



Transcript of **Hearings - Project No. 15-038, 15-039,
15-040**

Date: September 17, 2015

Case: State of Illinois Health Facilities and Services Review Board

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ILLINOIS DEPARTMENT OF PUBLIC HEALTH
HEALTH FACILITIES AND SERVICES REVIEW BOARD
BEFORE HEARING OFFICER MICHAEL CONSTANTINO

IN RE: :
Public Comments Regarding :
Application to Reconfigure : Project No. 15-038
the Rockton Avenue Campus :
by Rockford Memorial :
Hospital. :

HEARING in accordance with requirements of the
Illinois Health Facilities Planning Act

E. J. "Zeke" Giorgi Center

200 South Wyman Street

Rockford, Illinois 61101

Thursday, September 17, 2015

11:00 a.m.

Job No. 91696A

Pages: 1 - 116 for 15-038

Reported by: Camille Suzanne Connell,

CSR, RPR

PRESENT:

ILLINOIS HEALTH FACILITIES AND SERVICES

REVIEW BOARD, by

MICHAEL CONSTANTINO, Public Hearing Officer

NELSON AGBODO, Health Systems Data Manager

BRAD BURZYNSKI, Board Member

1 HEARING OFFICER CONSTANTINO: Thank you. We
2 are going to get started. It's 11:00, and my name is
3 Mike Constantino. I'm with the Illinois Department of
4 Public Health, and I'll be the hearing officer today.
5 Also with us today is Senator Brad Burzynski, the
6 current state board member, Mr. George Rote Nelson
7 Agbodo. Both of those are at the sign-in tables out
8 front. The Senator now would like to say a few words
9 of welcome. Senator.

10 SENATOR BURZYNSKI: Thank you. We are
11 pleased to see all of you here today, and certainly
12 this kind of a hearing always generates a big crowd,
13 so we are anxious to hear your comments. I'm here
14 today on behalf of the State board to ensure you that
15 your concerns are being heard, and that the Board
16 takes those things very seriously. I look forward to
17 hearing from all of you, like the whole room, I see a
18 lot of people that I used to work with, and it's good
19 to see you all here today. So thank you. Looking
20 forward to your input and hearing you.

21 HEARING OFFICER CONSTANTINO: Thank you,
22 Senator.

23 We have three wishes today. Please turn off
24 all your cell phones, all your other devices; and the

1 second wish is to be very nice to Camille, our court
2 reporter. That means when you come up to the podium
3 to speak, can you say your name, spell your name, and
4 speak very plainly into the microphone.

5 And my last wish is, please pay attention to
6 me when I tell you your time is up, please.

7 Okay. I have a brief statement I have to
8 read into the record, and then we will start taking
9 oral testimony. As per the rules of the State Board,
10 I have to read a previously published legal notice
11 into the record.

12 Project No. 15-038, Rockford Memorial
13 Hospital, Rockton Avenue campus, in accordance with
14 the requirements of Illinois Health Facility Planning
15 Act. Notice was provided on receipt of application
16 for permit to discontinue various clinical and
17 nonclinical service at Rockford Memorial Hospital on
18 the Rockton Avenue campus in Rockford, Illinois. The
19 applicants are Interstate Alliance Bank, Rockford
20 Memorial Hospital, and Rockford Health Systems. The
21 approximate cost is \$9.9 million.

22 The second project that was submitted was
23 project No. 15-039, Rockford Memorial Hospital,
24 Riverside campus. In accordance with the requirements

1 of the Illinois Health Facility Planning Act, notice
2 was given on receipt of an application for permit to
3 establish a 188-bed acute care hospital at I-90 and
4 Riverside Boulevard in Rockford Township. The
5 applicants are Interstate Alliance, Inc., Rockford
6 Memorial Hospital, and Rockford Health System. The
7 anticipated project cost is approximately \$470
8 million.

9 And the third project that was submitted was
10 15-040, Rockford Memorial Hospital, Riverside campus,
11 medical clinics building. In accordance with the
12 requirements of the Illinois Health Facility Planning
13 Act, notice was given on receipt of an application to
14 permit -- excuse me -- to establish a medical clinics
15 building at I-90 and East Riverside Boulevard,
16 Rockford Township. The applicants are Interstate
17 Alliance, Inc., Rockford Memorial Hospital, and
18 Rockford Health System. The anticipated cost of the
19 project is approximately \$68.5 million. Two of the
20 applications contain safety net impact statements,
21 15-038 and 15-039, and was declared to -- all three
22 applications were declared complete on August 19th,
23 2015.

24 Consideration by the State Board has been

1 tentatively scheduled for the November 17th, 2015,
2 State Board meeting to be held in Bolingbrook,
3 Illinois. The State Board staff will post its
4 findings in a State Board staff report, and the
5 reports would be made available by the internet on
6 November 3rd, 2015.

7 The public may submit written responses in
8 support of or in opposition to the findings of the
9 Illinois Health Facilities and Services Review Board
10 staff. The public will have until 9 a.m.

11 November 9th, 2015, to provide these comments. The
12 internet address used to access these reports can be
13 found at hfsrb.il.gov. You can also submit written
14 comments to this Court Behavior Administrator,
15 Illinois Health Facilities and Review Administrator,
16 care of the Illinois Department of Public Health, 525
17 West Jefferson Street, Second Floor, Springfield,
18 Illinois.

19 I want to reiterate to you that this meeting
20 is covered by HIPAA, so please have an acknowledgment
21 letter if you are disclosing individual patient
22 information. If you have not signed in, please do so.
23 In addition, those of you who came with prepared text
24 of your testimony, please note that you may submit the

1 written text, and you don't have to provide oral
2 testimony. All written and oral testimony will be
3 entered into today's record, and it will be made
4 available to all of the board members.

5 The final thing I would like, I want to make
6 a suggestion, and I need your agreement on this:
7 Cognizant of the amount of the time and the three
8 hearings we are scheduled to perform, if you came
9 prepared to provide oral testimony at all three public
10 hearings, we can incorporate your testimony in the two
11 hearings that follow this, and you will only have to
12 testify one time. If all of you are in agreement with
13 that, we would be happy to do that.

14 (Nodding yes.)

15 HEARING OFFICER CONSTANTINO: Now I will
16 call the first individual to testify from Rockford
17 Memorial Hospital. Javon Bea, please.

18 MR. BEA: Good morning, Senator Burzynski.
19 Thank you for being here. Good morning, Illinois
20 members of the Health Facilities Planning Committee
21 staff, and also members of the Rockford community, for
22 taking time out of our busy day to be here. This is
23 an exciting project that we get to tell you about
24 today.

1 My name is Javon, J-a-v-o-n, last name
2 B-e-a, and I am President and CEO of Mercy Health
3 System, who is the applicant in connection with the
4 three projects we are going to hear about today.
5 These projects encompass the needed reconfiguration of
6 our medical services, so that at completion, we will
7 have one hospital on two campuses.

8 Mercy Health System was privileged to have
9 partnered earlier this year with Rockford Health
10 System. When we began forging our future together,
11 Mercy Rockford Health System asked some difficult
12 questions and focused on how can we improve our
13 services and better fulfill our responsibilities to
14 the regional area, since Rockford Memorial Hospital is
15 the state-designated neonatal center for the 11
16 northern Illinois counties, and how we can improve
17 access for these counties, having to refer patients to
18 Rockford Memorial. We valued how patient care and
19 access could be improved. Most importantly, we
20 focused on the current respective needs of our
21 community and what changes are essential to meet those
22 needs in the future.

23 These three applications filed with the
24 agency, when viewed together, accomplish these

1 projects.

2 The first application proposes the needed
3 reconfiguration on our longstanding Rockford campus.
4 The second application proposes the establishment of
5 our most critical care and tertiary hospital services
6 on our Riverside Boulevard campus. And the third
7 application is simply proposes the establishment of a
8 medical office building to house our critical care and
9 tertiary physicians on the Riverside Boulevard campus.

10 Our first application provides our absolute
11 commitment to the Rockton Avenue campus, where we have
12 served patients on the west side for 130 years. But
13 not just on the west side. We have served patients
14 throughout the entire Illinois region because of our
15 state designation, but we have committed on Rockton
16 Avenue to continue to provide convenient care,
17 comprehensive emergency services, and a comprehensive
18 array of adult primary and specialty services with a
19 similar number of adult beds at all campuses.

20 Additionally, to further service the
21 community, as a result of our consolidation we are
22 going to be able to make available to the Rockford
23 community 200,000 square feet for community
24 organizations and nonprofit agencies. We will be

1 able, on our Rockton Avenue campus, to be able to move
2 to all private patient care rooms, providing
3 medical/surgical beds, ICU beds, and behavioral health
4 beds. We will continue to provide 24-hour a day,
5 365-day a year support services with full laboratory,
6 imaging, X-ray, CT, MRI, full pharmacy onsite at all
7 times.

8 The majority of our physicians -- the
9 majority of our primary and specialty physicians will
10 remain on the Rockton Avenue campus to continue to
11 care for patients at Rockton Avenue. And our
12 state-of-the-art cancer center will be housed at
13 Rockton Avenue and will provide the cancer care for
14 the entire system for both locations.

15 We will continue to provide a broad scope of
16 outpatient services on our Rockton campus. We will
17 continue to employ hundreds of nurses, hundreds of
18 other patient service workers and personnel in the
19 business functions at Rockton Avenue.

20 In short, we are going to continue our
21 vibrant and robust campus on Rockton Avenue that is
22 dedicated to provide the best possible patient
23 outcomes in the most efficient manner for the long
24 term for all hospital services that can be offered in

1 an appropriate manner in a 60-year old building.

2 One area of confusion I have heard is that
3 there is going to be a difference in the level of
4 emergency care at Rockton Avenue versus at Riverside,
5 which is a Level I designation. The next speaker, Dr.
6 Uehara, will specifically classify that this is not
7 the case. But in short, let me just say that the same
8 emergency conditions will be treated at Rockton Avenue
9 as treated at Riverside, which will carry the Level I
10 trauma designation.

11 So what makes a Level I trauma designation?
12 It is primarily -- and I would like to read from the
13 administrative code of the Illinois Department of
14 Public Health. "The Level I trauma designation,
15 under the direction of the Level I trauma medical
16 director, shall be responsible for coordinating trauma
17 care in the EMS region. This responsibility includes
18 obtaining the collaboration of all participating
19 hospitals in the region, and EMS systems in EMS
20 region."

21 So in other words, the primary goal for a
22 Level I trauma designation is a coordinating
23 administrative medical direction role for the EMS
24 region to coordinate the EMT and paramedics in the

1 region. And this -- we will continue to do this from
2 our Riverside campus.

3 In addition, Mercy Rockford is currently in
4 the process of significantly enhancing the areas of
5 the emergency response program through our new MD-1
6 program. Our MD-1 obtains highly-trained,
7 board-certified, emergency medicine physicians in an
8 emergency response vehicle equipped with life-saving
9 equipment and medications. This is a very important
10 program, because these physicians provide care to
11 patients in the field, working alongside the EMS and
12 paramedics before a patient is even brought to the
13 emergency department.

14 In other words, we are providing
15 hospital-level emergency care directly to the scene of
16 an accident or medical emergency.

17 HEARING OFFICER CONSTANTINO: Can I
18 interrupt you for just a second? We have been
19 notified there is a vehicle, a Suzuki Verona, NIU
20 plate 5147 that is going to be towed. Anyone with
21 that vehicle? NIU plate is 5147. Thank you.

22 MR. BEA: Sure. I'm just going to pick up
23 this last point, which is very important, and that is,
24 any one program takes emergency physicians and sends

1 them out to the field working with the EMTs and
2 paramedics with medications and life-saving equipment,
3 and since we have implemented that program, we have
4 shown that we have increased the survival rate by
5 three to four times.

6 So just as one example, the national
7 survival rate for cardiac arrest is 10 percent.
8 Implementing the MD one program in Beloit, Wisconsin,
9 the survival rate is now 47 percent. And in
10 Janesville, it's 30 percent. That is three to four
11 times the national survival rate. Mercy does more for
12 patients in an emergency before they ever have to be
13 brought to the hospital, and those patients have a
14 better chance of positive outcomes.

15 Another area of confusion that I have heard,
16 and I have met with a large community group from
17 neighborhoods and primarily on the west side, is that
18 for heart attack patients, they are going to have --
19 by not having the cath lab, being at Riverside, they
20 won't have this quote "immediate access" to cath lab.

21 Let me clarify that. First of all, for
22 heart attack patients, the Rockford Riverside campuses
23 will continue to follow the guidelines of the Society
24 of Cardiothoracic Patient Care, the American College

1 of Cardiology, and the American Heart Association.
2 These accrediting organizations all recommend a
3 90-minute hospital door to balloon catheterization
4 time, meaning that the time a patient presents at the
5 hospital to the time that blood flow is restored to
6 the heart in the cath lab should be 90 minutes.

7 All patients when they arrive at Rockton or
8 Riverside emergency department by ambulance or by
9 foot, will be treated according to these following
10 guidelines. But it is most interesting to note that
11 it takes, on average, 30 minutes to prepare the
12 cardiac catheterization lab. So even if a patient
13 walks into an emergency room -- currently on Rockton
14 Avenue, where there is a cath lab on site -- there is
15 still an average of 30 minutes before the cath lab is
16 prepared, which is no different than if you have a
17 heart attack at home and the ambulance has to come
18 pick you up.

19 While the ambulance picking you up is en
20 route, the cath lab was prepared. So, the distance --
21 the time it takes to get from Rockton Avenue to the
22 Riverside campus where the cath lab is -- by ambulance
23 is 10 to 12 minutes. By regular car, it will be 20 to
24 22 minutes. So, if a person presents at Rockton

1 Avenue needing a cath lab, they will be over at
2 Riverside before the cath lab is even done being
3 prepared. So it's -- there really is no difference,
4 and it has to do with the fact that there is going to
5 be the follow-up cardio thoracic surgery and other
6 services that need to be, like, a new technology at a
7 new facility.

8 So if a patient, and I've heard if a heart
9 attack -- I think I've summarized all that for you.
10 The point is, there is no difference between a heart
11 attack patient who walks in and the patient who calls
12 911 and is transported to the Riverside PD. Having
13 one or two campuses will provide our neighbors with
14 the best possible treatment at both worlds. They will
15 still get all their primary care specialty physicians,
16 access to inpatient beds, ICU beds, surgery suites,
17 all of the support services at Rockton. But if they
18 or their loved one have a high-risk baby, a high-risk
19 mother, or need major open heart surgery or brain
20 surgery, they will have new, state-of-the-art
21 facilities on Riverside.

22 So there is no question that together our
23 one hospital and two campuses will result in improved
24 care for our patients.

1 In addition, Rockford has a responsibility
2 -- Rockford Memorial to the regional area -- as I
3 said, Rockford Memorial is a state-designated hospital
4 to be a receiving center for the 11 northern counties
5 for neonatal children -- Level I neonatal. With a
6 convenient location on Highway 90 for our most
7 critical care and tertiary services that receive
8 referrals, Rockford Memorial receives referrals from
9 over 40 hospitals and large physician groups in
10 northern Illinois and Wisconsin, especially for
11 high-risk children and mothers.

12 You are going to find letters of support
13 from hospitals in the regional area that refer in,
14 such as Rochelle Hospital, Kishwaukee in DeKalb and
15 other hospitals supporting this, because they say the
16 access and the time to get to this location for these
17 critical care services for high-risk mothers and
18 children will be so much easier and less time on
19 Highway 90.

20 There is another concept, too, that I just
21 learned at last night's meeting with a number of
22 neighbors, is that because the perinatal high-risk
23 mother care, we are going to have our ob unit at
24 Riverside, because we feel it's always best to deliver

1 your babies in that safest environment where there is
2 back-up emergency care. I've had six children, and
3 two of the six were supposed to be -- anticipated to
4 be -- non- complicated deliveries, and they turned
5 into emergencies during the birthing process. So it
6 was great to have a perinatologist and neonatologist
7 right on site.

8 And being the fact that the Riverside campus
9 is only 10 minutes by ambulance, 20 minutes by car, it
10 makes all the sense in the world to have our
11 deliveries at Riverside where the back-up specialty
12 and subspecialty services are. But obviously, if a
13 patient -- if a delivery is imminent and is immediate,
14 and they come to the Rockford Memorial Rockton Avenue
15 campus, the baby will be able to be delivered right in
16 the emergency department.

17 So the -- I think that when we look at it,
18 this access on 90 is going to be better, not just for
19 all of the people who currently use Rockford Memorial
20 by moving out of -- if you take your neonatal center,
21 it's a 60-year old facility. Our neonatal center is
22 highly acclaimed and is due to the excellence of our
23 staff. But it's 37 babies all in one big, open room,
24 and every one of those babies are fighting for

1 survival. And when a baby dies, it's tremendously
2 traumatic on the other parents whose babies are
3 alongside. The state-of-the-art care today is to have
4 private bassinets and private rooms in neonatal.
5 Every year we have to go to the Illinois Department of
6 Public Health and get facility exceptions to continue
7 on for another year with our --

8 HEARING OFFICER CONSTANTINO: Can you
9 conclude your comments, please.

10 MR. BEA: Yep. So I will just say that we
11 will provide our neighbors with full access. We are
12 going to -- let me just kind of conclude in the last
13 couple pages here.

14 I think -- just a couple big comments, is
15 that we are different than what's happened in the
16 State of Illinois in that if you take some examples
17 where hospitals -- Sherman in Elgin, Silver Cross in
18 Joliet, and they had 80 facilities, and moved their
19 entire facilities and left convenient care behind.
20 And we are not doing that. We are actually keeping
21 the majority of our services at Rockton Avenue, but
22 offering in our facility what can be appropriately
23 offered.

24 Last, I would like to just say that we are

1 highly committed -- I am born and raised in Rockford,
2 have 11 brothers and sisters. I have many dozens of
3 relatives living on the west side. So we are highly
4 committed for the long term -- going to make a written
5 commitment to the City for keeping our facilities at
6 Rockton.

7 And lastly, two more comments. One is
8 upgrading our facilities for our most critical care
9 services is no different than what the other two
10 Rockford hospitals have done or are doing. Swedish
11 American built a 120-bed tower within the last 10
12 years, and OSF is currently building a major tower as
13 we speak at their sprawling campus. We do not have
14 enough land at Rockton Avenue to build a replacement
15 bed tower for our critical care services. We must do
16 this now, as Rockford Memorial identified and
17 purchased land 20 years ago for this purpose. Thank
18 you for your time and attention.

19 (Applause.)

20 HEARING OFFICER CONSTANTINO: Alderman
21 Venita Hervey.

22 ALDERMAN HERVEY: Thank you. My name is
23 Venita Hervey, V as in Victor, e-n-i-t-a, H-e-r, V as
24 in Victor, e-y. Thank you for sponsoring this

1 hearing.

2 As you well know, I am the person who
3 requested the hearing, quite by accident. I just made
4 a comment to someone casually to ask when the hearing
5 on the Rockford Memorial changes would happen, and
6 they said, Well, I don't believe anyone has requested
7 a hearing. So I had to rush back from a vacation and
8 then overnight you the request for a hearing.

9 I, like Mr. Bea, was born and raised on the
10 west side of Rockford. But unlike him, I still live
11 in the house in which I was raised. I care deeply and
12 passionately about the people who reside there. You
13 are looking at someone who just turned 60 who has a
14 congenital heart defect, Stage 4 non-Hodgkins
15 lymphoma, and kind of to paraphrase Joan Rivers, this
16 body has seen more knives than a Benihana restaurant.

17 So when you talk about the importance of
18 maintaining health care services in an area of
19 Rockford that is not just underserved, it is low
20 income, it is middle income, some of us are high
21 income. But it is an area that historically has seen
22 its services and resources evaporate only to reappear
23 in the far district portion of Rockford and Winnebago
24 County.

1 I put up with it when it came to grocery
2 stores, I didn't say a word when it came to commercial
3 services -- dry cleaners and things of that sort. But
4 the line is in the sand when it comes to health care
5 resources. Health care services are supposed to be
6 provided on the basis of need, not greed, and
7 certainly not a desire to attract people to a region
8 in order to establish a fourth hospital.

9 Rockford is uniquely situated to have three
10 hospitals that are perfectly located. We have
11 Rockford Memorial campus to the west, which serves not
12 just the west side of Rockford, but the entire western
13 and southwestern region of Winnebago County and
14 extending over. We have Swedish American in our
15 center city that serves north, south, and center, and
16 we have OSF St. Anthony Hospital on the eastern edge
17 of the city, that serves the eastern edge extending
18 into not just Winnebago, but also Boone County and the
19 community there.

20 We are also fortunate, I understand, to have
21 two amazing Level I trauma centers. One located in
22 the west, which serves the center city and toward the
23 western region of the county at Rockford Memorial
24 Hospital. The second, at OSF St. Anthony Hospital,

1 which serves the entire regional area -- I'm sorry --
2 eastern area, going over into Boone County. That is
3 balanced and a very nuanced approach to providing
4 health care for the residents of that area.

5 To upset that balance with no credible
6 reason defies logic. To take both a Level I trauma
7 center and a cardiac cath unit from the Rockford
8 Memorial Hospital campus, and to site it 25 minutes
9 away, not just from residents on the western portion
10 of Rockford, but also the western regions of our
11 towns, Pecatonica, Winnebago -- I can't even remember
12 -- Seward. All of those small towns going down to the
13 southwest. Byron, Oregon.

14 Ironically, the state has just spent over
15 \$50 million to redesign and improve Route 2, which is
16 South Main Street, which brings you from the southwest
17 straight shot up to Rockford Memorial campus. It used
18 to take you quite a while. And from the western
19 regions of the county, I think it's 20 -- Business 20.
20 West State Street is being widened. It's being done
21 in three phases, so it's not quite complete and will
22 provide much faster access, again, right into West
23 State Street and up to Rockton to Rockton Memorial
24 Hospital.

1 If this application was about establishing a
2 specialty center for NICU and specialized women's and
3 children's care, most of us wouldn't be here today,
4 and we would be planning on where we are going for
5 lunch. But it's not. It's about establishing a
6 fourth hospital in Rockford.

7 One hospital, two campuses is a great
8 marketing mantra, but what it really describes is a
9 fourth hospital in Rockford at the expense of a
10 hospital that is uniquely situated with our other two
11 hospital service centers to meet the health care needs
12 of this region. This is coming at a time when access
13 to health care is being improved across the country.
14 We are trying to avoid duplication of services. We
15 are trying to avoid increases in health care costs and
16 keep those contained.

17 If this application is approved, we will
18 have a fourth hospital; we will be transporting people
19 further and further across the city. People will have
20 to be removed from Rockford Memorial to receive
21 follow-up care at the Riverside campus.

22 As an Alderman, I can tell you that the
23 provision of fire and EMS services, along with police,
24 takes about 80 percent of our municipal budget. At a

1 time when our state is in a very precarious financial
2 situation, we are talking about taking ambulances from
3 the City of Rockford out of service for longer periods
4 of time to transport people to the Riverside location
5 when we can barely afford to keep our still coverage
6 areas and provide the time -- I would say timely
7 response to major cardiac and stroke events and trauma
8 events that we have established.

9 Rockford is one of the few accredited fire
10 and EMS departments. I think there are only three in
11 the entire state. This will greatly upset our still
12 coverage area and impede our certification. We are
13 pulling together some numbers, we do not have all of
14 them yet, but I can tell you I had this conversation
15 with the mayor and I will tell you, I was very upset
16 that he has submitted a letter of support for this
17 project. It didn't -- it was not presented to the
18 Aldermen. We have not approved it. In fact, I should
19 actually go back. This land is not even in the City
20 of Rockford. There is a pre- annexation agreement,
21 but we don't own it yet. But if it becomes part of
22 our jurisdiction, we will probably have to add a new
23 fire station at a huge cost -- not just the building
24 but the additional staff and two to three ambulances

1 to make up for time that they will be out of service
2 for having to travel to the Riverside facility.

3 I was going to read a list of the services
4 that will be discontinued and removed from Rockford
5 Memorial, but in deference to the time constraint, I
6 will not do that. I have listed them in writing. I
7 mentioned the Level I trauma center, cardiac cath, the
8 emergency department will go from 31 current rooms
9 down to 14; intensive care from 31 to 4 beds;
10 operating rooms from 14 to 4.

11 I will tell you that I have looked at the
12 census track numbers and the demographics projections
13 for the next 15 years, and none of them say that 75
14 percent of west Rockford and west Winnebago residents
15 will be moving to the far west side. That means that
16 there will be a void of health care services, a
17 virtual vacuum, especially in the area of critical
18 health care services.

19 I understand very well that Rockford
20 Memorial is a 60-year old facility. I wasn't born
21 there, but close. However, we have two hospitals in
22 this city that have made a commitment to modernize
23 their facilities and to bring them into state of the
24 art health care provision. OSF St. Anthony and the

1 far eastern region has more land, and I know that Mr.
2 Bea has sort of concentrated on that. That's true.
3 But Swedish American Hospital in our center city is
4 more land landlocked than Rockford Memorial.

5 Swedish American utilized both vertical
6 integration and built and then did some other
7 configurations and maintained their commitment to
8 providing health care. Rockford is not Janesville.
9 Rockford is not a semi-rural area. It is the urban
10 core of Winnebago County, and I have to commend the
11 hospital that made that commitment to continue to
12 provide and develop state-of-the-art patient care.
13 Swedish Memorial [sic] -- Swedish American is at a
14 very old and admittedly blighted area of the city. It
15 has higher crime, kind of like my neighborhood. But
16 they rebuilt there because there is a need for those
17 services. OSF St. Anthony has attracted more people
18 from lower incomes and has expanded their services to
19 meet the needs.

20 I find it ironic and highly disturbing that
21 Rockford Memorial Hospital, which we have always
22 claimed as our own, is basically looking to gut their
23 services on the Rockton Avenue campus and transfer
24 those to the far east side.

1 HEARING OFFICER CONSTANTINO: Alderman, can
2 you conclude your comments.

3 ALDERMAN HERVEY: Absolutely will.

4 HEARING OFFICER CONSTANTINO: Thank you.

5 ALDERMAN HERVEY: So, there are myriads of
6 issues that mitigate attempts allowing this
7 application -- these applications of these three
8 projects. But let me say if it is allowed, I believe
9 they will have devastating impact on the provision of
10 timely and life-saving services for a large segment of
11 the populations. I understand Mr. Bea has some
12 numbers that indicate that timeliness -- time doesn't
13 matter as much as it used to for cardiac intervention
14 and stroke intervention. That is unsupported by any
15 medical evidence, empirical research, replication,
16 peer review, validation are the hallmarks on medical
17 science, and none of those factors are present.

18 I am asking that you not consider that the
19 west side of Rockford be served by an emergency room
20 physician riding around in an SUV to give
21 intervention. Instead, the need remains in west
22 Rockford, where it has been for the last 60 years.
23 There are ways that Rockford Memorial can modernize
24 and upgrade their facility while maintaining services,

1 and I ask that you consider and respectfully deny
2 these applications and projects. Thank you.

3 (Applause.)

4 HEARING OFFICER CONSTANTINO: We have got a
5 number of people that want to testify orally. So we
6 are going to limit the testimony to two minutes. So
7 would Dennis -- I can't -- Yehar [sic]. Okay.

8 MR. UEHARA: I think the Alderwoman left
9 about 40 seconds left and that's exactly how much I'm
10 going to leave you --

11 HEARING OFFICER CONSTANTINO: Appreciate it.

12 DR. UEHARA: -- over my two minutes. My
13 name is Dennis D-e-n-n-i-s, U-e-h-a-r-a. And, unlike
14 the Alderwoman and Mr. Bea, I neither was born on the
15 west side nor do I live on the west side, though I
16 work on the west side, and I have a commitment to the
17 west side as well as all the emergency department
18 staff for the patients in the community as well as the
19 entire community of Rockford.

20 I am the chairman of the emergency
21 department of Rockford Memorial Hospital, I'm board
22 certified in emergency medicine, and have been
23 practicing in the emergency department in Rockford for
24 over 30 years. I am in support of all three Mercy

1 Rockford Health Systems projects.

2 Today I will limit my comments just to this
3 part of the provision of high-quality comprehensive
4 emergency services. Both locations will provide full
5 access to necessary emergency medical care. We remain
6 committed to the care of the west side of Rockford
7 where we have been serving patients for over
8 100 years.

9 Senator Burzynski and staff, I will review a
10 checklist -- it will be short -- of reasons that
11 people seek emergency care. And I have provided a
12 copy to you also that you can use as reference. This
13 list was compiled by the emergency staff. The list
14 includes very common conditions such as abdominal
15 pain, headache, fractures, lacerations, difficulty
16 breathing, and congestion. These medical ailments
17 will be cared for at both emergency department medical
18 locations. The list also includes other medical
19 conditions that community members have asked about
20 specifically, such as gunshots and knife wounds. But
21 it will also be cared for at both locations.

22 In addition, people have asked specifically
23 about whether or not the North Rockton Avenue campus
24 will be able to care for people who have a stroke or

1 have chest pain with a possible heart attack, and the
2 answer is yes. We will provide safe, effective care
3 based on medical protocols to every patient who comes
4 to our door, whether that door is on North Rockton or
5 Riverside.

6 In addition, we are going to have four ICU
7 beds, which is an appropriate number of beds for our
8 volume in the emergency department and volume in the
9 hospital. We are extremely proud of our emergency
10 physicians. They are superbly trained, board
11 certified, and highly experienced. They are committed
12 to the hospital and the community and are
13 long-standing members of the hospital and medical
14 staff. Some have been on staff for 25 to 30 years.
15 It will be that same group of physicians who will
16 provide care for both emergency departments supported
17 by our outstanding hospital medical staff and
18 emergency department staff.

19 Thank you for the opportunity to speak in
20 support of the plan with my assurance as medical
21 director that we will continue our legacy of
22 excellence in emergency care for the patients of our
23 community.

24 (Applause.)

1 HEARING OFFICER CONSTANTINO: Thank you.
2 Go to Robert Wooden, Robert J. Wooden. Number one,
3 Paula Carynski, C-a-r-y-n-s-k-i

4 MS. CARYNSKI: Thank you. I am Paula
5 Carynski, P-a-u-l-a, C-a-r-y-n-s-k-i, and I am the
6 President of the OSF St. Anthony Medical Center, and I
7 am speaking in opposition of the proposed project.

8 We at OSF are very much in favor of economic
9 development, particularly the type that provides
10 state-of-the-art medical facilities. OSF has made its
11 initial health care and economic investment in
12 Rockford in 1899, and we continue to do so. In fact,
13 this year alone OSF committed \$85 million to
14 improvements on its campus. That being said, we
15 firmly believe that Mercy Rockford Health System
16 should continue its tradition of investing in the west
17 side of the city.

18 To build this facility far out on the east
19 side does nothing to generate economic activity on the
20 west side, which is in desperate need of an economic
21 boost of this magnitude. We all want to see Rockford
22 flourish; we at OSF are part of this community. We
23 raise our families here. We want only the best for
24 the community and for its health care. We want to see

1 Mercy Rockford make a \$400 million investment in
2 Rockford. We want that very much.

3 Our opposition, though, is the location of
4 that proposed investment -- where it is needed the
5 least, where it will result in duplication of
6 services, and certainly where it would result in the
7 now distribution of health care services at the
8 expense of those who are most vulnerable. A proposed
9 development like this will rejuvenate and revitalize
10 whatever area is fortunate enough to receive it.

11 We urge the review board to say no to this
12 proposal in its current form, and let Mercy Rockford
13 reconsider where this investment will best service the
14 health of Rockford and rejuvenate an area that
15 desperately needs the investment. Thank you.

16 (Applause.)

17 HEARING OFFICER CONSTANTINO: Dr. Hover and
18 Dr. Hover? And after the Doctor would be Jeffery --
19 I'm sorry. Dr. Jeffrey Tillery.

20 DR. CACERES: Thank you very much. I am Dr.
21 C-a-c-e-r-e-s. I am a directional [phonetic]
22 cardiologist at Rockford Memorial Hospital. I am
23 speaking in support -- I am speaking in support of the
24 Rockford Mercy Health System plans. Specifically, I

1 want to reassure area residents that every patient
2 that is having a heart attack that requires emergency
3 treatment in the cath lab will receive that care
4 according to the nationally published guidelines, and
5 that with Rockton Avenue campus or the East Riverside
6 Boulevard campus.

7 I just referred to several patients who
8 required emergency intervention when having a heart
9 attack -- additionally, everything shows that as long
10 as regular transition happens, there is no additional
11 advantage to having it done sooner within the time
12 frame. Whether a patient in the Rockton Avenue or the
13 East Riverside campus, we will provide this
14 life-saving care.

15 I am responsible for developing a regional
16 protocol and teaching our emergency department how to
17 respond when a patient needs emergency transport to a
18 hospital with an intervention cath lab. These
19 protocols are based on the American Association of
20 Cardiology guidelines. These same protocols will
21 apply at our Rockton Avenue emergency department. We
22 will refer to certain heart attacks as certain
23 [inaudible] is a heart attack that can be seen on an
24 EKG and needs emergency care.

1 Our plan to continue to provide care that
2 meets this standard is for patients with chest pain if
3 they call 911, EMS will perform an EKG within 10
4 minutes of contacting the patient. If the EKG shows
5 STEMI, EMS will activate a system alert. The Mercy
6 Rockford Health System will work with EMS to develop
7 protocols to STEMI patient to the Riverside campus.
8 While the patient is being transported to the
9 hospital, the cardiac cath lab presents for the
10 patient arrival and will be ready to treat that
11 patient. If a patient presents to Rockton Avenue
12 emergency department and be diagnosed to have a STEMI

13 HEARING OFFICER CONSTANTINO: Please
14 conclude your comments.

15 DR. CACERES: -- will be activated within 10
16 minutes of arrival. At that time, the Riverside
17 campus will prepare and will be ready to treat that
18 patient.

19 Therefore, the 20-minute transport time to
20 the east side will not affect our ability to treat
21 patients in the cath lab within the recommended time
22 frame. I am confident that the treating of patients
23 presenting to our Rockton Avenue emergency department
24 and those presenting to our Riverside campus will

1 receive the same outstanding standard of care.

2 (Applause.)

3 HEARING OFFICER CONSTANTINO: Melody is
4 next.

5 DR. TILLERY: Good morning. I'm Dr. Jeff
6 Tillery, J-e-f-f, last name T-i-l-l-e-r-y, and I am
7 the chief transformation officer for OSF Health
8 System.

9 I began practicing medicine here in Rockford
10 in 1990 as a family physician. In addition to wearing
11 many hats at OSF since 1994, I have served on the
12 board of directors for Crusader Clinic, have been
13 involved with the healthy Rockford initiative Access
14 to Care.

15 I am speaking in opposition of the proposed
16 projects. Medicine is all about best practices and
17 evidence. What we know now is that best practice
18 involves working better to better the health of the
19 entire population that our systems serve. It means
20 truly partnering with community in sickness and in
21 health. Best practice is caring about everything that
22 affects the health of those we serve, including
23 whether they can get to the hospital for the tests
24 they need. Best practice is serving people where they

1 are. Mercy Rockford plans to move its most essential
2 services to the east side, leaving some medical
3 services behind on the west side. Those remaining
4 services will be perfectly adequate when the need is
5 less acute, but when the need is life threatening to
6 treat heart attacks, strokes, car accident injuries,
7 or gunshot wounds, the trip across town to the Level I
8 trauma center now costs precious minutes and possibly
9 even lives. When the need is an MRI and the patient
10 has no car, that new hospital isn't just on the new
11 side of town, it's in another world. It's out of
12 reach.

13 A hospital is the foundation of a community.
14 It's a pillar of care and health. Shifting those
15 essential services from the west side to the east side
16 will leave a major void, because the population left
17 behind is both the most vulnerable of all the
18 residents served in Rockford, and they are those who
19 have the greatest challenges seeking care. The gap in
20 access will be devastating to many.

21 Our communities trust us, the three health
22 systems that serve Rockford, to keep them well, to
23 ensure that they have access to safety net services
24 that most of us here may take for granted.

1 Moving those most essential services out of
2 reach of those west side residents will be a major
3 detriment to the health of all of us in this
4 community. Thank you.

5 (Applause.)

6 HEARING OFFICER CONSTANTINO: Go ahead,
7 Melody.

8 MS. ROCCA FORTE: My name is Melody
9 Roccaforte, R-o-c-c-a-f-o-r-t-e. I support the
10 project going forward as an executive director of a
11 cancer center here in Rockford providing supportive
12 services. It's important that we provide cancer care
13 on the west side of town and not abandon that area for
14 families who are going through this most devastating
15 disease.

16 In support of the entire project, I am
17 pleased to say that as a 35-year employee of Rockford
18 Health System, we all experience the dream of building
19 on that piece of property on the east side. Many of
20 us knew that there was a tremendous need. But I would
21 like to also follow that with saying that I have been
22 extremely proud of the collaboration between the three
23 health systems to provide care for the 11-15 counties
24 that we serve, and that was done in a competitive but

1 a very collaborative way. We should leave no patient
2 behind, whether it's on the west side or the east
3 side. When it it comes right down to the fact, since
4 the Rockton Avenue campus is the only one on the west
5 side of the river, I think it's very important that we
6 take the money that was invested in renovating a
7 state-of-the-art cancer center, surgical department,
8 emergency room, etc., and continue to provide those
9 services there while utilizing an investment that was
10 made many, many years ago by the leadership of
11 Rockford Health System to serve the east side prior to
12 anyone else being out there with a full hospital
13 facility.

14 HEARING OFFICER CONSTANTINO: Thank you.
15 After Susan is Michelle Hintz, H-i-n-t-z.

16 MS. MILFORD: Good morning. My name is
17 Susan Milford, S-u-s-a-n, M-i-l-f-o-r-d, and I am
18 Senior Vice President with OSF Health Care System, and
19 I am speaking today in opposition to this proposed
20 project.

21 Open heart surgery, pediatric, obstetrics,
22 intensive care, cardiac catheterization, these are all
23 vital services in a community the size of Rockford.
24 They must be available, accessible, affordable, and

1 high quality. The Mercy Rockford Health System
2 proposal for a new health care complex far east of the
3 city's population center seeks to relocate and change
4 those services, but it does not examine or explain the
5 impact of what it would do.

6 In our view, the proposal does not meet the
7 certificate of need requirements in these areas of
8 specific services. Number one, criteria 1110.230.
9 The proposal calls for centralizing certain clinical
10 services on the Riverside campus. This would limit
11 access to high tech health care for many west side
12 residents. Why is this necessary? The proposal does
13 not answer the question.

14 Criteria 1110.530, medical, surgical, ob,
15 pediatrics and ICU. The application fails to address
16 numerous applicable criteria under this section.

17 Criteria 1110.1230, open heart surgery. Not
18 only would this proposal create service duplication,
19 but it simply is not justified by the utilization.
20 Cardiac surgery cases fell by 38.5 percent from 179 to
21 a hundred cases between 2010 and 2014. The lowest
22 number was 87 in '13. This volume is not sufficient
23 to justify this proposal.

24 Criteria 1110.1330, cardiac catheterization.

1 Again, the application does not address the various
2 requirements for this service.

3 So, in our opinion, there is a glaring lack
4 of information showing the need and benefit for moving
5 and changing these services.

6 HEARING OFFICER CONSTANTINO: Can you
7 conclude your comments.

8 MS. MILFORD: Yes. That alone is a reason
9 to deny this proposal. Thank you.

10 HEARING OFFICER CONSTANTINO: After Michelle
11 would be Harneet Bath, B-a-t-h.

12 MS. HINTZ: Good morning. My name is
13 Michelle Hintz, M-i-c-h-e-l-l-e, H-i-n-t-z. I am the
14 director of emergency services at Rockford Memorial
15 Hospital, previously managing the emergency
16 department.

17 My history of nursing practice includes
18 emergency cardiac cath lab, neuro, trauma/ICU. I have
19 been at Rockford Health for just over 20 years.

20 I support Mercy Rockford's plans for
21 emergency services at two locations and the
22 designation of the east side campus as our regional
23 Level I trauma center.

24 The staff and physicians and nurses in the

1 emergency department is a very highly trained group of
2 professionals who are dedicated to serving our
3 community. We are very excited for the growth of the
4 new campus, which allows us to continue to serve our
5 current patients as well as enhanced care to reach out
6 to regional and local citizens.

7 But what's most important for the community
8 to know is that we are here for you. Even though we
9 are expanding our services to two campuses, we are
10 still here for you.

11 The emergency department at Rockton Avenue
12 will be staffed by the same physicians and nurses as
13 the East Riverside campus. We have staff at both
14 facilities to ensure a strong level of experience at
15 both locations. We have a team of extremely talented
16 emergency room nurses. They are highly trained and
17 are very experienced at caring for patients of all
18 ages. The expectation for our nurses is that after
19 two years of experience, they become trauma certified,
20 and they also attend quarterly designation sessions to
21 ensure that we maintain our advanced skills for caring
22 for these patients, the pediatric population, which is
23 critical care and trauma, as well as the adult
24 population needs, which includes critical care and

1 stroke, heart attack, and trauma needs.

2 The emergency department is located at both
3 Rockton Avenue and East Riverside Boulevard. We will
4 have continuous coverage of trauma specialists who
5 will work closely with the emergency physicians to
6 support the needs of the patients who have been to
7 both campuses. We want all patients who come to the
8 Rockton Avenue campus as they always have, and we will
9 be there to help you. Thank you for the opportunity
10 to speak to the Rockford Memorial plans, and we will
11 continue to support your needs. Please remember, even
12 with the addition of a new campus, we are here for
13 you.

14 (Applause.)

15 HEARING OFFICER CONSTANTINO: Linn Mcneely
16 is next.

17 MR. BATH: Good morning. My name is Dr.
18 Harneet Bath. I'll spell it. H-a-r-n-e-e-t, B-a-t-h.
19 I am the CMO analyst at St. OSF Medical Center, and I
20 am speaking in opposition to this proposed project. I
21 am also on the board of directors of Rockford Health
22 Counsel and YMCA of Rockford, which allows me to see
23 the community need in a better way.

24 Today, I am speaking on my own behalf as a

1 community member and as a community physician. The
2 applicant states that this proposed project will not
3 commercially impact the access to safety net services.
4 I respectfully but completely disagree. Closing a
5 Level I trauma center on North Rockton Avenue would be
6 devastating to a big portion of our population. More
7 than 30 percent of city's population lives west of the
8 Rock River -- that has been served by Rockford
9 Memorial. A lot of these people don't have reliable
10 transportation. Removing the Level I trauma center,
11 the NICU, the stroke center, and the STEMI center will
12 force them to go to another hospital or drive at least
13 30 minutes. If I am an adult with a gunshot wound, a
14 collapsed lung, or a stroke, or a heart attack, or
15 woman in labor, I don't need an EMT or an AED
16 physician. I need a trauma center with in-house
17 specialists and the tertiary specialists.

18 People before me have talked about the
19 30 minutes which is the standard of care. Most
20 hospitals run between 60 to 80 minutes. You add 20
21 minutes to that, you will never beat the deadline.
22 For a stroke patient, every one-minute delay kills two
23 million neurons that never come back. It also kills
24 seven and a half miles of monamed [phonetic] fiber

1 that never comes back. Multiply that by 20 or 30
2 minutes' time.

3 OSF, Swedish, Crusader, and others have served
4 this area forever. But all our efforts are only
5 complimentary to access to a great medical center.
6 People of the southwest side fought for decades for a
7 full-service grocery store in the neighborhood, and
8 they finally got one. But this project puts them one
9 step ahead and one step backwards. We welcome the
10 investment in the community, but the change that will
11 come at that location will be like urban -- the west
12 side critical needs, like the south side of Chicago,
13 and results in the extra death and complications of
14 adults, elderly, kids, and newborns -- not what our
15 community needs. Thank you.

16 MS. MCNEELY: Good morning. My name is Lynn
17 McNeely. I'm the Alderman for the 13th Ward in the
18 City of Rockford. My last name is spelled M-c,
19 capital N-e-e-l-y. Good morning to you all. I have
20 attended meetings and certainly have met with the
21 representatives of Rockford Memorial Hospital. Let me
22 say that I certainly appreciate my colleagues,
23 Alderman Venita Hervey for her comments. We have
24 fought long for our side of the city, and certainly we

1 don't want to see anything reduced from our part of
2 the city. I don't want to see any individual from any
3 part of the city be in jeopardy for health. I spoke
4 with three young ladies yesterday with kids that were
5 in desperate need of housing. The three locations
6 were covered with mold. The kids were -- all of the
7 kids of the three women -- all of their kids were
8 suffering from mold infection. They were constantly
9 going to the emergency room and to doctors because of
10 nose bleeds and various infections. This is something
11 that we have within my ward on a constant basis. I
12 don't want to add anything else to that particular
13 part of the city, that region. I believe what we are
14 looking at here today is not just a hospital. We are
15 looking, as some people have stated, economic
16 development, and I have to separate the two.

17 I think we should continue to have a
18 hospital on the west side of Rockford. I am truly
19 concerned about the emergency room. And I know that
20 the room is filled with individuals in support of
21 Rockford Memorial Hospital. I'm not against Rockford
22 Memorial Hospital going east.

23 HEARING OFFICER CONSTANTINO: Can you please
24 conclude your comments.

1 MS. MCNEELY: Yes. As a economic
2 development, if they want to do that, but I need some
3 reassurance that when people within my particular area
4 of the city are going to receive the necessary medical
5 care that they need, whether it be a senior citizen
6 with a heart attack or a young family with a baby that
7 needs some type of medical assistance.

8 So I stand here today somewhat divided about
9 their application, wanting them to do their economic
10 development, but certainly want to maintain a
11 full-fledged hospital on the west side. Thank you
12 very much.

13 (Applause.)

14 HEARING OFFICER CONSTANTINO: Don Vayr,
15 V-a-y-r. And after Don, Stephen Ambrose.

16 MR. VAYR: Good morning. My name is Don
17 Vayr, that's D-o-n-a-l-d, V as in Victor, a-y-r. I'm
18 the director at OSF St. Anthony Medical Center. I
19 also work on the community health needs assessment
20 where I work with other health care agencies and
21 providers in the area. This morning, I am speaking in
22 opposition to the proposed project. This project
23 contradicts the fundamental policy of the Review
24 Board. By statute, the CON process is intended to

1 maintain and improve the provision of essential health
2 services and increase the accessibility of those
3 services to the medically underserved and indigent.
4 That requirement alone is reason to deny the proposal.
5 Rockford's medically underserved and indigent
6 typically live on the west side of river, and because
7 of financial and transportation issues, they already
8 struggle to access quality health care. Moving their
9 hospital eight miles further away would only
10 exacerbate the problem. We see nothing in the
11 proposal that explains how this project would increase
12 the accessibility of the serves to the medically
13 underserved and indigent. On the contrary, it does
14 the exact opposite.

15 The Health Facilities Planning Act and
16 Review Board rules also require that the proposed
17 project be in the best interests of the public. This
18 is certainly not the case of the 12,000 underserved
19 and indigent members of the public who live west of
20 the river. Thank you.

21 (Applause.)

22 HEARING OFFICER CONSTANTINO: Stephen
23 Ambrose, and then Mark Hohelin.

24 MR. AMBROSE: Hello. My name is Stephen

1 Ambrose, S-t-e-p-h-e-n, A-m-b-r-o-s-e. I'm here in
2 support of all three Rockford Health System projects.
3 I am the father of nine children. I am the owner of
4 Ambrose Greenhouse and Landscaping in the area, and
5 two years ago this October, my oldest daughter was
6 diagnosed with bone cancer. Upon diagnosis, we had
7 two options for treatment. It was University of
8 Madison or women's and children's in Chicago. We went
9 to the childrens' hospital, because quite frankly, the
10 childrens' hospital had the best rate of survival for
11 our daughter. This was quite a commitment. We had to
12 travel -- well, upon receiving the calendar for her
13 treatment, she had great fear that we wouldn't be able
14 to be with her, and at that point I had made a promise
15 to my daughter that her sentence, as we called it,
16 would be our sentence. We would be with her through
17 every stay. We spent 180 days last year in the
18 hospital. Two weeks out of every month, every other
19 week she had received treatment. It was a strain on
20 our family, it was a strain on our income, it was a
21 strain on our business. And I am in full support of
22 having a conveniently-located childrens' hospital in
23 the area. I think this would have alleviated a lot of
24 emotional and financial strain on our family. Thank

1 you.

2 MR. HOHELIN: Good morning. My name is Mark
3 H-o-h-e-l-i-n. I'm the Senior Vice President of
4 health care analytics at OSF Health Care System. I'm
5 also the Chairman of the OSF C1 governing council. I
6 am here speaking in opposition to the proposed
7 project. As you know, health care organizations
8 seeking to establish or modify a facility in the State
9 of Illinois must get state approval, and it has to be
10 based upon that state certificate of need. As
11 previously stated, some of the criterion within these
12 applications did not show any justification for these
13 projects. Mercy Health Care Systems project provides
14 no justification for much of the proposed plan.

15 Mercy Rockford has simply not shown a need
16 for this expensive new campus along with [inaudible]
17 on the city's far east side. Mercy Rockford has
18 failed to meet the following requirements: Criteria
19 1110.130, discontinuation. Attachment 10 outlines
20 information you have provided of the services to be
21 discontinued on Rockton Avenue and moved to the
22 Riverside site. Information provided fails to
23 establish the need for a new campus. Criterion
24 1110.230: Alternative. Other options, including

1 joint ventures or other community-based health care
2 resources must be examined and explained, which in
3 this proposal they are not. Criterion 1110.234, use
4 of existing space is not clarified. Proposal admits
5 that there will be a substantial amount of vacated
6 space, but does not address its use or its cost in
7 detail. Some space is meant for demolition, but again
8 there is no cost estimate. Attachment 15, also under
9 services utilization. "There is no utilization
10 figures to justify the need for this for proposal."
11 Criterion 1110.3030: Clinical service areas. We find
12 no information to support this relocation replacement
13 proposal. There is no data on building a facility and
14 no justification for what is proposed. There are far
15 too many unanswered questions for this proposal to be
16 given a positive response, and therefore they should
17 be denied. Thank you.

18 (Applause.)

19 HEARING OFFICER CONSTANTINO: Connie Vitali
20 and then Julie Snyder.

21 Ms. VITALI: Good morning. My name is
22 Connie Vitali, C-o-n-n-i-e, V as in Victor, i-t-a-l-i,
23 and thank you for this opportunity to share my total
24 support for Mercy Rockford's three applications. I am

1 a physician, I am chief of pathology at Rockford
2 Memorial Hospital, and I am a Mercy Rockford Health
3 System board member. I have served on Rockford health
4 system board for eight years, and I am its immediate
5 past chairwoman.

6 The Rockford Health System board has
7 tremendous commitment to provide the highest level of
8 health care for this community, and we recognize a
9 specific commitment to continue to service the
10 residents on the west side of Rockford, where the
11 Rockton Avenue campus is located. In fact, the
12 Rockford Health System sought a partner in Mercy
13 Health System that would help us stabilize and enhance
14 services to our entire community, including the west
15 side.

16 Our plan for one hospital on two campuses
17 represents a significant and long-term commitment to
18 continuing services on our North Rockton Avenue
19 campus. Our merger with Mercy and the expansion of
20 our now-combined geographic area provide us a much
21 larger patient base to grow and enhance the types of
22 services provided to the community. These exciting
23 plans also provide the opportunity to enhance access
24 and provide state-of-the-art clinical facilities for

1 our neonatal, pediatric, maternal, and adult critical
2 care services throughout the development of a campus
3 on East Riverside Boulevard and I-90. This will allow
4 us to provide the highest level of quality and
5 efficiency for all of our patients in the region,
6 including those that will be referred to us by our new
7 Mercy partners.

8 And finally, it's important to note that
9 although Mercy Health System has its home in
10 Janesville, Wisconsin and has more than 60 facilities,
11 the new Mercy Rockford organization established its
12 headquarters here in Rockford and is focusing on
13 unprecedented investment in both facilities and health
14 care development in Rockford. These plans were
15 thoroughly developed to allow our commitment to our
16 whole community and the region we serve.

17 Thank you for your consideration, and I urge
18 your approval of the three Mercy Rockford
19 applications. Thank you.

20 (Applause.)

21 HEARING OFFICER CONSTANTINO: Julie Snyder,
22 S-n-y-d-e-r. Vincent R-a-c-a-n-e-l-l-i. Vincent

23 UNIDENTIFIED FEMALE: He's coming down.

24 DR. RACANELLI: Vincent Racanelli,

1 R-a-c-a-n-e-l-l-i. Good afternoon. My name is Dr.
2 Vincent Racanelli. I am an internal medicine
3 physician at the new Mercy Rockford Health System. My
4 offices are on Rockton Avenue campus, and I'm here to
5 speak in support of the Mercy Rockford Health System
6 facility plans and particularly the plans to continue
7 a vibrant and robust medical campus on the North
8 Rockton Avenue site. The campus will provide primary
9 physician care offices, specialty physician care, and
10 adult hospital services, as we do now. I have been a
11 primary care physician for 10 years, starting my
12 practice here in Rockford out of residence. My
13 practice has now grown to approximately 3,000
14 patients, and I am pleased that I will continue to
15 serve those patients at my current location on the
16 North Rockton Avenue campus. I am also an internist,
17 and I see my patients at the hospital as well as the
18 outpatient setting, and I look forward to continuing
19 to see those patients at the west side campus. I'm
20 enthusiastic that my patients will still have access
21 to the Rockton Avenue campus, the specialist
22 physicians that they rely on, including cardiology,
23 neurology, pulmonology, along with comprehensive lab
24 and radiographic services.

1 I feel extremely honored to be a primary
2 care physician with the new Mercy Rockford system, as
3 I am afforded a rare opportunity to impact patients'
4 lives as well as their health care on a very personal
5 basis. I enjoy that interaction, as do my patients,
6 and I am happy to say that I can assure them that the
7 Mercy Health System plan will allow me to continue to
8 provide that excellent care at my current location.
9 Thank you.

10 (Applause.)

11 HEARING OFFICER CONSTANTINO: Anthony Grier
12 and then Victory Bell.

13 REVEREND GRIER: Good morning. Reverend
14 Grier, A-n-t-h-o-n-y, G-r-i-e-r. I would like to
15 speak in opposition to the application submitted. I
16 too am a resident of Rockford, Illinois, raised here.
17 18 years ago, my daughter experienced a
18 life-threatening situation when I lived in Freeport,
19 Illinois, and had it not been where Rockford Memorial
20 was positioned, I probably would have lost her.

21 So today I stand to ask you to reconsider
22 this decision, because we need to think of the
23 particular disparities that are taking place in the
24 community and with the people of this community -- how

1 we will continue to add on to the disparities if we
2 remove what's needed in this community. Growing up on
3 the west side, if something took place, we always knew
4 that we could go to Rockford Memorial Hospital because
5 it was within walking distance, driving distance, or
6 any other type of transportation that would be needed
7 for the particular drama that was taking place. But
8 now, if we move the most-needed area -- that most
9 needed thing from that hospital, it will affect those
10 that already have problems with transportation.

11 So in closing, what I would like to say is,
12 we have always acted on things that look good and
13 sound great to build. Why don't we react on the
14 things that's really needed? Thank you, and I will
15 submit my written.

16 (Applause.)

17 HEARING OFFICER CONSTANTINO: Cynthia Combs.

18 MR. BELL: Thank you, sir. Hi, I'm Victory
19 Bell V-i-c-t-o-r-y, B-e-l-l. Good afternoon, ladies
20 and gentlemen. I have served in Rockford as an
21 Alderman for 38 years, and I also am very actively
22 involved in activities in Rockford today. I've lived
23 in southwest Rockford for some 70 years, and I am a
24 proud south Rockford person. I am here today to give

1 my support to the three facets of the Mercy Rockford
2 facility plan that would create the hospital for Mercy
3 Rockford with two campuses, one on Rockton Avenue and
4 the other one on Riverside Boulevard. It is
5 imperative that we continue the quality medical
6 services at Rockford Memorial Hospital. This health
7 complex is and will remain an anchor of the west side
8 of the City of Rockford. Many of our citizens use the
9 clinic and hospital on Rockton Avenue and consider
10 these complexes as west side treasures. I am equally
11 excited about the proposed state-of-the-art complex
12 and the values it offers to the entire community. I
13 believe it will provide a renewed economic vitality in
14 our region. The importance of the financial commitment
15 to Rockford cannot be understated. Thus, hopefully,
16 we will provide expanded health care services and with
17 the vital health care opportunities with which we
18 stimulate our economic opportunity.

19 Lastly, the possibilities of proposed
20 repurposing some 200,000 square feet of clinic space
21 and the opportunity to establish educational and
22 training options that presently we do not have on the
23 west side of Rockford. And the opportunity does exist
24 which we can create, innovate, and provide educational

1 opportunities that many of the citizens in southwest
2 Rockford and west Rockford are in dire need of. I ask
3 you as commissioner to support the recommendation of
4 this body that has been presented. Thank you.

5 (Applause.)

6 HEARING OFFICER CONSTANTINO: Cynthia Combs.
7 Mr. Ramirez next.

8 MS. COMBS: Good afternoon. My name is
9 Cynthia Combs, C-y-n-t-h-i-a, C-o-m-b-s, and I am here
10 to support Mercy Rockford plans to grow the services
11 they currently offer by adding an additional campus at
12 the East Riverside Boulevard campus. I currently
13 coordinate both stroke and chest pain initiatives at
14 Rockford Memorial Hospital. My 28-year nursing
15 history includes practice in adult critical care,
16 including cardiovascular and neurosurgical ICU, as
17 well as working in the childrens' hospital emergency
18 department, and in general, a Level I designated
19 trauma emergency department.

20 I have worked at Rockford Memorial for the
21 last six years. It is the intent of both the chest
22 pain and stroke programs, which are each
23 well-networked with both local and regional responders
24 and hospitals, to grow and offer the latest up-to-date

1 treatments and care to our whole community. Each of
2 these programs aspire to maintain and expand to offer
3 higher accreditation and designation. I want the
4 community to be aware that Rockford Memorial focuses
5 on providing our community with the most comprehensive
6 care right here in our area for the cardiac and stroke
7 patients. Rockford Memorial is the destination
8 hospital in our region for stroke patients. We are
9 the only local hospital that offers intravascular
10 therapy for treatment of acute stroke. In each of
11 these programs, time is an essential key to save heart
12 muscle and brain function. Central location of the
13 North Rockton Avenue campus and the East Riverside
14 campus will allow for faster access to care for the
15 greater Rockford region, including greater Illinois
16 and southern Wisconsin areas.

17 As a part of our chest pain center of
18 accreditation and cardiac stroke designation, our
19 nursing staff is required to attend and participate in
20 quarterly validations that assure that they are
21 knowledgeable and proficient in the assessment and
22 care of stroke and chest pain patients. This level of
23 expertise will be maintained in all our nursing staff
24 on both campuses. Our community should know that it

1 is supporting our community at large by providing
2 great, state-of-the-art care right here in the
3 Rockford area, but now with two locations.

4 HEARING OFFICER CONSTANTINO: Can you
5 conclude.

6 MS. COMBS: Okay. That's all.

7 (Applause.)

8 HEARING OFFICER CONSTANTINO: Rowena is
9 next. Thank you.

10 MS. RAMIREZ: Good afternoon. My name is
11 Luz L-u-z, R-a-m-i-r-e-z. I'm the executive director
12 of La Voz Latina. We are a non-profit community
13 resource center that mostly serves the need of Latinos
14 in the community. We have had a great partnership and
15 a great relationship with Rockford Memorial Hospital,
16 now Mercy Rockford, for many reasons. They have been
17 supportive of our organization, our population, for
18 many years.

19 In the past couple years, they have expanded
20 their efforts to provide various services, preventive
21 services, at no cost, such as flu shots, mammograms,
22 screenings, and health and loss education. We work
23 with many individuals from different sectors of Mercy
24 Rockford to identify programs and services that are

1 needed in the Latino community, and the relationship
2 we have had has been extreme productive. I believe
3 that Mercy Rockford, as a footprint in the region,
4 those conversations and the ongoing collaboration
5 between us will lead to greater access and more
6 projects with the Latino community.

7 I have had many questions, and I feel very
8 comfortable with the responses that I have received --
9 that the services that are critical to the west side
10 will not be going away, and that they will maintain
11 the level that they have been providing up until now.

12 Aside from my professional relationship with
13 Mercy Rockford, I have a personal relationship through
14 Rockford Memorial Hospital, because my last pregnancy
15 was a high-risk pregnancy. From the very beginning,
16 we were told that my son might have a problem, and
17 they believed it could be Down Syndrome or that it
18 could be something else. As the pregnancy progressed,
19 I began to have more complications. Being Catholic,
20 my hospital of choice has always been St. Anthony.
21 But there was no doubt in my mind that I needed the
22 best for my baby and I made arrangements with my
23 doctor to deliver at Rockford Memorial Hospital.

24 I cannot express to you today how

1 appreciative I am of the care that I received while I
2 was there and throughout the process. Even though the
3 current ward is outdated, I could not have felt more
4 comfortable. I am very pleased to share that I did
5 not have complications with the birth, and everything
6 was perfect.

7 However, I had a second -- we had a scare
8 with my son, and I took him to the OSF emergency room.
9 He was then transferred to Rockford Memorial Hospital,
10 where he was admitted. Again, while he was in their
11 care, I was completely confident that he could not be
12 cared for any less.

13 HEARING OFFICER CONSTANTINO: Can you
14 conclude your remarks, please.

15 MS. RAMIREZ: My children are everything to
16 me, and I have always been excited about Rockford
17 Health System. I am excited about the state-of-the
18 art mothers' and childrens' hospital on Riverside. I
19 can only imagine what they can do in a
20 state-of-the-art facility if they already provide the
21 best care possible. I am in complete support of the
22 Rockford east side campus.

23 (Applause.)

24 HEARING OFFICER CONSTANTINO: Bobbi Smith.

1 MS. WERMES: Hello. My name is Rowena
2 R-o-w-e-n-a, Wermes, W-e-r-m-e-s. I work in the
3 strategic planning department at Integra Health
4 System, and I am here to voice my opposition of
5 projects 15-038, 15-039, and 15-040, because Mercy has
6 historically disregarded the CON rules, and these
7 three projects once again disregard the rules of the
8 State of Illinois.

9 The bed count has to be minimum for a new
10 medical surgical category of service, within an MSA,
11 is 100 beds. They are proposing to split their
12 medical surgical beds, as you know, between two
13 facilities, with 84 med/surg beds at their Riverside
14 campus and 70 med/surg beds at the Rockton campus.
15 Neither of which meets the 100-bed rule per MSA at
16 each facility.

17 A second example of Mercy Rockford
18 disregarding the rules can be found in the section of
19 the application that pertains to the establishment of
20 open heart surgery. Specifically, the applicant must
21 document that a minimum of 200 open heart procedures
22 will be performed during the second year of operation.
23 Given that Mercy Rockford's 2014 volume was 110 open
24 heart surgery cases, as reported in the IDPH annual

1 hospital questionnaire, it is not even currently
2 meeting the minimum. They haven't demonstrated an
3 ability to add almost 100 new surgeries a year within
4 the same area it claims it will serve.

5 Thank you for this opportunity to share my
6 opposition for the three Mercy Rockford CON projects.
7 I request the review board deny these projects on the
8 basis of Mercy Rockford should follow the CON rules.
9 Thank you.

10 (Applause.)

11 HEARING OFFICER CONSTANTINO: Thank you.

12 MS. SMITH: Hi, my name is Bobbi Smith,
13 B-o-b-b-i, S-m-i-t-h. I am the nurse manager for
14 child development and behavior, maternal fetal
15 medicine, medical genetics, neonatology, and
16 pediatric therapy. I am speaking in strong support of
17 Mercy Rockford's plans to serve the needs of women and
18 children.

19 In my 29 years at Rockford Memorial Hospital, I
20 have been blessed to care for infants and children as
21 well as mothers who are experiencing difficulties with
22 a pregnancy. Our focus has always been on providing
23 family-centered care. During my career as a nurse in
24 the neonatal intensive care unit, I felt that it was a

1 privilege to be involved with family at the most
2 crucial time in their lives. In that bedside-nurse
3 position, I had the honor of helping families
4 participate in the care of their baby. Sometimes that
5 was the only time they were able to care for their
6 baby. While I am a mom to seven, grandmother to 21
7 grandchildren and six great grandchildren, I always
8 attempted to provide the care for the children that I
9 was responsible for as if they were a member of my own
10 family. Rockford Health System has been our region's
11 place for kids, and we provide the region's only Level
12 III care unit, pediatric intensive care unit, and high
13 risk mother's unit. Our goal is to give every child
14 the best possible start at life. We work to ensure
15 healthy pregnancies for moms, and are the only
16 hospital in the region that provides highly
17 specialized care when pregnant moms experience risks
18 or complications. We care for children who are born
19 prematurely or with serious complications. We provide
20 ongoing and specialized services to children with
21 developmental challenges, acute injuries, chronic
22 diseases, or disabilities.

23 HEARING OFFICER CONSTANTINO: Can you
24 conclude your comments.

1 MS. SMITH: A majority of the children we
2 serve receive their care through Medicaid. We provide
3 that care in Rockford close to home. I can tell you
4 that it's a dream of our women's and children's
5 service line to have a new facility that meets the
6 needs and creates a very positive environment,
7 challenging with new equipment -- a facility, and I
8 support this effort.

9 (Applause.)

10 HEARING OFFICER CONSTANTINO: We had
11 scheduled a lunch break now, but we are going to
12 continue if that's okay with everyone here. Thomas
13 Myers and Jacob MacNeal.

14 MR. MYERS: Thomas, T-h-o-m-a-s, Myers,
15 M-y-e-r-s. I serve as the vice president of strategy
16 and public affairs at SwedishAmerican Health System,
17 and on behalf of SwedishAmerican, I would like to
18 thank you for the opportunity to read into the record
19 the express concerns that SwedishAmerican has
20 regarding project 15-038, Rockford Memorial Hospital
21 Rockton Avenue campus, and project number 15-039,
22 Rockford Memorial Hospital Riverside campus.

23 Our concerns pertain to service levels,
24 which Rockford Memorial Hospital has historically

1 provided to the west side of the Rockford community,
2 and the impact those proposed changes at Rockford
3 Memorial campus on Rockton Avenue will have on
4 SwedishAmerican. In reviewing the project, we know
5 that there is a proposed decrease in emergency
6 department rooms from 31 to 17 at the Rockton Avenue
7 campus. Current Level I trauma capabilities are
8 proposed to move to the I-90 northeast location, with
9 apparently no trauma capabilities at the Rockton
10 Avenue campus. Cardiac catheterization and cardiac
11 surgical services are proposed to move to the I-90
12 northeast location, all inpatient obstetrical and
13 pediatric beds will move to the I-90 northeast
14 location, with no ob or pediatric beds at the Rockton
15 Avenue campus, and the decrease in critical care beds
16 capacity from 26 to 4 at the Rockton Avenue campus.
17 Plus, the relocation of numerous members of the
18 Rockford physician's practices to the I-90 location.
19 When taken together, it is our perception that these
20 reductions in services at the Rockton Avenue campus
21 will represent significant stressors for the health
22 care of our citizens in the central, western,
23 southwestern, and northwestern parts of our city and
24 will present an impact on SwedishAmerican and on

1 safety net services that will be challenging for us to
2 address. Thank you. Thank you.

3 HEARING OFFICER CONSTANTINO: While I
4 appreciate all your applause, if we could please stop
5 with the applause, we could move quicker, and I know
6 you are all tired of looking at us, and I'm tired of
7 looking at you.

8 (Laughter.)

9 DR. MACNEAL: I'm Dr. Jay M-a-c-N-e-a-l.
10 I'm a board certified emergency medicine physician
11 with fellowship training in the subspecialty of EMS.
12 I've been with Mercy Health System for three years,
13 and I'm very excited about the direction we are
14 heading with regard to EMS services. The American
15 Heart Association, CDC, the National Association of
16 EMS Physicians, and physicians in the emergency
17 department nationwide are well aware of the benefits
18 of regional systems of care. Often times, the best
19 care is provided for the patient is not necessarily at
20 the closest facility, but the nearest, most
21 appropriate destination that has the services needed
22 for the patient. Regional facilities have the most
23 up-to-date technology which allows physicians,
24 surgeons, and staff to take care of the immediate

1 needs of patients. Like all emergencies, our Rockton
2 campus will continue to stabilize any walk-in trauma,
3 strokes, or STEMIs that occur. Most emergency
4 departments in the country are not connected to a cath
5 lab, are not connected to a NICU, a stroke center, or
6 a Level I trauma center. We realize that medicine is
7 not always about getting the patient to the nearest
8 hospital fast, but getting to the nearest appropriate
9 care. New studies have indicated that clot rejuvenal
10 therapy for stroke patients having the most up-to-date
11 medical imaging and equipment will provide benefits to
12 these patients. STEMI patients will continue to be
13 provided the best care and modern facilities in the
14 cath lab, ICU, and if necessary, the operating rooms
15 for open heart. Trauma patients will be directed to
16 the most appropriate Level I trauma centers. Most
17 trauma patients do not go to the operating room. The
18 emergency room has a small minority of trauma patients
19 that actually go to the operating room. The term
20 golden hour, in fact, recently, has been debunked and
21 the term golden period is being used. It is more
22 important than just get them somewhere fast. Many of
23 these patients will benefit from advance imaging and
24 interventional radiology at the Riverside campus.

1 These monitoring techniques have shown incredible
2 benefits to trauma patients and reduce patient
3 recovery times.

4 As assistant EMS medical director, I am
5 very concerned about what happens out of the hospital
6 and providing that critical care to the patient at
7 their time of greatest need.

8 HEARING OFFICER CONSTANTINO: Can you
9 conclude your comments.

10 DR. MACNEAL: Sure. EMS providers are very
11 capable of handling extended transport times. We
12 routinely receive stroke, STEMI, and trauma patients
13 from great distances meeting all of the guidelines of
14 providing excellent care. Our EMS drivers have
15 excellent training, EKGs, and great stroke and trauma
16 assessment skills.

17 In order to continue to expand clinical
18 skills, Mercy will be putting the physicians in the
19 field, not just to respond in SUVs and independently
20 treat patients, but to also train and work with EMS
21 providers and coordinate care, which is a critical gap
22 in this region. Thank you.

23 (Applause.)

24 HEARING OFFICER CONSTANTINO: -- Robinson.

1 And Mr. Smith, Charles Smith. I see you guys didn't
2 listen.

3 MR. ROBINSON: Good afternoon. My name is
4 Mike R-o-b-i-n-s-o-n. I am the director of marketing
5 and communication for OSF St. Anthony Medical Center.
6 I am representing OSF today, but I am also invested in
7 the community health in other ways. I am President of
8 the board for Highview at the Woodlands, an assisted
9 living facility, I am President of the board for
10 Access Services of Northern Illinois, which helps
11 people with intellectual disabilities to live more
12 independently. Finally, I'm a board member and past
13 President of Rockford MELD, which helps to build
14 strong families. I am also a resident of the west
15 side. I am speaking in opposition to this proposed
16 project. I believe this proposal will be particularly
17 harmful to children, the elderly, and poor people in
18 this community. 34 percent of the children of
19 Rockford are living in poverty, according to the
20 census bureau numbers from 2014. The large majority
21 of those live west of the Rock River. How does
22 reducing hospital services on west side and moving
23 pediatric and NICU services to the far east side
24 interstate location possibly improve the medical

1 accessibility and health care of those children and
2 their families? Many of the people struggling to
3 survive on too little money are elderly, because they
4 don't own a vehicle, no longer drive, and have trouble
5 getting to and from buses. Many of them are west
6 siderers. This proposal certainly does not improve
7 access for this group of people, who perhaps need care
8 the most. These issues of transportation and
9 accessibility relate not only hospital treatment but
10 also to clinical services. Thus, the difficulty to
11 receive health care would increase for the poor, not
12 only for serious or hospitalized care, but for routine
13 check-ups and follow-up care as well as less serious
14 health issues. Neglecting those things, of course,
15 leads to more serious illnesses, higher health care
16 costs, and lower quality of care for people.

17 Finally, this would make it more difficult
18 for the approximately 60,000 people who live on
19 Rockford's west side to get to a hospital in the event
20 of a stroke or heart attack. It will take longer to
21 get care for health problems for which timely
22 treatment is necessary for recovery. This could be a
23 matter of life or death. Thank you.

24 HEARING OFFICER CONSTANTINO: Charles Smith,

1 Mr. Kevin Rose.

2 DR. SMITH: Good afternoon. My name is Dr.
3 Charles Smith, C-h-a-r-l-e-s, S-m-i-t-h. Good
4 afternoon. My name is Dr. Charles Smith. I am a
5 retired internal medicine physician and co-founder of
6 Group Hope. I am speaking in support of Mercy
7 Rockford's plans. Earlier today, you heard from my
8 wife, Bobbi Smith, who is a nurse manager at Rockford
9 Memorial. Bobbi and I have another reason, a
10 particular reason, to support Mercy Rockford's plans,
11 and that is Mercy Rockford's commitment to behavioral
12 health services on the North Rockton campus.

13 In 2003, Bobbi and I founded Group Hope. It's
14 a mental health support service for people with
15 depression, bipolar disorder, and anxiety symptoms.
16 Group Hope provides a place for people to feel safe
17 when discussing feelings of being overwhelmed and the
18 entire nature of depression. We did that in honor of
19 our daughter, Carrie Jane. We attached Group Hope as
20 a program of local Mental Health Association, we
21 joined with as many hospitals, clinics, and providers
22 that we could, and these group efforts have been
23 supported by the community health system as an adjunct
24 to the professional health that people can get.

1 In 12 years, Group Hope is accomplishing its
2 mission. The ten meetings weekly in the Rockford area
3 provide a safe, hopeful exposure to other people who
4 understand and who validate the reality of each
5 other's painful depression experience. It is powerful
6 that friends do this with and for each other. Many
7 referrals to the Group Hope service have come from the
8 inpatient unit at Rockford Memorial. Staff members
9 pass out our schedule and approach donors and give
10 encouragement to try group hope support. In 2014, the
11 hospital leaders gave us space to meet every Saturday
12 afternoon in the cafeteria.

13 HEARING OFFICER CONSTANTINO: Doctor, can
14 you conclude your comments.

15 DR. SMITH: Group Hope wishes that they
16 might give west side residents a dose of what we can
17 do for them. We want to expand into the west side, so
18 Bobbi and I support Mercy Rockford's plan to continue
19 offering both inpatient and outpatient behavioral
20 health care on the North Rockton campus. Thank you.

21 (Applause.)

22 MR. ROSE: Good afternoon. My name is Kevin
23 K-e-v-i-n, R-o-s-e. I am here in support of our three
24 Mercy Rockford Health System projects. My wife and I

1 have seven children, all born and raised here in
2 Rockford. I feel very strongly that this area needs a
3 comprehensive childrens' hospital. One of my sons was
4 born with a birth defect. We had several trips to
5 Childrens' Hospital of Chicago and Wisconsin to get
6 the care he needed. In all, he has incurred 13
7 surgeries and countless appointments for testing and
8 follow up. I can't even begin to guess how many hours
9 we have spent in the car fighting traffic or nights
10 spent in that hospital while recovering from surgery
11 -- if he had an emergency, having to drive to
12 Milwaukee or Chicago to get the care he needed.

13 This has been emotionally draining on my wife
14 and I and very stressful for my son and the other six
15 children we have at home. I don't want any other
16 families to have to go through what we have gone
17 through these past several years. It's just not right
18 that families have to travel so far away to get care.
19 I know from experience that childrens' hospitals have
20 a special look and feel to them. They are much
21 different than an adult hospital. The equipment is
22 different, the rooms are different, the entire
23 environment is built around and for the children.
24 They are built to promote a child's healing. I am

1 extremely excited about this plan and that it will
2 provide a specialized environment for children in this
3 area. We need a conveniently-located comprehensive
4 childrens' hospital close to home -- not only for my
5 children, but for my children's children. Thank you.

6 (Applause.)

7 HEARING OFFICER CONSTANTINO: I'm sorry.
8 It's Ashley Weinrich and then Jack B-e-c-h-e-r-e-r.

9 MS. WEINRICH: Hi, my name is Ashley
10 Weinrich, A-s-h-l-e-y, W-e-i-n-r-i-c-h. I work in the
11 strategy and development department of Integra, and I
12 am here to voice my opposition of 15-038, 15-039, and
13 15-040.

14 HEARING OFFICER CONSTANTINO: Ashley, can
15 you speak into the microphone. I'm sorry.

16 MS. WEINRICH: That's okay.

17 MS. WEINRICH: Because I believe there is a
18 more cost-effective approach to pursue. According to
19 Mercy Rockford, the purpose of its merger was to form
20 a four-hospital system to centralize specialty
21 services and service its community's needs. In
22 project 15-038 and 15-039, Mercy Rockford identified a
23 more reasonable alternative to building the proposed
24 two hospitals. The more cost-effective alternative

1 number 2 includes modernizing facilities while
2 decreasing the number of under-utilized beds at the
3 cost of \$425 million.

4 In addition, the first alternative in the
5 Riverside medical office building application, project
6 15-040, of the medical office building on their
7 Rockton Avenue campus would be a more reasonable
8 choice, because it would centralize physicians closer
9 to its already centralized clinical specialties. The
10 alternative proposal would, number one, allow Mercy to
11 fulfill its merger purpose; number two, cost less than
12 the total combined cost of around \$408 million for the
13 three projects; and number three, act upon its own
14 recommendation.

15 Thank you for the opportunity to provide
16 testimony opposing the Mercy Rockford CON projects.
17 Mercy Rockford has a cost-effective approach to serve
18 its community and fulfill its merger purpose at a
19 significantly lower cost.

20 MR. BECHERER: My name is Jack, J-a-c-k,
21 B-e-c-h-e-r-e-r. I came to Rockford in 2004 as
22 President of Rock Valley College. Shortly after, I
23 was invited to be on the board of Rockford Health
24 System. I had options. I accepted RHS because of its

1 west side location and the mission. It's similar to
2 what community colleges do. We both provide
3 accessible services to people who really need it.

4 During the first four or five years on the
5 board, I was surprised that we were not profitable.
6 We started looking for options. And we looked at a
7 partnership with OSF, which was very exciting. We
8 couldn't do that. We looked at other options, and
9 then we found Mercy Hospital of Janesville. If we had
10 not done so, I don't know how the quality could be
11 preserved for the next decade at Rockford Health
12 System. So we were looking for options. Mercy was
13 profitable. Mercy developed, with the leadership on
14 both groups, a great, vibrant mission. It's going to
15 save the services on the west side. It's going to
16 create capacity with 200,000 square feet of space for
17 community benefits, education, training. It's going
18 to be very dynamic, and we are going to provide moms
19 and babies the quality that they need. This is as
20 good as it can be. If this is not going to work in 10
21 years, Rockford Memorial will not be the place it is
22 today. We need a new model.

23 HEARING OFFICER CONSTANTINO: Can you
24 conclude your comments.

1 MR. BECHERER: That is all. Thank you very
2 much.

3 (Applause.)

4 HEARING OFFICER CONSTANTINO: Robert
5 V-a-v-r-i-k and then Stacey Van Vleet.

6 MR. VAVRIK: Thank you. Good afternoon. My
7 name is Robert Vavrik, that's V as in Victor,
8 a-v-r-i-k, and I work for the strategy and development
9 department at OSF. I am here to voice my opposition
10 to all three CONs based on the projected service area
11 of the proposed new hospital. In its application,
12 Mercy Rockford writes the purpose of these projects is
13 to provide for the continued delivery of needed health
14 care services to the residents and community
15 traditionally served by Rockford Memorial Hospital on
16 Rockton. This is echoed later in the application
17 claiming the patient origin following completion of
18 the project is anticipated to remain very similar to
19 the 2014 patient origins. However, the same CON
20 application for the Rockford Riverside campus lists
21 both Harvard and Marengo as zip codes from which the
22 new facility will draw patients -- two zip codes not
23 found on their 2014 patient origin list.

24 An article published in the Rockford Register

1 Star on August 13th, 2015, also quotes State Senate
2 Dave Syverson, who is a Mercy Rockford board member,
3 as saying they still expect to draw patients from west
4 McHenry County. These claims are contradictory.
5 Centegra Health System already provides the care this
6 community needs. We serve Randall and Harvard at our
7 hospital in Woodstock, and will also serve them at our
8 new hospital, Centegra Hospital in Huntley, which this
9 board approved in 2012 and will open next summer.

10 Mercy Rockford contradicts itself when it
11 claims it will serve the same patients, and that
12 includes the new zip codes in the area of patients.
13 There is no reason for this patient to travel across
14 two counties to receive care. Thank you.

15 HEARING OFFICER CONSTANTINO: Stacey
16 Vanvleet and then Magic Johnson.

17 MS. VANVLEET: My name is Stacey Van Vleet,
18 S-t-a-c-e-y, capital V as in Victor, a-n, capital V as
19 in Victor, l-e-e-t, and I support Mercy Rockford's
20 plans for emergency services at two locations and the
21 destination on the East Riverside Boulevard campus as
22 a regional Level I trauma center.

23 I am a nurse practitioner and a state-mandated
24 [inaudible] coordinator for the trauma services a

1 Rockford Memorial Hospital. I have been in this role
2 since 2003 and previously worked as a flight nurse for
3 the React Air Medical Program. Level I trauma centers
4 coordinate care for the designated regions Rockford
5 Memorial is part of region one, which stretches from
6 the Iowa border, south to Mendota, as well as east and
7 north. The vast majority of hospitals in the state
8 are not Level I trauma centers. For example, there
9 are four hospitals in our region and only two are
10 designated as state Level I trauma centers. As a
11 Level I trauma center, we coordinate care and
12 correspond with other hospitals in the region and with
13 the EMS first responders, like paramedics, police,
14 fire, and ambulance services. Over 30 percent of our
15 trauma cases we see at Rockford Memorial are
16 transferred to us from other hospitals in the region.
17 As a Level I trauma center, we have protocols in place
18 to work with the referring hospital to provide safe
19 and effective care. The referring hospitals stabilize
20 and assess the patient, then work with us to transfer
21 the patient for specialized or critical care. We will
22 use those same protocols at the North Rockton Avenue
23 Hospital.

24 Trauma cases are only a very small percentage

1 of the patients we treat each year. Category one
2 traumas requiring the trauma surgeon and activating
3 the trauma team are most critical traumas and
4 represent less than half of one percent of all visits
5 we see in the emergency department at Rockford
6 Memorial. Nearly all of us category ones have
7 received initial care by the first responders at the
8 trauma scene or by another hospital. I support Mercy
9 Rockford's plans for emergency and trauma care.
10 Rockford Memorial will continue its important role as
11 a state-designated trauma center while we expand the
12 access and enhance for both the local citizens and the
13 larger region. Thank you.

14 HEARING OFFICER CONSTANTINO: Chip Stoner is
15 next.

16 MR. JOHNSON: I'm the Reverend Dr. Matthew
17 Johnson, J-o-h-n-s-o-n. I am with the Unitarian
18 Universalist Church in Rockford. This town's
19 geography is a consequence of systems of racial and
20 economic segregation -- white flight and white
21 supremacy. The lack of a Level I emergency department
22 and pediatric services on the west side is
23 unconscionable. If it's true the only significant
24 difference between Level I and Level II is

1 administrative capacity and coordination, then put it
2 on the west side. We can coordinate it from anywhere.
3 But a lot of folks don't have cars. How will
4 relatives, grandparents, come to visit those new
5 children who are, not just NICUs, but regular births
6 happening far away from where they live, and have to
7 pay for a hotel to stay there or go back and forth
8 when they have no bus?

9 Building a hospital is fine, but keep Level
10 I trauma and pediatric and obstetrics at the Rockton
11 campus.

12 One more thing. Folks have tried to
13 reassure me that the CEO cares about the west side,
14 and I don't doubt his integrity. But CEOs retire,
15 board members change. Things written in a letter are
16 not legally binding, so I would like to see this board
17 at least require a commitment to the high-quality
18 services -- Level I trauma and other services on
19 Rockton -- that guarantees quality on the west side.
20 They will make more money on the east side, and that's
21 true. And that's the problem, a national problem,
22 about how we pay for health care. But we shouldn't
23 have a system that poor people don't get as good a
24 health care as rich folks do. Thank you.

1 HEARING OFFICER CONSTANTINO: Chip Stoner.

2 MR. STONER: My name is Chip Stoner,
3 C-h-i-p, S-t-o-n-e-r, and I am the present CEO of Boys
4 & Girls Club of Rockford. I am speaking in support of
5 Mercy Rockford's application to this Board. The Boys
6 & Girls Club of Rockford is the area's largest
7 organization serving local youth. Our organization
8 serves over 6,500 kids each and every year, ages 6-18,
9 at our four local clubs with extended learning
10 opportunities throughout the entire county. Our focus
11 is a multifaceted approach to lifelong learning, our
12 program is diversified, and provides members with
13 opportunities for growth through academic success,
14 good character leadership, healthy, and healthy
15 lifestyles. Rockford Health Systems and Boys & Girls
16 Clubs share a similar passion, particularly children
17 struggling with the disadvantages of growing up in
18 poverty.

19 The Boys & Girls Clubs have benefitted from
20 access to care on Rockford Health System's Ronald
21 McDonald care mobile, a free medical and dental clinic
22 on wheels that brings care for kids directly to the
23 neighborhood, Boys & Girls Clubs, and schools. Boys &
24 Girls Clubs support Mercy Rockford plans to maintain

1 an active medical campus on North Rockton Avenue,
2 continuing service to families who rely on their
3 doctors and health care in that neighborhood.

4 Additionally, we support the plans to create
5 a state-of-the-art women's and children's hospital,
6 serving the critical care needs of children in our
7 community and throughout the region. I am a lifelong
8 resident of this community. I own homes on both sides
9 of this town. I currently own a home within walking
10 distance of downtown Rockford. I get so frustrated
11 when this community continually defines itself between
12 west and east side. Let's look at what's best for the
13 entire region to benefit this community for everybody
14 who works and lives in this place.

15 My youngest son had a brain tumor. We had
16 to go four years ago into the Childrens' Memorial
17 Hospital in Chicago. It would have been wonderful for
18 my wife and I and other kids if we had a childrens'
19 hospital here in this community. Let's think of
20 what's best for the entire community, not just for one
21 side of town. Thank you very much.

22 (Applause.)

23 MR. LAWLER: Mr. Hearing Officer, members of
24 the Board, my name is Dan Lawler. I am a partner with

1 the law firm of Barnes and Thornburg. I am here to
2 address the misrepresentation of a congratulatory note
3 from the Governor's office as it were a letter of
4 support for the CON application. The Governor's
5 statement is just a well-wishing note intended for an
6 announcement that it commends event organizers, offers
7 congratulations on the recent headquarter move, shows
8 awareness of the attempt to build a new facility, and
9 offers best wishes. There is nothing wrong with the
10 letter, and the Governor is entirely within his rights
11 to provide a congratulatory letter of this nature.
12 What is outrageous is the obvious misrepresentation of
13 the letter to make it appear that the Governor is
14 supporting their CON application. The applicants have
15 gone so far as to publicly post the Governor's letter
16 as a letter of support for their CON applications.

17 The applicants have previously used a
18 governor's letter to support a CON application. In
19 2009, a letter from then-Governor Quinn was submitted
20 with a CON application of support that grew sharp
21 bipartisan criticism from widespread members of a task
22 force on health planning reform. Senator Susan
23 Garrett, the cochair of the task force, said, "It is
24 very upsetting to me while we are pushing for

1 reforming the planning support, the Governor is
2 encouraging certain projects to be pushed through."

3 Senator Bill Brady said, "Clearly, this is
4 what we set this Board up for, that it would not be
5 political. When the person who appoints you weighs
6 in, it is certainly political." Governor Quinn
7 quickly retracted that letter and said it was, "sent
8 without my knowledge or approval and should not have
9 been submitted to the Board."

10 As in 2009, the Governor has not taken a
11 position on a pending CON project. But the applicants
12 sure make it look that way to this Board and to the
13 public. The applicant's tactic is highly prejudicial.

14 On behalf of OSF St. Anthony Medical Center,
15 I request we suspend these CON applications and take
16 action to ensure that the applicant's communications
17 to this Board do not prejudice any party or adversely
18 affect the fairness of the proceedings. I am
19 submitting a formal, written, and documented objection
20 with this oral statement. Thank you.

21 HEARING OFFICER CONSTANTINO: I've got
22 trouble with this name. I'm going to spell it out.
23 It's long. Sumoulindra B-h-a-t-t-a-c-h-a-r-y-a.

24 (Laughter.)

1 HEARING OFFICER CONSTANTINO: You already
2 knew. And then Dr. Pharatiroy is next.

3 DR. BHATTACHARYA: Thank you. Last name you
4 spelled very nicely. Thank you. I am
5 Dr. Bhattacharya, and I've been an ob/gyn at Rockford
6 Health System for 10 years, and I also serve as the
7 medical director of the obstetrical and gynecological
8 services. I provide care in the areas of pregnancy,
9 childbirth, and womens' health. In my career, I have
10 delivered thousands of newborn babies and have created
11 many hundreds of surgical procedures. I see
12 obstetrical and gynecological patients at the North
13 Rockton Avenue campus as well as the Perryville
14 building.

15 I support the Mercy Rockford plan to
16 continue offering primary care for women, including
17 ob/gyn services at many convenient locations,
18 including the North Rockton Avenue location. That's
19 not going to change. Patients will continue to see
20 ob/gyns and other physicians on the current campus. I
21 also support Mercy Rockford plans to create a
22 state-of-the-art hospital at the East Riverside campus
23 to provide the highest level of hospital care for
24 women, babies, and children. We play a critical role

1 to our region as a state-designated perinatal center.
2 We have a great team of highly trained physicians and
3 staff that work together to provide the highest level
4 of care to women and newborn babies. However, our
5 hospital facility is in need of modernization. A new
6 women's and children's hospital will allow us to
7 upgrade our inpatient unit and to provide all private
8 rooms. That will provide more comfort, privacy, and
9 enjoyment for our families. At the same time, we will
10 have a new nursery and, most importantly, a new NICU.
11 The new hospital will also provide state-of-the-art
12 technology and efficiency for our staff. We are
13 excited that moms, babies, and families will
14 experience a beautiful, modern facility to deliver
15 babies where the region's highest level of expertise
16 and technology is immediately available should the
17 need arise.

18 Additionally, the surgical facilities at the
19 new hospital will enhance the care we provide to
20 surgical patients. Obstetrical and gynecological
21 surgical procedures today require longer time, and the
22 use of the robot on a regular basis that I have had
23 the opportunity to work with, have caused minimally
24 invasive surgery with faster recovery times --

1 HEARING OFFICER CONSTANTINO: Can you
2 conclude your comments.

3 DR. BHATTACHARYA: -- and it's true what
4 they say. While the incisions have gotten tinier and
5 tinier, and the surgical equipment has gotten
6 gigantic. Our plans for the future are really
7 exciting. We will continue providing excellent
8 primary care in convenient neighborhood locations, and
9 the new women's and children's hospital will create a
10 destination medical center to attract patients to our
11 region and attract the highest level of care. Thank
12 you for your time.

13 HEARING OFFICER CONSTANTINO: Thank you,
14 Doctor. Andy Schultz. Andy Schultz.

15 DR. PHARATIROY: Dr. Pharatiroy,
16 P-h-a-r-a-t-i-r-o-y. Good afternoon. I am a
17 pulmonologist and the medical director of pulmonary
18 rehab and the medical subspecialties at Rockford
19 Memorial Hospital. I have been practicing pulmonary
20 and critical care medicine at Rockford Memorial
21 Hospital for about 23 years.

22 Over the years, we have been able to develop
23 many special programs in pulmonary and critical care
24 areas that are benefiting patients in the northern

1 region and in both west and east locations in
2 Rockford. I am speaking in strong support of Mercy
3 Rockford's plan to enhance patient care by
4 establishing one hospital on two campuses.

5 My specialty provides care to a wide variety
6 of patients with breathing issues. Some of your
7 patients have chronic diseases like asthma and COPD
8 and are primarily treated in the same staff settings
9 over a long period of time. Some of our patients,
10 particularly the elderly or medically fragile, may
11 develop pneumonia or other conditions which require
12 hospitalization for treatment. A small percentage of
13 our patients are those who have highly complex
14 illnesses and injuries and require very specialized
15 intensive care. Because our team of pulmonologists
16 offer certain procedures and treatments that are not
17 available elsewhere in northern Illinois or southern
18 Wisconsin, a number of patients come to us from a very
19 large geographic area. What excites me about the
20 Mercy Rockford plan is that all those types of
21 patients will receive convenient and appropriate care
22 at both campuses. Our pulmonary team always provides
23 care for patients in their -- in two locations. The
24 North Rockton Avenue campus and at the clinic on

1 Perryville. Patients come to whichever location is
2 most convenient for them, and that would not change.
3 We will continue to provide clinicians in two
4 convenient locations.

5 HEARING OFFICER CONSTANTINO: Can you
6 complete your comments.

7 DR. PHARATIROY: Sure. Likewise, patients
8 who require hospitalization for chronic diseases like
9 asthma and COPD can be cared for at either campus.

10 Lastly, those patients who need highly
11 complex critical care be surrounded by
12 state-of-the-art facilities and technologies that just
13 aren't possible in our current locations. On behalf
14 of our team and our patients, we urge approval of
15 Mercy Health's applications to the State. We can
16 breathe easier. Thank you.

17 (Applause.)

18 MR. SCHULTZ: Andy Schultz, A-n-d-y,
19 S-c-h-u-l-t-z. This letter I am submitting in support
20 of Mercy Rockford Health System's three applications.
21 I would like to take this opportunity to introduce
22 myself. I am the CEO and founder of MTS Medical
23 Services. We are a private ambulance provider located
24 in Winnebago County, and our company also provides

1 services to several outlying areas and fire protection
2 districts in northern Illinois and three other states.
3 I have been working in EMS as a paramedic in the State
4 of Illinois for the past 28 years. I started MTS
5 Medical Services in 2005 with the vision of improving
6 the three hospital services in this community. I feel
7 anyone that is associated in health care has an
8 obligation to provide the services that are in the
9 best interest of the community and its patients.

10 With that being said, I am showing my
11 support for the approval of the new Mercy Rockford
12 Health Systems campus on East Riverside Boulevard. I
13 can't express my excitement on having such a huge
14 project in this area. This type of growth has been
15 needed in this community for years. Just imagine the
16 amount of jobs this is going to generate as well as
17 the thought of Rockford having a state-of-the-art
18 designation hospital.

19 If you think about it, the three current
20 hospitals are very old and quite landlocked. I feel
21 the best part about this project is that ability of
22 Rockford is to not only have the brand new
23 state-of-the-art hospital, but the forward thinking of
24 Mercy Rockford to continue the operations and

1 renovating of the original Rockford Memorial campus on
2 the west side. This will allow the west side
3 community and the residents to still have an
4 outstanding hospital that will meet all their needs.

5 I feel it's also very important to mention
6 the three local hospitals in the area here are very
7 busy. They have very busy emergency departments, and
8 when transporting ambulance patients to them, it's not
9 uncommon to have all the rooms full and have these
10 patients waiting with the ambulance out of service in
11 the hallway for up to 30 minutes sometimes. All this
12 does is keep that ambulance company out of service
13 much longer. This will allow -- this new campus will
14 also add extra ED beds.

15 HEARING OFFICER CONSTANTINO: Can you
16 conclude your comments.

17 MR. SCHULTZ: Yes, I will. This will also
18 give us the ability to have other additional ED beds
19 to transport patients to and allow these ambulances to
20 get cleared up and back in service to their
21 communities where they are needed. Thank you.

22 (Applause.)

23 MR. MCCANSE: Donald McCanse, M-c-C-a-n-s-e.
24 Good afternoon. My name is Donald McCanse, and I am a

1 board certified general surgeon. I have lived and
2 worked in Rockford for more than the last 30 years. I
3 strongly support Mercy Rockford's plan for one
4 hospital on two campuses. My wife's family is from
5 the west side of Rockford. My office location and
6 primary surgical location has always been at Rockford
7 Memorial Hospital on North Rockton Avenue. I
8 appreciate how important the Rockton Avenue campus is
9 as an economic and health care anchor for the west
10 side of Rockford.

11 I support Mercy Rockford's plan to continue
12 to provide a broad range of services on the Rockton
13 campus, including emergency service, inpatient beds,
14 surgical services, primary care, and specialty
15 physicians. The ongoing availability of this care
16 means continued access for patients from throughout
17 the region. The North Rockton Avenue location is and
18 will remain the home for your state-of-the-art cancer
19 center and behavioral services. Rockford Memorial
20 recently invested \$7 million in technology for our
21 cancer care center. We built an addition to the
22 hospital and installed the TrueBeam accelerator that
23 provides radiation oncology care for our patients.

24 I treat cancer patients on a daily basis.

1 They will continue to benefit from this highly
2 advanced technology on the west-side campus. I have
3 regularly performed surgery over the last 30 years in
4 the Rockford Memorial Hospital OR. Most of these
5 rooms were designed and built, believe it or not,
6 before I started working at the hospital. They are
7 too small to allow us to do what is routine surgery
8 with the new equipment -- the routine techniques that
9 are now standard care. Our outpatient pre-op recovery
10 areas do not meet the current standard for patient
11 privacy and comfort. We are a busy surgical hospital
12 and will greatly benefit from the creation of a second
13 hospital location with a new surgical facility.

14 Mercy Rockford's plans for one hospital on
15 two campuses offers the best option to improve areas
16 that require updating while continuing to offer
17 upgraded services on our North Rockton campus. Thank
18 you for your time.

19 (Applause.)

20 HEARING OFFICER CONSTANTINO: Senator Steve
21 Stadelman.

22 UNIDENTIFIED FEMALE: He's here. Let me go
23 get him.

24 HEARING OFFICER CONSTANTINO: Is there

1 anyone else in opposition to this project? Anyone
2 else in opposition that wants to testify?

3 SENATOR STADELMAN: Good afternoon. Thanks
4 for the opportunity to give testimony to the Illinois
5 Health Facilities and Services Review Board. Mercy
6 Rockford's proposed project greatly interests me, not
7 only as a State Senator, but as a parent as well.

8 Nearly 13 years ago, we had twins who were
9 born prematurely, and as many parents in a similar
10 situation, we spent many hours in the first few weeks
11 and first few months of their lives in the neonatal
12 unit at RMH. It became our second home for those
13 months and the staff became like family members.

14 Today we are fortunate our twins are happy,
15 healthy preteens experiencing all the joys and
16 challenges associated with that stage in life. We
17 will be forever grateful for the quality of care that
18 the doctors and nurses and others at Rockford Health
19 System provided to us. So it's exciting to hear about
20 Mercy Rockford's plan for Rockford even becoming a
21 bigger, regional destination for this type of
22 top-level specialty medical care.

23 As we know, health care is a growing
24 industry, and the Rockford area is in a prime position

1 to take advantage of that. When you combine Mercy
2 Rockford facility that will contain neonatal,
3 pediatric ICUs, and a women's and children's hospital
4 with high-risk maternity care services, and Level I
5 trauma center with SwedishAmerican and OSF St. Anthony
6 to expand those services, well, Rockford will be a
7 destination throughout northern Illinois and southern
8 Wisconsin. That's good for our local economy; that's
9 good for our state's economy. However, I also hope
10 it's good for the health care campus on Rockton Avenue
11 and that part of the community as well.

12 Mercy Rockford has pitched this project as
13 one hospital, two campuses. I hope that means
14 continued investment in the west side location, where
15 there are also many business rooftops and patients to
16 be served as well. Mercy Rockford officials have
17 pledged millions of dollars a year towards the Rockton
18 Avenue facilities, and that initial commitment must be
19 kept.

20 With that said, I urge the Health Facilities
21 and Services Review Board to accept the plan and the
22 improved health care opportunities and economic
23 development that will follow. During your review, I
24 also ask that you consider the impact of the entire

1 community, so that all parts had are ensured high
2 quality health care for the long-term future. Thank
3 you very much.

4 HEARING OFFICER CONSTANTINO: I'm going to
5 make a suggestion -- only a suggestion. All I have in
6 front of me here are supporting testimony. I would
7 rather you submit your written comments to me, and
8 then we can conclude the meeting, and then we can get
9 out of here and enjoy lunch and enjoy the afternoon.
10 Anyone opposed to that?

11 UNIDENTIFIED MALE: I believe that there are
12 people coming in for the sign-up period for the later
13 hearing.

14 HEARING OFFICER CONSTANTINO: Oh, there is?
15 Okay. Then we will continue.

16 DR. ZARNKE: Mark Zarnke, Z-a-r-n-k-e.
17 Thank you for your patience, gentleman. I am Dr. Mark
18 Zarnke. I am a general surgeon and trauma surgeon for
19 Rockford Memorial Hospital as well as chair of the
20 operating room committee. I am also an independent
21 surgeon that has been practicing here for over
22 26 years. As a trauma surgeon, I help provide the
23 team the high quality standards that we accept for
24 treating patients in our area.

1 Rockford Memorial is my preferred hospital
2 for surgery, and I think that you will find that maybe
3 the independent surgeons in town would agree with
4 that. One of the reasons -- probably the major reason
5 for that is the coordinating of the team that we have.
6 It's a very stable group of anesthesiologists, nurses,
7 and pre- and post-hospital operative care in the unit.
8 Together, we are able to provide very consistent,
9 outstanding care for them. Unfortunately,
10 the plan for the facility that we are operating in is
11 outdated. We have recognized for years, and believe
12 me, we have looked at many ways of trying to
13 reconfigure and persist on the west side with the
14 major surgery there. I do believe that the Mercy
15 Rockford plans that have been proposed will support
16 this and allow this to go forward. As Dr. McCanse
17 said, the mechanics of the operating rooms were
18 developed over 60 years ago. The standard of care now
19 for surgery is much different. It is much more
20 labor-intensive with staff and equipment. It is
21 simply that the operating rooms are not able to
22 accommodate this. There is no room in the current
23 structure, and also with the pre- and post- operative
24 care, the flow for convenience, privacy, and comfort

1 of our patients is somewhat impaired. The
2 newly-designed department and its proposal will allow
3 us to correct all those things. Even with the
4 construction of ten new surgical suites on the east
5 side, what we plan to do is continue using the four
6 most modern rooms on the west side and continue to
7 operate in them. Postsurgery will be able to use,
8 again, the most updated and modern facilities that we
9 have --

10 HEARING OFFICER CONSTANTINO: Please
11 conclude your comments.

12 DR. ZARNKE: -- and we will be able to
13 continue the care. I support this plan, and thank you
14 for your time.

15 HEARING OFFICER CONSTANTINO: Carol Myers.

16 MS. DAUGHTRY: My name is Gail Daughtry,
17 G-a-i-l, D-a-u-g-h-t-r-y. I am the executive
18 assistant to Mayor Lindberg, and I have been asked to
19 speak on his behalf in support of Mercy Rockford
20 Health's expansion plan. His remarks are as follows:
21 "Please be assured that the City of Loves Park gives
22 their full support of the plans currently being
23 reviewed for the new Riverside campus for Mercy
24 Health. I attended a prior meeting and was shown a

1 preliminary set of plans for the new facility.

2 Needless to say, I was impressed with the concept, and
3 join with others in extending our support of this
4 tremendous project.

5 In addition to the hundreds of skilled jobs
6 created in the construction phase, we look to the
7 future jobs that will be created in the medical
8 industry and related support businesses. This can
9 only help to secure the Rockford/Loves Park region as
10 a leader in health care and modern health care
11 technology. Another important side effect will be the
12 economic impact with regards to hotels, restaurants,
13 etc., needed to support the people traveling here for
14 the services that will be provided. This only helps
15 all of us to maintain a strong, viable base that
16 supports all of our services we provide as a
17 community.

18 Again, please consider the City of Loves
19 Park as a strong supporter of this project."
20 Sincerely, Darryl Lindberg, Mayor of Loves Park.

21 (Applause.)

22 HEARING OFFICER CONSTANTINO: Carol Myers.
23 Carol Anderson.

24 MS. ANDREASEN: Satryl, S-a-t-r-y-l

1 A-n-d-r-e-a-s-e-n. I am a resident in the west side,
2 and I live about two miles northwest of the hospital.
3 I believe in the proposed emergency and hospital
4 services that will be continued to be offered at the
5 hospital on Rockton Avenue, and I believe it will
6 support the needs of the west side residents, and I
7 believe it will continue to be a major employer on
8 this side of the river. Thank you.

9 (Applause.)

10 HEARING OFFICER CONSTANTINO: Thank you. We
11 need to take a short break. Senator, is 15 minutes
12 okay with you? We are going to take a 15-minute break
13 and start again at 1:35.

14 (Off the record at 1:20 p.m.)

15 HEARING OFFICER CONSTANTINO: We are going
16 to get started again. Okay. A Libby Clark. Libby
17 Clark. Stanley Meyers. George Boyer's -- can't make
18 out the last part of it.

19 UNIDENTIFIED SPEAKER: Spell it.

20 HEARING OFFICER CONSTANTINO:
21 L-i-c-h-t-h-a-r-d-p. What happened to -- to all
22 these? Ginger Smalley.

23 UNIDENTIFIED SPEAKER: I think they left.

24 HEARING OFFICER CONSTANTINO: Ginger

1 Smalley. Vera Philips. Vera Philips. Carol Bennehoff,
2 B-e-n-n-e-h-o-f-f. Georgina Caywood. Caywood,
3 c-a-y-w-o-o-d. Joyce Lillie? Lillie, L-i-l-l-i-e.
4 Janet Makeever, M-a-k-e-e-v-e-r. Makeever. Marina
5 Drake, D-r-a-k-e. Tamara Dennis.

6 MS. DENNIS: Right here. Tamara Dennis,
7 T-a-m-a-r-a, D-e-n-n-i-s. I am a nurse. I am in
8 support of all the three Rockford -- Mercy Rockford
9 Health Care plans. I am director of cardiovascular
10 and also clinical director of ob/gyn physicians at
11 Mercy Health Care. I can't tell you how important it
12 is to move forward with plans to construct the
13 hospital on Riverside Boulevard. The I-90/Riverside
14 campus will enhance regional access to much needed
15 services, such as high-risk infants and patients
16 needing highly specialized health care. The womens'
17 health center will provide an array of specialized
18 services for high-risk moms and a variety of
19 subspecialties, including our maternal fetal
20 specialists.

21 In addition to obstetrics, I also oversee
22 the heart care program at Mercy. For cardiac
23 patients, the Rockton and Riverside patients will
24 follow the guidelines of the Society of Cardiovascular

1 Patient Care, the American College of Cardiology, and
2 the American Heart Association. These accredited
3 organizations all recommend a 90-minute
4 catheterization time, meaning the time when the
5 patient presents at the hospital to the time the blood
6 starts reflowing. We are confident our
7 catheterization time will be 20 to 25 minutes from our
8 Rockton Avenue campus to our Riverside campus. All
9 patients, whether they arrive at Rockton or Riverside
10 campus emergency department by ambulance or by foot,
11 will be treated following these national guidelines.
12 Thank you.

13 (Applause.)

14 HEARING OFFICER CONSTANTINO: Brad Long.
15 Brad Long. Brad Long. Angela Mascharka.

16 MS. MASCHARKA: My name is Angela Mascharka,
17 M-a-s-h-c-h-a-r-k-a. I'm a licensed clinical social
18 worker with Rockford Health System, and I am happy to
19 say I've been an employee there for 24 years. Very
20 committed to our patients as are maybe all of your --
21 my coworkers. I am also proud to say I am an employee
22 of the cancer center, of which under this new plan
23 will continue to provide quality state-of-the-art
24 cancer services at our North Rockton Avenue campus.

1 I'm excited at the same time to see our system respond
2 to the needs of our community by having additional
3 specialized services at the Riverside Boulevard
4 campus.

5 As a social worker -- and I've been here
6 since this morning and listening to a lot of the
7 information that was shared in opposition -- of course
8 transportation was one of the issues, and I was very
9 very happy to hear that part of the plan is to have a
10 continuous shuttle that would run from the North
11 Rockton campus out to the Riverside Boulevard campus
12 to address any situations in which people would have
13 difficulty getting to the other campus. So, again,
14 that was one of the things that was near and dear to
15 my heart when I heard of this plan.

16 In conclusion, I am here to give my support
17 to the one hospital, two campuses plan, and I feel it
18 will greatly benefit our patients and the residents of
19 this community.

20 (Applause.)

21 HEARING OFFICER CONSTANTINO: Scheieeger,
22 S-c-h-e-i-e-e-g-e-r? Scheieeger. Dave Grzetb, that's
23 G-r-z-e-t-b.

24 UNIDENTIFIED FEMALE: He submitted a

1 statement. He had to leave. He is in support of the
2 project.

3 HEARING OFFICER CONSTANTINO: Donald
4 McCanse.

5 UNIDENTIFIED MALE: He already left.

6 HEARING OFFICER CONSTANTINO: Christina
7 Closter.

8 MS. CLOSTER: Here is a statement in support
9 of the project.

10 HEARING OFFICER CONSTANTINO: Donald Mccanse.

11 UNIDENTIFIED SPEAKERS: He already spoke.

12 HEARING OFFICER CONSTANTINO: Christina
13 Decoster.

14 MS. DECOSTER: I'm here on behalf of State
15 Senator Tim Bivins, who could not be here today and
16 wanted to send this statement in support of the
17 project.

18 HEARING OFFICER CONSTANTINO: Christina
19 Fritz. Christina Fritz. Anyone else want to provide
20 oral testimony? Step forward and give your name,
21 spell your name.

22 MR. MILOS: Good afternoon. I am Glenn
23 Milos, G-l-e-n-n, M-i-l-o-s. I am here in support of
24 the Mercy Rockford Health System plans. As Mercy

1 Health System's Regional Medical Director for trauma
2 and emergency medicine, I know that training and
3 experience improves outcomes and saves lives.

4 Consequently, it is our plan to have both the Rockton
5 Avenue and Riverside Boulevard campuses to be staffed
6 with the same advanced trauma-support trained
7 physicians and nurses. We will have one team of
8 highly-trained physicians and nurses who will rotate
9 through and work at both campuses. This is
10 significant because the quality of emergency and
11 trauma medical care provided will be nearly identical
12 irrespective of what campus a patient presents to.

13 In my opinion, this is what already happens
14 in Janesville. Mercy has a free-standing emergency
15 department in Janesville for which we call ED north
16 that is situated approximately 15 minutes across town
17 from the main campus. We have one team of physicians
18 and nurses who provide the same high quality, advanced
19 cardiac and trauma life-support care at both emergency
20 departments. Transferring the patients with a heart
21 attack, stroke, traumatic injury, or surgical
22 condition from ED north is done frequently and
23 seamlessly, and in a very timely fashion with
24 absolutely little adverse outcome to the patient.

1 Moreover, we frequently transfer patients from our
2 Mercy Walworth facility, which is 35 minutes, and our
3 Mercy Harvard facility, which is 45 minutes, to
4 Janesville with patients who have heart attack,
5 strokes, traumatic injury or surgical conditions
6 without any adverse outcome to the patients. So the
7 amount of time it would take to transport a patient
8 from Rockton to Riverside campus is in line with what
9 we've been doing successfully for many years. We also
10 have highly successful cardiac outcomes on patients
11 with a heart attack from our Walworth and Harvard
12 Hospitals to our cath lab in Janesville. Our outcomes
13 consistently exceed the industry benchmark of 90
14 minutes for door-to-door recatheterization time as
15 previously addressed by Mr. Bea. Our highly trained
16 emergency medical physicians also maintain an advanced
17 cardiac life support training and are able to initiate
18 life-saving medical care to stabilize the patient for
19 transport and definitive catheterization.

20 HEARING OFFICER CONSTANTINO: Please
21 conclude your comments.

22 MR. MILOS: These patients will be
23 transported to the cardiac catheter team. They are
24 able to prepare the procedure room while the patients

1 are being transferred.

2 Prior to joining the Mercy Health System, I
3 worked in Rockford for seven years. I know firsthand
4 how vital emergency, cardiac, and trauma services are
5 for the region. I am committed to building a robust,
6 comprehensive emergency services system that begins in
7 the field even before the patient -- I'm almost done.

8 I am a Rockford native and am currently
9 residing in Rockford with my family. My parents and
10 extended family also reside in Rockford. Therefore, I
11 have a vested interest in ensuring that our Mercy
12 Rockford Health System exceed in delivering in
13 Rockford. I am passionate and committed to providing
14 evidence-based medicine that is patient centric and
15 delivered with empathy and kindness and compassion.
16 That is who we are at Mercy Rockford.

17 (Applause.)

18 UNIDENTIFIED FEMALE: Excuse me. We have
19 two people that are in here now, so should we -- who
20 is it?

21 HEARING OFFICER CONSTANTINO: Is there
22 anyone else who wants to provide public testimony?

23 UNIDENTIFIED FEMALE: For Juan.

24 HEARING OFFICER CONSTANTINO: Yes.

1 MR. LONG: Hello, my name is Brad Long,
2 B-r-a-d, L-o-n-g. I am a business agent for
3 Carpenter's Local 792, a carpenter by trade, and also
4 president of the Northwest Building and Construction
5 Trades Council.

6 As the president, I represent 15,000 members
7 in the eight northwest counties of Illinois. And as a
8 carpenter, I've enjoyed countless hours working at all
9 three hospitals in Rockford, including Rockford
10 Memorial Hospital, able to earn a living wage while
11 doing that to provide for my family.

12 In the last seven years, it's been pretty
13 rough for everybody, especially construction. The
14 industry has been hit awfully hard. Just to give you
15 an example of how it's been, just with our Local 792,
16 the carpenters, we used to have 1400 members. Now we
17 are down to 750. Now it's growing back, but this
18 project will go a long way to putting the men and
19 women of our building trades back to work, and we
20 support this project in all three phases. Thank you.

21 (Applause.)

22 HEARING OFFICER CONSTANTINO: Anyone else
23 want to provide public testimony? Oral testimony? Is
24 there anyone else? It's 15-038, which is the first

1 project. Is there anyone else for the first project,
2 15-038?

3 MS. NORMAN: My name is Jodi Norman,
4 J-o-d-i, N-o-r-m-a-n. I'm sorry.

5 (Crying.)

6 I speak for myself and on behalf of my
7 husband, who died at Rockford Memorial on
8 February 24th, 2006. I am opposed to the project --
9 all three. I spoke to Senator Syverson earlier -- he
10 didn't mention that he was a member of the board right
11 now of RMH, but my husband was in a car wreck.
12 Somebody ran a stop sign. He died at Rockford
13 Memorial four days later. I wasn't able to get
14 information, I was kept away from him. He was denied
15 and delayed care in a lot of ways. There were a lot
16 of things that didn't work the way it was supposed to.
17 And we are both lifelong citizens of Rockford. He was
18 born at St. Anthony Hospital, I was born at Rockford
19 Memorial, which was our hospital of choice. We went
20 for the best care. We agreed that RMH was that place.
21 There were just a lot of things that didn't work, and
22 I was unable to get information from the police
23 department, from the fire department, from the
24 hospital, from the coroner, from the State's Attorney,

1 and I know that's not typical, and I am grateful to
2 the people who did the best they could and did go
3 above and beyond, and were so good to us in so many
4 ways and to our families over the years, because there
5 are so very many.

6 But I don't think the people should be
7 allowed to get off the hook if you can't account for
8 the people who are in your care who are competent, who
9 are clear, who know what they need and what they don't
10 need, and I'm very sorry to have seen that Rockford
11 has emphasized putting people into behavioral health
12 diagnoses and clinics and programs when it's physical
13 and mental care that's needed and there is a
14 disagreement between other outside interests.

15 HEARING OFFICER CONSTANTINO: Can you
16 conclude your remarks.

17 MS. NORMAN: Yes, I will. I appreciate the
18 people of Rockford who do and the outsiders who do
19 what they can. I think the outlying communities will
20 be hurt terribly, especially the western portions of
21 the county, and I do look at the bigger picture.
22 There are a lot of other reasons, but I do hope they
23 will think differently about the proposal and take
24 better care of Rockton Avenue campus and do more with

1 that. Thank you.

2 HEARING OFFICER CONSTANTINO: Is there
3 anyone else that wanted to testify for Project No.
4 15-038? This is the Rockton Avenue campus project.

5 MR. BEA: We have closing testimony.

6 HEARING OFFICER CONSTANTINO: Mr. Bea.

7 MR. BEA: Thank you very much. I want to
8 just take moment to thank everyone who came out to
9 speak today. We heard all the comments; we take all
10 the comments very seriously. I think that there's --
11 even though we have been meeting with many
12 neighborhood groups, we still need for us to continue
13 to bring better understanding to some of the
14 misperceptions out there. I especially feel for our
15 last speaker. I know what it's like -- my oldest
16 daughter Sarah died, and when she was dying, even
17 though I've been in health care all my life, I
18 couldn't absorb all the information that I was
19 receiving from doctors. I wanted to know from the
20 coroners how did it happen, and so it becomes a very
21 confusing time, and those things certainly stay with
22 you for the rest of your life.

23 But I can just tell you that from hundreds
24 and hundreds and thousands of patients that come to

1 Mercy Rockford Health System, we absolutely are
2 committed to every single patient and are always
3 striving to make better and we want to actually hit
4 [inaudible], and that's part of the reason that we
5 decided that with a 60-year old building that we can
6 offer a number of services, and I want to emphasize
7 the emergency care that will be provided, that the ER
8 doctors testified, will be the same standard of care
9 will be the same at Rockton as it is at Riverside.
10 And I also want to say that, because the cath lab will
11 be at Riverside, there is going to be two standards of
12 care, and that's just not true.

13 The fact of the matter is, you will receive
14 the same standard of care whether you walk into
15 Riverside and need a cath lab, where it would take 30
16 minutes to prepare the cath lab, or whether you walk
17 into Rockton and then go over to Riverside. Or,
18 whether you have a heart attack at home and the
19 ambulance has to transport you to any hospital with a
20 cath lab. As you heard many cardiologists testify,
21 it's at 90-minute window of time. So, I want to
22 assure the Rockford community that we've done
23 something I think is impressive -- that we are very
24 proud of, and I take great pride in, because I am so

1 committed, and my wife has has dozens of relatives who
2 live on the west side. I grew up on the west side. I
3 just -- people have said to me earlier at the last
4 meeting, what is this? You are trying to keep
5 everything possible on the west side. And I said,
6 absolutely. That's our mission. That's our primary
7 mission. But we don't have the ability, as the
8 Alderman Hervey said, to be able to do it all. We
9 don't have the land to be able to build a new tower on
10 the west side.

11 And I just want to say, this wasn't my idea.
12 This didn't happen since the merger of Mercy in
13 Rockford. This happened 20 years ago, with the vision
14 of the Rockford leaders. And a 40-year old facility,
15 knowing that someday it was going to get to where
16 there was going to need to be a new facility for those
17 critical care services.

18 So I just want to emphasize -- I want to
19 thank Senator Burzynski, I know it's been long. I am
20 thinking the next two hearings will probably go
21 quicker, and I would like to thank the staff of the
22 Illinois facilities for all of you coming today.
23 Thank you very much.

24 ALDERMAN HERVEY: Thank you. I only have a

1 couple of comments with regard to the Riverside
2 facility. As I mentioned earlier --

3 HEARING OFFICER CONSTANTINO: Can you hold
4 off a minute on your comments?

5 ALDERMAN HERVEY: Oh, are you still on 038?

6 HEARING OFFICER CONSTANTINO: Yes, we are.

7 ALDERMAN HERVEY: My apologies. I'm sorry.

8 (Laughter.)

9 HEARING OFFICER CONSTANTINO: Okay. That's
10 -- anyone else want to provide testimony for 15-038?
11 That's the Rockton Avenue campus. Okay. That hearing
12 is closed, and we are going to start, go right into
13 the next hearing. This is the Riverside campus.

14 (Hearing was concluded at 2:04 p.m.)

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1 ILLINOIS DEPARTMENT OF PUBLIC HEALTH
2 HEALTH FACILITIES AND SERVICES REVIEW BOARD
3 BEFORE HEARING OFFICER MICHAEL CONSTANTINO
4 IN RE: :
5 Public Comments Regarding :
6 Application to Establish an : Project No. 15-039
7 East Riverside Boulevard :
8 Campus. :
9 :
10
11 HEARING in accordance with requirements of the
12 Illinois Health Facilities Planning Act
13
14 E. J. "Zeke" Giorgi Center
15 200 South Wyman Street
16 Rockford, Illinois 61101
17 Thursday, September 17, 2015
18 11:00 a.m.
19
20
21 Job No. 91696A
22 Pages: 117 - 157 for 15-039
23 Reported by: Camille Suzanne Connell,
24 CSR, RPR

1 HEARING OFFICER CONSTANTINO: We are going
2 to start with Mr. Bea again to provide opening
3 comments for 15-039, and then we will -- I'm sorry. I
4 apologize Alderman -- and we like to keep comments to
5 two minutes, please.

6 MR. BEA: Thank you. Hello, Mr.
7 Constantino, you said there is no limit to my time,
8 right?

9 HEARING OFFICER CONSTANTINO: I made an
10 executive decision.

11 MR. BEA: I will say that, because the three
12 projects had to be broken, the amount copies that have
13 made that their integrated projects and the single
14 thing we had when we get to hearing three. So,
15 project two is that with the reconfiguration of the
16 project keeping the majority of service, primary
17 specialty services, and the majority of the physicians
18 that Rockford campus. We focused in on only those
19 services that cannot be renovated within our building,
20 primarily the neonatal center, the perinatal high-risk
21 mothers, the pediatric intensive care unit, and the
22 high level of tertiary open heart surgery and
23 neurosurgery.

24 And so that's really what the project is

1 for. I want to emphasize a couple of other things,
2 and that is for anyone we are going to offer free
3 patient transportation, a shuttle service, between
4 Rockton Avenue and Riverside location. The city has
5 already committed that there will be bus service
6 between the two. But any patient or patient's family
7 that needs transportation between the two, we will
8 provide it.

9 The reality is, when you need one of the
10 services at Mercy Rockford, it's the highest level
11 intensive tertiary care service. So, if you come in
12 to the Rockford Memorial at Rockton and need that,
13 chances are you are probably going to be sent over in
14 10 to 12 minutes by ambulance, because otherwise you
15 would be getting all your care. The far majority of
16 care -- very few people get into the hospital today.
17 That is why we are offering back to the State 109 beds
18 that we are not using. I talked to you before the
19 hearing and asked, what's the highest number of beds
20 you can recall of beds being voluntarily given back to
21 the State? You said 110. Well, we are at 109, and
22 that's because we are acknowledging the fact that so
23 much is being done outpatient. You just don't need --
24 health care -- virtually every hospital in the state

1 has accessed licensed beds. Some of them don't even
2 have the beds in their facility. So the point is, the
3 far, far majority of care is going to be offered where
4 it's always been, and that is on Rockton Avenue. And
5 it's just that high-level tertiary, most critical care
6 of which Rockford is a state-designated center for the
7 whole northern Illinois area that will be on
8 Riverside. Thank you.

9 HEARING OFFICER CONSTANTINO: Can I --
10 excuse me everyone, Ms. Hervey. I apologize. I know
11 he's your boss, but please do not have any more -- it
12 will go a lot faster if you didn't applaud. And I
13 apologize --

14 MS. HERVEY: I only have a couple of
15 additional comments from those I made this morning.
16 When we talk about moving over to the Riverside
17 center, perhaps the most glaring example of an
18 unnecessary move and a duplication of services is the
19 Level I trauma center. If that service moves to
20 Riverside, you will have two Level I trauma centers
21 within about four miles of each other. None service
22 the entire western side and the entire western region.
23 I think it's pretty callous and shows a real disregard
24 for people and their lives to make the argument that

1 time doesn't matter. Every EMT and fire department
2 I've talked to, and some physicians, say nope. Time
3 is muscle. The neurologist, I think, who spoke/talked
4 about how much you lose in terms of nerve synapses and
5 things of that sort. I'm a lawyer not a doctor, so
6 forgive me if I butcher the human body here, but there
7 are critical medical outcomes and recovery levels that
8 are dependent upon fast access to care, and the higher
9 levels of care. I am not arguing that the two
10 emergency rooms won't be comparable. I believe they
11 will be. That's not what we are concerned about. We
12 are concerned about removing the higher levels of
13 care, those that medical science has risen to that
14 allow us to achieve better outcomes, faster recovery,
15 and better quality of life because they are available
16 in a shorter distance. But to put two within 24 miles
17 of each other and remove them from an entire region is
18 incomprehensible, and certainly doesn't meet the
19 standards or the criteria that I have read about for
20 obtaining a certificate of need. The other issue that
21 I want to talk about is the fact that we need a lot of
22 people with support. A specialty children's hospital
23 and a NICU unit that is more centrally located.
24 That's a specialty facility, not a fourth, pretty much

1 full-service hospital within the Rockford region.
2 Even giving up 109 beds doesn't make up for the fact
3 that you are still operating the fourth hospital
4 within the City of Rockford and these surrounding
5 areas. So, for the all the people who are talking
6 about the children, the little babies, I want them to
7 have better regional access to care by ambulance, by
8 helicopter, by car. At the same time, I don't want
9 people who suffer from critical, medical events to
10 have to lose the life-saving and time-sensitive
11 services that are available with three hospitals that
12 are in Rockford. I have to say it again. Rockford is
13 uniquely situated to provide services in equitable and
14 cost-effective way. Thank you.

15 HEARING OFFICER CONSTANTINO: Dr. Gillian
16 Headley. Gillian Headley. And then Joy Norman.

17 MS. HEADLEY: My name is Dr. Gillian
18 Headley, and I am one of the six neonatologists who
19 care for newborns in the Rockford Memorial Neonatology
20 Unit and Intensive Care Unit. I am speaking in
21 support of the Mercy Rockford plans, particularly the
22 plans to create a modern, 46-bed NICU as part of the
23 womens' and children's hospital on the East Riverside
24 campus. It takes a large and experienced team of

1 caregivers to care for the babies that come to our
2 NICU. Our team is proud that we have some of the best
3 survival rates in the country. In addition to
4 neonatology, our team includes six neonatal nurse
5 practitioners and 120 nurses. Pediatric therapists
6 provide support for our babies to help them with
7 breathing, feeding, movement, and other developmental
8 needs. Our team includes pharmacists who are
9 specially trained in the management of medications
10 used for our tiny patients. We have registered
11 dietitians, nutrition techs, and other service
12 providers. A Registered Nurse case manager and a
13 licensed social worker provide support to families in
14 the NICU and also assists in preparations for the
15 families on discharge. When a newborn needs to be
16 transferred in to us, we send our NICU transport team
17 by ambulance or helicopter as needed to the regional
18 referring hospital to stabilize and transport the
19 babies to the NICU.

20 As the regional perinatal center for
21 northern Illinois, we serve an 11-county region,
22 receiving patients from nine receiving hospitals
23 within Illinois. In addition, we now receive patients
24 from Mercy hospitals in Janesville and Walworth County

1 in Wisconsin. The location of the women and
2 children's hospital on the East Riverside campus would
3 be ideal for serving that large geographic area.
4 Every member of our team is highly trained and
5 experienced. We love the work that we do. We care
6 very much about our babies and their families.

7 HEARING OFFICER CONSTANTINO: Can you
8 conclude your comments.

9 MS. HEADLEY: Yes. The facilities design of
10 our unit has not kept up with the needs of the large
11 team and the babies we serve. We do not have enough
12 space to provide service for the supportive needs of
13 the families needed at the bedside, including invasive
14 surgery. It cannot provide individualized, private
15 NICU babies and their families, some of whom are with
16 us for up to five or seven months or more. There is
17 no room to add other family members in the spaces. In
18 short, our current facilities do not match the quality
19 of care we provide. The Mercy Rockford plans for the
20 women's and children's hospital with a modern NICU
21 will make that possible.

22 UNIDENTIFIED SPEAKER: Could I ask a favor?
23 We have a woman outside with a baby who would like --
24 she is on our list, but the baby is getting a little

1 crabby. Is that okay?

2 HEARING OFFICER CONSTANTINO: Jodi Normer.

3 MS. NORMER: I already spoke.

4 HEARING OFFICER CONSTANTINO: Mark Goelzer.

5 UNIDENTIFIED SPEAKER: He might be.

6 UNIDENTIFIED FEMALE: My name is Carrie and
7 I am here in support of the Mercy Rockford Health
8 System's plan to build the new hospital want on
9 Riverside Boulevard. I know personally how important
10 it is to have reliable, accessible care close to home,
11 and I also believe that the partnership between Mercy
12 and Rockford is what saved my daughter's Lilly's life,
13 and I would like to see this partnership help other
14 patients just as it has helped my family.

15 Due to the mistreatment we received at
16 another local hospital, our first daughter McKenna was
17 born prematurely and passed away. I feel very
18 strongly that if we had had better, accessible
19 options, that she would still be us with us today, and
20 I feel that we knew this pregnancy with Lily that we
21 had to do things differently, and the amazing staff at
22 Mercy in Rockford made that possible. And our little
23 miracle is here today in this room. So I think Mercy
24 and Rockford's plan will make its highest level much

1 more accessible to patients in northern Illinois and
2 southern Wisconsin, which is where we are from. And I
3 hope that other people can benefit from the
4 partnership between Mercy and Rockford Memorial
5 hospitals, just as it has ours. Thank you for giving
6 me this opportunity.

7 HEARING OFFICER CONSTANTINO: Is there
8 anyone else that wants to provide opposition
9 testimony? Anyone else? No? You are after this
10 gentleman.

11 MR. GOELZNER: Thank you for letting me
12 speak. My name is Mark Goelzer, G-o-e-l-z-e-r. I'm a
13 pediatrician, and I am a medical director with members
14 of the Mercy side, Mercy Health System. I'm also a
15 practicing pediatrician, so I am going to kind of
16 mirror of some of the testimony of the last mother
17 gave as well as Dr. Headley.

18 I am one of those people that, just like in
19 the other 11 counties that this facility will service.
20 Southern Wisconsin is the same way. Our family
21 practitioners and we have a responsibility to take
22 care of critically-ill babies that are born in our
23 facilities. And it is very difficult at times to get
24 them transferred to appropriate facilities. The

1 location on the corner of Riverside and the interstate
2 is ideal for really all of southern Wisconsin as well
3 as the majority of northern Illinois in particular and
4 will facilitate the quality of care. It will also
5 allow -- the new building will allow for the state of
6 the art equipment that we can't retrofit into a
7 60-year old building. In addition, the health system
8 will provide pediatric specialty services there as
9 well as which we are also utilizing there, which will
10 make it much more convenient for all Rockford patients
11 and will improve the quality of care in this region.
12 I think we have many people that have difficulties, as
13 the last mother described, in getting transport to the
14 appropriate facility, but this will be perfect for all
15 of us. Thank you very much for letting me testify.
16 Thank you.

17 HEARING OFFICER CONSTANTINO: Thank you.

18 MR. STENERSON: Good afternoon. Thank you
19 for the opportunity to come before your group. My
20 name is David Stenerson, D-a-v-i-d, S-t-e-n-e-r-s-o-n.
21 I am the Chief Financial Officer at OSF St. Anthony
22 Medical Center, and I'm speaking in opposition to the
23 proposed project. As the Chief Financial Officer, I
24 have reviewed the application for the certificate of

1 need as prepared by Mercy Rockford Health System. The
2 applications do not provide any analysis of the impact
3 of other providers in the community. The proposed
4 location of the fourth hospital in Rockford is within
5 the primary service area of OSF St. Anthony. My
6 concern is that the financial impact on OSF St.
7 Anthony will be dramatic. Approximately 44 percent,
8 or about a \$143 million net revenue is derived from
9 the zip codes in the Janesville to Mercy for proposed
10 location. Nearly half of that revenue results from
11 emergency room visits.

12 While it is possible that St. Anthony will
13 be able to be paid some of this volume current patient
14 relationships that exist, over time St. Anthony will
15 most certainly be dramatically impacted by the
16 proposed new and unnecessary facility of a new
17 proposed location.

18 Additionally, the Health Facility and
19 Services Review Board be transferred the permit for
20 purposes of improving facility at its current
21 location. The financial ability to support the permit
22 is driven by the revenue associated with the people
23 served who live in the area surrounding Mercy's new
24 proposed site. St. Anthony has the ability and

1 capacity to serve the community surrounding the
2 location of the proposed new hospital and has been
3 successfully doing so for generations. The program
4 and services to address the needs of eastern and
5 northeastern section of Winnebago County and beyond.
6 Placement of the new hospital on the east side of
7 Rockford creates a tremendous maldistribution of
8 health care services in the Rockford region. I
9 respectfully and strongly oppose the new hospital at
10 the proposed location. The investment is better
11 placed where the health care needs are currently being
12 served by Mercy Rockford on the west side of Rockford.
13 Thank you for your time.

14 HEARING OFFICER CONSTANTINO: John J.
15 Morrissey. Then Anthoney Stipansky.

16 MR. MORRISSEY: Good afternoon. My name is
17 John J. Morrissey, M-o-r-r-i-s-s-e-y. I am a
18 principal owner of Morrissey Family Businesses, a four
19 business group that provides accounting, tax, human
20 resource/payroll services across the greater Rock
21 River Valley. We have served this community for over
22 40 years, and after my career took me to other
23 communities, I have returned to Rockford and am a
24 second-generation of family leaders here. I have

1 served and continue to serve on a number of community
2 boards, including the Rockford Health System community
3 board as well as the Rockford Memorial Development
4 foundation. I am here to lend my firm support to all
5 three of the Mercy Rockford Health System applications
6 that will create two hospitals -- excuse me. Two
7 campuses -- one hospital on two campuses.

8 I come with respect of a business owner, one
9 who works with businesses of all sizes in our
10 community. Also as an advocate for quality health
11 care that can be delivered in our community. I
12 believe that quality health care can be delivered from
13 a second campus should not be measured only in the
14 number of minutes from one campus to another, but in
15 the broader line of economic value that comes from the
16 care that is delivered and improved in this community.
17 Construction alone is a tremendous boon to the local
18 economy, and those well-paying jobs are a significant
19 boost to our region's economy. But the important
20 impact will continue to be felt long after the initial
21 construction is complete. This opportunity to create
22 a destination medical center in our community will, of
23 course, create job in the health care world, but also
24 spur development beyond the health care arena,

1 including restaurants, evenings in hotels, and other
2 economic development in the area. Families and
3 visitors to the people of this new campus will support
4 this the synergies such as Sportscore.

5 The Riverside/I-90 location of this
6 additional hospital campus simply makes sense from the
7 perspective of a region that seeks to reform itself
8 based on economic development. I am further excited
9 of the Mercy Rockford organization, both its
10 management and community support. It has committed to
11 a vibrant, continued, active medical campus on the
12 west side in its North Rockton Avenue location.

13 As a product of the Rockford west side, I was
14 born in and grew up in the shadows of that hospital,
15 and I look forward to its continued vibrant presence
16 in the neighborhood.

17 HEARING OFFICER CONSTANTINO: Can you
18 conclude your remarks.

19 MR. MORRISSEY: I therefore support the
20 Mercy Rockford plan to improve --

21 HEARING OFFICER CONSTANTINO: You are the
22 only one that listens. Anthony --

23 (Laughter.)

24 MR. SAMANSKY: Good afternoon. I'm Anthony

1 Samansky. I am the chief senior paramedic for the
2 Capron Rescue Squad. We are the EMS provider for
3 northern Boone County. We service approximately
4 24,000 residents in an area of 240 square miles. We
5 have no emergency room in northern Boone County, and
6 we have no hospital that can admit patients in Boone
7 County.

8 We have heard a lot today about time. We
9 have an ambulance rolling within 90 seconds of a call,
10 because there are areas in my district that it can
11 take me 15, 20 minutes to get to going down dirt
12 roads, back roads, and so on that are predominantly
13 rural. The new facility that Mercy is proposing to
14 build will cut significant time off our transport to
15 definitive care. You have heard about the golden
16 hour. The golden hour, in my opinion, is urban myth.
17 Some patients have an hour; others have 15 minutes.
18 Others have one. I am an very good paramedic, but I
19 can slow down -- I can keep an injury or illness from
20 progressing, but I can't fix it. I have to be able to
21 get into a facility quickly, where there are
22 physicians and skilled nurses who can fix the patient.
23 This facility will cut literally 10 to 15 minutes off
24 my transport times. And for the residents that I

1 serve, this is going to save lives. We stand in
2 support of Mercy Rockford building the facility.
3 Thank you for your time.

4 (Applause.)

5 HEARING OFFICER CONSTANTINO: Matt Morgan.

6 MS. ALLEN: Hello. My name is Pam Allen,
7 P-a-m, A-l-l-e-n. I am a certified neonatal intensive
8 care nurse and manager of Rockford Level III neonatal
9 intensive care unit, which is a the highest level
10 state designation. We are the only Level III NICU
11 west of Hoffman Estates. I have worked in that NICU
12 for more than 30 years and again as a staff nurse. I
13 strongly support Mercy Rockford Health's proposal to
14 build a women's and children's hospital with a NICU
15 designed to modernize our facility based on research.

16 One of the reasons why our NICU achieves
17 such great outcomes for our babies is that we actively
18 participate in national and international NICU
19 organizations like the Vermont Rockford network. We
20 have best practices and research to continually
21 improve the care that we provide. We currently have a
22 46-bed NICU with and 40 beds in our main NICU, and six
23 in an annex. They are located in what you might call
24 a ward concept, with many beds in a large room.

1 Make no mistake: We provide excellent care.
2 But that type of NICU concept is over 30 years old,
3 and is not what research and experience now show to be
4 best for fragile babies and their families. Our
5 entire NICU team is excited that we will be able to be
6 part of the design process and create a modern NICU
7 atmosphere to serve the babies and families that come
8 to us from 11 counties throughout northwest Illinois
9 and now Wisconsin.

10 There are a number of recommended standards
11 for NICU design that have been published. A few
12 recommendations provide single-family rooms that
13 provide private environments for each baby and that
14 baby's family. We cannot accomplish that design in
15 our current location, but we will be able to do so in
16 the new hospital.

17 Additionally, the new design will help us
18 address noise and temperature control and reduce
19 drafts in the air to meet the needs of the infants at
20 different stages of development and times of day as
21 well as their caregivers. We will provide family
22 support spaces, education areas, family kitchen, and
23 lactation support to further our commitment to
24 family-centered care. We take very seriously our

1 obligations to our babies, their families, our
2 communities, and referring physicians and hospitals.
3 The Mercy Rockford plans for a state-of-the-art
4 womens' hospital will greatly and increase Rockford as
5 destination facility.

6 HEARING OFFICER CONSTANTINO: Matt Morgan.

7 MR. MORGAN: Good afternoon. That's
8 M-o-r-g-a-n. On behalf of the March of Dimes'
9 Illinois Chapter, and acting President for the
10 Northern Illinois region, I would like to draw your
11 attention to the corporate leadership, support, and
12 community service that Mercy Rockford Health System
13 provides to improve the health of women, infants, and
14 children in the Rockford area.

15 For over 75 years, the March of Dimes has
16 been a leader in improving the health in pregnant
17 women and children. The mission is to improve the
18 health of all babies by preventing birth defects,
19 premature birth, and infant mortality. Mercy Rockford
20 Health Systems has been a March for Dimes partner for
21 many years, helping women have full-term healthy
22 pregnancies, safe deliveries, and healthy children.
23 Over the years, Mercy Rockford has been benefiting
24 mothers and babies in the Rockford area. Rockford

1 Health Systems has provided March of Dimes with key
2 leaders in several capacities, including the northern
3 division program service committee, the state program
4 service committee, as well as the prenatal nursing
5 advisory counsel, which plans the annual prenatal
6 nursing conference. Mercy Rockford Health System and
7 the March of Dimes service the same families and share
8 the same commitment to quality maternal outcomes.
9 Together, we help premature babies and their families
10 in what is often an emotionally challenging time.

11 I am one of those families. Four years ago,
12 my wife and I had premature children. They were one
13 pound, 10 ounces, born at 25-week development. And
14 this has help me establish a strong development with a
15 lot of people who work at Rockford Mercy. In fact, I
16 came here today to speak for them, because the passion
17 we have behind it. And I also say to people that,
18 going back four years ago, if you ever want to see
19 bravery, it's watching a baby fight for their life.
20 And if there is anything that I can do to help and
21 babies fight for their life, then I am fully in
22 support of that, and I hope that you all could be too.
23 Thanks.

24 HEARING OFFICER CONSTANTINO: Thank you.

1 Denny Rogers. Christine Thayer.

2 MR. ROGERS: Good afternoon. My name is
3 Dennie Rogers, D-e-n-n-i-e, R-o-g-e-r-s, and I am the
4 maternal fetal medicine specialist at Rockford Health
5 Systems. I am a head obstetrician who is geared with
6 special training and experience in high-risk
7 pregnancies. I provide prenatal care for women with
8 high-risk pregnancies, manage women with existing
9 health conditions, care for women who develop
10 complications during pregnancy, and diagnose and
11 manage birth defects in developing babies. I am
12 pleased to voice my full support today for the Mercy
13 Rockford Health plan to arrange a facility that will
14 be have to provide care to our local moms and help us
15 fulfill our obligations and responsibilities as a
16 State-designated perinatal center of an 11-county
17 region in the northwest Illinois region. We are one
18 of just such centers and provide oversight to
19 approximately 11 other hospitals. This means that
20 hundreds of women every year from all over the region
21 are referred to us for their perinatal care when it
22 has been determined that they have a high-risk
23 pregnancy or complication. Once referred to us,
24 pregnant women typically have multiple office visits.

1 They often require numerous assets in our facilities
2 in order to improve their overall outcomes. Some
3 high-risk patients are transported by flight and
4 driven to our hospital prior to delivery in order to
5 manage their conditions, such as preterm labor and
6 hypertension. Many of our patients deliver at Mercy
7 Hospital. We offer them the highest level of care in
8 terms of life-saving resources, such as specialized
9 surgeons, anesthesiologists, our neonatal specialists,
10 and we are the area's only Level III neonatal
11 intensive care unit, and we have so many other
12 supportive services. We are the largest deliverer of
13 [inaudible] now being in the Janesville, Wisconsin
14 area through our partnership. We already have begun
15 to obtain referrals. The plan for a new hospital will
16 provide a much needed improvement in our facilities,
17 which are outdated and do not provide a good work flow
18 for our patients and their families.

19 Our plan for a new women's and children's
20 hospital will allow us to create an outpatient and an
21 inpatient facility that actually reflects the level of
22 care that we provide in the region. You can imagine
23 how the mothers and families that are referred to us
24 for high-risk pregnancies than those with

1 complications are often worried and scared. They
2 deserve to be treated in a comfortable, modern
3 facility that offers the highest level of care,
4 efficiency, privacy and patient safety. Our new
5 facility will serve as a designation for women
6 throughout our region, and I am in support of this
7 project.

8 (Applause.)

9 DR. THAYER: Good afternoon. I am Dr.
10 Cristine Thayer, T-h-a-y-e-r, and I'm a
11 clinically-trained pediatric surgeon at Rockford
12 Memorial Hospital. I began practicing here three
13 years ago, and I have been a pediatric surgeon for 12
14 years. I perform surgeries on children of all ages,
15 from tiny, premature infants to teenagers, and I am
16 the only pediatric surgeon geographically located in
17 the Rockford area. I wholeheartedly support Mercy
18 Rockford's plans to create a women's and children's
19 hospital on the new campus at East Riverside so that
20 it will meet the unique needs of children when they
21 are sick or injured. The new location will provide
22 much more convenient access for the children and
23 families we refer from throughout the region.

24 Rockford Memorial Hospital is the only

1 hospital in our region with a pediatric intensive care
2 unit, a general pediatric hospital unit, and the Level
3 III NICU center. We care for children from our local
4 communities throughout all of northern Illinois, and
5 if we have already begun to receive referrals from
6 Wisconsin and our new partners at Mercy. Our new
7 hospital facility will be a destination center for
8 childrens' care, not only because of the regional
9 access, but because it provides a facility uniquely
10 dedicated to the needs of children. A hospital
11 designated to children, infants, and maternity care
12 looks and feels very different than a hospital for
13 adults. That is simply the right thing to do. It
14 will allow us to provide the best and most appropriate
15 care for children and their families. Children have
16 very different needs than adults. The highest level
17 of respect is required to take care of a child.
18 Children are vulnerable and cannot advocate for
19 themselves like an adult. Children have different
20 emotional, psychological, and physical needs, and they
21 don't process what's happening to them when they are
22 hospitalized. We need to provide an environment that
23 is highly attuned to them, that is child friendly,
24 where they feel safe and comfortable.

1 These plans will help Rockford Mercy to
2 continue to recruit and retain expert pediatric
3 specialty physicians, and provide programs that serve
4 families throughout our region. Let's keep and grow
5 excellent childrens' care right here close to home.
6 Thank you.

7 HEARING OFFICER CONSTANTINO: Is there
8 anyone else that wants to provide testimony in
9 opposition?

10 MR. LAWLER: Very briefly, my name is Dan
11 Lawler, and I represent OSF St. Anthony Medical
12 Center. We had as many witnesses prepared to address
13 the board and its staff today on this hearing, and on
14 the third hearing.

15 With respect for your time, we are
16 submitting written submissions for the same reason. I
17 have the same objection and would make the same
18 request that I made to the Board earlier in the
19 hearing, and I am submitting that today.

20 HEARING OFFICER CONSTANTINO: Sandra
21 Mascari-Devitt. Then Shaun Wallery.

22 MR. WALLERY: I'm really sorry.

23 MS. DEVITT: Good afternoon. My name is
24 Sandra Mascari-Devitt, M-a-s-c-a-r-i, hyphen

1 D-e-v-i-t-t, and I am here this afternoon in support
2 of the Mercy Rockford Health System plans, and I stand
3 here in front of you today because I know firsthand
4 how important it is to have high-quality care close to
5 home.

6 When you come face to face with a family
7 medical emergency or critical illness, it can be very
8 overwhelming and scary. I have had two such family
9 medical scares. Almost five years ago, I was
10 diagnosed with stage 3, grade 3 breast cancer. I was
11 scared, disorientated with the diagnosis and with all
12 the advice of where to have treatment. However, there
13 are two things that were really important to me:
14 Getting the highest quality of care, and staying close
15 to home, where I wanted to feel safe and I wanted to
16 feel most normal. This was my community, and this was
17 where my life was.

18 Mercy Health System gave me everything I
19 needed right in my own community, from diagnostic
20 investigation on to diagnosis, through treatment, and
21 now into aftercare. I received the highest quality of
22 technical care, but more than that, I received the
23 highest level of personal care. I never felt like a
24 number on a chart or a patient being shuttled through

1 the system. I felt like the patient. Like family.
2 Local community members truly reaching out with their
3 hearts and their minds to take care of other community
4 members.

5 So that's why, when my mom had a medical
6 emergency a week ago and had to be rushed to the
7 hospital, Mercy Health System was the choice. My mom
8 sent her resounding message from Mercy ICU this
9 morning as she recuperates from emergency brain
10 surgery, that this is what you want for the community
11 of Rockford. A high-quality facility with matching
12 high-quality care, so that when a medical emergency or
13 a critical illness strikes yourself or your loved one,
14 you will have the peace of mind that high quality care
15 is right here waiting for you in your own community at
16 Mercy Rockford Health Systems.

17 Thank you for giving me the opportunity to
18 share my excitement and my heartfelt support of this
19 project with all of you.

20 (Applause.)

21 MR. WALLERY: Good afternoon. My name is
22 Shaun Wallery. I am the medical director of the
23 neurology department at Rockford Memorial Hospital. I
24 am speaking in support of Mercy Rockford's three

1 applications, specifically as they relate to the
2 provision of neurological services in the region.
3 Rockford Memorial Hospital has become the largest
4 provider of neurology services in Rockford. In the
5 recent several years we have focused on improving
6 several service lines and will continue to do so.
7 Though they will they have an emergency pack.

8 The first service line I would like to talk
9 about is our stroke service line. We are a primary
10 stroke center. We are the only hospital in the region
11 that has no intensive care, neuro-interventional care,
12 a highly specialized advanced management to stroke.
13 We are also the only regional hospital that provides
14 24/7 in-person neurological services for acute stroke.
15 As such, we have become the stroke leader in the city
16 and are poised to be the designated center for acute
17 stroke management.

18 Every minute of a stroke, 1.9 million brain
19 cells die. By locating these services on the East
20 Riverside campus, with its interstate highway access,
21 we expand direct access to the highest level of stroke
22 care in the region. That level is imperative for
23 acute stroke management, saving lives, and preventing
24 long-term disability in the Rockford community.

1 Another neurology program that is very near
2 and dear to my heart is ALS, also known as Lou
3 Gehrig's Disease. As the ALS Association clinic
4 director, I can tell you that we have changed lives by
5 providing care for many patients and families since
6 its opening in April of this year. This is a clinic
7 that has expanded every month since its opening. One
8 aspect of our care and consideration is our facility.
9 Some of our patients require equipment that cannot fit
10 into the the ALS clinic now. We are in dire need of
11 an expanded space that is more amenable for our
12 current patients and meets their needs. I would
13 encourage the committee to consider a center that will
14 allow us to expand excellent care to all patients and
15 families in the Rockford and surrounding communities.
16 I appreciate your time and attention. Thank you.

17 HEARING OFFICER CONSTANTINO: And then Dr.
18 Dean.

19 MS. WIRTJES: Hi. Good afternoon. My name
20 is Penny Wirtjes, W-i-r-t-j-e-s. I am very happy to
21 be here this afternoon representing our family in
22 support of the new Mercy Rockford Health System
23 women's and children's hospital Level I trauma center
24 along with neonatal and pediatric intensive care

1 units, high risk maternity care, and so much more.
2 The reason I am here is because of the wonderful
3 professional and expert care our grandson Landon
4 received six years ago in the NICU. Our grandson was
5 born with Down syndrome. Landon needed a lot of
6 special care. I am so thankful every day that the
7 NICU was there for Landon. Landon was born with a
8 heart condition that was discover in the NICU, and I
9 am not so sure that he would be here today without the
10 expertise and exceptional care he received in the
11 Rockford Health System NICU. The NICU team took
12 exceptional care of our son and daughter in law as
13 well. Shortly after Landon was born, we were
14 introduced to a wonderful place in our community
15 Gigi's Playhouse. Gigi's Playhouse is a center for
16 individuals with Down syndrome. Gigi's has many
17 special, social, educational, and supportive programs
18 for the families.

19 Rockford Health Systems is a very big
20 support to Gigi's. There are very few programs or
21 events that we attend at Gigi's that do not have a
22 sponsorship or support from Rockford Health System.
23 All of these programs are free. We feel that the
24 women's and children's hospital here in Rockford,

1 future families will receive even more specialized
2 care than Landon received six years ago.

3 Please allow Rockford Mercy Health System to
4 continue to grow and take excellent care of our future
5 generations.

6 (Applause.)

7 DR. WOLAMYK: Good afternoon, and I thank
8 you very much for letting me talk. My name is Dean,
9 D-e-a-n, last name W-o-l-a-m-y-k, and no doubt that
10 was in my handwriting, which is why read it.

11 And I'm a physician, and I have a sort of
12 unique perspective. I worked in the emergency room at
13 Rockford Memorial Hospital for ten years, and then I
14 worked in the emergency department at Mercy Hospital
15 also. So I'm very familiar with it from those
16 experiences. I am a resident of Rockford. I moved
17 here in 1993. And the area I live in is the northeast
18 side of town, very close to the where the campus we
19 are talking about building.

20 The area has grown tremendously. I cannot
21 stress to you how the population growth has occurred,
22 particularly in that part of town, but also in the
23 outlying towns and communities there. I strongly --
24 and I can't express my enthusiasm for how much I

1 support the building of this hospital. It will allow
2 us to serve many in this population while maintaining
3 the west side and taking care of the west side of
4 Rockford and also the western community. But it also
5 allows us to take care of the growth that's occurred
6 on the northeast side communities also. Rockford
7 Health System has a long tradition of providing
8 excellent care. And on the adult side, very effective
9 adult medical programs in terms of surgical services,
10 medical services, etc. But their main focus has been
11 pediatrics. They have offered services very
12 [inaudible] to the area. They are -- the only NICU is
13 there in the intensive care unit, and they provide
14 maternal fetal medicine throughout the area.

15 The issue -- the whole hub that holds the
16 whole thing together is the emergency department at
17 Rockford Memorial Hospital. I'm not just saying that
18 because I work there, but because it's true. They
19 provide the communication center for the EMS, they
20 provide training, they provide medical control. They
21 also coordinate the reactive group, which actually
22 goes out and gets people. We actually go get them
23 from the community and also by the ground and also by
24 the helicopter program.

1 Mercy Health System, on the other hand, has
2 grown more in terms of the adult population. We do
3 have a pediatric unit in the hospital in Janesville,
4 but it's very small, without many services. The main
5 thrust of Mercy traditionally has been on the
6 ambulatory side, and we have clinics in 28 different
7 communities, both in Wisconsin and Illinois. Since
8 they have been with Mercy, they have been on a
9 relentless journey for both improvement as an
10 organization and also for growth.

11 HEARING OFFICER CONSTANTINO: Can you
12 conclude your comments.

13 DR. WOLAMYK: I look forward very much to
14 the melding of Mercy Health System with their
15 experience and vision with what they have done along
16 with the strength of the medical staff of Rockford
17 Health System and their tradition of care. I thank
18 you very much for hearing my comments.

19 HEARING OFFICER CONSTANTINO: Thank you.
20 And is there anyone else that wants to provide
21 opposition testimony for this project, 15-039? Anyone
22 else? Okay.

23 What I have in front of me are all support
24 testimony. Okay. I would like for you just to submit

1 your written comments. Come up, give your name to the
2 court reporter, and submit your written comments -- if
3 you don't have a problem with that.

4 Anyone have have a problem with that? Okay.
5 I'll call your name, you come up, and you can read
6 your name into the record, and just hand me your
7 testimony. Theresa Hollinger.

8 MS. HOLLINGER: Theresa Hollinger.
9 T-h-e-r-e-s-a, H-o-l-l-i-n-g-e-r, and I'm in support
10 of the project.

11 HEARING OFFICER CONSTANTINO: Tim Denke.
12 Tim Denke.

13 MR. DENKE: The real reason -- I want ten
14 seconds is, I bring a unique perspective to this
15 support. First of all, I was born on the west side of
16 Rockford and raised on west side of Rockford. Second
17 of all, my son, my wife, myself, and all my family
18 have been born in RMH and I have had a couple of
19 surgeries there. So that's the second part. So we
20 have very strong support for the community.

21 Thirdly, I represent the owner and operator
22 of a 179-acre sports complex immediate across the
23 street from the proposed Mercy Rockford expansion,
24 which has nearly two million visitors per year. And

1 the fourth, I'm also a neighbor. I will be able to
2 see the development out of my back deck.

3 So four unique perspectives, and in all four
4 of them, I am totally in support of the development.
5 Thank you for your time.

6 HEARING OFFICER CONSTANTINO: Thanks. Julie
7 -- Y-o-c-k.

8 MS. YOCK: Hello, my name is Julie Yock,
9 that's Y-o-c-k, and I have a letter to support on
10 behalf of Congressman Don Manzullo.

11 HEARING OFFICER CONSTANTINO: Brendan Camp,
12 Dr. Brendan Camp [sic].

13 MR. GREENKAMP: Hello, my name is Jason
14 Greencamp, G-r-e-e-n-k-a-m-p. I am the President of
15 the medical staff of Rockford Memorial Hospital, the
16 associate director in the emergency department, and
17 am a practicing emergency physician. I am speaking in
18 total and enthusiastic support of all of Mercy
19 Rockford Health system's plans. Thank you.

20 HEARING OFFICER CONSTANTINO: Thank you, Dr.
21 Daniel McQuillan.

22 DR. MCQUILLAN: I am Daniel McQuillan, I'm
23 the director of anesthesiology at Rockford Memorial
24 Hospital.

1 HEARING OFFICER CONSTANTINO: Can you spell
2 your name.

3 DR. MCQUILLAN: M-c-q-u-i-l-l-a-n. Just let
4 me say one thing. We are out of space at our
5 hospital. We have lots of equipment we need for the
6 monitoring that is being at our facility. We don't
7 have anywhere to go. We need something new. Thank
8 you.

9 HEARING OFFICER CONSTANTINO: Finley.
10 Gretchen Finley. Then Glen Milos.

11 MR. MILOS: I already presented at the first
12 session.

13 MS. FINLEY: Gretchen, G-r-e-t-c-h-e-n,
14 Finley, F-i-n-l-e-y. I can come up to you.

15 (Written statement handed to Hearing
16 Officer.)

17 HEARING OFFICER CONSTANTINO: Now you are
18 feeling sorry for me? Mr. M-i-l-n-e. Ms.? Oh, I'm
19 sorry. Go ahead.

20 MS. MILNE: Good afternoon. X-a-n, X, as
21 in X-ray, a-n, M-i-l-n-e and I'm in support of the
22 project.

23 HEARING OFFICER CONSTANTINO: Mary Ilene
24 Blondell. Miss Blondell. And then James spears.

1 MS. BLONDELL: Mary Ilene Blondell, M-a-r-y,
2 I-l-e-n-e, B-l-o-n-d-e-l-l, and I think I'm the only
3 person here today from the City of Chicago advocating
4 in support of the expansion based on Mr. Wallery's
5 comments. There is a greater need for ALS patients
6 and an expanded clinic that patients [inaudible] not
7 only if they come from northern Wisconsin, but up from
8 central and the City of Chicago to receive the highest
9 quality of the care for their needs. Thank you.

10 (Applause.)

11 MR. SPEARS: Good afternoon. My name is
12 James Speers, S-p-e-e-r-s. I'm really not associated
13 with the hospital at all. I work and live in
14 Winnebago County, work in Rockford at Fifth Third
15 Bank. I am fully in support of the hospital being
16 built on the east side, and the whole project in all.

17 HEARING OFFICER CONSTANTINO: Thank you.
18 Benjamin Slack.

19 MR. SLACK: Good afternoon. My name is Ben
20 Slack. I'm executive director of the Epilepsy
21 Foundation, surveying 45 counties in northern
22 Illinois. I just want to say that I am fully in
23 support of this medical center being built on
24 Riverside. Specialized care for individuals with

1 epilepsy in this territory is virtually nonexistent.
2 In the 25 counties we serve, we have one epilepsy
3 specialist out of Peoria, and we need this specialized
4 care here in Rockford so people have access to it. So
5 that is all I have to say. Thank you.

6 HEARING OFFICER CONSTANTINO: Linda
7 Thresher.

8 MS. THRESHER: I'm Linda Thresher,
9 T-h-r-e-s-h-e-r, and I am in support of the
10 proposition.

11 HEARING OFFICER CONSTANTINO: Mary Pohl?
12 Mary Pohl? P-o-h-l.

13 UNIDENTIFIED SPEAKER: She had to leave.

14 HEARING OFFICER CONSTANTINO: Katie Gill.
15 G-e-l [sic].

16 MS. GEE: Is it G-e-e?

17 HEARING OFFICER CONSTANTINO: Oh, excuse me.

18 MS. GEE: K-a-t-i-e and G-e-e and I am in
19 support of the project.

20 HEARING OFFICER CONSTANTINO: Julie Snyder.

21 MS. SNYDER: J-u-l-i-e, S-n-y-d-e-r.

22 HEARING OFFICER CONSTANTINO: Peter J.
23 D-a-l-b-r-a, Winnebago County Sheriff's police
24 officer.

1 UNIDENTIFIED SPEAKER: I think he was put in
2 the wrong stack. I mean, he was in support, but he
3 just signed support, not to speak.

4 HEARING OFFICER CONSTANTINO: He is what?

5 UNIDENTIFIED MALE: He signed for his
6 support, but not to speak.

7 HEARING OFFICER CONSTANTINO: Oh, okay.
8 Rachel M-i-c-i-r-k-i. Is there a Rachel?

9 MS. MICIRKI: Yeah, I'm just here to
10 support, not to speak, as well.

11 HEARING OFFICER CONSTANTINO: Okay. Jerry
12 Johnson -- Jansen.

13 MR. JOHNSON: You got it right. Thank you,
14 sir. My name is J-e-r-e Johnson, and I am here in
15 support of the project. I am a current director for
16 the radiology services for Mercy Health, and the plan
17 does include professional, timely, and cost-effective
18 imaging services to support.

19 HEARING OFFICER CONSTANTINO: Carrie Knott.

20 UNIDENTIFIED SPEAKER: She went home
21 already.

22 HEARING OFFICER CONSTANTINO: Jessica Koltz,
23 K-o-l-t-z. Jessica?

24 MS. KOLTZ: J-e-s-s-i-c-a, K-o-l-t-z, and I

1 came prepared with a handy-dandy device that has my
2 notes. I just want to highlight that I fully support
3 the \$400 million Mercy Rockford proposal. As a
4 life-long west side Rockford native, through the
5 creation of countless employment opportunities, as
6 well as the fact that it will benefit and provide for
7 the neonatal of the 15 counties and countless
8 communities of the region of which Mercy Rockford
9 Health Systems supports. Thank you.

10 HEARING OFFICER CONSTANTINO: Sherry
11 G-a-u-m-o-n-d.

12 MS. GAUMOND: That's pretty good. Sherry
13 G-a-u-m-o-n-d, and I'm here in support of all three
14 projects. Thank you.

15 HEARING OFFICER CONSTANTINO: Timothy --
16 that's you.

17 MR. GAUMOND: Can you guess how to say that?
18 Tim, T-i-m-o-t-h-y, G-a-u-m-o-n-d, and I'm in support
19 of the project. Thanks.

20 HEARING OFFICER CONSTANTINO: Anybody else?
21 Mr. Bea? Or is -- I'm sorry. This -- the lady before
22 --

23 MS. GARMAN: My name is Georgia G-a-r-m-a-n,
24 and I would like to offer my support for the

1 proposition as well.

2 HEARING OFFICER CONSTANTINO: Mr. Bea.

3 MR. BEA: These are my notes from the
4 proposal. My -- again, I just want to thank everybody
5 that turned out to testify for our hearing too. Thank
6 you for all your support. I think, if I had to read
7 one statement into the the record that summarizes a
8 lot of the testimony we have received, is that the
9 Riverside facility will enhance Mercy Rockford's
10 ability to provide us with state-of-the-art technology
11 and facilities that can accommodate high-level
12 innovation, not only for the people of Rockford, but
13 also for the entire region that the State is holding
14 Mercy Rockford accountable for. Thank you

15 HEARING OFFICER CONSTANTINO: Okay. That
16 concludes project number 15-039, the Riverside campus
17 project. We are going to go right into the medical
18 clinics building project 15-040.

19 (Hearing concluded at 3:00 p.m.)
20
21
22
23
24

1 ILLINOIS DEPARTMENT OF PUBLIC HEALTH
2 HEALTH FACILITIES AND SERVICES REVIEW BOARD
3 BEFORE HEARING OFFICER MICHAEL CONSTANTINO
4 IN RE: :
5 Public Comments Regarding :
6 Application to Establish a : Project No. 15-040
7 Medical Office Building on :
8 Riverside Boulevard. :
9 :
10
11 HEARING in accordance with requirements of the
12 Illinois Health Facilities Planning Act
13
14 E. J. "Zeke" Giorgi Center
15 200 South Wyman Street
16 Rockford, Illinois 61101
17 Thursday, September 17, 2015
18 3:00 p.m.
19
20
21 Job No. 91696A
22 Pages: 158 - 171 for 15-040
23 Reported by: Camille Suzanne Connell,
24 CSR, RPR

1 HEARING OFFICER CONSTANTINO: Mr. Bea, do
2 you want to begin.

3 MR. BEA: Sure. I'll make this very quick.
4 This is simply -- this piece of the project is for a
5 medical office building on Riverside is to be able to
6 house the specialists that will be taking care of the
7 pediatric hospital and intensive care/tertiary care
8 services, which is the primary care neurosurgery,
9 neonatal --

10 But at some point, I do want to show that we
11 are crammed. We don't have the room to have the
12 subspecialties. People have to out-migrate and the
13 massive court. Right now, things like pedestrian
14 gastroenterology, pediatric cardiothoracic surgery,
15 endocrinology, etc., and other pediatric
16 subspecialties that should be present in Rockford and
17 will keep people from having to travel to Madison and
18 Rockford -- excuse me. Madison and Chicago. So
19 simply -- this simply is a medical office building to
20 house the specialists at Riverside.

21 HEARING OFFICER CONSTANTINO: Alderman
22 Hervey.

23 MS. HERVEY: No, thank you.

24 HEARING OFFICER CONSTANTINO: Anybody else

1 want to provide testimony on the medical office
2 specialty clinic? Okay. We will take -- we will take
3 a ten-minute break.

4 HEARING OFFICER CONSTANTINO: We are going
5 to get started in a couple minutes. On the record at
6 3:12. Okay. We are going to start. The public
7 hearing for project number 15-0040. This is the
8 medical clinics building on Riverside campus. Mr.
9 Bea, do you want to begin.

10 MR. BEA: I'll be very brief. I just want
11 to emphasize that the majority of all our physicians
12 are going to remain on Rockton Avenue what is going to
13 be housed in this building are those subspecialists
14 that are taking care of the pediatric, neonatal
15 care/intensive care, high-risk mothers and some of the
16 cardiothoracic surgeons. But the extra space will
17 allow us to bring in new subspecialists that don't
18 exist in Rockford that people now have to travel out
19 for. Alderman --

20 MS. HERVEY: Thank you. Just very briefly,
21 the major concern with the medical center is, if you
22 denied first two certificate of need, you don't need
23 the third. I don't think we need a health care
24 provider facility that far east. My other concern is

1 that when you start to move pediatric, obstetric,
2 those types of services, cardiac -- all of cardiac
3 services, it's not a bus line, and Mr. Bea may have
4 talked with the mayor. The mayor -- I served three
5 years on the mass transit district board. We are a
6 separate board; we are a separate entity. You don't
7 just extend bus service. There is a cost. And right
8 now, given this precarious financial state of the
9 State of Illinois, the federal government is not in
10 that great of shape, and the City of Rockford is
11 facing a 2.3 million dollar budget deficit just for
12 this year. There is no money to extend services. I
13 don't care if it's going to take three years, five
14 years to build it. Those things come at a cost. So,
15 for women who need those services to be able to get to
16 Riverside, they are going to have to get to Rockford
17 Memorial and transfer to their shuttle system and then
18 ride, even with a sick child, for another 25 minutes
19 or more. I object to that. Again, I think it places
20 undue burden on some of the people who are most
21 vulnerable and need these services the most.

22 And I go back to my original premise, which
23 is that there are -- there is no need for it. There
24 are architects, design people, topography specialists,

1 and urban designers who can help Rockford Memorial
2 expand. Bring new physicians into Rockford. I'm all
3 for it. Put up a women's and children's center on
4 Riverside and make the specialty come to the region
5 for these services, but don't cut life-saving services
6 go at the expense of building a new facility. Thank
7 you.

8 HEARING OFFICER CONSTANTINO: Michelle
9 Lippert.

10 MS. LIPPERT: Good afternoon. My name is
11 Michelle Lippert. I'm a Vice President of operations
12 for the Rockford Health Physician Group, which
13 represents about 185 physicians providing primary
14 care, specialty care, and hospital care. We have
15 physicians' offices in more than ten locations
16 throughout the community. I have been a part of
17 Rockford's health system for more than 24 years, and
18 began my career in cardiac and critical care nursing.
19 I am speaking in support of Mercy Health System plans,
20 and I am speaking particularly about the plans for the
21 medical office building that will be located near the
22 hospital on the East Riverside Boulevard campus. We
23 will continue to offer a wide range of primary care
24 and specialist physician services at the current North

1 Rockton Avenue campus. That will include ob/gyn,
2 internal medicine, family practice, pediatricians'
3 offices, as well as specialist physicians like
4 cardiology, neurology, oncology rheumatology, and
5 others will also continue to see patients on this
6 campus out of North Rockton Avenue.

7 The new office medical building on the East
8 Riverside Boulevard will house the key physician
9 groups that will support our new campus on that --
10 will support the new hospital on that campus. They
11 will provide care to patients from throughout the
12 region as well as from the surrounding communities.
13 Those specialties will include internal fetal
14 medicine, ob/gyn, and a wide variety of pediatric
15 subspecialties, including pediatric cardiology,
16 pediatric gastroenterology to name few.

17 Additionally, adult specialty physicians will see
18 patients in a new office building as well. These
19 include pulmonology, cardiology, electrophysiology,
20 and neurosurgery. The new office facility will be
21 designed to allow us gain efficiencies in operational
22 flow. It will also allow us to be child friendly in
23 that we will have specific pediatric outpatient tests
24 -- radiology labs, those sorts of things -- and then,

1 of course, the adult areas. Thank you for allowing me
2 to speak in support of these plans to expand access to
3 physician services through the addition of this
4 medical office building.

5 HEARING OFFICER CONSTANTINO: Susan
6 Milford.

7 MS. MILFORD: Good afternoon this time. My
8 name is Susan M-i-l-f-o-r-d. I am the Vice President
9 for OSF Health Care Systems, and I am speaking in
10 opposition to this proposed project.

11 The applicants have identified this project
12 as nonsubstantive, and yet clearly by the CON rules it
13 is a substantive project. Medical Clinics Building
14 for the RMH Riverside campus in purpose misinterprets
15 several CON review board criteria, including: The
16 proposed MCB as a health care facility. By its own
17 definition, the applicants propose to establish the
18 new MCB as a an integral, connected facility as
19 opposed to a new hospital.

20 Assuming the proposed MCB is an
21 establishment of a health care facility, the project
22 is substantive and not non-substantive, thereby
23 requiring the need to be in full compliance with
24 applicable review board criteria. The permit

1 application as submitted is incomplete in that it
2 lacks clinical service areas.

3 Also, outpatient services are a integral
4 component of a hospital, and as such fall under review
5 board criterion 1110.3030, clinical service areas
6 other than category of service. There is no
7 substantiated methodology to support the proposed
8 CSAs.

9 In reviewing the MCB equipment, it appears
10 certain clinical services areas will be developed
11 beyond those stated, criterion 1110.3030, in the
12 permit application, thereby requiring a permit
13 application respond to all the criteria. CSA appears
14 to include extensive procedural capabilities,
15 neurological services, pulmonary services,
16 capabilities of the "ASTC-like" procedures, urology,
17 gynecology, dermatology, thereby begging both the CSA
18 question and the services noted in attachment 34.
19 Consistent with each of the three respective permit
20 applications 15-038, 15-039, and 15-0040, the
21 applicants have not submitted full information on all
22 their current health care facilities as required by
23 criteria number 110.230(1), attachment 211.

24 Because the permit application is woefully

1 deficient based on review board criteria, we
2 respectfully suggest it be declared incomplete and be
3 withdrawn from further consideration. Thank you.

4 HEARING OFFICER CONSTANTINO: Elizabeth
5 Simms.

6 MS. SIMMS: Hello. I'm Elizabeth Simms.
7 I'm with Lutheran Social Services of Illinois. I
8 represent senior services. Over 80 percent of our
9 seniors right now do not -- are not able to attain
10 services in the Rockford area for specialties, which
11 can be expanded by having the new clinic. Right now,
12 we are trying to move these lower-income seniors to
13 Chicago, Madison, Mayo for diagnostic and services,
14 and having these located in this area would allow us
15 as providers the ability to see that our seniors are
16 taken care of in the Rockford area. Also, as a
17 patient of Rockford Health System, I think this would
18 expand things so that I myself would not have to go to
19 Chicago or Madison.

20 HEARING OFFICER CONSTANTINO: Dan Lawler.

21 MR. LAWLER: Again, going to be clear. My
22 name is Dan Lawler. I represent OSF St. Anthony
23 Medical Center. We had additional witnesses who were
24 prepared to give original testimony, but in response

1 to the hearing officer and in deference to your time,
2 we will submit written statements. Similarly, I am
3 raising the same objection and making the same request
4 upon the board of this project that I have made, as
5 more fully set forth in my written statement. Thank
6 you.

7 HEARING OFFICER CONSTANTINO: Dan Parod.
8 Good afternoon. Dan Parod, D-a-n, P-a-r-o-d, Senior
9 Vice President with Rockford Mercy Health System, and
10 I really just want to enter into the record seven
11 letters. I noticed today that we found a lot of
12 community support. There were a number of individuals
13 who provided letters that couldn't be here to speak
14 today. We have letters from physicians, from
15 patients, from community members, and business owners,
16 all who support the development of our second campus.
17 So, I would like to enter in these letters of support.
18 Thank you.

19 HEARING OFFICER CONSTANTINO: John Groh.

20 MR. GROH: Good afternoon and thank you. My
21 name is John Groh, and I am, in addition to being a
22 lifelong Rockford resident, I am president and CEO of
23 the Rockford area Convention and Visitors Bureau. It
24 is a non-profit organization that promotes and works

1 towards growing our regional economy, principally by
2 increasing all forms of travel into the the region.
3 We drive quality of life and economic growth for our
4 citizens through tourism, marketing, and destination
5 development efforts, and to that, we work closely with
6 area hotels, restaurants, sports facilities, tourism
7 venues, and other civic organizations. And as such, I
8 am here today to speak in support of Mercy Health
9 System's three applications.

10 Along with others in the greater Rockford
11 community, we recognize and value the ideals of
12 serving our local residents as well as creating
13 reasons for others to come into our region to work, to
14 play, to shop, and of course to seek superior quality
15 health care. Therefore, I am supportive of Mercy
16 Rockford's proposal and improvement in its North
17 Rockton Avenue campus, where my three children were
18 born, and to in the proposed campus on East Riverside
19 Boulevard. These investments will trigger economic
20 growth and create additional investment in the
21 community. As you know or as you may know, medically-
22 based tourism is one of the fastest growing economic
23 drivers and leading communities across the nation.
24 Mercy Rockford's proposed plans will result in

1 increase economic activity for our region, I believe,
2 and which will further result in job growth in our
3 community and significant other ancillary benefits
4 economically.

5 Moreover, I anticipate that these projects
6 will help stop out-migration of patients for other
7 services, and that those services when provide in
8 Illinois will help strengthen our economics or our
9 entire region and our entire state.

10 And so, as you review the applications, as
11 before you, I would encourage you to pay favorable
12 consideration and ultimately approval. Thank you very
13 much.

14 HEARING OFFICER CONSTANTINO: Is there
15 anyone else that wants to provide testimony? Anyone
16 else?

17 MR. BEA: I have about 20 minutes of
18 concluding remarks --

19 (Laughter.)

20 But thank you for everyone for turning out
21 and to help our health facilities staff for driving
22 all this way. But most of all, I want to say thanks
23 Senator Burzynski. I presume he is the only volunteer
24 up on the stage.

1 (Laughter.)

2 Let's give him a round applause.

3 (Applause.)

4 Again, thank you very much, and I appreciate
5 everyone and everyone that has brought forth all of
6 the wonderful, I think, justifications for why this
7 project is so badly needed in the Rockford area.

8 Senator, would you like to say a few words?

9 SENATOR BURZYNSKI: It's been a long day,
10 and if you all didn't know it, my role here is to
11 listen and to lend credibility to the hearing. And as
12 a member of the board, I am not allowed to speak or
13 voice my opinion or ask questions. So that is what
14 made it a long day. And as these guys know, you don't
15 want to give recovering politician a microphone to
16 speak.

17 (Laughter.)

18 So thank you all for being here today, and
19 thank you to the staff.

20 (Hearing concluded at 3:28 p.m.)

21

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CERTIFICATE OF COURT REPORTER - NOTARY PUBLIC

I, Camille S. Connell, Certified Shorthand
Reporter No. 084-004299, CSR, RPR, in and for the
State of Illinois, the officer before whom the
foregoing deposition was taken, do hereby certify that
the foregoing transcript is a true and correct record
of the testimony given; that said testimony was taken
by me stenographically and thereafter reduced to
typewriting under my direction; that reading and
signing was not requested; and that I am neither
counsel for, related to, nor employed by any of the
parties to this case and have no interest, financial
or otherwise, in its outcome.

IN WITNESS WHEREOF I have hereunto set my
hand and affixed my notarial seal this 1st day of
October 2015.

My commission expires: May 31, 2017



Camille S. Connell, CSR, RPR

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