

STATE OF ILLINOIS HEALTH FACILITIES AND SERVICES REVIEW BOARD

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

DOCKET ITEM NUMBER:	BOARD MEETING:	PROJECT NUMBER:				
C-01	August 25, 2015	E-03-015				
EXEMPTION APPLICANT(S): Memorial Regional Health Services, Inc., Memorial Group, Inc., Protestant Memorial Medical Center, Inc., d/b/a Memorial Hospital and BJC Healthcare.						
FACILITY NAME and LOCATION: Memorial Hospital, Belleville						

I. <u>The Transaction</u>

The applicants are proposing a change of ownership of Protestant Memorial Medical Center, Inc., d/b/a Memorial Hospital, located at 4500 Memorial Drive, Belleville, Illinois. This change of ownership is a of a proposed strategic affiliation between Memorial Group, Inc., and BJC Healthcare. The proposed strategic affiliation would be structured as a membership addition. Memorial Group, Inc. and BJC Healthcare will be the two corporate members of Memorial Regional Health Services, Inc., an Illinois not-for-profit corporation. Memorial Regional Health Services, Inc. will serve as the parent corporation of Memorial Hospital. The operating entity/licensee and the owner of the site is Protestant Memorial Medical Center, Inc. There is no acquisition price and the fair market value of the transaction is \$213,506,859. The anticipated completion date is November 1, 2015.

II. <u>The Applicants</u>

<u>Memorial Group, Inc.</u> is an Illinois not for profit corporation and is the sole corporate member of Protestant Memorial Medical Center, Inc.

<u>Memorial Regional Health Services, Inc.</u> is an Illinois not for profit corporation incorporated May 14, 2015. Memorial Group, Inc. and BJC Healthcare would be the two corporate members of Memorial Regional Health Services, Inc. Memorial Regional Health Services, Inc. will serve as the parent corporation of Memorial Hospital in Belleville and Memorial Hospital-East in Shiloh.

Protestant Memorial Medical Center, Inc., d/b/a Memorial Hospital is an Illinois not for profit corporation that operates a 216 bed acute care hospital in Belleville, Illinois.

BJC HealthCare, a Missouri not-for-profit corporation, located in St. Louis Missouri is one of the largest nonprofit health care organizations in the United States. BJC HealthCare owns and operates 12 hospitals in Missouri and Illinois, most of which are located in the St. Louis metropolitan area. BJC HealthCare has two academic hospitals, Barnes-Jewish Hospital and St. Louis Children's Hospital. BJC has a long-standing strong affiliation with Washington University's School of Medicine. BJC HealthCare owns Alton Memorial Hospital in Alton, Illinois.

III. <u>The Facility</u>

Protestant Memorial Medical Center, Inc., d/b/a Memorial Hospital is an Illinois not for profit corporation that currently operates a 216 bed acute care hospital in Belleville, Illinois.

IV. <u>Public Act 99-0154</u>

Public Act 99-0154 became law July 29, 2015 and is effective immediately. This Act states that an application for a change of ownership need not contain

- a signed transaction document so long as the application contains the following:
 - o name and background of the parties;
 - o structure of the transaction;
 - person who will be the licensed or certified entity both prior to and after the transaction;
 - fair market value of assets transferred;
 - o purchase price or other consideration for the assets.
- the applicant must submit a statement to the State Board within 90 days after the closing date of the transaction certifying that the transaction has been completed in accordance with the key terms contained in the application for change of ownership.
- If the key terms change a new application for change of ownership must be filed with the State Board.
- The **<u>State Board cannot impose any conditions or restrictions</u>, including;**
 - the time period for a subsequent change of ownership; or
 - a commitment to continue to offer a service for a specified period of time after the change of ownership occurs.
- An exemption shall be approved when information required by the Board by rule is submitted.(20 ILCS 3960/6 (a)

V. <u>Other Information</u>

Attached to the end of this report is the 2013 Hospital Profile Information for Protestant Memorial Medical Center, Inc., d/b/a Memorial Hospital, Belleville and the Memo of Understanding between BJC Healthcare and Memorial Group, Inc.



#E-003-015 Memorial Hospital - Belleville

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

Hospital Profile - 0	Belleville Page 1										
Ownership, Ma		Patients by Race Patients by E									
ADMINISTRATOR NA	ME: Mark J.	. Turner			W	White 67.6			.6% Hispanic or Latino:		
ADMINSTRATOR PHO						ack			ot Hispanic or L		
OWNERSHIP:			edical Center, In			American Indian 0.1%			Unknown: 0.		
OPERATOR:			edical Center, In			sian).5% –).1%			
MANAGEMENT:	Not for	Profit Corporation	on (Not Church-F	२		Hawaiian/ Pacific			IDPH Numbe HPA		
CERTIFICATION: FACILITY DESIGNAT					Ur	Unknown 0.0%				F-01 11	
ADDRESS		al Hospital Iemorial Drive	CI	ry: Belleville	÷	COUNTY	: St. Clai	r County	HSA		
		Facility Utilization Data by Category of Service									
	Authoriz	ed Peak Bed	-		y calegory	<u>/ OI Selvice</u>	Average	Average	CON	Staffed Bed	
Clinical Service	CON Be 12/31/20	ds Setup and	d Peak	Admissions	Inpatient Days	Observation Days	Length of Stay	Daily Census	Occupancy Rate %	Occupancy Rate %	
Medical/Surgical	175	253	188	12,406	55,393	1,432	4.6	155.7	89.0	61.5	
0-14 Years				0	0						
15-44 Years				1,775	6,541						
45-64 Years				3,941	16,915						
65-74 Years				2,474	11,726						
75 Years +				4,216	20,211						
Pediatric	14	14	12	37	79	6	2.3	0.2	1.7	1.7	
Intensive Care	19	20	20	1,613	5,433	14	3.4	14.9	78.5	74.6	
Direct Admission				1,039	3,337						
Transfers				574	2,096						
Obstetric/Gynecology	, 8	29	21	1,841	4,557	252	2.6	13.2	164.7	45.4	
Maternity				1,706	4,200						
Clean Gynecology				135	357						
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0	
Long Term Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0	
Swing Beds			0	0	0		0.0	0.0			
Acute Mental Illness	0	0	0	0	0	0	0.0	0.0	0.0	0.0	
Rehabilitation	0	0	0	0	0	0	0.0	0.0	0.0	0.0	
Long-Term Acute Car	·e 0	0	0	0	0	0	0.0	0.0	0.0	0.0	
Dedcated Observation						0					
Facility Utilization	216	;		15,323	65,462	1,704	4.4	184.0	85.2		
			(Includes ICU	Direct Admis	sions Only)					
Inpatients and Outpatients Served by Payor Source											
	Medicare	Medicaid	Other Public	Private In	surance	Private Pay		Ch	arity Care	Totals	
• • •	44.9%	13.9%	2.3%	•	27.6%	4.0%			7.3%		
Inpatients	6879	2132	354		4225	608			1125	15,323	
	27.9%	14.9%	5.9%		43.0%	4.2%			4.0%		
Outpatients	55868	29850	11734		85970 8499				8071	199,992	
Financial Year Report	<u>ed:</u> 1/1/2013	3 to 12/31/20)13 Inpatie	nt and Outp	atient Net	Revenue by P	ayor Sou	rce	Charity .	Total Charity	
	Medicare	Medicaid	Other Public			Private Pay		Totals	Charity Care	Care Expense	
Inpatient	52.4%	12.0%	1.9%	1 11/400 11	33.7%	0.1%		00.0%	Expense	4,781,902	
Revenue (\$)	59,090,730	13,496,685	2,177,701	37	970,359	98,680		34,155	3,150,592	Total Charity	
				57,	-				3,130,332	Care as % of Net Revenue	
Outpatient Revenue (\$)	18.4%	3.3%	4.2%	05.0	73.9%	0.1%		00.0%	1 621 210		
	23,641,447	4,297,250	5,402,096	95,0	014,437	179,532	126,5	34,762	1,631,310	2.0%	
B	Birthing Data	New	born Nurs	ery Utilization			<u>Organ Tra</u>	nsplantation			
Number of Total Birth			,610		Level I	Level II	Lev	vel II+	Kidney:	0	
Number of Live Births	S:	1	,609 Beds		29	9 18	3	0	Heart:	0	
Birthing Rooms:			0 Patient	t Days	2,534			0	Lung:	0	
Labor Rooms:	² Total Newborn Patie						:	3,392	Heart/Lung:		
Delivery Rooms:			1		aborator	Studioo			Pancreas:	0	
Labor-Delivery-Recov		Boomer	8 0 Innotio		_aboratory	Suules	50	1 177	Liver:	0	
Labor-Delivery-Recov C-Section Rooms:	very-Postpartum	n Ruums:	•	ent Studies tient Studies				1,177 3,926	Total:	0	
CSections Performed: 494 Studies Performed I					Under Cor	ntract		3,920 2,932			
								•			

lospital Profile - (lination				Page
Survival Specialty		Onerativ	a Deemo	<u>Su</u>	rgery a	-	ng Room Util				Haura	
Surgical Specialty	Innotiont		ng Rooms	- Total		Surgical (gical Hours			per Case
0	•	•	t Combine			Inpatient (•	Dutpatient		•	Outpatier
Cardiovascular	0	0	2	2		246	9	1299	12	1311	5.3	1.3
Dermatology	0	0	0	(0	0	0	0	0	0.0	0.0
General	0	0	18	18		1570	1855	2832	2018	4850	1.8	1.1
Gastroenterology	0	0	0	(0	0	0	0	0	0.0	0.0
Neurology	0	0	0	(254	28	716	24	740	2.8	0.9
OB/Gynecology	0	0	0	(368	705	851	686	1537	2.3	1.0
Oral/Maxillofacial	0	0	0	()	9	383	9	691	700	1.0	1.8
Ophthalmology	0	0	0	()	2	287	2	242	244	1.0	0.8
Orthopedic	0	0	0	0)	891	918	1678	1141	2819	1.9	1.2
Otolaryngology	0	0	0	0)	98	592	130	532	662	1.3	0.9
Plastic Surgery	0	0	0	0)	82	787	127	592	719	1.5	0.8
Podiatry	0	0	0	()	26	320	29	315	344	1.1	1.0
Thoracic	0	0	0	()	76	41	73	32	105	1.0	0.8
Urology	0	0	0	Ć		245	742	261	862	1123	1.1	1.2
Totals	0	0	20	20	,)	3867	6667	8007	7147	15154	2.1	1.1
	-		-									
SURGICAL RECOV	ERYSIAI	IONS	Sta	age 1 Re	covery	Stations	22	Stage	e 2 Recover	y Stations	36	
					and No			Room Utilzat				
		<u>P</u>	rocedure R	ooms		<u>Surgi</u>	cal Cases	<u>S</u>	urgical Hou	rs	<u>Hours</u>	per Case
rocedure Type	Inp	atient O	utpatient Co	ombined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatier
astrointestinal		0	0	9	g	1396	2344	1961	2357	4318	1.4	1.0
aser Eye Procedures		0	0	0	C) 0	0	0	0	0	0.0	0.0
ain Management		0	0	4	4	123	5048	107	1728	1835	0.9	0.3
ystoscopy		0	0	2	2	2 187	333	172	325	497	0.9	1.0
				M	ultipur	pose Non-D	edicated Ro	<u>oms</u>				
		0	0	0	C	0 (0	0	0	0	0.0	0.0
		0	0	0	C	0 (0	0	0	0	0.0	0.0
		0	0	0	C	0 0	0	0	0	0	0.0	0.0
	Emergend	y/Traum	a Care						Cardiac Cat	heterization	l ahs	
Certified Trauma Center					No Total Cath Labs (Dedicated+Nondedicated labs):							
Level of Traum	a Service		Le	evel 1	Level 2 Cath Labs us					4		
			(Not An	swered)	Not	Answered		dicated Diagr			es	2 0
Operating Roo	ms Dedica	ted for Tr	auma Care			0		abe	-			
Number of Tra	uma Visits:					0		dicated Interv	.dD5	0		
Patients Admit	ted from Ti	auma				0	De		ametenzatio	II Labs		0
Emergency Se	rvice Type	:			Comp	orehensive		Card	iac Cathoto	rization Utiliz	zation	
Number of Em	ergency Ro	oom Stati	ons			36	Total	Cardiac Catheterization Utiliz Total Cardiac Cath Procedures:				4 550
Persons Treated by Emergency Services:						52,333		Diagnostic Catheterizations (0-14)				1,556
Patients Admit	ted from E	mergency	/:			10,850	Diagnostic Catheterizations (0-14)					1,219
Total ED Visits (Emergency+Trauma):						52,333	Interventional Catheterizations (1,219
Free-Standing Emergency Center												284
						0		Interventional Catheterization (15+				53
Beds in Free-Standing Centers Patient Visits in Free-Standing Centers						0	L1	EP Catheterizations (15+)				55
Hospital Admissions from Free-Standing Center					0		Cardiac Surgery Data					
					U	Total Cardiac Surgery Cases:					179	
Outpatient Service Data						Pediatric (0 - 14 Years):						0
Total Outpatient Visits						304,791Adult (15 Years and Older):						179
Outpatient \	/isits at the	Hospital	/ Campus:			268,347	Co	ronary Artery				
Outpatient \	/isits Offsit	e/off cam	pus			36,444		performed	of total Card	ac Cases :		140
and the second												

Diagnostic/Interventional Equipment		Exam		aminatio	ons	Therapeutic Equipment			Therapies/
	Owned Co	ontract	Inpatient	Outpt	Contract		Owned	Contract	<u>Treatments</u>
General Radiography/Fluoroscopy	26	0	24,985	62,055	0	Lithotripsy	0	225	225
Nuclear Medicine	5	0	3,666	7,441	0	Linear Accelerator	0	0	0
Mammography	3	0	177	26,427	0	Image Guided Rad Thera	ару		0
Ultrasound	13	0	1,788	7,175	0	Intensity Modulated Rad	Thrp		0
Angiography	4	0				High Dose Brachytherapy	5	0	5
Diagnostic Angiography			363	192	0	Proton Beam Therapy	0	0	0
Interventional Angiography			89	214	0	Gamma Knife	0	0	0
Positron Emission Tomography (PET)	0	0	0	0	0	Cyber knife	0	0	0
Computerized Axial Tomography (CAT)	4	0	10,605	30,909	0				
Magnetic Resonance Imaging	3	0	1,804	6,213	0				

Source: 2013 Annual Hospital Questionnaire, Illinois Department of Public Health, Health Systems Development.

MEMORANDUM OF UNDERSTANDING

This Memorandum of Understanding ("MOU") is made and entered by and between Memorial Group, Inc., an Illinois not-for-profit corporation ("Memorial"), and BJC Health System, a Missouri nonprofit corporation doing business as BJC HealthCare ("BJC"). For purposes of this MOU, Memorial and BJC may each be referred to individually as a "Party", and are collectively referred to as the "Parties".

BACKGROUND

A. The Parties have engaged in discussions regarding a proposed strategic affiliation involving the joint ownership and operation of the hospitals, including Memorial Hospital located in Belleville, Illinois and Memorial Hospital-East located in Shiloh, Illinois, and other health care facilities that are currently owned by Memorial and its subsidiaries (the "Strategic Affiliation").

B. The Parties desire to set forth in this MOU certain non-binding terms reflecting their mutual understanding with regard to various aspects of the Strategic Affiliation.

NON-BINDING TERMS

1. <u>Purposes</u>. The purpose of the proposed Strategic Affiliation will be to improve the manner which health care services are provided to the residents of the communities served by Memorial. The Parties anticipate that the Strategic Affiliation will create a stronger regional health delivery system that will, among other things, improve access to clinical expertise, facilitate the sharing of clinical and non-clinical "best practices," and provide economies of scale that will reduce costs for both patients and providers.

2. <u>Organizational Structure</u>. The proposed Strategic Affiliation will be structured as a membership substitution, whereby (i) BJC and Memorial will form and become the members of a new Illinois not-for-profit corporation - Memorial Regional Health Services, Inc. ("MRHS"), and (ii) MRHS will, in turn, replace Memorial as the common parent corporation of each of the entities that are currently direct subsidiaries of Memorial (the "Memorial Subsidiaries").

3. **Governance**. MRHS will be governed by a Board of Directors (the "MRHS Board"). At the time of the closing of the proposed Strategic Affiliation, BJC and Memorial will each appoint an equal number of directors to the MRHS Board for the staggered terms set forth in the MRHS governing documents, and thereafter, the members of the MHRS Board will be appointed in accordance with the MRHS governing documents. BJC and Memorial, as the corporate members of MRHS, will each hold certain reserved powers with respect to the governance and operation of MRHS. In addition to the MRHS Board, Memorial Hospital and Memorial Hospital-East will be governed by a board of directors which will retain certain responsibilities with respect to the hospitals, including medical staff credentialing, oversight of implementation of operating and capital budgets, maintaining accreditation with applicable accreditation body(ies), and patient care quality and safety.

The Parties have executed this Memorandum of Understanding to be effective as of April 27, 2015.

Memorial Group, Inc.

Ву: _____

Print Name: _____

Title: _____

BJC Health System d/b/a BJC HealthCare

By: / Michn Print Name: Michael A.L Title: Schitz Vice Preside

The Parties have executed this Memorandum of Understanding to be effective as of April 27, 2015.

Memorial Group, Inc.

By: Marl Tremen

Print Name: MARK J. TURNER

Title: PRESIDENT & CEO

BJC Health System d/b/a BJC HealthCare

By:	

Print Name:

Title:

4. <u>Capital Commitments</u>. BJC will agree to make capital and operating investments in the facilities and operations of MRHS (the "MRHS Facilities") in an amount sufficient to ensure that the hospitals and other health care facilities operated by MRHS remain preferred providers of health care to the local community. BJC's total contribution to MRHS and the MRHS Facilities will be supported by a mutually agreed upon valuation.

5. <u>Service Commitments</u>. BJC would agree to recognize MRHS as its hub hospital provider in MRHS's primary service area. As a hub provider, the Hospitals operated by MRHS will provide the highest levels of service by BJC affiliated hospital providers in MRHS's primary service area and will be the conduit through which patients in MRHS's primary service area access BJC hospitals. BJC would also agree to operate and maintain the Memorial hospital facilities as full-service acute care hospitals for a defined period of time and maintain Memorial's core services at both such hospital facilities.

6. <u>Charity Care Commitments</u>. The Parties agree that the Memorial Subsidiaries would continue to provide access to care for indigent and uninsured patients in accordance with a mutually-agreeable charity care policy for MRHS.

7. <u>Identification of Memorial</u>. All signage and logos used by MRHS and the Memorial Subsidiaries will continue to use the name "Memorial." The BJC name and brand would be incorporated into all signage and logos in a manner that is mutually agreed upon by the Parties.

8. <u>Governing Law</u>. This MOU shall be construed and enforced in accordance with the laws of the State of Illinois.

9. <u>Non-Binding Nature</u>. The provisions of this MOU are intended to set forth certain mutual understandings between the Parties with respect to the proposed Strategic Affiliation, but each Party acknowledges that this MOU is not intended to create or constitute a legally binding obligation between BJC and Memorial, and neither BJC nor Memorial shall have any liability to the other Party with respect to the provisions hereof until a definitive agreement and other related documents (collectively, the "Definitive Agreement") are prepared, authorized, executed and delivered by and between the Parties. The omission of certain terms from this MOU shall not be construed so as to diminish the importance or the materiality of such term, and the Parties acknowledge that, in addition to the proposed terms contained in this MOU, additional material terms remain to be resolved.

10. <u>Counterparts</u>. This MOU may be executed in two or more counterparts, each of which shall be deemed to be an original copy of this MOU, and all of which, when taken together, shall be deemed to constitute one and the same instrument.

[Signature page follows.]