opening of the new facility, or category of service, in the specific areas and the positions that are available;
2. Advertisement in the local newspaper;
3. A special day for nurses will be held in the community. The nurses from the surrounding area will be invited to a special open house and tour of the facility. A film will also be shown to introduce the Applicant and its other Long-Term Care facilities, concluding with a question and answer session on the philosophy of the organization;
4. Announcement of the opening of the facility will be sent to the area Schools of Nursing. It is the philosophy of the organization that an innovative nursing program, and a continual in-service training program enhances the attraction of new employees and helps retain qualified and dedicated staff. It should be noted that the administrative services company is located in Chicago, and is very familiar with the employment situation of the area. Alden also has employees within the area and the State to pull from to fill

ATTACHMENT-19

SECTION IV – SERVICE SPECIFIC REVIEW CRITERIA Continued xxii

any needed position. The proposed employees will have paid continuing education credits, competitive wages, and a pension offered. With such a large number of existing employees one strong focus of recruitment will be by word of mouth by these existing employees to their respective communities. Furthermore, Alden will provide an upward mobility transfer for those employees within the market area.

As an existing facility, the following are the specific hiring procedures used at the Subject facility:

1. Applications are completed either online or in person;
2. Hiring manager reviews the applications;
3. Calls are made to the eligible candidates for each position to interview with specific manager;
4. If the candidate meets the requirements of the position, a second interview is scheduled with the Executive Director;
5. If the position is a management position, an interview is scheduled with a corporate partner to determine whether the candidate meets the job requirements;
6. Potential candidates are drug tested following a second successful interview and are informed that results will be communicated with them within a week;
7. Potential candidates are called by the Business Office Manager when the drug test results are received;
8. If the drug test results show the candidate is eligible for hire, the candidate is then scheduled to come in for orientation.

Employee turnover at Alden Courts of Waterford is very low and the Applicant has not experienced any difficulty in maintaining appropriate staffing levels. Lauren Wetzels, Executive

ATTACHMENT-19

SECTION IV – SERVICE SPECIFIC REVIEW CRITERIA Continued xxiii

Director of Alden Courts of Waterford, has provided a statement indicating more than half of the current employees have more than two years of seniority and several have been there as long as seven years. Additionally, she has provided a listing of applications on file by position title. Ms. Wetzel's documentation is appended as **ATTACHMENT-19B**. Thus, it does not appear that between the Applicant's experience and through the experience of the existing campus that there will be any difficulty in securing the needed health care manpower.

ATTACHMENT- 19

Alden Courts of Waterford
Staffing Patterns

CURRENT STAFFING PATTERN	
<u>Title</u>	<u>FTE's</u>
<u>ADMINISTRATIVE</u>	
Executive Director	1
Program Coordinator	1
Officer Manager	1
Receptionist	2
Marketing Liaison	1
<u>NURSING</u>	
Director of Nursing	1
Nursing Professionals	5
Nurses' Aides	17
<u>DIETARY</u>	
Dietary Aides	2.5
<u>ACTIVITIES</u>	
Activity Director	1
Activity Aides	2
<u>HOUSEKEEPING</u>	
Housekeeping Aides	2
TOTAL FTE's	36.5

PROPOSED STAFFING PATTERN	
<u>Title</u>	<u>FTE's</u>
<u>ADMINISTRATIVE</u>	
Executive Director	1
Program Coordinator	1
Officer Manager	1
Receptionist	2
Account Manager	1
<u>NURSING</u>	
Director of Nursing	1
Nursing Professionals	10
Nurses' Aides	21
<u>DIETARY</u>	
Dietary Aides	2
<u>ACTIVITIES</u>	
Activity Director	1
Activity Aides	2
<u>HOUSEKEEPING</u>	
Housekeeping Aides	2
TOTAL FTE's	45

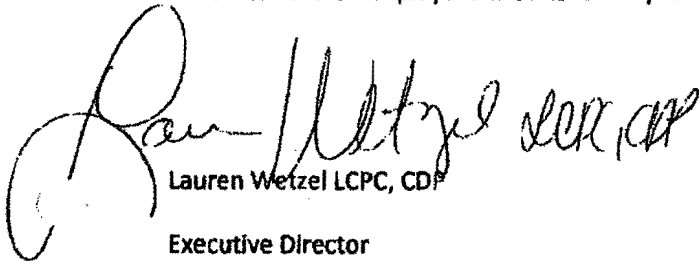
Laundry and Dietary services will be provided through Alden of Waterford Rehabilitation and Health Care Center. These costs are reflected as Contracted Costs in the financial statements under the appropriate cost center.

ALDEN Courts of Waterford

July 20, 2015

To whom it may concern:

I have attached a list of the applications submitted for CNA, LPN and RN positions in 2015. Not all applicants attached were hired, nor was there necessarily a position open when the applications were received. We average approximately 50 employees at any time and more than half have been with the company for over two years. While we do experience turnover in these positions, it is generally low and have had several employees with us for 7+ years.


Lauren Wetzel LCPC, CDP
Executive Director

Alden Courts Memory Care Assisted Living
1991 Randi Drive Aurora, IL 60504 tel: (630)851-1466 fax: (630)585 1008 www.thealdennetwork.com



A member of the Alden network

ATTACHMENT-19B

Alden Courts of Waterford
Employment Applications On File

<u>RN</u>		<u>LPN</u>		<u>CNA</u>	
M S	Feb 2015	T S	Feb 2015	C S	Sept 2014
J M	Feb 2015	S B	May 2015	E M	Jan 2015
E R	Apr 2015	D G	July 2015	J S	Feb 2015
R S-G	Apr 2015	S G	July 2015	C M	Feb 2015
S A	Apr 2015	K M	July 2015	K A	Feb 2015
M S	Apr 2015	S R	July 2015	M K	Apr 2015
H N-T	Apr 2015			S E	May 2015
G Z	May 2015			J D	July 2015
A D	May 2015				
K Z	July 2015				
G C	June 2015				

SECTION IV – SERVICE SPECIFIC REVIEW CRITERIA Continued xxiv

Criterion 1125.600 Bed Capacity

The maximum bed capacity of a general LTC facility is 250 beds, unless the applicant documents that a larger facility would provide personalization of patient/resident care and documents provision of quality care based on the experience of the applicant and compliance with IDPH's licensure standards (77 Ill. Adm. Code: Chapter I, Subchapter c (Long-Term Care Facilities)) over a two-year period.

This project is for the conversion of 22 of the 66 sheltered care beds to 20 nursing care beds in the existing Continuum of Care Retirement Campus (CCRC). Upon project completion the licensed bed capacity will be 20 nursing beds, and will also have 44 sheltered care beds. Therefore, the proposed project is compliant with this criterion.

SECTION IV – SERVICE SPECIFIC REVIEW CRITERIA Continued xxv

Criterion 1125.610 - Community Related Functions

The applicant shall document cooperation with and the receipt of the endorsement of community groups in the town or municipality where the facility is or is proposed to be located, such as, but not limited to, social, economic or governmental organizations or other concerned parties or groups. Documentation shall consist of copies of all letters of support from those organizations.

Appended as **ATTACHMENT-21A** are letters of support for the proposed addition of nursing memory care services to Alden Courts of Waterford. These letters are from William Catching, Aurora Township Supervisor; Thomas J Weisner, Mayor of City of Aurora; Scheketa Hart-Burns, Alderman, 7th Ward, City of Aurora; Richard C. Irvin, Alderman-At-Large, City of Aurora; Robert J. O'Connor, Alderman-At-Large, City of Aurora; Meenalochani Narayanan, MD; and Vivya M. Sabharwal, MD.

Doctors Narayanan and Sabharwal are of IPC Healthcare and combined state that they can refer 17 additional residents to the facility over the next 24-months.

Together, these letters indicate great community support for the proposed project.

ATTACHMENT- 21



AURORA TOWNSHIP

80 N. Broadway
Aurora, IL 60507-2847
www.auroratownship.org

Supervisor
William Catching

Trustees
Dolores Hicks
David W. Moore
Juan Reyna
Juanita Wells

Clerk
Ken Christy

Assessor
Davis R. Offutt

Highway Commissioner
John Shoemaker

Township Service Locations:

Main Office
80 N. Broadway
630-897-8777

Youth Services
313 Gale Street
630-859-7501

Senior Services
900 N. Lake Street
630-897-4035

Highway Dept.
220 Butterfield Rd.
North Aurora
630-892-0246

May 6, 2015

Ms. Courtney Avery, Administrator
Health Facilities and Services Review Board
Illinois Department of Public Health
525 W. Jefferson Street, Second Floor
Springfield, IL 62761

RE: Application for Certificate of Need for Alden Courts of Waterford
1991 Randi Drive
Aurora, IL

Dear Ms. Avery,

I am writing to express my support for Alden's proposed expansion of nursing memory care services which will be accomplished through the conversion of 22 sheltered care beds to 20 skilled care beds at Alden Courts of Waterford, which is currently a 66-bed sheltered memory facility in Aurora.

Upon project completion, the facility will offer 44 sheltered care and 20 nursing care beds all for those with memory impairment. With the continuum of care community at Alden of Waterford there are residential services from independent villas and duplexes and apartments all the way through skilled rehabilitation services. As the population continues to age in and around the Aurora area, these services are needed as much as ever.

Alden of Waterford has been part of the Aurora community for nearly 20 years. I hope that it will continue for another 20 years and continue to grow and evolve as it has been.

I urge you to give Alden's certificate of need application every consideration.

Yours truly,

William Catching
Aurora Township Supervisor

ATTACHMENT-21A



City of Aurora

Mayor's Office • 44 E. Downer Place • Aurora, Illinois 60507-2067
Phone (630) 256-3010 • Fax (630) 256-3019

Thomas J. Weisner
Mayor

May 11, 2015

Ms. Courtney Avery, Administrator
Health Facilities and Services Review Board
Illinois Department of Public Health
525 W. Jefferson Street, Second Floor
Springfield, IL 62761

RE: Application for Certificate of Need for Alden Courts of Waterford
1991 Randi Drive
Aurora, IL

Dear Ms. Avery,

I am writing to express my support for Alden's proposed expansion of nursing memory care services which will be accomplished through the conversion of 22 sheltered care beds to 20 skilled care beds at Alden Courts of Waterford, which is currently a 66-bed sheltered memory facility in Aurora. Upon project completion, the facility will offer 44 sheltered care and 20 nursing care beds all for those with memory impairment. With the continuum of care community at Alden of Waterford there are residential services from independent villas and duplexes and apartments all the way through skilled rehabilitation services. As the population continues to age in and around the Aurora area, these services are needed as much as ever.

Alden of Waterford has been part of the Aurora community for nearly 20 years. I hope that it will continue for another 20 years and continue to grow and evolve as it has been.

I urge you to give Alden's certificate of need application every consideration.

Sincerely,

Thomas J. Weisner
Mayor



City of Aurora • Office of the Aldermen

44 East Downer Place • Aurora, Illinois 60507-2067 • (630) 256-3020 • FAX (630) 256-3059

July 2, 2015

Ms. Courtney Avery, Administrator
Health Facilities and Services Review Board
Illinois Department of Public Health
525 W. Jefferson Street, Second Floor
Springfield, IL 62761

RE: Application for Certificate of Need for Alden Courts of Waterford
1991 Randi Drive
Aurora, IL

Dear Ms. Avery,

I am writing to express my support for Alden's proposed expansion of nursing memory care services which will be accomplished through the conversion of 22 sheltered care beds to 20 skilled care beds at Alden Courts of Waterford, which is currently a 66-bed sheltered memory facility in Aurora. Upon project completion, the facility will offer 44 sheltered care and 20 nursing care beds all for those with memory impairment. With the continuum of care community at Alden of Waterford there are residential services from independent villas and duplexes and apartments all the way through skilled rehabilitation services. As the population continues to age in and around the Aurora area, these services are needed as much as ever.

I have been Alderman for 24 years and Alden of Waterford has been part of our community for nearly 20 years. I hope that it will continue for another 20 years and continue to grow and evolve as it has been.

I urge you to give Alden's certificate of need application every consideration.

Sincerely,

A handwritten signature in cursive script that reads "Scheketa Hart-Burns".

Scheketa Hart-Burns

Alderman, 7th Ward



City of Aurora • Office of the Aldermen

44 East Downer Place • Aurora, Illinois 60507-2067 • (630) 256-3020 • FAX (630) 256-3059

July 7, 2015

Ms. Courtney Avery, Administrator
Health Facilities and Services Review Board
Illinois Department of Public Health
525 W. Jefferson Street, Second Floor
Springfield, IL 62761

RE: Application for Certificate of Need for Alden Courts of Waterford
1991 Randi Drive
Aurora, IL

Dear Ms. Avery,

I am writing to express my support for Alden's proposed expansion of nursing memory care services which will be accomplished through the conversion of 22 sheltered care beds to 20 skilled care beds at Alden Courts of Waterford, which is currently a 66-bed sheltered memory facility in Aurora. Upon project completion, the facility will offer 44 sheltered care and 20 nursing care beds all for those with memory impairment. With the continuum of care community at Alden of Waterford there are residential services from independent villas and duplexes and apartments all the way through skilled rehabilitation services. As the population continues to age in and around the Aurora area, these services are needed as much as ever.

Alden of Waterford has been part of the Aurora community for nearly 20 years. I hope that it will continue for another 20 years and continue to grow and evolve as it has been.

I urge you to give Alden's certificate of need application every consideration. Thank you for your consideration.

Sincerely,



Richard C. Irvin

Alderman-At-Large



City of Aurora • Office of the Aldermen

44 East Downer Place • Aurora, Illinois 60507-2067 • (630) 256-3020 • FAX (630) 256-3059

July 2, 2015

Ms. Courtney Avery, Administrator
Health Facilities and Services Review Board
Illinois Department of Public Health
525 W. Jefferson Street, Second Floor
Springfield, IL 62761

RE: Alden Courts of Waterford
1991 Randi Drive
Aurora, IL

Dear Ms. Avery,

I am writing to express my support for Alden's proposal to convert 22 sheltered care beds to 20 skilled care beds at the above captioned location. We believe there is a tremendous need for this level of care and Alden Courts of Waterford will provide unique and much needed service to our community. The Alden of Waterford Community with all of its levels of care provides a vital health care continuum for our City. They have been a valued partner for nearly 20 years.

I urge you to give Alden's certificate of need application every consideration. Thank you for your attention on this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "Robert J. O'Connor".

Robert J. O'Connor
Alderman-At-Large



June 30, 2015

Ms. Courtney Avery, Administrator
Health Facilities and Services Review Board
Illinois Department of Public Health
525 W. Jefferson Street, Second Floor
Springfield, IL. 62761

Re: Application for Certificate of Need for Alden Courts of Waterford
1991 Randi Drive
Aurora, IL. 60504

Dear Ms. Avery,

I am a physician who currently sees residents at Alden of Waterford. The building next door, Alden Courts of Waterford, is specifically designed to service residents who have been diagnosed with dementia.

In the past year, I have referred patients to other facilities farther from home that were not as well equipped to care for my patients. Due to HIPAA compliance, identifications of these patients cannot be provided. It would be great for Alden Courts of Waterford to be able to provide services to these patients. After project completion, I project that I could refer approximately ten patients in the two years. Please note these patient referrals have not been used to support any other pending approved CON application for this area. As the population continues to age in and around the surrounding area of the Waterford Campus, these services will be much in need.

I encourage you to consider this application.

Sincerely,

A handwritten signature in black ink, appearing to be "NM", is written over the word "Sincerely,". To the right of the signature, the date "7/1/15" is written in the same ink.

Dr. Meenalochani Narayanan



July 14, 2015

Ms. Courtney Avery, Administrator
Health Facilities and Services Review Board
Illinois Department of Public Health
525 W. Jefferson Street, Second Floor
Springfield, IL. 62761

Re: Application for Certificate of Need for Alden Courts of Waterford
1991 Randi Drive
Aurora, IL. 60504

Dear Ms. Avery,

The Alden of Waterford Campus is a wonderful concept. I currently see patients at Alden of Waterford Rehabilitation and Healthcare facility. The Alden Courts of Waterford facility is specifically designed to care for those patients in need of memory care.

In the past, I have referred patients to other facilities due to memory care needs which could not be provided by facilities closest to the hospital. Due to HIPAA compliance, identifications of these patients cannot be provided. I am anticipating that I could refer approximately seven patients in the two years following the completion of skilled beds implemented into the Alden Courts of Waterford facility. Please note these patient referrals have not been used to support any other pending approved CON application for this area. The need for skilled services at the Alden Courts of Waterford facility would serve not only the current population on campus, but the surrounding community as they continue to age.

Thank you for your time and I strongly encourage you to consider this application.

Sincerely,

A handwritten signature in black ink, appearing to read "V. Sabharwal", is written over the typed name below.

Dr. Vidya M. Sabharwal, MD

SECTION IV – SERVICE SPECIFIC REVIEW CRITERIA Continued xxvi

Criterion 1125.620 - Project Size

The applicant shall document that the amount of physical space proposed for the project is necessary and not excessive. The proposed gross square footage (GSF) cannot exceed the GSF standards as stated in Appendix A of 77 Ill. Adm. Code 1125 (LTC rules), unless the additional GSF can be justified by documenting one of the following:

Upon project completion, Alden Courts of Waterford will comprise 9,254 gross square feet of space for 20 nursing care beds. This equates to 462.7 gsf per bed upon project completion. The proposed project complies with this criterion as the full bed compliment is well within the range limit of 435-713 gross square feet per bed.

SECTION IV – SERVICE SPECIFIC REVIEW CRITERIA Continued xxvii

Criterion 1125.630 - Zoning

The applicant shall document one of the following:

1. The property to be utilized has been zoned for the type of facility to be developed;
2. Zoning approval has been received; or
3. A variance in zoning for the project is to be sought.

Appended as **ATTACHMENT-23A**, is a letter from Edward T. Sieben, Zoning Administrator, City of Aurora, Planning & Zoning Division, providing documentation that the Subject facility is operating in compliance.

ATTACHMENT- 23



City of Aurora

Planning and Zoning Division
Development Services Department

Mailing Address: 44 E. Downer Place • Aurora, IL 60507-2067
Office Location: 1 S. Broadway • Aurora, IL 60505
Phone: (630) 256-3080 • Fax (630) 256-3089

Stephane A. Phifer, AICP
Director

Zoning Verification Letter

July 15, 2015

Ms. Courtney Avery, Administrator
Health Facilities and Services Review Board
Illinois Department of Public Health
525 W. Jefferson Street, Second Floor
Springfield, Illinois 60504

Re: Alden Courts of Waterford
1991 Randi Drive Aurora, IL 60504
Pin: 15-36-202-005

Dear Ms. Avery,

Please be advised that the above-mentioned property is zoned **PDD – Planned Development District**.

The subject licensed Health Care facility is a permitted conditional use under the current City Zoning Ordinance and in compliance with the zoning. The facility is operating in compliance. Therefore, current zoning use as a nursing facility is "lawfully established under the City of Aurora regulation."

If you have any questions, please contact me at (630) 256-3080.

Sincerely,

A handwritten signature in black ink that reads "Edward T. Sieben".

Edward T. Sieben,
Zoning Administrator
City of Aurora
Planning & Zoning Division

SECTION IV – SERVICE SPECIFIC REVIEW CRITERIA Continued xxviii

Criterion 1125.640 – Assurances

1. The applicant representative who signs the CON application shall submit a signed and dated statement attesting to the applicant's understanding that, by the second year of operation after the project completion, the applicant will achieve and maintain the occupancy standards specified in Section 1125.210(c) for each category of service involved in the proposal.
2. For beds that have been approved based upon representations for continuum of care (Section 1125.560(a)) or defined population (Section 1125.560(b)), the facility shall provide assurance that it will maintain admissions limitations as specified in those Sections for the life of the facility. To eliminate or modify the admissions limitations, prior approval of HFSRB will be required.

Appended as **ATTACHMENT-24A**, is a letter signed by the Applicant addressing item number 1. Item two above does not apply as the existing campus was not originally approved under the continuum of care or defined population criterion.

ATTACHMENT- 24



ALDEN COURTS OF WATERFORD, L.L.C.
4200 WEST PETERSON AVENUE
CHICAGO, ILLINOIS 60646
(773) 286-3883

June 29, 2015

Ms. Courtney Avery, Administrator
Health Facilities and Services Review Board
Illinois Department of Public Health
525 W. Jefferson Street, Second Floor
Springfield, IL 62761

RE: Alden Courts of Waterford
1991 Randi Drive
Aurora, IL

Dear Ms. Avery:

This letter attests to the fact that if this Project is approved by the Illinois Health Facilities and Services Review board, Alden Courts of Waterford understands that it is expected to achieve and maintain the occupancy specified in §1125.210 (c) by the second year of operation after project completion. Our ability to maintain this occupancy level could be affected by various factors outside of our control, such as natural disasters, regulatory changes in healthcare, interruption of necessary utilities, physical plant problems, or other unexpected issues outside of our control which could have a direct or indirect effect upon our occupancy rate.

Sincerely,

ALDEN COURTS OF WATERFORD, L.L.C.

By: 
Randi Schullo

Subscribed and sworn to before me
this 29 day of June, 2015

Notary Public 



ATTACHMENT-24A

SECTION V – FINANCIAL AND ECONOMIC FEASIBILITY REVIEW *Continued i*

Criterion 1125.650 - Modernization

1. If the project involves modernization of a category of LTC bed service, the applicant shall document that the bed areas to be modernized are deteriorated or functionally obsolete and need to be replaced or modernized, due to such factors as, but not limited to:
 - a. High cost of maintenance;

This item is not applicable.
 - b. Non-compliance with licensing or life safety codes;

As this project is changing from sheltered care to nursing, the modernization requires meeting the higher level of licensing standards to include physical plant requirements. Although this cost is minor, it is part of the project. Specifically, to be eligible for nursing licensure, the unit requires the addition of its own clean and soiled utilities, a tub/shower room that meets standards, and the addition of an exam room. Finally, to help accommodate these changes/additions one two-bed room will be repurposed for the exam room. These are the extent of the alterations to the unit that pertain to licensing requirements.
 - c. Changes in standards of care (e.g., private versus multiple bed rooms); or

This item is not applicable.
 - d. Additional space for diagnostic or therapeutic purposes.

As explained in item "b" above, part of the renovations include "required" diagnostic/therapeutic space such as the exam room which was not required under the sheltered care level of licensing. The need for this space is primarily due to licensing requirements.
2. Documentation shall include the most recent:
 - a. IDPH and CMMS inspection reports; and

ATTACHMENT-25

SECTION V – FINANCIAL AND ECONOMIC FEASIBILITY REVIEW Continued ii

The existing space is licensed as sheltered care. The need to modernize is more about realigning the campus continuum of care to provide a nursing level of care for memory impaired residents than it is about correcting or updating the facility to meet present day standards and practices. This facility is designed specifically for the care and treatment of those with memory issues and as it continues in that path, a modernization is merely needed to meet that end with IDPH licensure.

b. Accrediting agency reports.

This item is not applicable due to the nature of the modernization.

3. Other documentation shall include the following, as applicable to the factors cited in the application:

a. Copies of maintenance reports;

This item is not applicable.

b. Copies of citations for life safety code violations; and

This item is not applicable.

c. Other pertinent reports and data.

Appended as **ATTACHMENT-25A** is the IDPH physical plant licensing requirements for a nursing unit illustrating the need for clean and soiled utilities, an exam room, and a unit tub/shower room.

4. Projects involving the replacement or modernization of a category of service or facility shall meet or exceed the occupancy standards for the categories of service, as specified in Section 1125.210(c).

The proposed project involves the conversion of categories of service from sheltered care to nursing care; hence, the establishment of the nursing category of care. There are also no occupancy requirements applicable to sheltered care. As Alden Courts of Waterford is an

ATTACHMENT-25

SECTION V – FINANCIAL AND ECONOMIC FEASIBILITY REVIEW *Continued iii*

independently licensed sheltered care facility, and as this project is for the establishment of the nursing category of care, this item is not applicable.

Joint Committee on Administrative Rules
ADMINISTRATIVE CODE

TITLE 77: PUBLIC HEALTH
CHAPTER I: DEPARTMENT OF PUBLIC HEALTH
SUBCHAPTER c: LONG-TERM CARE FACILITIES
PART 300 SKILLED NURSING AND INTERMEDIATE CARE FACILITIES CODE
SECTION 300.2860 NURSING UNIT

Section 300.2860 Nursing Unit

- a) The number of resident beds in a nursing unit shall not exceed 75 beds.
 - 1) Not less than 60 percent of the resident beds shall be in one or two bed rooms.
 - 2) Not less than three percent of the total number of the beds in the facility shall be located in single bed rooms with a private bath, water closet and lavatory.

- b) General Requirements for Bedrooms
 - 1) Resident bedrooms shall have an entrance directly off a corridor with an entrance door which swings into the room.
 - 2) Resident bedrooms shall have adequate and satisfactory artificial light and be equipped in accordance with Section 300.2940(a)2) and (e)1).
 - 3) Residents shall have access to a toilet room without entering the general corridor area.
 - 4) The facility shall provide a closet or wardrobe of at least four square feet for each resident.
 - 5) Resident bedroom floors shall be at or above grade level.
 - 6) Each room used as a resident bedroom shall have at least one outside window, and a total window area to the outside equal to at least one-tenth the floor area of the room.
 - 7) A nurses' call system shall be provided in accordance with Section 300.2940 (g). (B)

ATTACHMENT-25A

- 8) Complete visual privacy shall be provided for each resident in multibed rooms. Design for privacy shall not restrict resident access to the entry, lavatory, nor toilet.
 - 9) No resident bedroom shall be located more than 120 feet from the nurses' station, clean utility room, and soiled utility room.
- c) Resident Bedrooms
- 1) Single resident bedrooms shall contain at least 100 square feet. Multiple resident bedrooms shall contain at least 80 square feet per bed. Minimum usable floor area shall be exclusive of toilet rooms, closets, lockers, wardrobes, alcoves, vestibules, or clearly definable entryways.
 - 2) Multiple resident bedrooms shall not have more than four beds nor more than three beds deep from an outside wall. All beds shall have a minimum clearance of three feet at the foot and sides of the bed.
- d) Special Care Room
- 1) The facility shall provide a special care room for each nursing unit.
 - 2) This room shall be provided with a private toilet room containing water closet, lavatory, bathtub or shower and all other necessary facilities to meet the resident's needs. (B)
 - 3) This room shall be located to allow direct visual supervision from the nurses' station.
 - 4) This room shall be included in the authorized maximum bed capacity for the facility.
 - 5) It is permissible for the room to be occupied by a resident, not in need of special care, provided the resident is clearly informed and understands he or she will be immediately transferred out of the room any time of day or night, whenever the room is needed to care for a resident requiring special care.
- e) Nurses' Station (B)
- 1) The facility shall provide a minimum of one nursing station per unit with direct access to the corridor for each nursing unit. The location of this station shall allow visual control without the use of mirrors of each resident sleeping corridor. Separation shall be provided from the utility rooms.
 - 2) One or more nursing units may be combined at a central nursing station if sufficient space is provided for all nursing functions.

- 3) A lounge with toilet room shall be provided near each station for nursing staff. Lockers for safekeeping of coats and personal effects may be provided within this space or in a convenient central location.

f) Bath and Toilet Rooms

- 1) The resident bedroom toilet room shall serve no more than two resident rooms nor more than eight beds. The toilet room shall contain a water closet and a lavatory. The lavatory may be omitted from the toilet room when the resident room contains a lavatory.
- 2) The facility shall provide one wheelchair resident toilet room for each sex residing in a nursing unit. The room shall be accessible from the corridor. This room shall contain a water closet and lavatory.
- 3) Wheelchair resident toilet rooms are not required when all resident toilet rooms can accommodate wheelchair residents.
- 4) The facility shall provide one training toilet room on each nursing floor, which is accessible from the corridor. Three-foot clearance at the front and both sides of the water closet shall be provided. This room shall contain a lavatory accessible for wheelchair use.
- 5) The facility shall provide one bathtub or shower for each ten resident beds per nursing unit which are not served by bathing or showering facilities in resident rooms.
- 6) All shower stalls for residents not needing assistance shall be at least three feet square and shall have no curb.
- 7) The facility shall provide at least one bathtub for assisted bathing per nursing unit. There shall be a clear area at least three feet wide at both sides and one end of the tub.
- 8) The facility shall provide at least one shower stall for assisted showering per nursing unit. The shower stall shall be at least four feet square with no curb.
- 9) The facility shall provide a toilet room with a water closet and lavatory, accessible to the assisted bathtub and shower without entering the general corridor. This room may be arranged to serve as the training toilet facility.
- 10) Grouped bathing and toilet facilities shall be partitioned or curtained for privacy.

g) Utility Rooms

- 1) The clean utility room shall have direct access to a corridor or access may be through the nurses' station entrance. This room shall contain work counters, single or double compartment sink with integral drainboard, storage

ATTACHMENT-25A

cabinets, and an autoclave. (Autoclave may be waived in lieu of other methods if sterilization is approved by Department.)

- 2) A clean linen storage room or closet within the clean utility room shall be provided. If a closed cart system is used, storage may be in an alcove.
 - 3) The soiled utility room shall have direct access to a corridor. This room shall contain work counters, storage cabinets, and a clinical rim flush sink. The room shall also contain a three compartment sink with integral drainboard if chemical sanitizing procedures are used, or a double compartment sink with integral drainboard if a utensil sanitizer is used (See Section 300.2430).
 - 4) The charging room for a linen chute shall be large enough to unload the collecting cart with the door closed.
- h) Medication Facilities
- 1) A medication station shall be provided for convenient and prompt 24 hour distribution of medicine to residents. The medicine preparation room shall be under the nursing staff's visual control and contain a work counter, refrigerator, and locked storage for biologicals and drugs. A sink for handwashing and preparation of medication shall be provided in the medication preparation room.
 - 2) If medicine dispensing carts are used, a specific storage space for the cart shall be provided, which may be located in the nurses' station or in an alcove or other space under the direct control of the nursing staff. A sink for handwashing and preparation of medication shall be provided in the nurses' station.
- i) A nourishment station shall be provided with a handwashing sink and equipment including refrigerator, and storage cabinets for serving nourishment between scheduled meals. Ice for residents' use shall be provided only by icemaker dispenser units.
- j) A room for examination and treatment of residents shall be provided and shall have a minimum floor area of 100 square feet, excluding space for vestibule, closets and work counters (whether fixed or movable). The minimum room dimension shall be ten feet. The room shall contain a lavatory or sink equipped for handwashing; a work counter; storage facilities; and a desk, counter, or shelf space for writing.
- k) An equipment storage room shall be provided for storage of equipment such as I.V. stands, inhalators, air mattresses, walkers, and wheelchairs.
- l) Parking space for wheelchairs shall be provided and located out of path of normal traffic.

(Source: Amended at 18 Ill. Reg. 1491, effective January 14, 1994)

ATTACHMENT-25A

SECTION V – FINANCIAL AND ECONOMIC FEASIBILITY REVIEW *Continued iv*

Criterion 1125.800 Estimated Total Project Cost

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):

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

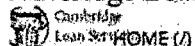
Availability of Funds

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:

Appended as ATTACHMENT-27A, is documentation that Alden of Waterford has reserve replacement funds in excess of the project amount that will be fully used to fund the project. Therefore, the Applicant is funding the modernization and conversion through internal resources.

ATTACHMENT-27



Alden Waterford

[Home \(/\)](#) / [Alden \(/loans/view\)](#) / Alden Waterford

Initial Principal

\$18,925,076.23

Remaining Principal

\$18,599,870.11

Escrow Balance

\$58,962.66

Pool Number	FHA Account	Escrow Account	R/R Account	Repair Account	Misc 1
762574	071-43233	2376944	3254331	None	None

Loan Transactions

Tran. Type	Transaction Month	Payment Rcvd.	Payment Rcvd. Date	Payment Total	Principal	Interest	Real Estate Tax	MIP	Insurance	Escrow Total	R/R
Manual Balance Forward	01/01/2014						\$50,892.52	\$58,056.25	\$13,000.00	\$121,948.77	\$1,039,511.39
Interest	01/02/2014										\$72.02
Insurance	01/10/2014								\$-18,267.00	\$-18,267.00	
Invoice (/invoices/view/143)	01/01/2014	Yes	01/14/2014	\$101,620.12	\$17,550.00	\$65,764.84	\$9,205.48	\$8,100.00	\$1,000.00	\$18,305.48	
Reserve Release	01/29/2014										\$-4,190.49
Interest	02/06/2014										\$70.61
Invoice (/invoices/view/328)	02/01/2014	Yes	02/14/2014	\$101,620.12	\$17,610.99	\$65,703.65	\$9,205.48	\$8,100.00	\$1,000.00	\$18,305.48	
Interest	03/10/2014										\$63.55
Invoice (/invoices/view/466)	03/01/2014	Yes	03/14/2014	\$101,620.12	\$17,672.18	\$65,842.46	\$9,205.48	\$8,100.00	\$1,000.00	\$18,305.48	
Interest	04/08/2014										\$70.36
Invoice (/invoices/view/589)	04/01/2014	Yes	04/14/2014	\$101,620.12	\$17,733.60	\$65,581.04	\$9,205.48	\$8,100.00	\$1,000.00	\$18,305.48	
Reserve Release	04/24/2014										\$-1,479.00
Interest	05/09/2014										\$88.07
Invoice (/invoices/view/707)	05/01/2014	Yes	05/14/2014	\$101,620.12	\$17,795.22	\$65,519.42	\$9,205.48	\$8,100.00	\$1,000.00	\$18,305.48	
RE Tax 2013 Full Year	05/21/2014						\$-98,604.22			\$-98,604.22	
Reserve Release	06/03/2014										\$-6,085.00
MIP Payment	06/03/2014							\$-93,595.76		\$-93,595.76	
Interest	06/10/2014										\$70.27
Invoice (/invoices/view/981)	06/01/2014	Yes	06/16/2014	\$101,620.12	\$17,857.06	\$65,457.58	\$9,205.48	\$8,100.00	\$1,000.00	\$18,305.48	
Reserve Release	06/25/2014										\$-38,420.00
Interest	07/07/2014										\$67.13
Invoice (/invoices/view/2989)	07/01/2014	Yes	07/14/2014	\$101,620.12	\$17,919.11	\$65,395.53	\$9,205.48	\$8,100.00	\$1,000.00	\$18,305.48	

ATTACHMENT-27A

Tran. Type	Month	Rcvd.	Rcvd. Date	Total	Principal	Interest	Tax	MP	Insurance	Total	R/R
Reserve Release	07/15/2014										\$-60,450.00
Reserve Release	08/07/2014										\$-35,245.00
Refund of Excess Tax Escrow	08/14/2014						\$-16,726.68			\$-16,726.68	
Invoice (/invoices/view/3589)	08/01/2014	Yes	08/14/2014	\$92,414.64	\$17,981.38	\$65,333.26		\$8,100.00	\$1,000.00	\$9,100.00	
Interest	08/15/2014										\$64.60
Interest	09/10/2014										\$60.49
Invoice (/invoices/view/3694)	09/01/2014	Yes	09/15/2014	\$101,620.12	\$18,043.87	\$65,270.77	\$9,205.48	\$8,100.00	\$1,000.00	\$18,305.48	
Interest	09/30/2014										\$36.31
Invoice (/invoices/view/4370)	10/01/2014	Yes	10/14/2014	\$101,620.12	\$18,106.57	\$65,208.07	\$9,205.48	\$8,100.00	\$1,000.00	\$18,305.48	
Reserve Release	10/15/2014										\$-82,908.80
Interest	10/31/2014										\$123.16
Invoice (/invoices/view/4519)	11/01/2014	Yes	11/14/2014	\$101,620.12	\$18,169.49	\$65,145.15	\$9,205.48	\$8,100.00	\$1,000.00	\$18,305.48	
Interest	11/28/2014										\$52.65
Insurance	12/01/2014								\$-11,717.00	\$-11,717.00	
Reallocate Escrows	12/01/2014							\$-5,984.00	\$5,984.00		
Reserve Deposit	12/03/2014										\$10,753.67
Invoice (/invoices/view/5193)	12/01/2014	Yes	12/15/2014	\$102,620.12	\$18,232.63	\$65,082.01	\$9,205.48	\$8,100.00	\$1,000.00	\$18,305.48	\$1,000.00
Interest	12/31/2014										\$55.13
Invoice (/invoices/view/5481)	01/01/2015	Yes	01/14/2015	\$102,620.12	\$18,295.99	\$65,018.65	\$9,205.48	\$8,100.00	\$1,000.00	\$18,305.48	\$1,000.00
Reserve Release	01/27/2015										\$-10,467.72
Interest	01/30/2015										\$55.10
Invoice (/invoices/view/6101)	02/01/2015	Yes	02/17/2015	\$102,620.12	\$18,359.56	\$64,955.08	\$9,205.48	\$8,100.00	\$1,000.00	\$18,305.48	\$1,000.00
Interest	02/27/2015										\$49.32
Invoice (/invoices/view/6549)	03/01/2015	Yes	03/16/2015	\$102,620.12	\$18,423.36	\$64,891.26	\$9,205.48	\$8,100.00	\$1,000.00	\$18,305.48	\$1,000.00
Interest	03/31/2015										\$54.66
Reserve Release	04/06/2015										\$-12,489.68
April Invoice (/invoices/view/7025)	04/01/2015	Yes	04/14/2015	\$102,620.12	\$18,487.38	\$64,827.26	\$9,205.48	\$8,100.00	\$1,000.00	\$18,305.48	\$1,000.00
Interest	04/30/2015										\$52.28
May Invoice (/invoices/view/7485)	05/01/2015	Yes	05/14/2015	\$102,620.12	\$18,551.63	\$64,763.01	\$9,205.48	\$8,100.00	\$1,000.00	\$18,305.48	\$1,000.00
Interest	05/29/2015										\$53.95
RE Tax 2014 1st	06/01/2015						\$-51,889.98			\$-51,889.98	
MIP Payment	06/12/2015							\$-92,478.63		\$-92,478.63	

Tran. Type	Month	Rcvd.	Rcvd. Date	Total	Principal	Interest	Tax	MIP	Insurance	Total	R/R
Reserve Release	06/15/2015										\$-32,980.00
June Invoice (/invoices/view/7930)	06/01/2015	Yes	06/15/2015	\$102,620.12	\$18,616.10	\$64,696.54	\$9,205.48	\$8,100.00	\$1,000.00	\$18,305.48	\$1,000.00
July Invoice (/invoices/view/8474)	07/01/2015	No		\$102,620.12	\$18,680.79	\$64,633.85	\$9,205.48	\$8,100.00	\$1,000.00	\$18,305.48	\$1,000.00
Totals:					\$325,406.12	\$1,174,257.40	\$40,164.80	\$11,797.86	\$7,000.00	\$58,962.66	\$762,935.36
Remaining	Principal:				\$18,599,670.11						

APPROVE
JULY'S
1000
DEPOSIT

Search: _____

About

Jeffrey A. Davis founded Cambridge Realty Capital in 1983, after becoming the youngest Senior Vice President at Baird & Warner, Inc., a landmark Chicago real estate firm. During the 1980's, Cambridge provided financing for all types of commercial real estate.

[Read more](#)

[http://www.cambridgecap.com/pages/about_us/3.php/1xzz2c9l\(imcP9\)](http://www.cambridgecap.com/pages/about_us/3.php/1xzz2c9l(imcP9))

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 Chicago IL, US 60606
 Phone: (312) 357-1601
 Email: info@cambridgecap.com

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SECTION V – FINANCIAL AND ECONOMIC FEASIBILITY REVIEW Continued v

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.

As the proposed project meets item 2 above of the Financial Viability Waiver, this item is not applicable.

Economic Feasibility

This section is applicable to all projects

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

Appended as ATTACHMENT-30A, is a letter from the owner addressing reasonableness of financing arrangements.

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:

This item is not applicable as the project is being funded completely with internal resources and does not require financing.

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.

Salaries	\$1,814,048	
Benefits	\$428,520	
Supplies	\$310,952	
Patient Days @ 90%		21,024
Total/Operating Cost/PT Day	\$2,553,520	\$121.46

ATTACHMENT-30

SECTION V – FINANCIAL AND ECONOMIC FEASIBILITY REVIEW Continued vii

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.

Depreciation	\$312,746	
Interest Expense	\$443,279	
PT Days @ 90%		21,024
Total/Operating Cost/PT Day	\$756,025	\$35.96



ALDEN WATERFORD REHAB & COURTS, L.L.C.
 4200 WEST PETERSON AVENUE
 CHICAGO, ILLINOIS 60646
 (773) 286-3883

June 29, 2015

Ms. Courtney Avery, Administrator
 Health Facilities and Services Review Board
 Illinois Department of Public Health
 525 W. Jefferson Street, Second Floor
 Springfield, IL 62761

RE: Certificate of Need for Alden Waterford Rehab &
 Courts, L.L.C; conditions of debt financing

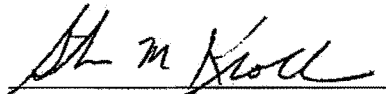
Dear Ms. Avery:

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 1.5 times for LTC 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.

Respectfully,



Board Member or Officer
 Steve Kroll, Chief Financial Officer

Notarization:

Subscribed and sworn to before me
 this 29 day of June 2015



Signature of Notary
 Seal

 Board Member or Officer

Notarization:

Subscribed and sworn to before me
 this ____ day of _____

 Signature of Notary
 Seal



ATTACHMENT-30A



ALDEN COURTS OF WATERFORD, L.L.C.
4200 WEST PETERSON AVENUE
CHICAGO, ILLINOIS 60646
(773) 286-3883

June 29, 2015

Ms. Courtney Avery, Administrator
Health Facilities and Services Review Board
Illinois Department of Public Health
525 W. Jefferson Street, Second Floor
Springfield, IL 62761

RE: Certificate of Need for Alden Courts of Waterford,
L.L.C.; conditions of debt financing

Dear Ms. Avery:

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.

Respectfully,

Board Member or Officer
Steve Kroll, Chief Financial Officer

Board Member or Officer

Notarization:
Subscribed and sworn to before me
this 29 day of June, 2015

Notarization:
Subscribed and sworn to before me
this ____ day of _____

Signature of Notary
Seal

Signature of Notary
Seal

