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June 13, 2016

### VIA HAND DELIVERY

RECEIVED

JUN 1 3 2016

Courtney R. Avery Administrator Illinois Health Facilities and Services Review Board 25 West Jefferson Street 2nd Floor Springfield, IL 62761

**HEALTH FACILITIES &** SERVICES REVIEW BOARD

Project No. 15-044 Transformative Health of McHenry Re: Applicants' Response to Staff Report

Dear Ms. Avery:

This response is submitted on behalf of the applicants on the above Project No. 15-044, pursuant to Section 6(c-5) of the Illinois Health Facilities Planning Act (20 ILCS 3960/6(c-5) which grants applicants the right to submit a response to the facts and findings of the Staff Report.

The Staff has found that the applicants have successfully addressed 18 of 20 criteria, making it one of the most favorably reviewed long-term care projects before the Review Board in recent years. Moreover, the project should have received positive findings on the other two criteria as addressed below.

### The Applicants Documented Compliance with the Service Accessibility Criterion

- The Board's Rule, Application Form and Staff Report all confirm that documentation of at least one of five accessibility factors is required by this Criterion. (See Attachment 1.)
- The Staff Report finds that the applicants documented two of the factors: (1) Medically Underserved Populations in the Planning Area, and (2) Restrictive Admission policies at area facilities. (Report at 16.)
- Because the applicants documented at least one of the factors, a positive finding should have been made for this Criterion.

### The Applicants Documented Compliance with the Unnecessary Duplication Criterion

- The Criterion requires documentation that the project will not be an unnecessary duplication and will not reduce utilization of existing facilities within two years of project completion. (See Attachment 2.)
- The Staff found there is a need for 127 beds in McHenry County
- The Staff found there is <u>no surplus of beds</u> in McHenry County based on bed to population ratio.
- McHenry County's <u>bed to population ratio is second lowest</u> among all 95 statewide Planning Areas, and would remain second lowest even with the additional beds proposed by this Project. (See Attachment 3.)
- The Board's Inventory and Bed Need Projections show that Planning Area bed occupancy will be above the target rate by 2018 even with the additional beds proposed by this Project. (See Attachment 4.)
- Because the Review Board's data and projections show: (1) A need for 127 additional beds; (2) No surplus beds based on bed/population ratios, and; (3) Planning Area beds will be above target occupancy by 2018, a positive finding should have been made for this Criterion.

### Opposition Complaints of Adverse Impact are Contradicted by their own Cost Reports

- The Staff Report includes opposition statements that the proposed project will adversely impact their facilities. (Report at 3.)
- The opposing facilities state that this impact will be based on the <u>alleged loss of patient referrals</u> from Centegra Health System.
- In fact, CMS Cost Reports show that opposing facilities <u>admit only about half</u> of the Centegra patients that are referred to their facilities. (See, Attachment 5.)
- Because opposing facilities receive almost twice as many referrals of Centegra
  patients than they actually admit, these facilities will not be adversely impacted
  by the proposed project.

Courtney R. Avery June 13, 2016 Page 3

Please provide this Applicants' Response to Staff Report to the Members of the Review Board as it is timely submitted and is proper written comment under Section 6(c-5) of the Planning Act which grants applicants the right to submit a response to the facts and findings of the Staff Report.

Very truly yours,

**BARNES & THORNBURG LLP** 

Daniel J. Lawler

DJL:dp Enclosures

### Joint Committee on Administrative Rules

# ADMINISTRATIVE CODE

# TITLE 77: PUBLIC HEALTH CHAPTER II: HEALTH FACILITIES AND SERVICES REVIEW BOARD SUBCHAPTER b: OTHER BOARD RULES PART 1125 LONG-TERM CARE SECTION 1125.570 SERVICE ACCESSIBILITY

### Section 1125.570 Service Accessibility

The number of beds being established or added for each category of service is necessary to improve access for planning area residents.

- a) Service Restrictions

  The applicant shall document that at least one of the following factors exists in the planning area, as applicable:
  - 1) The absence of the proposed service within the planning area;
  - Access limitations due to payor status of patients/residents, including, but not limited to, individuals with LTC coverage through Medicare, Medicaid, managed care or charity care;
  - 3) Restrictive admission policies of existing providers;
  - The area population and existing care system exhibit indicators of medical care problems, such as an average family income level below the State average poverty level, or designation by the Secretary of Health and Human Services as a Health Professional Shortage Area, a Medically Underserved Area, or a Medically Underserved Population;
  - 5) For purposes of this Section 1125.570 only, all services within the 45-minute normal travel time meet or exceed the occupancy standard specified in Section 1125.210(c).
- b) Supporting Documentation
  The applicant shall provide the following documentation, as applicable, concerning existing restrictions to service access:
  - 1) The location and utilization of other planning area service providers;
  - 2) Patient/resident location information by zip code;
  - 3) Independent time-travel studies;

- 4) Certification of a waiting list;
- 5) Admission restrictions that exist in area providers;
- An assessment of area population characteristics that document that access problems exist;
- 7) Most recently published IDPH Long Term Care Facilities Inventory and Data (see www.hfsrb.illinois.gov).

### Criterion 1125.570 - Service Accessibility

### 1. Service Restrictions

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

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

### Additional documentation required:

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

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

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

TABLE SEVEN Referral Sources to Transformative Health of McHenry					
Referring Facility/Physician	Number of Referrals	% of Patients from McHenry County HPA			
Centegra Hospital-McHenry	1,107	87%			
Centegra Hospital-Woodstock	500				
Dr. Joseph Emmons, M.D.*	59	92%			
Dr. Karen Judy, M.D.*	167	86%			
Dr Marcel Hoffman, M.D.*	368	90%			
Dr. Thomas Thandupurakal, M.D.^	16	69%			
Dr. Ifzal Bangash, M.D.>	124	90%			
Dr. Daniel Huerta-de Hathaway>	8	88%			
Dr. John Anderson, M.D.>	55	96%			
Dr. Corey Black, M.D. CPC Specialist	2	100%			
Dr. Prashant Sura, M.D. CPC Specialist	23	52%			
Total/Average	2,429	85%			
*Centegra Hospital-Woodstock  ^CPC Fox Lake Internal Medicine  >CPC McHenry Internal Medicine					

c. To determine if there is sufficient demand for the proposed long term care facility the State Board staff relies upon the referral letters provided by the applicants and the calculated bed need in the planning area.

To demonstrate compliance with 77 IAC 1125.540-Service Demand the applicants' provided referral letters with a total of 2,429 referrals. The applicants "believe with the growth rate of the 65+ age cohort in McHenry County of 9.5%; and the belief that the number of referrals will remain constant over the next few years there will be sufficient demand for the proposed number of beds." [See Application for Permit pages 119-132 and Supplemental Information provided by the Applicants on December 23, 2015]

Based upon the information provided by the applicants in the application for permit and the supplemental information it appears that the proposed project will serve the residents of McHenry County and that there is sufficient demand for the project based upon the calculated bed need and the referral letters provided by the applicants. These two findings remain unchanged from the Original State Board Staff Report.

THE STATE BOARD STAFF FINDS THE PROPOSED PROJECT IS IN COMFORMANCE WITH THE REQUIREMENTS OF CRITERION PLANNING AREA NEED AND SERVICE DEMAND (77 IAC 1125.530 AND 77 IAC 1125.540)

### B. Criterion 1125.570 - Service Accessibility

To determine if the number of beds being establish is necessary to <u>improve</u> <u>service access for planning area residents</u> the applicants must document that at least one of the following factors exists in the planning area.

1) The absence of the proposed service within the planning area;

 Access limitations due to payor status of patients/residents, including, but not limited to, individuals with LTC coverage through Medicare, Medicaid, managed care or charity care;

### Joint Committee on Administrative Rules

# ADMINISTRATIVE CODE

# TITLE 77: PUBLIC HEALTH CHAPTER II: HEALTH FACILITIES AND SERVICES REVIEW BOARD SUBCHAPTER b: OTHER BOARD RULES PART 1125 LONG-TERM CARE SECTION 1125.580 UNNECESSARY DUPLICATION/MALDISTRIBUTION

### Section 1125.580 Unnecessary Duplication/Maldistribution

- a) The applicant shall document that the project will not result in an unnecessary duplication. The applicant shall provide the following information:
  - 1) A list of all zip code areas that are located, in total or in part, within 30 minutes normal travel time of the project's site;
  - 2) The total population of the identified zip code areas (based upon the most recent population numbers available for the State of Illinois); and
  - 3) The names and locations of all existing or approved LTC facilities located within 30 minutes normal travel time from the project site that provide the categories of bed service that are proposed by the project.
- b) The applicant shall document that the project will not result in maldistribution of services. Maldistribution exists when the identified area (within the planning area) has an excess supply of facilities, beds and services characterized by such factors as, but not limited to:
  - 1) A ratio of beds to population that exceeds one and one-half times the State average;
  - 2) Historical utilization (for the latest 12-month period prior to submission of the application) for existing facilities and services that is below the occupancy standard established pursuant to Section 1125.210(c); or
  - 3) Insufficient population to provide the volume or caseload necessary to utilize the services proposed by the project at or above occupancy standards.
- c) The applicant shall document that, within 24 months after project completion, the proposed project:
  - 1) Will not lower the utilization of other area providers below the occupancy standards specified in Section 1125.210(c); and



# BED/POPULATION RATIOS DEMONSTRATE THERE IS NO SURPLUS OF BEDS IN MCHENRY COUNTY

PLANNING AREA	HSA	BEDS	POPULATION	BEDS PER 1000 PERSONS	
Kendali	9	185	118,100	1.6	
McHenry	8	997	308,500	3.2	
6-B	6	4,194	1,042,000	4.0	
Jackson	5	251	59,500	4.2	
Will	9	2,905	683,300	4.3	
6-C	6	4,784	1,070,600	4.5	
Champaign	4	908	202,600	4.5	
Boone	1	279	53,800	5.2	
Bond	5	90	17,200	5.2	
Grundy	9	265	50,400	5.3	
7-A	7	3,441	617,700	5.6	
7-D	7	2,880	493,100	5.8	
Kane	8	3,084	522,900	5.9	
Jasper	5	57	9,500	6.0	
Alexander/Pulaski	5	83	13,300	6.2	
McLean	4	1,090	172,000	6.3	
Sangamon	3	1,271	199,400	6.4	
Lake	8	4,502	705,900	6.4	
7-C	7	6,002	930,400	6.5	
DeKalb	1	742	104,100	7.1	
Edwards/Wabash	5	129	18,100	7.1	
Jo Daviess	1	163	22,300	7.3	
Hardin/Pope	_5	62	8,500	7.3	
Monroe	11	250	33,300	7.5	
Winnebago	1	2,220	293,200	7.6	
STATE AVERAGE		100,792	12,880,900	7.8	
Crawford	5	160	19,700	8.1	
Madison	11	2,212	266,900	8.3	
Rock Island	10	1,219	146,400	8.3	
Williamson	5	555	66,600	8.3	
Vienard	3	106	12,600	8.4	
St. Clair	11	2,251	267,900	8.4	
efferson	5	336	38,500	8.7	
Greene	3	119	13,500	8.8	
lenderson/Warren	2	218	24,500	8.9	
[azewell	2	1,256	135,500	9.3	
/ermilion	4	759	80,900	9.4	
Bureau/Putnam	_2	377	39,800	9.5	
Peoria	2	1,765	186,300	9.5	

Perry	5	210	22,200	9.5
7-E	7	9,162	960,800	9.5
Clinton	11	357	37,400	9.5
Lee	1	342	35,400	9.7
Piatt	4	160	16,400	9.8
Franklin	5	383	39,100	9.8
Hancock	3	184	18,600	9.9
Henry	10	500	49,600	10.1
Wayne	5	169	16,400	10.3
Carroll	1	155	14,800	10.5
Johnson/Massac	5	299	28,000	10.7
Mercer	10	172	16,100	10.7
Ogle	1	565	52,400	10.8
McDonough	2	360	32,100	11.2
Cass	3	150	13,300	11.3
LaSalle	2	1,266	113,000	11.2
Macon	4	1,257	110,700	11.4
Mason	3	164	14,200	11.5
DeWitt	4	190	16,300	11.7
Douglas	4	233	19,800	11.8
Shelby	4	259	21,900	11.8
	5	261		11.9
Fayette	6		22,000	12.0
Kankakee	9	7,192	601,000 110,900	12.3
	5	1,368		12.4
Washington		178	14,400	12.5
Brown/Schuyler	<u>3</u> 5	179	14,300	12.7
Effingham		434	34,200	13.1
Marion	53	509	38,900	13.1
Christian		449	34,200	
Stephenson	4	637 518	46,800	13.6 13.6
Livingston			38,000	13.8
Morgan/Scott Whiteside	3	551	39,800	14.3
Coles/Cumberland	4	819 939	57,300	14.3
7-B	7		63,800 464,000	14.7
Randolph	5	6,827 490		14.8
		590	33,000	
Woodford Clark	2	245	38,700	15.2 15.2
Gallatin/Hamilton/Saline		582	16,100 38,400	15.2
Macoupin	3	704	46,700	15.1
Clay	5	209	13,600	15.4
Calhoun/Pike	3	337	21,200	15.9
	3	468	29,700	15.8
Logan	3	369	22,600	16.3
Jersey	3	480		16.4
Montgomery	2	603	29,300	16.6
Fulton			36,400	
Edgar	4	299	18,000	16.6

Union	5	293	17,600	16.6
Iroquois	4	486	28,900	16.8
Knox	2	950	52,100	18.2
Richland	5	309	16,100	19.2
Lawrence	5	340	17,000	20.0
Adams	3	1,499	67,000	22.4
Marshall/Stark	2	427	18,200	23.5
White	5	351	14,600	24.0
Moultrie	4	361	14,900	24.2
Ford	4	434	13,900	31.2

Sources: IHFSRB Inventory of Health Care & Services & Need Determinations, August 3, 2015; Long Term Care Facility Updates, May 11, 2016

# INVENTORY OF HEALTH CARE FACILITIES AND SERVICES AND NEED DETERMINATIONS

Illinois Department of Public Health Illinois Health Facilities and Services Review Board	iblic Health and Services Review	Board			General Lon	General Long-Term Care Category of Service	ategory of Serv	ice			8/3/2015 Page A-122
Planning Area:	McHenry									Ge	General Nursing Care
Facility Name			C	City		County/Area	rea			Beds	2013 Patient Days
ALDEN TERRACE OF MCHENRY REHAB	E OF MCHENR	Y REHAB	X	MCHENRY		McHenry County	County			316	116'89
CENTEGRA SPECIALTY HOSPITAL WOODSTOCK	CIALTY HOSPIT	FAL WOODSTOC		WOODSTOCK		McHenry County	County			0	4,629
11/12/2014 14-038		Received permit for discontinuation of 40 bed Skilled Nursing (Long-Term Care) category of service.	iscontinuatio	n of 40 bed Skil	led Nursing (Lo	ong-Term Care) c	ategory of servic	aí.			
CROSSROADS CARE CENTER WOODSTOCK	ARE CENTER V	VOODSTOCK	**	WOODSTOCK		McHenry County	County			115	35,416
CRYSTAL PINES REHAB & HCC	REHAB & HCC		O	CRYSTAL LAKE	E	McHenry County	County			114	36,830
FAIR OAKS HEALTH CARE CENTER	LTH CARE CEN	ITER	C	CRYSTAL LAKE	8	McHenry County	County			51	14,912
3/29/2013 Bed Change		Facility added 5 Nursing Care beds. Facility now has 51 Nursing Care beds.	ing Care bed	s. Facility now	has 51 Nursing	Care beds.					
FLORENCE NURSING HOME			2	MARENGO		McHenry County	County			26	16,481
HEARTHSTONE MANOR	MANOR		*	WOODSTOCK		McHenry County	County			75	19,390
MERCY HARVARD HOSPITAL CARE CENTER	RD HOSPITAL	CARE CENTER	Щ	HARVARD		McHenry County	County			45	7,466
SPRINGS AT CRYSTAL LAKE	YSTAL LAKE		0	CRYSTAL LAKE	9	McHenry County	County			16	18,930
VALLEY HI NURSING HOME	SING HOME		>	WOODSTOCK		McHenry County	County			128	44,228
						H H	Planning Area Totals	otals		997	267,199
HEALTH SERVICE	E AGE GROUPS		2013 Patient Days		2013 Population	2013 Use F	2013 Use Rates (Per 1,000)	2013	2013 Minimum Use Rates		2013 Maximum Use Rates
AREA	0-64 Years Old	PiO i	457,316	1,	1,361,900		335.8		201.5		537.3
800	65-74 Years Old	» Old	354,924		103,900		3,416.0		2,049.6		5,465.6
	75+ Years Old	Oid	1,364,262		71,500		9,080.6		11,448.4		30,528.9
	2013 PSA Patient Days	2013 PSA Estimated Populations	2013 PSA Use Rates (Per 1,000)	2013 HSA Minimum Use Rates	2013 HSA Maximum Use Rates	2018 PSA Planned Use Rates	2018 PSA Projected Populations	2018 PSA Planned Patient Days			
0-64 Years Old	26,755	272,500	98.2	201.5	537.3	201.5	291,200	58,670	Planned	Planned	
65-74 Years Old	41,276	22,600	1,826.4	2,049.6	5,465.6	2,049.6	29,700	60,873	Average Daily	Bed Need	•
75+ Years Old	199,168	13,400	14,863.3	11,448.4	30,528.9	14,863.3	16,800	249,703	Census	(90% Occ.)	Beds Needed
						Planning A	Planning Area Totals	369,246	1,011.6	1,124	127

# AREA PROVIDERS RECEIVE ALMOST TWICE AS MANY CENTEGRA PATIENT REFERRALS THAN THEY ACTUALLY ADMIT

Figure 1 below shows the total number of individual patients referred to individual skilled nursing facilities ("SNF") in the project's service area from Centegra Hospital - McHenry and Centegra Hospital - Woodstock, and the number of individual patients actually admitted by those SNFs. All of the data included in the following chart were reported to the Centers for Medicare & Medicaid Services "(CMS") by each of the PSA providers and by the Centegra hospitals as part of the standard 2014 CMS annual reporting guidelines.

Service Area SNFs	Referrals of Centegra Patients to SNF	Admissions of Centegra Patients to SNF	Patients Referred but Not Admitted	% Referrals Not Admitted
Alden Terrace of McHenry Rehab	120	63	57	48%
Crossroads Care Center	156	72	84	54%
Crystal Pines Rehab & Health Center	116 🗤	63	53	46%
Fair Oaks Rehab & Skilled Nursing	228	118	110	48%
Hearthstone Manor	181	86	95	52%
The Springs at Crystal Lake	519	297	222	43%
Wauconda Healthcare & Rehab	147	64	83	56%
Valley Hi Nursing Home	127	76	51	40%
Hillcrest Retirement Village	12	0	12	100%
Florence Nursing Home	38	24	14	37%
Total	1,644	863	781	48%

Figure 1

As shown in Figure 1, while 1,644 Centegra patients were referred to facilities within the PSA, those providers only admitted 863 individual patients, or 52% of the Centegra patients referred. **PSA providers did not admit 781 Centegra patients referred to them.** 

Source: The 2014 CMS Cost Reports of the listed facilities compiled by Definitive Healthcare LLP, a provider of healthcare data whose services are relied upon in the ordinary of business by healthcare businesses. http://www.definitivehc.com