

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-02	November 17, 2015	E-019-15 thru E-031-15

EXEMPTION APPLICANT(S): Community Health Systems, Inc., and Quorum Health Corporation

FACILITY NAME and LOCATION:

- E-019-15 MetroSouth Medical Center, Blue Island
- E-020-15 Lindenhurst Surgery Center, Lindenhurst
- E-021-15 Gateway Regional Medical Center, Granite City
- E-022-15 Galesburg Cottage Hospital, Galesburg
- E-023-15 Vista Medical Center East, Waukegan
- E-024-15 Monroe County Surgery Center, Waterloo
- E-025-15 Heartland Regional Medical Center, Marion
- E-026-15 Lindenhurst Free Standing Emergency Center
- E-027-15 Vista Medical Center –West, Waukegan
- E-028-15 Edwardsville Ambulatory Surgery Center, Glen Carbon
- E-029-15 Crossroads Community Hospital, Mt. Vernon
- E-030-15 Red Bud Regional Hospital, Red Bud
- E-031-15 Union County Hospital, Anna

1. The Transaction

Community Health Systems, Inc is "spinning off" the above named health care facilities to Quorum Health Corporation. This transaction is considered a change of ownership of a health care facility under the Health Facilities Planning Act (20 ILCS 3960). A "spin off" is the creation of an independent company through the sale or distribution of new shares of an existing business or division of a parent company. A spinoff is a type of divestiture. The spin-off transaction will create a new, publicly traded company (Quorum Health Corporation) that will own or lease and operate 38 hospitals and outpatient services. This transaction is a stock transfer resulting in no change from the current licensees.

2. Public Hearing

No public hearing was requested and no letters of support and opposition were received by the State Board Staff.

3. Public Act 99-0154

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:

• name and background of the parties

- 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
- purchase price or other consideration for the assets

The State Board cannot impose any conditions or restrictions, 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 State Board by rule is submitted.

The applicants have submitted the required information per PA 99-0154.

4. Other Information

Attached to the end of this report is the 2014 Hospital Profiles for the health care entities identified in this report.

Hospital Profile - CY	2014	MetroSo	uth Medical	Center			Blue	Island		Page 1
Ownership, Mana	agement and	General Infor	<u>mation</u>			Patients by	Race		Patients by Et	hnicity
ADMINISTRATOR NAME	E: AARON	I HAZZARD			Wh	nite	2	5.3% H	ispanic or Latino	o: 9.9%
ADMINSTRATOR PHON	E (708) 59	97-2000 x5201			Bla	ck	62	2.4% N	ot Hispanic or L	atino: 88.49
OWNERSHIP:	, ,	and Illinois Hold	inas. LLC		Am	erican Indian	(nknown:	1.79
OPERATOR:		and Illinois Hold	•		Asian			0.1% -		
MANAGEMENT:		Liability Compa	•			waiian/ Pacific		0.0%	IDPH Number	: 5835
CERTIFICATION:	Liiiilea	Liability Compa	iriy			wanan, r acinc known		2.0%	HPA	A-04
CERTIFICATION. FACILITY DESIGNATION	M.				Offi	KIIOWII	1.2	2.070	HSA	7
ADDRESS		South Gregory S	treet CII	'Y: Blue Isla	and	COUNTY:	Suburb	an Cook C		,
ADDICEGO	12555 (Journ Gregory C	Facility Utiliza				Cubuib	an oook c	Journey	
	Authorize		s		-	_	Average	Average	CON	Staffed Bed
Clinical Service	CON Bed 12/31/201	•	l Peak Census	Admissions	Inpatient Days	Observation Days	Length of Stay	Daily Census	Occupancy Rate %	Occupancy Rate %
					-	-	-			
ledical/Surgical	242	51	51	5,382	23,116	2,042	4.7	68.9	28.5	135.1
0-14 Years				4	14					
15-44 Years				680	2,128					
45-64 Years				1,788	6,825					
65-74 Years				1,099	4,632					
75 Years +				1,811	9,517					
Pediatric	0	0	0	0	0	0	0.0	0.0	0.0	0.0
ntensive Care	28	14	14	1,169	3,440	0	2.9	9.4	33.7	67.3
Direct Admission				866	2,482					
Transfers				303	958					
						4.407		45.0	F0.7	100.0
Obstetric/Gynecology	30	14	14	1,620	4,444	1,107	3.4	15.2	50.7	108.6
Maternity				1,572	4,299					
Clean Gynecology				48	145					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
₋ong 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	14	7	7	218	1,790	0	8.2	4.9	35.0	70.1
Rehabilitation	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedcated Observation	0					0	0.0	0.0		
Facility Utilization	314			8,086	32,790	3,149	4.4	98.5	31.4	
			(Includes ICU	Direct Admis	sions Only))				
			<u>Inpatier</u>	nts and Outp	oatients Se	rved by Payor	r Source			
	Medicare	Medicaid	Other Public	Private In	surance	Private Pay		Ch	arity Care	Totals
	38.2%	34.4%	6.4%		15.5%	5.1%			0.4%	
Inpatients	3232	2908	545		1316	433			31	8,465
										0,403
Outpatients	19.5%	49.4%	5.3%		18.5%	6.6%			0.7%	70.000
·	14984	38039	4086		14278	5085			520	76,992
Financial Year Reported:	1/1/2014	to 12/31/20	14 Inpatie	nt and Outp	atient Net	Revenue by P	ayor Sou	<u>rce</u>	Charity	Total Charity
	Medicare	Medicaid	Other Public	Private In	surance	Private Pay		Totals	Care	Care Expense
Inpatient	31.6%	32.4%	2.4%		25.3%	8.3%		00.0%	Expense	897,270
Revenue (\$)										Total Charity
29	9,788,131	30,627,811	2,299,474	23,	882,947	7,805,226	94,4	03,589	376,453	Care as % of
Outpatient	28.3%	8.0%	3.7%		40.4%	19.5%	1	100.0%		Net Revenue
Revenue (\$) 11	,301,762	3,188,632	1,486,309	16,1	105,145	7,793,031	39,8	74,879	520,817	0.7%
Diet	hina Data			Now	horn Nuros	ry Hilizotion			Organ Tran	colontation
	hing Data	-	450	newi		ery Utilization			_	nsplantation
Number of Total Births:			459		Level I	Level II	Le	vel II+	Kidney:	0
Number of Live Births:		1,	449 Beds		10	10)	8	Heart:	0
Birthing Rooms:			0 Patient	Days	2,650			966	Lung:	0
Labor Rooms:			5	lewborn Pati	•	1,000		4,671	Heart/Lung:	0
Delivery Rooms:			0	icwooiii Fall	on Days			-1 ,011	Pancreas:	0
Labor-Delivery-Recovery	y Rooms:		13	<u>L</u>	.aboratory	Studies			Liver:	0
Labor-Delivery-Recover	•	Rooms:		nt Studies	_		32	8,074		-
C-Section Rooms:	,			ient Studies				0,198	Total:	0
CSections Performed:			•	s Performed	Under Con	tract		3.338		

73,338

Hospital Profile -	CY 2014	l N	/letroSou	ıth Medi	cal Center	•		Blue	Island		Page 2
				Surge	ry and Opera	ting Room U	tilization_				
Surgical Specialty		Operating	Rooms		Surgica	al Cases	<u>s</u>	Surgical Hou	<u>rs</u>	Hours p	er Case
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	1	1	65	148	323	300	623	5.0	2.0
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	5	5	502	646	1252	1060	2312	2.5	1.6
Gastroenterology	0	0	0	0	0	0	0	0	0	0.0	0.0
Neurology	0	0	0	0	42	14	134	17	151	3.2	1.2
OB/Gynecology	0	0	1	1	194	323	654	646	1300	3.4	2.0
Oral/Maxillofacial	0	0	0	0	0	1	0	2	2	0.0	2.0
Ophthalmology	0	0	1	1	0	584	0	616	616	0.0	1.1
Orthopedic	0	0	2	2	209	423	496	1005	1501	2.4	2.4
Otolaryngology	0	0	0	0	0	0	0	0	0	0.0	0.0
Plastic Surgery	0	0	0	0	0	0	0	0	0	0.0	0.0
Podiatry	0	0	0	0	27	111	45	127	172	1.7	1.1
Thoracic	0	0	0	0	44	0	112	0	112	2.5	0.0
Urology	0	0	1	1	85	179	190	304	494	2.2	1.7
Totals	0	0	11	11	1168	2429	3206	4077	7283	2.7	1.7
SURGICAL RECO	VERY STAT	TIONS	Stag	e 1 Recov	ery Stations	12	Sta	age 2 Recove	ery Stations	28	

<u>Dedicated and Non-Dedicated Procedure Room Utilzation</u>											
	Procedure Rooms			Surgical Cases			Surgical Hou	<u>rs</u>	Hours per Case		
Procedure Type	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	3	3	890	3107	1014	3824	4838	1.1	1.2
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	1	1	0	51	0	36	36	0.0	0.7
Cystoscopy	0	0	0	0	0	0	0	0	0	0.0	0.0
			<u>Mu</u>	ıltipurp	ose Non-De	dicated Roo	ms_				
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care		Cardiac Catheterization Labs	
Certified Trauma Center Level of Trauma Service Level 1	No Level 2	Total Cath Labs (Dedicated+Nondedicated labs): Cath Labs used for Angiography procedures	3 0
Operating Rooms Dedicated for Trauma Care Number of Trauma Visits: Patients Admitted from Trauma	0 0 0	Dedicated Diagnostic Catheterization Lab Dedicated Interventional Catheterization Labs Dedicated EP Catheterization Labs	0 2 1
Emergency Service Type:	Comprehensive	Cardiac Catheterization Utilization	
Number of Emergency Room Stations Persons Treated by Emergency Services: Patients Admitted from Emergency: Total ED Visits (Emergency+Trauma): Free-Standing Emergency Center Beds in Free-Standing Centers Patient Visits in Free-Standing Centers Hospital Admissions from Free-Standing Center	27 45,622 5,138 45,622	Total Cardiac Cath Procedures: Diagnostic Catheterizations (0-14) Diagnostic Catheterizations (15+) Interventional Catheterizations (0-14): Interventional Catheterization (15+) EP Catheterizations (15+) Cardiac Surgery Data	2,047 0 1,149 0 550 348
Outpatient Service Data	70.000	Total Cardiac Surgery Cases: Pediatric (0 - 14 Years): Adult (15 Years and Older):	42 0 42
Total Outpatient Visits Outpatient Visits at the Hospital/ Campus: Outpatient Visits Offsite/off campus	76,992 76,699 293	Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	39

Diagnostic/Interventional Equipment			<u>Ex</u>	aminatio	<u>ns</u>	Therapeutic Equipment			Therapies/
	Owned Co	ontract	Inpatient	Outpt	Contract		Owned	Contract	<u>Treatments</u>
General Radiography/Fluoroscopy	7	0	8,736	22,786	0	Lithotripsy	(0	0
Nuclear Medicine	5	0	643	672	0	Linear Accelerator	(0	0
Mammography	3	0	0	6,012	0	Image Guided Rad Thera	ару		0
Ultrasound	5	0	1,965	7,677	0	Intensity Modulated Rad	Thrp		0
Angiography	1	0				High Dose Brachytherapy	(0	0
Diagnostic Angiography			69	63	0	Proton Beam Therapy	(0	0
Interventional Angiography			205	189	0	Gamma Knife	(0	0
Positron Emission Tomography (PET)	0	0	0	0	0	Cyber knife	(0	0
Computerized Axial Tomography (CAT)	2	0	4,559	10,743	0				
Magnetic Resonance Imaging	1	0	1,268	1,168	0				

Reference Numbers Facility Id 7003168	Number of Operating Rooms 4	
Health Service Area 008 Planning Service Area 09	Procedure Rooms 2	
Lindenhurst Surgery Center	Exam Rooms 0	
1050 Red Oak Lane	Number of Recovery Stations Stage 1 16	
Lindenhurst, IL 60046	Number of Recovery Stations Stage 2 0	
Administrator Date Complete		
Barbara Martin 3/18/2015	Type of Ownership	
Contact Person Telephone	Limited Liability Partnership (RA required)	
Rose Galera 847-356-4712		
Registered Agent	HOCDITAL TRANSFER DELATIONICHIDO	
Illinois Corporation Service C	HOSPITAL TRANSFER RELATIONSHIPS HOSPITAL NAME NUMBER OF PATI	FNITC
Property Owner	HOSPITAL NAME NUMBER OF PATI Vista Medical Center East/Vista Medical Center Wes	
Waukegan Illinois Hospital Company, LLC	Vista Medical Certer East/Vista Medical Certer Wes	1
Legal Owner(s)		C
Aaron Siegel		0
Alan Gegenheimer		C
Amit Parikh		
Benjamin Johnson		
Daniel Green	STAFFING PATTERNS	
Daniel Liesen	PERSONNEL FULL-TIME EQUIVALENTS	_
David Zoellick	Administrator 1.00	
Gregory Caronis	Physicians 0.00	
Juan Alzate	Nurse Anesthetists 0.00	
Justin Cohen	Director of Nurses 1.00 Registered Nurses 9.00	
Kristopher Atzeff	Certified Aides 9.00	
Michael Scheer	Other Health Profs. 4.00	
Nejd Alsikafi	Other Non-Health Profs 4.00	
Paul Strohmayer	TOTAL 19.00	-
Rachel Greenberg		
Raza Khan		
Robert Erickson		
Roger Collins	DAYS AND HOURS OF OPERATION	_
Ronald Kim	Monday 15	
Sanjay Gandhi	Tuesday 15	
Serafin Deleon	Wednesday 15 Thursday 15	
Steven Reinglass	Thursday 15 Friday 15	
Sutchin Patel	Saturday 0	
Waukegan Illinois Hospital Company, LLC	Sunday 0	

NUME	BER OF PATI	ENTS BY AGE G	NUMBER OF PATIENTS BY AGE GROUP			NUMBER OF PATIENTS BY PRIMARY PAYMENT SOURCE			
AGE	MALE	FEMALE	TOTAL	PAYMENT SOURCE	MALE	FEMALE	TOTAL		
0-14 years	44	30	74	Medicaid	55	101	156		
15-44 years	294	232	526	Medicare	383	491	874		
45-64 years	509	442	951	Other Public	2	0	2		
65-74 years	253	298	551	Insurance	841	646	1,487		
75+ years	190	245	435	Private Pay	9	9	18		
TOTAL	1.290	1.247	2.537	Charity Care	0	0	0		
	,	,	,	TOTAL	1,290	1,247	2,537		

	NET REVENUE BY PAYOR SOURCE FOR FISCAL YEAR									
Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care		rity Care se as % of		
21.4%	0.1%	0.0%	77.7%	0.8%	100.0%	Expense	Total N	et Revenue		
1,127,531	6,209	0	4,092,563	40,581	5,266,884		0	0%		

OPERATING ROOM UTILIZATION FOR THE REPORTING YEAR

SURGERY AREA	TOTAL SURGERIES	SURGERY TIME (HOURS)	SURGERY PREP AND CLEAN-UP TIME (HOURS)	TOTAL SURGERY TIME (HOURS)	AVERAGE CASE TIME (HOURS)
Cardiovascular	0	0.00	0.00	0.00	0.00
Dermatology	0	0.00	0.00	0.00	0.00
Gastroenterology	0	0.00	0.00	0.00	0.00
General	378	215.75	94.50	310.25	0.82
Laser Eye	0	0.00	0.00	0.00	0.00
Neurological	49	19.25	12.50	31.75	0.65
OB/Gynecology	50	54.25	12.50	66.75	1.34
Ophthalmology	721	241.50	180.25	421.75	0.58
Oral/Maxillofacial	0	0.00	0.00	0.00	0.00
Orthopedic	611	405.75	152.75	558.50	0.91
Otolaryngology	63	24.25	15.75	40.00	0.63
Pain Management	0	0.00	0.00	0.00	0.00
Plastic	0	0.00	0.00	0.00	0.00
Podiatry	81	65.75	20.50	86.25	1.06
Thoracic	7	6.25	1.75	8.00	1.14
Urology	499	259.50	124.75	384.25	0.77
TOTAL	2459	1,292.25	615.25	1907.50	0.78

PROCEDURE ROOM UTILIZATION FOR THE REPORTING YEAR

SURGERY AREA	PROCEDURE ROOMS	TOTAL SURGERIES	SURGERY TIME (HOURS)	PREP AND CLEAN-UP TIME (HOURS)	TOTAL SURGERY TIME (HOURS)	AVERAGE CASE TIME (HOURS)
Cardiac Catheteriza	0	0	0	0	0	0.00
Gastro-Intestinal	1	8	3.75	2	5.75	0.72
Laser Eye	0	0	0	0	0	0.00
Pain Management	1	70	23	17.5	40.5	0.58
TOTALS	2	78	26.75	19.5	46.25	0.59

Patients by Location of Residence

Zip Code	<u>City</u>	County	<u>Patients</u>
60046	Lake Villa	LAKE	278
60085	Waukegan	LAKE	269
60073	Round Lake	LAKE	260
60002	Antioch	LAKE	242
60031	Gurnee	LAKE	206
60030	Grayslake	LAKE	166
60087	Waukegan	LAKE	158
60099	Zion	LAKE	124
60060	Mundelein	LAKE	85
60048	Libertyville	LAKE	81
60041	Ingelside	LAKE	63
60083	Wadsworth	LAKE	58
60064	North Chicago	LAKE	50
60020	Fox Lake	LAKE	45
60096	Winthrop Harbor	LAKE	33
60061	Vernon Hills	LAKE	30
60081	Spring Grove	MCHENRY	25
60047	Lake Zurich	LAKE	22
60089	Buffalo Grove	LAKE	19
60044	Lake Bluff	LAKE	19
60079	Waukegan	LAKE	18
60050	Mc Henry	MCHENRY	18
60084	Wauconda	LAKE	17
60045	Lake Forest	LAKE	13
53168		KENOSHA	13

Hospital Profile - CY	2014	Gateway	Regional M	1edical Ce	nter		Grani	te City		Page 1
Ownership, Mana	gement and					Patients by	Race	-	Patients by Et	
ADMINISTRATOR NAME	: Ronald	W. Leazer			Wł	hite	79	9.8% H	lispanic or Latino	
ADMINSTRATOR PHONE	E 618-798	3-3990			Bla	ack	19	9.0% N	lot Hispanic or L	atino: 96.3%
OWNERSHIP:	Granite	City Illinois Hos	pital Co.		Am	nerican Indian	(0.0% U	Inknown:	0.49
OPERATOR:	Granite	City Illinois Hos	pital Co.		As	ian	().1% -		
MANAGEMENT:	For Prof	it Corporation			Ha	waiian/ Pacific	. (0.2%	IDPH Number	: 5223
CERTIFICATION:	None				Un	known	(0.9%	HPA	F-01
FACILITY DESIGNATION	I: Genera	l Hospital							HSA	11
ADDRESS	2100 Ma	adison Avenue	CI	TY: Granite (City	COUNTY	: Madiso	n County		
			Facility Utiliz	ation Data by	/ Category	of Service				
Clinical Service	Authorize CON Bed 12/31/201	s Setup and		Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	166	60	60	3,130	12,910	1,948	4.7	40.7	24.5	67.8
0-14 Years	100	00	00	20	65	1,540	7.7	40.7	24.0	07.0
15-44 Years				428	1,405					
45-64 Years				1,092	4,534					
65-74 Years				624	2,120					
75 Years +				966	4,786					
Pediatric	5	0	0	0	0	0	0.0	0.0	0.0	0.0
ntensive Care	12	11	11	344	1,398	0	4.1	3.8	31.9	34.8
Direct Admission		• •	• •	192	820	2	•••	0.0		
Transfers				152	578					
Obstatrio/Gymanology	27	27	8	345	861	26	2.6	2.4	9.0	9.0
Obstetric/Gynecology Maternity	21	21	0	330	831	20	2.0	2.4	9.0	9.0
Clean Gynecology				330 15	30					
, 0,	0	0	0			0	0.0	0.0	0.0	0.0
Neonatal	19	0	0	0	1.000	0	0.0	0.0	0.0	0.0
Long Term Care	19	19	12	215	1,989	0	9.3	5.4	28.7	28.7
Swing Beds	400	400	0	0	0		0.0	0.0	40.5	40.5
Acute Mental Illness	100	100	99	2,781	18,067	0	6.5	49.5	49.5	49.5
Rehabilitation	14	14	8	77	1,053	0	13.7	2.9	20.6	20.6
Long-Term Acute Care Dedcated Observation	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Facility Utilization	343			6,740	36,278		5.7	104.8	30.6	
racinty offization	343		(Includes ICU	,	•	•	5.7	104.0	30.0	
			<u>'</u>			erved by Payo	r Source			
/	Medicare	Medicaid	Other Public	-		Private Pay		Ch	arity Care	Totals
	31.0%	35.7%	0.9%		24.7%	6.6%		-	1.1%	
Inpatients	2092	2403	60		1664	446			75	6,740
										0,740
Outpatients	20.5% 15583	21.7% 16488	0.6% 463		44.7% 33876	12.3% 9357			0.1% 78	75,845
r IN D						Revenue by F	lavor Sau	roo		Total Charity
Financial Year Reported:	1/1/2014		·	-		•	-		Charity	Care Expense
Inpatient	Medicare	Medicaid	Other Public			Private Pay		Totals	Care Expense	452,037
Revenue (\$)	22.8%	31.0%	0.1%		20.1%	25.9%	1	00.0%	Lxperise	Total Charity
15	5,757,127	21,424,148	101,077	13,	915,666	17,876,570	69,0	74,588	384,216	Care as % of
Outpatient	12.6%	10.0%	0.1%	ì	49.0%	28.4%	1	00.0%		Net Revenue
D / 6\	437,688	5,094,121	51,923		63,771	14,524,392		71,895	67,821	0.4%
Rirth	ning Data			Newl	orn Nurs	ery Utilization			Organ Trai	nsplantation
Number of Total Births:	illig Data		323	INCWI		•			Kidney:	•
Number of Live Births:			202		Level I	Level II		vel II+	Heart:	0
Birthing Rooms:			Doub	. D	3)	0	Lung:	0
Labor Rooms:			Λ	nt Days	655	5 ()	0	Heart/Lung:	
Delivery Rooms:			0 Total	Newborn Pation	ent Days			655	Pancreas:	0
Labor-Delivery-Recovery	Rooms.		4	L	aboratory	Studies			Liver:	0
Labor-Delivery-Recovery		Rooms:		= ent Studies			17	3,031		_
C-Section Rooms:	. corparturii			tient Studies				0,796	Total:	0
CSections Performed:				es Performed	Under Con	troot		5.075		

15,075

125

				Surge	ry and Opera	ating Room U	tilization	•		•	•	
Surgical Specialty		Operating	Rooms		Surgica	al Cases	<u>s</u>	Surgical Hou	<u>rs</u>	Hours p	Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient	
Cardiovascular	0	0	0	0	46	67	116	129	245	2.5	1.9	
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0	
General	0	0	3	3	168	311	488	749	1237	2.9	2.4	
Gastroenterology	0	0	3	3	419	1163	236	684	920	0.6	0.6	
Neurology	0	0	0	0	0	1	0	2	2	0.0	2.0	
OB/Gynecology	0	0	1	1	160	429	360	794	1154	2.3	1.9	
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0	
Ophthalmology	0	0	0	0	0	0	0	0	0	0.0	0.0	
Orthopedic	0	0	2	2	331	253	1152	629	1781	3.5	2.5	
Otolaryngology	0	0	0	0	2	202	2	204	206	1.0	1.0	
Plastic Surgery	0	0	0	0	30	109	50	162	212	1.7	1.5	
Podiatry	0	0	0	0	0	2	0	2	2	0.0	1.0	
Thoracic	0	0	0	0	0	0	0	0	0	0.0	0.0	
Urology	0	0	1	1	52	134	83	192	275	1.6	1.4	
Totals	0	0	10	10	1208	2671	2487	3547	6034	2.1	1.3	
SURGICAL RECOVERY STATIONS Stage 1 Recover			ery Stations	12	Sta	age 2 Recove	ery Stations	24				

		<u>1</u>	Dedicated a	nd Non	-Dedicated	Procedure R	oom Utilza	<u>tion</u>			
		Procedure	Rooms		Surgic	al Cases	5	Surgical Hou	<u>rs</u>	<u>Hours</u>	per Case
Procedure Type	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	3	3	419	163	256	684	940	0.6	4.2
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	1	1	1	68	2	49	51	2.0	0.7
Cystoscopy	0	0	1	1	37	58	45	71	116	1.2	1.2
			<u>Μι</u>	ıltipurp	ose Non-De	dicated Roo	ms_				
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care		Cardiac Catheterization Labs	
Certified Trauma Center Level of Trauma Service Level 1	No Level 2	Total Cath Labs (Dedicated+Nondedicated labs): Cath Labs used for Angiography procedures Dedicated Diagnostic Catheterization Lab	1 1 0
Operating Rooms Dedicated for Trauma Care Number of Trauma Visits: Patients Admitted from Trauma	0	Dedicated Interventional Catheterization Labs Dedicated EP Catheterization Labs	0
Emergency Service Type:	Comprehensive	Cardiac Catheterization Utilization	
Number of Emergency Room Stations Persons Treated by Emergency Services: Patients Admitted from Emergency: Total ED Visits (Emergency+Trauma): Free-Standing Emergency Center Beds in Free-Standing Centers	16 29,306 5,138 29,306	Total Cardiac Cath Procedures: Diagnostic Catheterizations (0-14) Diagnostic Catheterizations (15+) Interventional Catheterizations (0-14): Interventional Catheterization (15+) EP Catheterizations (15+)	544 0 204 0 324 16
Patient Visits in Free-Standing Centers Hospital Admissions from Free-Standing Center		<u>Cardiac Surgery Data</u> Total Cardiac Surgery Cases:	0
Outpatient Service Data Total Outpatient Visits Outpatient Visits at the Hospital/ Campus: Outpatient Visits Offsite/off campus	75,845 75,845 0	Pediatric (0 - 14 Years): Adult (15 Years and Older): Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases:	0 0

Diagnostic/Interventional Equipment			Exa	aminatio	<u>ns</u>	Therapeutic Equipment			Therapies/
	Owned Co	ontract	Inpatient	Outpt	Contract		Owned	Contract	<u>Treatments</u>
General Radiography/Fluoroscopy	12	0	6,041	17,496	0	Lithotripsy	(0	0
Nuclear Medicine	1	0	224	393	0	Linear Accelerator	(0	0
Mammography	2	0	1	2,199	0	Image Guided Rad Thera	ру		0
Ultrasound	3	0	610	2,912	0	Intensity Modulated Rad	Thrp		0
Angiography	1	0				High Dose Brachytherapy	(0	0
Diagnostic Angiography			0	48	0	Proton Beam Therapy	(0	0
Interventional Angiography			0	183	0	Gamma Knife	(0	0
Positron Emission Tomography (PET)	0	0	0	0	0	Cyber knife	(0	0
Computerized Axial Tomography (CAT)	3	0	2,071	7,293	0				
Magnetic Resonance Imaging	2	0	192	1,228	0				

Hospital Profile - C	Y 2014	Galeshu	g Cottage H	osnital			Gales	hura		Page 1
Ownership, Ma				- opital		Patients by		y	Patients by Et	
ADMINISTRATOR NAM		chneider			Wh	nite		.8% Hi	spanic or Latino	
ADMINISTRATOR PHO	•					ack	_		ot Hispanic or La	
OWNERSHIP:		urg Hospital Cor	noration			nerican Indian			nknown:	0.0%
OPERATOR:		urg Cottage Hos	•		As).2% -		0.070
MANAGEMENT:		fit Corporation	pitai			waiian/ Pacific).2%	IDPH Number	5330
CERTIFICATION:	None	in corporation				known		1.1%	HPA	C-03
FACILITY DESIGNATION		l Hospital			-				HSA	2
ADDRESS		th Kellogg Stree	t CIT	Y: Galesbu	rg	COUNTY:	Knox C	ounty		
			Facility Utilizat	ion Data by	/ Category	of Service				
Clinical Service	Authorize CON Bed	ls Setup and	Peak	-	Inpatient	Observation	Average Length	Average Daily	CON Occupancy	Staffed Bed Occupancy
<u> </u>	12/31/201			Admissions	Days	Days	of Stay	Census	Rate %	Rate %
Medical/Surgical	87	87	32	1,498	7,539	0	5.0	20.7	23.7	23.7
0-14 Years 15-44 Years				34 149	71 626					
45-64 Years				373	1,752					
65-74 Years				320	1,702					
75 Years +				622	3,387					
Pediatric	18	18	2	19	56	0	2.9	0.2	0.9	0.9
-										
Intensive Care	12	12	11	514	2,106	0	4.1	5.8	48.1	48.1
Direct Admission				514	2,106					
Transfers				0	0					
Obstetric/Gynecology	10	10	9	427	1,000	0	2.3	2.7	27.4	27.4
Maternity				427	1,000					
Clean Gynecology				0	0					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	34	34	28	467	5,971	0	12.8	16.4	48.1	48.1
Swing Beds	<u> </u>	<u> </u>	0	0	0		0.0	0.0		
	40	40		-						50.4
Acute Mental Illness	12	12	11	182	2,325	0	12.8	6.4	53.1	53.1
Rehabilitation	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long-Term Acute Care		0	0	0	0	0	0.0	0.0	0.0	0.0
Dedcated Observation	0					0				
Facility Utilization	173			3,107	18,997	0	6.1	52.0	30.1	
			(Includes ICU L			<u></u>				
			<u>Inpatien</u>	ts and Outp	oatients Se	erved by Payor	Source			
	Medicare	Medicaid	Other Public	Private In:	surance	Private Pay		Cha	arity Care	Totals
luuatianta	57.0%	14.7%	0.8%		27.4%	0.0%			0.0%	
Inpatients	1772	458	26		851	0			0	3,107
	32.4%	24.4%	1.2%		36.9%	5.1%			0.0%	
Outpatients	20240	15245	755		23046	3173			7	62,466
Financial Year Reporte	d: 1/1/2014	to 12/31/20	14 Inpatier	t and Outp	atient Net	Revenue by P	avor Soul	ce		Total Charity
1 inunciai Tear Reporte				-		•	-		Charity	Care Expense
Inpatient	Medicare	Medicaid	Other Public	Private In		Private Pay		Totals	Care Expense	33,540
Revenue (\$)	29.3%	27.6%	2.4%		40.7%	0.0%		00.0%	•	Total Charity
	11,046,373	10,419,290	901,638	15,	322,687	0	37,6	89,988	0	Care as % of
Outpatient	19.2%	-0.7%	2.8%		75.2%	3.4%	1	00.0%		Net Revenue
Revenue (\$)	6,869,357	-235,439	1,015,792	26,9	16,280	1,215,790	35,78	31,780	33,540	0.0%
		•	•	•	•		•		· · · · · · · · · · · · · · · · · · ·	
	irthing Data			Newl	oorn Nurse	ery Utilization			_	<u>splantation</u>
Number of Total Births			426		Level I	Level II	Lev	/el II+	Kidney:	0
Number of Live Births	:	•	422 Beds		C) 0)	0	Heart:	0
Birthing Rooms:			0 Patient	Days	802	2 36	i	8	Lung:	0
Labor Rooms:			0 Total N	ewborn Patie	ent Days			846	Heart/Lung:	0
Delivery Rooms:	D		0		•	Studios			Pancreas:	0
Labor-Delivery-Recov	•	Danie	0	_	aboratory	<u>Studies</u>	-	2 205	Liver:	0
Labor-Delivery-Recov	ery-Postpartum	Rooms:	•	nt Studies				3,225	Total:	0
C-Section Rooms: CSections Performed:	-		•	ent Studies Performed	Under Con	stract		7,711 7,339		
Coections Performed:			0 Studies	renoimed	Unider Con	แเสบเ	2	7,338		

lospital Profile -	CY 2014	. G	alesbur	g Cottag	ge Hospita	l		Gales	burg		Page
				<u>Surge</u>	ry and Opera	iting Room U	<u>tilization</u>				
Surgical Specialty		Operating	Rooms		<u>Surgica</u>	al Cases	<u>Surgical Hours</u>			Hours p	er Case
	Inpatient	Outpatient 0	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatien
Cardiovascular	0	0	0	0	50	59	68.37	66.18	134.55	1.4	1.1
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	5	5	138	679	205.2	520.35	725.55	1.5	0.8
Gastroenterology	0	0	0	0	95	718	68.45	534.65	603.1	0.7	0.7
Neurology	0	0	0	0	0	49	0	0.81	0.81	0.0	0.0
OB/Gynecology	0	0	0	0	104	160	139.45	146.9	286.35	1.3	0.9
Oral/Maxillofacial	0	0	0	0	1	2	1.5	4	5.5	1.5	2.0
Ophthalmology	0	0	0	0	0	412	0	309	309	0.0	0.8
Orthopedic	0	0	0	0	222	327	460.53	271.88	732.41	2.1	0.8
Otolaryngology	0	0	0	0	2	247	1.75	347.22	348.97	0.9	1.4
Plastic Surgery	0	0	0	0	0	13	0	11.25	11.25	0.0	0.9
Podiatry	0	0	0	0	0	8	0	9.43	9.43	0.0	1.2
Thoracic	0	0	0	0	6	0	10.17	0	10.17	1.7	0.0
Urology	0	0	1	1	23	183	21.98	181.65	203.63	1.0	1.0
Totals	0	0	6	6	641	2857	977.4	2403.32	3380.72	1.5	0.8
SURGICAL RECOV	/ERY STAT	TIONS	Stag	e 1 Recov	ery Stations	6	Sta	age 2 Recove	ery Stations	10	

		<u></u>	Dedicated a	nd Non	-Dedicated	Procedure R	oom Utilza	<u>tion</u>			
		Procedure	Rooms		<u>Surgic</u>	al Cases	5	Surgical Hou	<u>rs</u>	<u>Hours</u>	per Case
Procedure Type	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	2	2	95	718	68	534	603	0.7	0.7
Laser Eye Procedures	0	0	1	1	0	410	0	307	307	0.0	0.7
Pain Management	0	1	0	1	0	599	0	5	5	0.0	0.0
Cystoscopy	0	0	1	1	23	183	22	182	204	1.0	1.0
			<u>M</u> 1	ıltipurp	ose Non-De	edicated Roo	ms_				
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0

	Cardiac Catheterization Labs	
Yes Level 2 Adult and Ped	Total Cath Labs (Dedicated+Nondedicated labs): Cath Labs used for Angiography procedures Dedicated Diagnostic Catheterization Lab	0 0 0
1 37 6	Dedicated Interventional Catheterization Labs Dedicated EP Catheterization Labs	0 0
Comprehensive	Cardiac Catheterization Utilization	
17,476 2,261 17,513	Total Cardiac Cath Procedures: Diagnostic Catheterizations (0-14) Diagnostic Catheterizations (15+) Interventional Catheterizations (0-14): Interventional Catheterization (15+) EP Catheterizations (15+) Cardiac Surgery Data	0 0 0 0 0
	Total Cardiac Surgery Cases: Pediatric (0 - 14 Years):	0 0
62,459 62,459 0	Adult (15 Years and Older): Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	0
	Level 2 Adult and Ped 1 37 6 Comprehensive 12 17,476 2,261 17,513	Adult and Ped Adult and Ped Dedicated Diagnostic Catheterization Lab Dedicated Interventional Catheterization Labs Dedicated EP Catheterization Labs Dedicated EP Catheterization Utilization Cardiac Catheterization Utilization Total Cardiac Cath Procedures: Diagnostic Catheterizations (0-14) Diagnostic Catheterizations (0-14) Diagnostic Catheterizations (15+) Interventional Catheterizations (0-14): Interventional Catheterizations (15+) EP Catheterizations (15+) EP Catheterizations (15+) Cardiac Surgery Data Total Cardiac Surgery Cases: Pediatric (0 - 14 Years): Adult (15 Years and Older): Coronary Artery Bypass Grafts (CABGs)

Diagnostic/Interventional Equipment			Exa	<u>aminatio</u>	<u>ns</u>	Therapeutic Equipment			Therapies/
	Owned Co	ontract	Inpatient	Outpt	Contract		Owned	Contract	<u>Treatments</u>
General Radiography/Fluoroscopy	5	0	4,480	12,077	0	Lithotripsy	() 1	35
Nuclear Medicine	1	0	79	525	0	Linear Accelerator	(0	0
Mammography	1	0	1	2,575	0	Image Guided Rad Thera	ару		0
Ultrasound	2	0	207	1,917	0	Intensity Modulated Rad	Thrp		0
Angiography	1	0				High Dose Brachytherapy	(0	0
Diagnostic Angiography			7	14	0	Proton Beam Therapy	(0	0
Interventional Angiography			29	55	0	Gamma Knife	(0	0
Positron Emission Tomography (PET)	0	1	0	0	56	Cyber knife	(0	0
Computerized Axial Tomography (CAT)	1	0	864	3,511	0				
Magnetic Resonance Imaging	1	0	55	1,142	0				

ADMINISTRATOR NAME: Barbara Martin White 55.5% Hispatch ADMINSTRATOR PHONE 847-360-3000 Black 25.6% Not HOWNERSHIP: Community Health Systems American Indian 0.1% Unknown OPERATOR: Community Health Systems Asian 1.1% —— MANAGEMENT: For Profit Corporation Hawaiian/ Pacific 0.5% ID CERTIFICATION: None Unknown 17.3% HIF FACILITY DESIGNATION: General Hospital HSADDRESS 1324 North Sheridan Road CITY: Waukegan COUNTY: Lake County Facility Utilization Data by Category of Service Authorized Peak Beds Average Average	DPH Number: 5 PA A SA 8 CON Staffe Occupancy Occup Rate % Rat	17.5° 69.7° 12.8° 5397 A-09
ADMINSTRATOR PHONE 847-360-3000 Black American Indian 0.1% Unknown 0.1% 0.1% Unknown 0.1% Unknown 0.1% 0.1% Unknown 0.1% 0.1% Unknown 0.1% 0.1% Unknown 0.1%	Hispanic or Latino: Hispan	69.7' 12.8' 5397 A-09 8 ed Bed ipancy ite %
Community Health Systems	DPH Number: 5 PA A SA 8 CON Staffe Occupancy Rate % Rat 66.4	12.8° 5397 A-09 8 ed Bed ipancy tite %
Community Health Systems	DPH Number: 5 PA A SA 8 CON Staffe Occupancy Rate % Rat 66.4	5397 A-09 B ed Bed ipancy ite %
MANAGEMENT: For Profit Corporation None Unknown 17.3% He	PA A 8 SA 8 CON Staffe Occupancy Rate % Rat 66.4	A-09 B ed Bed upancy tte %
CERTIFICATION: General Hospital 1324 North Sheridan Road CITY: Waukegan COUNTY: Lake County Hispan County County Lake County County County Lake County County County Lake County County County County Lake County County	PA A 8 SA 8 CON Staffe Occupancy Rate % Rat 66.4	A-09 B ed Bed upancy tte %
Clinical Service Authorized CON Beds Peak Beds Setup and 12/31/2014 130 121 8,569 34,825 1,760 4.3 100.2 15.44 Years 45-64 Years + 75 Years + 75 Years + 10 Direct Admission Transfers 23 23 23 23 1,379 5,847 0 4.2 16.0 Transfers 2925 4,310 Transfers 2926 4,310 Transfers 2926 4,310 Transfers 292 27 17 1,339 3,025 50 2.3 8.4 Maternity Clean Gynecology 29 27 17 1,339 3,025 50 2.3 8.4 Clean Gynecology 29 27 17 1,339 3,025 50 2.3 8.4 Clean Gynecology 29 27 27 27 27 27 27 27	CON Staffe Occupancy Rate % 66.4	ed Bed Ipancy Ite %
County C	CON Staffe Occupancy Occup Rate % Rat 66.4	ed Bed ipancy ite %
Clinical Service Authorized CON Beds Setup and 12/31/2014 151 130 121 8,569 34,825 1,760 4.3 100.2 O-14 Years O-15 Years	Occupancy Occupancy Rate % Rate 166.4	ipancy ite %
Clinical Service Consus Staffed Census Admissions Census	Occupancy Occupancy Rate % Rate 166.4	ipancy ite %
Clinical Service CON Beds 12/31/2014 Setup and Staffed Census Peak Census Admissions Inpatient Days Observation Days Length of Stay Daily Census Consus <	Occupancy Occupancy Rate % Rate 166.4	ipancy ite %
Medical/Surgical 151 130 121 8,569 34,825 1,760 4.3 100.2 0-14 Years 15-44 Years 45-64 Years 65-74 Years 75 Years + 2,104 1,375 7,007 6,328 75 Years + 3,319 14,113 6,328 75 Years + 14,113 7,377 1,256 7,377 0 0 2.9 3.4 Pediatric 25 10 10 436 1,256 1,256 0 2.9 3.4 Intensive Care Direct Admission Transfers 23 23 23 1,379 925 4,310 1,537 5,847 1,537 0 4.2 16.0 Obstetric/Gynecology Maternity Clean Gynecology 29 27 17 1,339 1,339 3,025 3,025 50 2.3 8.4 Clean Gynecology Clean Gynecology 0 <t< td=""><td>13.8</td><td></td></t<>	13.8	
0-14 Years 0 0 15-44 Years 2,104 7,007 45-64 Years 3,319 14,113 65-74 Years 1,375 6,328 75 Years + 1,771 7,377 Pediatric 25 10 10 436 1,256 0 2.9 3.4 Intensive Care 23 23 23 1,379 5,847 0 4.2 16.0 Direct Admission 925 4,310 7,537 7	13.8	
15-44 Years 2,104 7,007 45-64 Years 3,319 14,113 65-74 Years 1,375 6,328 75 Years +		
45-64 Years 3,319 14,113 65-74 Years 1,375 6,328 75 Years + 1,771 7,377 ediatric 25 10 10 436 1,256 0 2.9 3.4 intensive Care 23 23 23 13,79 5,847 0 4.2 16.0 Direct Admission 925 4,310 4.310 4.2 16.0 Transfers 454 1,537 4.54 1,537 Institution of the color of the co		
65-74 Years 1,375 6,328 75 Years + 1,771 7,377 ediatric 25 10 10 436 1,256 0 2.9 3.4 etensive Care 23 23 23 1,379 5,847 0 4.2 16.0 Direct Admission Transfers 925 4,310 4.310 4.4 1,537 bstetric/Gynecology Maternity Clean Gynecology 29 27 17 1,339 3,025 50 2.3 8.4 Maternity Clean Gynecology 0 0 0 0 0 0 0 0 0.0 0		
75 Years + 1,771 7,377 ediatric 25 10 10 436 1,256 0 2.9 3.4 Itensive Care 23 23 23 23 1,379 5,847 0 4.2 16.0 Direct Admission 925 4,310 454 1,537 454 1,537 50 2.3 8.4 bstetric/Gynecology 29 27 17 1,339 3,025 50 2.3 8.4 Maternity 1,339 3,025 50 2.3 8.4 Clean Gynecology 0 0 0 0 0 0 0 eonatal 0 0 0 0 0 0 0 0 0 ong Term Care 0 0 0 0 0 0 0 0 0 wing Beds 0 0 0 0 0 0 0 0 0 cute Mental Illness 0 0 0 0 0 0 0		
ediatric 25 10 10 436 1,256 0 2.9 3.4 Itensive Care 23 23 23 23 1,379 5,847 0 4.2 16.0 Direct Admission Transfers 925 4,310 4,310 454 1,537 454 1,537 50 2.3 8.4 bstetric/Gynecology 29 27 17 1,339 3,025 50 2.3 8.4 Maternity Clean Gynecology 0 0 0 0 0 0 0 0.0 0.0 eonatal 0 0 0 0 0 0 0 0.0 0.0 ong Term Care 0 0 0 0 0 0 0 0 0 wing Beds 0 0 0 0 0 0 0 0 cute Mental Illness 0 0 0 0 0 0 0 0		
Direct Admission Transfers 925 4,310 454 1,537 bstetric/Gynecology Maternity Clean Gynecology 29 27 17 1,339 3,025 1,339 3,025 2,23 8,4 8,4 8,339 3,025 2,3 8,4 8,339 3,025 2,3 8,4 8,339 3,025 2,3 8,4 8,339 3,025 2,3 8,4 8,339 3,025 2,3 8,4 8,339 3,025 2,3 8,4 8,339 3,025 2,3 8,4 8,339 3,025 2,3 8,4 8,339 3,025 2,3 8,4 8,339 3,025 2,3 8,4 8,339 3,025 2,3 8,4 8,339 3,025 2,3 8,4 8,339 3,025 2,3 8,4 8,339 3,025 2,3 8,4 8,339 3,025 2,3 8,4 8,339 3,025 2,3 8,4 8,339 3,025 2,3 8,4 8,39 3,025 2,3 8,29 3,025 2,3 8,29 3,025 2,3 8,29 3,025 2,3 8,29 3,025 2,3 8,29 3,025 2,3 8,29 3,025 2,3 8,29 3,025 2,3 8,29 3,025 2,3 8,29 3,025 2,3 8,29 3,025 2,3 8,29 3,025 2,3 8,29 3,025 2,3 8,29 3,025 2,3 8,29 3,025 2,3 8,29 3,29 3,025 2,3 8,29 3,29 3,29 2,29 3,29 2,29 3,29 2,29 2	69.6	34.4
Direct Admission Transfers 925 4,310 454 1,537 bstetric/Gynecology Maternity Clean Gynecology 29 27 17 1,339 3,025 1,339 3,025 2,23 8,4 8,4 8,339 3,025 2,3 8,4 8,339 3,025 2,3 8,4 8,339 3,025 2,3 8,4 8,339 3,025 2,3 8,4 8,339 3,025 2,3 8,4 8,339 3,025 2,3 8,4 8,339 3,025 2,3 8,4 8,339 3,025 2,3 8,4 8,339 3,025 2,3 8,4 8,339 3,025 2,3 8,4 8,339 3,025 2,3 8,4 8,339 3,025 2,3 8,4 8,339 3,025 2,3 8,4 8,339 3,025 2,3 8,4 8,339 3,025 2,3 8,4 8,339 3,025 2,3 8,4 8,339 3,025 2,3 8,4 8,39 3,025 2,3 8,29 3,025 2,3 8,29 3,025 2,3 8,29 3,025 2,3 8,29 3,025 2,3 8,29 3,025 2,3 8,29 3,025 2,3 8,29 3,025 2,3 8,29 3,025 2,3 8,29 3,025 2,3 8,29 3,025 2,3 8,29 3,025 2,3 8,29 3,025 2,3 8,29 3,025 2,3 8,29 3,025 2,3 8,29 3,29 3,025 2,3 8,29 3,29 3,29 2,29 3,29 2,29 3,29 2,29 2		69.6
Transfers 29 27 17 1,339 3,025 50 2.3 8.4 Maternity		
Destetric/Gynecology		
Maternity 1,339 3,025 Clean Gynecology 0 0 0 0 leonatal 0 0 0 0 0 0 0.0 0.0 cong Term Care 0 0 0 0 0 0 0.0 0.0 wing Beds 0 0 0 0 0 0 0.0 0.0 ccute Mental Illness 0 0 0 0 0 0 0.0 0.0	29.1	31.2
Clean Gynecology 0 0 eonatal 0 0 0 0 0 0.0 0.0 ong Term Care 0 0 0 0 0 0 0.0 0.0 wing Beds 0 0 0 0 0 0.0 0.0 cute Mental Illness 0 0 0 0 0 0.0 0.0	29.1	31.2
leonatal 0		
ong Term Care 0 0 0 0 0 0.0 0.0 wing Beds 0 0 0 0 0.0 0.0 cute Mental Illness 0 0 0 0 0 0 0.0		
swing Beds 0 0 0 0.0 0.0 cute Mental Illness 0 0 0 0 0 0 0.0 0.0	0.0	0.0
Acute Mental Illness 0 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	0.0
	0.0	0.0
Long-Term Acute Care 0 0 0 0 0 0.0 0.0	0.0	0.0
Dedcated Observation 0 0		
Facility Utilization 228 11,269 44,953 1,810 4.1 128.1	56.2	
(Includes ICU Direct Admissions Only)		
Inpatients and Outpatients Served by Payor Source Medicare Medicaid Other Public Private Insurance Private Pay Charity	Carra Tad	4-1-
,	<u> </u>	tals
37.3% 32.7% 1.6% 22.9% 4.4% Inpatients	1.0%	
4205 3690 185 2577 498		11,269
25.3% 37.0% 1.2% 30.4% 5.8% Outpatients	0.3%	00 444
33554 48976 1547 40301 7663		32,441
	narity Total Cl	•
_	Care 2 127	•
Inpatient 29.4% 28.6% 1.3% 27.6% 13.1% 100.0% ^{EX} / Revenue (\$)	pense 2,121	
39,451,212 38,446,587 1,735,665 37,025,294 17,586,045 134,244,803 1,7	757,793	•
Outpatient 20.2% 9.8% 2.0% 41.0% 26.9% 100.0%	Net Re	
2	369,652 1.1	
	·	
	Organ Transplanta	
201011 2010111	Kidney:	0
District Decree	Heart:	0
	Lung:	0
Lotal Newborn Patient Days 2.845	Heart/Lung:	0
	Pancreas:	0
Labor Delivery December December December 45 Lengthert Obelles	1 Section	0
	Liver:	
C-Section Rooms: 2 Outpatient Studies 234,169 CSections Performed: 385 Studies Performed Under Contract 0	Liver: Total:	0

0

385

Hospital Profile -	CY 2014	,	√ista Med	lical Cer	nter East			Wauk	egan	Page	
				Surge	ry and Opera	ating Room U	tilization_				
Surgical Specialty		Operating	Rooms		Surgica	al Cases	<u>s</u>	Surgical Hou	<u>rs</u>	Hours p	oer Case
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	1	1	89	2	402	2	404	4.5	1.0
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	8	8	2120	1300	2554	1046	3600	1.2	8.0
Gastroenterology	0	0	2	2	691	1277	371	632	1003	0.5	0.5
Neurology	0	0	0	0	1	1	3	1	4	3.0	1.0
OB/Gynecology	0	0	0	0	281	492	478	490	968	1.7	1.0
Oral/Maxillofacial	0	0	0	0	0	1	0	2	2	0.0	2.0
Ophthalmology	0	0	0	0	0	73	0	68	68	0.0	0.9
Orthopedic	0	0	0	0	135	393	297	533	830	2.2	1.4
Otolaryngology	0	0	0	0	18	190	38	196	234	2.1	1.0
Plastic Surgery	0	0	0	0	0	19	0	31	31	0.0	1.6
Podiatry	0	0	0	0	2	38	13	49	62	6.5	1.3
Thoracic	0	0	0	0	0	0	0	0	0	0.0	0.0
Urology	0	0	0	0	25	142	64	118	182	2.6	0.8
Totals	0	0	11	11	3362	3928	4220	3168	7388	1.3	0.8
SURGICAL RECO	VERY STAT	TIONS	Stag	e 1 Recov	ery Stations	15	Sta	age 2 Recove	ery Stations	12	

	<u>Dedicated and Non-Dedicated Procedure Room Utilzation</u>										
	Procedure Rooms				Surgica	al Cases	Surgical Hours			Hours per Case	
Procedure Type	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	0	0	0	0	0	0	0	0.0	0.0
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	1	1	22	219	30	250	280	1.4	1.1
Cystoscopy	0	0	0	0	0	0	0	0	0	0.0	0.0
			<u>Mu</u>	ıltipurp	ose Non-De	dicated Roo	<u>ms</u>				
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care		Cardiac Catheterization Labs	
Certified Trauma Center Level of Trauma Service Level	Yes 1 Level 2 Adult	Total Cath Labs (Dedicated+Nondedicated labs): Cath Labs used for Angiography procedures	3 1
Operating Rooms Dedicated for Trauma Care Number of Trauma Visits: Patients Admitted from Trauma	1 0 0	Dedicated Diagnostic Catheterization Lab Dedicated Interventional Catheterization Labs Dedicated EP Catheterization Labs	1 1 1
Emergency Service Type:	Comprehensive	Cardiac Catheterization Utilization	
Number of Emergency Room Stations Persons Treated by Emergency Services: Patients Admitted from Emergency: Total ED Visits (Emergency+Trauma): Free-Standing Emergency Centre	31 44,436 8,202 44,436	Total Cardiac Cath Procedures: Diagnostic Catheterizations (0-14) Diagnostic Catheterizations (15+) Interventional Catheterizations (0-14):	1,132 0 825 0
Beds in Free-Standing Centers Patient Visits in Free-Standing Centers Hospital Admissions from Free-Standing Center	7 12,120 37	Interventional Catheterization (15+) EP Catheterizations (15+) <u>Cardiac Surgery Data</u> Total Cardiac Surgery Cases:	256 51 91
Outpatient Service Data Total Outpatient Visits Outpatient Visits at the Hospital/ Campus:	132,441 73,071	Pediatric (0 - 14 Years): Adult (15 Years and Older): Coronary Artery Bypass Grafts (CABGs)	0 91
Outpatient Visits Offsite/off campus	59,370	performed of total Cardiac Cases :	0

Diagnostic/Interventional Equipment			<u>Ex</u>	aminatio	ns	Therapeutic Equipment	Therapeutic Equipment			
	Owned Co	ontract	Inpatient	Outpt	Contract		Owned	Contract	<u>Treatments</u>	
General Radiography/Fluoroscopy	19	0	15,535	41,204	0	Lithotripsy	(0	0	
Nuclear Medicine	8	0	887	840	0	Linear Accelerator	(0 0	0	
Mammography	6	0	11	9,661	0	Image Guided Rad Thera	ару		0	
Ultrasound	11	0	2,201	7,315	0	Intensity Modulated Rad	Thrp		0	
Angiography	3	0				High Dose Brachytherapy	(0	0	
Diagnostic Angiography			0	0	0	Proton Beam Therapy	(0 0	0	
Interventional Angiography			555	748	0	Gamma Knife	(0	0	
Positron Emission Tomography (PET)	0	1	0	0	196	Cyber knife	(0 0	0	
Computerized Axial Tomography (CAT)	5	0	6,012	8,439	0					
Magnetic Resonance Imaging	4	0	1,174	2,447	0					

Reference Num	nbers	Facility Id 70	003161	Number of Operating Rooms		2
Health Service		Planning Se		Procedure Rooms		0
Ionroe County		_		Exam Rooms		1
01 Hamacher S	J			Number of Recovery Stations S	Stage 1	8
Vaterloo, IL 62				Number of Recovery Stations	-	0
dministrator		Data (Complete		3	
Brad Deutch	DNI		2/2015	Time of Our analysis		
ontact Persor	•			Type of Ownership	roquirod)	
Brad Deutch		Telepi	-939-1001	Limited Liability Company (RA	required)	
	•	010	-939-1001			
Registered Age				HOSPITAL TRANSI	ER RELATIONSH	IPS
Donald Scho				HOSPITAL NAME	NUMBER	R OF PATIENTS
roperty Owne		ocration		Red Bud Regional		0
	elopment Corp	วบเสแบบ		Belleville Memoral Hospital		2
egal Owner(s)						0
Christopher Vu	lin					0
David King						0
Donald Unwin						
Gregory Randle	9			STAFFING PA	TTERNS	
Keith Wilkey Ketan Shah					FULL-TIME EQUIV	'ALENTS
Micheal Kirk				Administrator		1.00
Ricardo Rao				Physicians		0.00
Ricardo Rao Villiam Rebhol	_			Nurse Anesthetists		0.00
	Z			Director of Nurses		0.00
William Reilly				Registered Nurses		1.00
				Certified Aides		0.00
				Other Health Profs.		0.00
				Other Non-Health Profs TOTAL		2.00
				TOTAL		4.00
				DAYS AND HOUR	S OF OPERATION	
				Monday		9
				Tuesday		9
				Wednesday		9
				Thursday		9
				Friday Saturday		9 0
				Sunday		0
				- Canady		v
NIIIMI	SED OF DATI	ENTS BY AGE G	POLIB	NUMBER OF PATIENTS BY	PRIMARY PAYME	NT SOURCE
_	_			PAYMENT SOURCE MA		TOTAL
AGE	MALE	FEMALE	TOTAL	Medicaid MA		49
0-14 years	42 84	25 73	67 157		21 28 128 167	49 295
15-44 years 45-64 years	84 269	73 205	474	Other Public	22 20	295 42
65-74 years	89	95	184		372 274	646
75+ years	60	92	152	Private Pay	1 1	2
TOTAL	E 4.4	400	1.024	Charity Care	0 0	0

NET REVENUE BY PAYOR SOURCE FOR FISCAL YEAR								
Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care	Charity Expense	
19.2%	1.5%	6.4%	72.8%	0.1%	100.0%	Expense	Total Net I	Revenue
257,133	20,393	86,438	977,069	1,345	1,342,378		0	0%

Charity Care

TOTAL

TOTAL

544

490

1,034

0

1,034

0

490

0

544

OPERATING ROOM UTILIZATION FOR THE REPORTING YEAR

SURGERY AREA	TOTAL SURGERIES	SURGERY TIME (HOURS)	SURGERY PREP AND CLEAN-UP TIME (HOURS)	TOTAL SURGERY TIME (HOURS)	AVERAGE CASE TIME (HOURS)
Cardiovascular	44	28.50	22.00	50.50	1.15
Dermatology	0	0.00	0.00	0.00	0.00
Gastroenterology	330	113.25	110.00	223.25	0.68
General	37	39.25	18.50	57.75	1.56
Laser Eye	0	0.00	0.00	0.00	0.00
Neurological	0	0.00	0.00	0.00	0.00
OB/Gynecology	1	1.00	0.75	1.75	1.75
Ophthalmology	111	42.25	54.75	97.00	0.87
Oral/Maxillofacial	0	0.00	0.00	0.00	0.00
Orthopedic	96	109.50	48.00	157.50	1.64
Otolaryngology	177	117.00	88.50	205.50	1.16
Pain Management	197	54.25	33.00	87.25	0.44
Plastic	0	0.00	0.00	0.00	0.00
Podiatry	17	17.00	8.50	25.50	1.50
Thoracic	0	0.00	0.00	0.00	0.00
Urology	24	18.50	12.00	30.50	1.27
TOTAL	1034	540.50	396.00	936.50	0.91

PROCEDURE ROOM UTILIZATION FOR THE REPORTING YEAR

SURGERY AREA	PROCEDURE ROOMS	TOTAL SURGERIES	SURGERY TIME (HOURS)	PREP AND CLEAN-UP TIME (HOURS)	TOTAL SURGERY TIME (HOURS)	AVERAGE CASE TIME (HOURS)
Cardiac Catheteriza	0	0	0	0	0	0.00
Gastro-Intestinal	0	0	0	0	0	0.00
Laser Eye	0	0	0	0	0	0.00
Pain Management	0	0	0	0	0	0.00
TOTALS	0	0	0	0	0	0.00

Patients by Location of Residence

Zip Code	<u>City</u>	County	<u>Patients</u>
62298	Waterloo	Monroe	410
62236	Columbia	Monroe	127
62278	Red Bud	Randolph	82
62239	Dupo	Saint Clair	28
62286	Sparta	Randolph	28
62295	Valmeyer	Monroe	25
62242	Evansville	Randolph	24
62260	Millstadt	Saint Clair	23
62269	O'Fallon	Saint Clair	20
62244	Fults	Monroe	19
62277	Prairie Du Rocher	Randolph	16
62221	Belleville	Saint Clair	13
62223	Belleville	Saint Clair	13
62233	Chester	Randolph	13
62257	Marissa	Saint Clair	11
62258	Mascoutah	Saint Clair	11
62288	Steeleville	Randolph	10
62225	Belleville	Saint Clair	10
62206	Cahokia	Saint Clair	9
62248	Hecker	Monroe	9
62264	New Athens	Saint Clair	7
62226	Belleville	Saint Clair	7
62208	Fairview Heights	Saint Clair	6
62240	East Carondelet	Saint Clair	5
62285	Smithton	Saint Clair	5

Hospital Profile - C	V 201 <i>1</i>	Heartlar	nd Regional N	Andical C	ontor		Mario	'n		Page 1
Ownership, Mar				vieutcai C	CITICI	Patients by		'11	Patients by Et	
ADMINISTRATOR NAM	_		<u>manon</u>		۱۸/৮	nite		.7% Hi		
		•							spanic or Latino	
ADMINSTRATOR PHO					Bla				ot Hispanic or L	
OWNERSHIP:		Hospital Corpo				nerican Indian			nknown:	1.0%
OPERATOR:		Hospital Corpo	ration			ian).3% -	IDDII Noodoo	5000
MANAGEMENT:		ofit Corporation		1.1\		waiian/ Pacific).5%	IDPH Number	
CERTIFICATION:	-		e Hospital (LTAC	П)	Un	known		.1%	HPA HSA	F-06
FACILITY DESIGNATION ADDRESS		al Hospital /est Deyoung	CIT	Y: Marion		COUNTY	• \\/illiam	son Count		5
ADDICESS	3333 V	rest Deyoung	Facility Utiliza		. Cotogoni		. wiiiiaiii	SOIT COUIT	у	
	Authoriz		ls	ition Data D			Average	Average	CON	Staffed Bed
Clinical Service	CON Bed 12/31/20			Admissions	Inpatient Days	Observation Days	Length of Stay	Daily Census	Occupancy Rate %	Occupancy Rate %
Medical/Surgical	68	68	68	3,518	10,969	1,859	3.6	35.1	51.7	51.7
0-14 Years	00	00	00	647	1,216	1,000	0.0	00.1	01.7	01.7
15-44 Years				1,024	2,267					
45-64 Years				717	2,499					
65-74 Years				462	1,916					
75 Years +				668	3.071					
Pediatric	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Intensive Care	18	18	0	658	2,542	0	3.9	7.0	38.7	38.7
Direct Admission	10	10	U	416	2,542 1,607	U	3.9	7.0	30.1	30.1
Transfers				242	935					
Obstetric/Gynecology	12	12	12	945	1,918	20	2.1	5.3	44.2	44.2
Maternity				945	1,918					
Clean Gynecology				0	0					
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 Care		0	0	0	0	0	0.0	0.0	0.0	0.0
Dedcated Observation	0					0	0.0	0.0	0.0	
Facility Utilization	98	1		4,879	15,429	1,879	3.5	47.4	48.4	
•			(Includes ICU	Direct Admis	sions Only)				
			Inpatier	nts and Out	oatients Se	erved by Payo	r Source			
	Medicare	Medicaid	Other Public	Private In	surance	Private Pay		Cha	rity Care	Totals
	36.8%	32.2%	7.3%		21.8%	1.4%			0.5%	
Inpatients	1796	1570	355		1066	70			22	4,879
										.,
Outpatients	34.2% 18849	30.1% 16570	2.1% 1145		30.5% 16780	3.1% 1699			0.1% 55	55,098
F: 117 P				nt and Outn			lavar Cau			Total Charity
Financial Year Reported			•	-		Revenue by P	•		Charity	Care Expense
Innation t	Medicare	Medicaid	Other Public	Private In		Private Pay		Totals	Care Expense	250,955
Inpatient	25.0%	31.1%	12.6%		24.0%	7.4%	1	00.0%	Expense	
Revenue (\$)	13,934,915	17,360,222	7,004,140	13,	376,527	4,127,691	55,8	03,495	198,811	Total Charity Care as % of
Outpatient	13.1%	3.7%	10.1%		68.4%	4.8%	1	00.0%		Net Revenue
D (A)	8,755,111	2,471,589	6,778,649	45.8	334,026	3,192,856		32,231	52,144	0.2%
		, ,	-, -,		•			, -		
·	rthing Data			New	born Nurse	ery Utilization				<u>nsplantation</u>
Number of Total Births			881		Level I	Level II	Le	/el II+	Kidney:	0
Number of Live Births:			875 Beds		12	2	4	4	Heart:	0
Birthing Rooms:			0 Patient	Days	1,363	3 105	5	8	Lung:	0
Labor Rooms:			0 Total N	lewborn Pati	ent Days			1,476	Heart/Lung:	0
Delivery Rooms:	_		0		•	C4			Pancreas:	0
Labor-Delivery-Recove	•	_	5	_	<u>aboratory</u>	Studies			Liver:	0
Labor-Delivery-Recove	ery-Postpartum	n Rooms:	•	nt Studies				3,337	Total:	0
C-Section Rooms:				ient Studies				5,351		
CSections Performed:			288 Studies	s Performed	Under Con	tract		3.999		

6,999

288

Marion

				<u>Surge</u>	ry and Opera	ating Room U	<u>tilization</u>					
Surgical Specialty		<u>Operating</u>	Rooms		<u>Surgica</u>	al Cases	<u>s</u>	Surgical Hou	<u>rs</u>	Hours p	Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient	
Cardiovascular	0	0	1	1	3	1	5	1	6	1.7	1.0	
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0	
General	0	0	4	4	493	306	556	203	759	1.1	0.7	
Gastroenterology	0	0	0	0	0	0	0	0	0	0.0	0.0	
Neurology	0	0	0	0	0	0	0	0	0	0.0	0.0	
OB/Gynecology	0	0	0	0	454	517	618	381	999	1.4	0.7	
Oral/Maxillofacial	0	0	0	0	0	2	0	2	2	0.0	1.0	
Ophthalmology	0	0	0	0	0	14	0	5	5	0.0	0.4	
Orthopedic	0	0	0	0	479	313	921	315	1236	1.9	1.0	
Otolaryngology	0	0	0	0	2	645	1	157	158	0.5	0.2	
Plastic Surgery	0	0	0	0	0	0	0	0	0	0.0	0.0	
Podiatry	0	0	0	0	22	69	25	84	109	1.1	1.2	
Thoracic	0	0	0	0	0	0	0	0	0	0.0	0.0	
Urology	0	0	0	0	88	359	68	278	346	8.0	0.8	
Totals	0	0	5	5	1541	2226	2194	1426	3620	1.4	0.6	
SURGICAL RECOV	/ERY STAT	TIONS	Stag	e 1 Recov	ery Stations	10	Sta	age 2 Recove	ery Stations	26		

	<u>Dedicated and Non-Dedicated Procedure Room Utilzation</u>										
	Procedure Rooms			<u>Surgic</u>	al Cases	9	Surgical Hou	<u>rs</u>	Hours per Case		
Procedure Type	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	2	2	565	1223	210	361	571	0.4	0.3
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	1	1	0	807	0	312	312	0.0	0.4
Cystoscopy	0	0	0	0	0	0	0	0	0	0.0	0.0
			<u>Μι</u>	ıltipurp	ose Non-De	dicated Roo	ms_				
Minor procedures	0	0	1	1	63	18	21	5	26	0.3	0.3
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care		Cardiac Catheterization Labs	
Certified Trauma Center Level of Trauma Service Level 1 Operating Rooms Dedicated for Trauma Care Number of Trauma Visits:	No Level 2 0 0	Total Cath Labs (Dedicated+Nondedicated labs): Cath Labs used for Angiography procedures Dedicated Diagnostic Catheterization Lab Dedicated Interventional Catheterization Labs Dedicated EP Catheterization Labs	1 1 0 0
Patients Admitted from Trauma Emergency Service Type: Number of Emergency Room Stations	0 Comprehensive 12	Cardiac Catheterization Utilization	U
Persons Treated by Emergency Services: Patients Admitted from Emergency: Total ED Visits (Emergency+Trauma):	18,549 2,535 18,549	Total Cardiac Cath Procedures: Diagnostic Catheterizations (0-14) Diagnostic Catheterizations (15+)	778 0 619 0
Free-Standing Emergency Cente Beds in Free-Standing Centers Patient Visits in Free-Standing Centers Hospital Admissions from Free-Standing Center	Ţ	Interventional Catheterizations (0-14): Interventional Catheterization (15+) EP Catheterizations (15+) <u>Cardiac Surgery Data</u> Total Cardiac Surgery Cases:	159 0
Outpatient Service Data Total Outpatient Visits Outpatient Visits at the Hospital/ Campus: Outpatient Visits Offsite/off campus	55,098 55,098 0	Pediatric (0 - 14 Years): Adult (15 Years and Older): Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	0 0

Diagnostic/Interventional Equipment	<u>Examinations</u> <u>Therapeutic Equipment</u>								Therapies/
	Owned Co	ntract	Inpatient	Outpt	Contract		Owned	Contract	<u>Treatments</u>
General Radiography/Fluoroscopy	3	0	6,366	13,218	0	Lithotripsy	() 2	53
Nuclear Medicine	3	0	392	981	0	Linear Accelerator	(0	0
Mammography	1	0	0	1,992	0	Image Guided Rad Thera	ру		0
Ultrasound	2	0	1,120	2,723	0	Intensity Modulated Rad Thrp		0	
Angiography	2	0				High Dose Brachytherapy	(0	0
Diagnostic Angiography			2	8	0	Proton Beam Therapy	(0	0
Interventional Angiography			0	0	0	Gamma Knife	(0	0
Positron Emission Tomography (PET)	0	0	0	0	0	Cyber knife	(0	0
Computerized Axial Tomography (CAT)	2	0	2,321	5,785	0				
Magnetic Resonance Imaging	1	0	295	1,296	0				

Source: 2014 Annual Hospital Questionnaire, Illinois Department of Publicagaith Guestit Gystems Development.

Hospital Profile - CY	2014	Vista Med	dical Center	West			Wauk	egan		Page 1
Ownership, Mana	agement and (General Inform	nation_			Patients by	Race		Patients by E	thnicity
ADMINISTRATOR NAME	: Barbara l	Martin			Wł	nite	61	.6% H	ispanic or Latin	o: 17.3°
ADMINSTRATOR PHON	E 847-360-3	3000			Bla	ack	25	5.2% N	ot Hispanic or L	atino: 76.19
OWNERSHIP:	Commun	ity Health Syste	em		Am	nerican Indian	C).0% U	nknown:	6.79
OPERATOR:	Commun	ity Health Syste	em		As	ian	C).9% –		
MANAGEMENT:	For Profit	Corporation			Ha	waiian/ Pacific	C).1%	IDPH Number	: 5405
CERTIFICATION:	None				Un	known	12	2.2%	HPA	A-09
FACILITY DESIGNATION	,	ic Hospital							HSA	8
ADDRESS	2615 We	st Washington		Y: Waukeg		COUNTY	: Lake Co	ounty		
	A 41		Facility Utiliza	tion Data by	/ Category	of Service	•		2011	04.44.10.1
Clinical Service	Authorized CON Beds 12/31/2014	Setup and	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	0	0	0	0	0	0	0.0	0.0	0.0	0.0
0-14 Years				0	0					
15-44 Years				0	0					
45-64 Years				0	0					
65-74 Years				0	0					
75 Years +				0	0					
Pediatric	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Intensive Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Direct Admission				0	0					
Transfers				0	0					
Obstetric/Gynecology	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Maternity				0	0					
Clean Gynecology				0	0					
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	46	42	37	1,463	9,870	0	6.7	27.0	58.8	64.4
Rehabilitation	25	25	13	241	3,069	0	12.7	8.4	33.6	33.6
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedcated Observation	0					0	0.0	0.0	0.0	0.0
Facility Utilization	71			1,704	12,939	0	7.6	35.4	49.9	
			(Includes ICU	Direct Admis	sions Only)				
			<u>Inpatier</u>	ts and Outp	oatients Se	erved by Payo	r Source			
	Medicare	Medicaid	Other Public	Private In	surance	Private Pay		Cha	arity Care	Totals
In a classic	43.4%	31.1%	1.5%		19.7%	3.1%			1.2%	
Inpatients	739	530	26		336	52			21	1,704
	7.8%	57.1%	1.1%		15.3%	17.4%			1.3%	
Outpatients	955	6950	133		1857	2118			159	12,172
Financial Year Reported:	1/1/2014 t	o 12/31/201	4 <u>Inpatie</u>	nt and Outp	atient Net	Revenue by P	ayor Soul	<u>ce</u>	Charity	Total Charity
	Medicare	Medicaid	Other Public	Private In	surance	Private Pay		Totals	Care	Care Expense
Inpatient	29.0%	41.3%	1.0%	i iii die	19.5%	9.2%		00.0%	Expense	134,748
Revenue (\$)				0					20.504	Total Charity
	4,688,375	6,682,209	164,949	3,	147,871	1,493,380	16,1	76,784	32,561	Care as % of
Outpatient	9.1%	-2.3%	1.3%		25.3%	66.6%	1	00.0%		Net Revenue
Revenue (\$)	688,604	-172,978	95,899	1,9	919,937	5,045,332	7,57	76,794	102,187	0.6%
<u>Birt</u>	hing Data			Newl	orn Nurs	ery Utilization			Organ Trai	nsplantation
Number of Total Births:			0		Level I	Level II	I ev	/el II+	Kidney:	0
Number of Live Births:			0 Beds		207011			0	Heart:	0
Birthing Rooms:			0 Patient	Davs	(0	Lung:	0
Labor Rooms:			Λ	lewborn Pati			,	0	Heart/Lung:	0
Delivery Rooms:			0	icwooiii Falli	un Days			U	Pancreas:	0
Labor-Delivery-Recover	y Rooms:		0	<u>L</u>	<u>aboratory</u>	<u>Studies</u>			Liver:	0
Labor-Delivery-Recovery	y-Postpartum F	Rooms:	•	nt Studies				9,438	Total:	0
C-Section Rooms:			•	ient Studies			3	7,456		J
CSections Performed:			0 Studies	s Performed	Under Con	tract		0		

Hospital Profile -	CY 2014	. \	√ista Med	lical Cer	nter West			Wauk	egan		Page 2	
				Surge	ry and Opera	ating Room U	<u>tilization</u>					
Surgical Specialty		Operating	Rooms		Surgica	al Cases	I Cases Surgical Hou			rs Hours per Ca		
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient	
Cardiovascular	0	0	0	0	0	0	0	0	0	0.0	0.0	
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0	
General	0	0	0	0	0	0	0	0	0	0.0	0.0	
Gastroenterology	0	0	0	0	0	0	0	0	0	0.0	0.0	
Neurology	0	0	0	0	0	0	0	0	0	0.0	0.0	
OB/Gynecology	0	0	0	0	0	0	0	0	0	0.0	0.0	
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0	
Ophthalmology	0	0	0	0	0	0	0	0	0	0.0	0.0	
Orthopedic	0	0	0	0	0	0	0	0	0	0.0	0.0	
Otolaryngology	0	0	0	0	0	0	0	0	0	0.0	0.0	
Plastic Surgery	0	0	0	0	0	0	0	0	0	0.0	0.0	
Podiatry	0	0	0	0	0	0	0	0	0	0.0	0.0	
Thoracic	0	0	0	0	0	0	0	0	0	0.0	0.0	
Urology	0	0	0	0	0	0	0	0	0	0.0	0.0	
Totals	0	0	0	0	0	0	0	0	0	0.0	0.0	
SURGICAL RECOVERY STATIONS Stage 1 Recovery Stations				0	Sta	age 2 Recov	ery Stations	0				

		<u>D</u>	Dedicated a	nd Non	-Dedicated	Procedure R	oom Utilza	<u>tion</u>			
		Procedure	Rooms		<u>Surgic</u>	al Cases	9	Surgical Hou	<u>rs</u>	<u>Hours</u>	per Case
Procedure Type	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	0	0	0	0	0	0	0	0.0	0.0
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	0	0	0	0	0	0	0	0.0	0.0
Cystoscopy	0	0	0	0	0	0	0	0	0	0.0	0.0
			<u>Mu</u>	ıltipurp	ose Non-De	dicated Roo	ms_				
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care		Cardiac Catheterization Labs	
Certified Trauma Center Level of Trauma Service Level 1	No Level 2	Total Cath Labs (Dedicated+Nondedicated labs): Cath Labs used for Angiography procedures	0 0
Operating Rooms Dedicated for Trauma Care Number of Trauma Visits: Patients Admitted from Trauma	0 0 0	Dedicated Diagnostic Catheterization Lab Dedicated Interventional Catheterization Labs Dedicated EP Catheterization Labs	0 0 0
Emergency Service Type:	Comprehensive	Cardiac Catheterization Utilization	
Number of Emergency Room Stations Persons Treated by Emergency Services: Patients Admitted from Emergency: Total ED Visits (Emergency+Trauma):	11,644 680 11,644	Total Cardiac Cath Procedures: Diagnostic Catheterizations (0-14) Diagnostic Catheterizations (15+) Interventional Catheterizations (0-14):	0 0 0
Free-Standing Emergency Center Beds in Free-Standing Centers Patient Visits in Free-Standing Centers Hospital Admissions from Free-Standing Center		Interventional Catheterization (15+) EP Catheterizations (15+) <u>Cardiac Surgery Data</u> Total Cardiac Surgery Cases:	0 0
Outpatient Service Data Total Outpatient Visits Outpatient Visits at the Hospital/ Campus: Outpatient Visits Offsite/off campus	12,172 12,172 0	Pediatric (0 - 14 Years): Adult (15 Years and Older): Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	0 0

Diagnostic/Interventional Equipment	<u>Examinations</u> <u>Therapeutic Equipment</u>								Therapies/
	Owned Co	ontract	Inpatient	Outpt	Contract		Owned	Contract	<u>Treatments</u>
General Radiography/Fluoroscopy	2	0	166	2,640	0	Lithotripsy	(0	0
Nuclear Medicine	0	0	0	0	0	Linear Accelerator	(0	0
Mammography	0	0	0	0	0	Image Guided Rad Thera	ару		0
Ultrasound	1	0	11	336	0	Intensity Modulated Rad Thrp		0	
Angiography	0	0				High Dose Brachytherapy	(0	0
Diagnostic Angiography			0	0	0	Proton Beam Therapy	(0	0
Interventional Angiography			0	0	0	Gamma Knife	(0	0
Positron Emission Tomography (PET)	0	0	0	0	0	Cyber knife	(0	0
Computerized Axial Tomography (CAT)	1	0	50	1,321	0				
Magnetic Resonance Imaging	0	0	0	0	0				

eference Number	s	,	002504	Number of Operating Rooms	2
Health Service Area		Planning Se	ervice Area 119	Procedure Rooms	1
dwardsville Ambula	-	gery Center, LLC		Exam Rooms	0
2 Ginger Creek Par	•			Number of Recovery Stations Stage 1	4
Glen Carbon, IL 620	J34			Number of Recovery Stations Stage 2	4
Administrator Ed Cunningham			Complete 0/2015	Type of Ownership	
Contact Person Michelle Looney		Telep 618	hone 3-656-8200	Limited Liability Company (RA required)	
Registered Agent				HOSPITAL TRANSFER RELA	ATIONSHIPS
Illinois Corporation	on Servic	e C			NUMBER OF PATIENTS
Property Owner				Gateway Regional Medical Center	2
NA				, 5	0
.egal Owner(s)					0
Alan Gitersonke, DI	PM				0
Craig Beyer, MD					U
Granite City Illinois					
Gregory Randle, MI	כ			STAFFING PATTERNS	
James Sola, MD					IE EQUIVALENTS
Michael Jones, MD	`			Administrator	1.00
Peter Anderson, MI				Physicians	0.00
R. Craig Mckee, MD Ronald Gould, MD	J			Nurse Anesthetists	0.00
Ronald Gould, IVID				Director of Nurses	1.00
				Registered Nurses	7.10
				Certified Aides	0.00
				Other Health Profs. Other Non-Health Profs	1.00 3.60
				TOTAL	13.70
				DAYS AND HOURS OF OPE Monday	ERATION 10
				Tuesday	10
				Wednesday	10
				Thursday	10
				Friday	10
				Saturday Sunday	0
				Curacy	Ç
NUMBER	OF PAT	IENTS BY AGE G	ROUP	NUMBER OF PATIENTS BY PRIMARY	
	MALE	FEMALE	TOTAL		EMALE TOTAL
0-14 years	7	12	19	Medicaid 73	130 203
15-44 years 45-64 years	145 398	237 504	382 902	Medicare 246 Other Public 45	465 711 47 92
45-64 years 65-74 years	398 170	504 299	902 469	Insurance 489	694 1,183
75+ years	139	308	447	Private Pay 6	24 30
TOTAL	859	1,360	2,219	Charity Care 0	0 0
		•	·	TOTAL 859	1,360 2,219
		NI	ET REVENUE BY PAY	OR SOURCE FOR FISCAL YEAR	
Medicare	Me	edicaid Othe	r Public Private Ins	urance Private Pay TOTALS	narity Charity Care Care Expense as % of the Revenue Care Charity Care

55.9%

5,830,910

0.4%

46,031

100.0%

10,424,137

4.7%

486,201

30.8%

3,214,287

8.1%

846,708

Total Net Revenue

0%

Expense

0

OPERATING ROOM UTILIZATION FOR THE REPORTING YEAR

			SURGERY PREP	TOTAL	AVERAGE
	TOTAL	SURGERY	AND CLEAN-UP	SURGERY	CASE TIME
SURGERY AREA	SURGERIES	TIME (HOURS)	TIME (HOURS)	TIME (HOURS)	(HOURS)
Cardiovascular	0	0.00	0.00	0.00	0.00
Dermatology	0	0.00	0.00	0.00	0.00
Gastroenterology	160	28.25	24.50	52.75	0.33
General	0	0.00	0.00	0.00	0.00
Laser Eye	0	0.00	0.00	0.00	0.00
Neurological	0	0.00	0.00	0.00	0.00
OB/Gynecology	59	10.00	17.50	27.50	0.47
Ophthalmology	537	146.50	130.00	276.50	0.51
Oral/Maxillofacial	15	6.50	3.00	9.50	0.63
Orthopedic	548	229.25	135.60	364.85	0.67
Otolaryngology	18	5.50	4.26	9.76	0.54
Pain Management	591	62.25	148.20	210.45	0.36
Plastic	237	104.25	67.50	171.75	0.72
Podiatry	54	24.50	11.80	36.30	0.67
Thoracic	0	0.00	0.00	0.00	0.00
Urology	0	0.00	0.00	0.00	0.00
TOTAL	2219	617.00	542.36	1159.36	0.52

PROCEDURE ROOM UTILIZATION FOR THE REPORTING YEAR

SURGERY AREA	PROCEDURE ROOMS	TOTAL SURGERIES	SURGERY TIME (HOURS)	PREP AND CLEAN-UP TIME (HOURS)	TOTAL SURGERY TIME (HOURS)	AVERAGE CASE TIME (HOURS)
Cardiac Catheteriza	0	0	0	0	0	0.00
Gastro-Intestinal	0	0	0	0	0	0.00
Laser Eye	1	0	0	0	0	0.00
Pain Management	0	0	0	0	0	0.00
TOTALS	1	0	0	0	0	0.00

Patients by Location of Residence

Zip Code	City	County	<u>Patients</u>
62040	Granite City		441
62025	Edwardsville		248
62234	Collinsville		226
62034	Glen Carbon		140
62294	Troy		125
62002	Alton		93
62249	Highland		83
62062	Maryville		60
62010	Bethalto		56
62095	Wood River		44
62088	Staunton		41
62024	East Alton		37
62035	Godfrey		36
62097	Worden		34
62269	O'Fallon		30
62246	Greenville		25
62052	Jerseyville		24
62012	Brighton		21
62220	Belleville		19
62060	Madison		18
62232	Caseyville		18
62033	Gillespie		17
62275	Pocahontas		15
62226	Belleville		15
62221	Belleville		13

Hospital Profile - C	Y 2014	Crossroa	ds Commur	nity Hospi	tal		Moun	t Verno	n	Page 1
Ownership, Mar	nagement and	General Inforn	<u>nation</u>			Patients by	Race		Patients by Et	thnicity
ADMINISTRATOR NAM	IE: Finny Ma	athew			W	hite	87	7.1% H	ispanic or Latino	o: 3.69
ADMINSTRATOR PHO	NE 618-241-	-8505			Bla	ack	5	5.9% N	ot Hispanic or L	atino: 92.19
OWNERSHIP:	National	Healthcare of N	Mt. Vernon, INC		Ar	nerican Indian	2	2.0% U	nknown:	4.4
OPERATOR:	National	Healthcare of N	Mt. Vernon, INC		As	sian	().3% -		
MANAGEMENT:	For Profi	it Corporation			Ha	awaiian/ Pacific	(0.0%	IDPH Number	3947
CERTIFICATION:	None				Ur	nknown	4	1.7%	HPA	F-04
FACILITY DESIGNATION		•							HSA	5
ADDRESS	8 Doctor	s Park Road		Y: Mount V			: Jefferso	on County		
	Authorize	d Peak Beds	Facility Utiliza	ition Data by	/ Category	of Service	Averege	Average	CON	Staffed Bed
Clinical Service	CON Beds 12/31/2014	Setup and		Admissions	Inpatient Days	Observation Days	Average Length of Stay	Daily Census	Occupancy Rate %	Occupancy Rate %
Medical/Surgical	40	40	21	1,110	3,540	888	4.0	12.1	30.3	30.3
0-14 Years				4	7					
15-44 Years				138	303					
45-64 Years				304	916					
65-74 Years				249	810					
75 Years +				415	1,504					
Pediatric	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Intensive Care	7	7	7	100	150	0	1.5	0.4	5.9	5.9
Direct Admission				61	99					
Transfers				39	51					
Obstetric/Gynecology	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Maternity				0	0					
Clean Gynecology				0	0					
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 Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedcated Observation	0					0				
Facility Utilization	47			1,171	3,690		3.9	12.5	26.7	
			(Includes ICU				•			
			_	-		erved by Payo	r Source	01		
	Medicare	Medicaid	Other Public	Private In		Private Pay		Chi	arity Care	Totals
Inpatients	60.9%	15.9%	0.8%		20.4%	1.8%			0.3%	4 4= 4
·	715	187	9		239	21			3	1,174
Outpatients	43.8% 18902	26.2% 11304	2.6% 1105		23.2% 10023	4.2% 1813			0.0% 9	43,156
Financial Year Reported	<i>l</i> : 1/1/2014	to 12/31/201	14 Inpatie	nt and Outp	atient Net	Revenue by P	avor Soul	rce		Total Charity
	Medicare	Medicaid	Other Public	Private In		Private Pay	_	Totals	Charity Care	Care Expense
Inpatient				Private iii		•			Expense	252,739
Revenue (\$)	35.1%	31.1%	1.3%		28.1%	4.4%		00.0%	•	Total Charity
	4,324,407	3,832,950	156,943	3,	466,268	541,839	12,3	22,407	45,729	Care as % of
Outpatient	13.8%	2.7%	10.1%		67.1%	6.4%	1	00.0%		Net Revenue
Revenue (\$)	3,995,004	783,046	2,920,041	19,4	140,918	1,842,814	28,98	31,823	207,010	0.6%
Bir	thing Data			Newl	orn Nurs	ery Utilization			Organ Trai	nsplantation
Number of Total Births			0		Level I	Level II		vel II+	Kidney:	0
Number of Live Births:			0 Beds)	0	Heart:	0
Birthing Rooms:			0 Patient	Davs)	0	Lung:	0
Labor Rooms:			Λ	lewborn Pati		•	-	0	Heart/Lung:	0
Delivery Rooms:			0		•			U	Pancreas:	0
Labor-Delivery-Recove	-		0	_	aboratory	<u>Studies</u>			Liver:	0
Labor-Delivery-Recove	ery-Postpartum	Rooms:	•	nt Studies				1,134	Total:	0
C-Section Rooms:				ient Studies			2	3,357		
CSections Performed:			0 Studies	s Performed	Under Cor	ntract		0		

	Surgery and Operating Room Utilization										
Surgical Specialty		Operating	Rooms		<u>Surgica</u>	al Cases	<u>s</u>	Surgical Hou	<u>rs</u>	Hours p	er Case
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	0	0	0	0	0	0	0	0.0	0.0
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	5	5	92	208	378	819	1197	4.1	3.9
Gastroenterology	0	0	0	0	0	0	0	0	0	0.0	0.0
Neurology	0	0	0	0	0	0	0	0	0	0.0	0.0
OB/Gynecology	0	0	0	0	13	331	62	1107	1169	4.8	3.3
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	0	0	0	162	0	399	399	0.0	2.5
Orthopedic	0	0	0	0	129	340	600	1194	1794	4.7	3.5
Otolaryngology	0	0	0	0	0	208	0	616	616	0.0	3.0
Plastic Surgery	0	0	0	0	0	0	0	0	0	0.0	0.0
Podiatry	0	0	0	0	0	1	0	4	4	0.0	4.0
Thoracic	0	0	0	0	0	0	0	0	0	0.0	0.0
Urology	0	0	0	0	30	330	95	920	1015	3.2	2.8
Totals	0	0	5	5	264	1580	1135	5059	6194	4.3	3.2
SURGICAL RECOV	VERY STAT	TIONS	Stag	e 1 Recov	ery Stations	8	Sta	age 2 Recove	ery Stations	15	

Dedicated and Non-Dedicated Procedure Room Utilzation												
		Procedure Rooms				al Cases	9	Surgical Hou	<u>rs</u>	Hours per Case		
Procedure Type	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient	
Gastrointestinal	0	0	1	1	36	740	100	1902	2002	2.8	2.6	
Laser Eye Procedures	0	0	1	1	0	137	0	130	130	0.0	0.9	
Pain Management	0	0	0	0	0	0	0	0	0	0.0	0.0	
Cystoscopy	0	0	1	1	8	259	18	670	688	2.3	2.6	
			<u>M</u> u	ultipurp	ose Non-De	edicated Roo	ms_					
	0	0	0	0	0	0	0	0	0	0.0	0.0	
	0	0	0	0	0	0	0	0	0	0.0	0.0	
	0	0	0	0	0	0	0	0	0	0.0	0.0	

Emergency/Trauma Care		Cardiac Catheterization Labs	
Certified Trauma Center Level of Trauma Service Level 1	No Level 2	Total Cath Labs (Dedicated+Nondedicated labs): Cath Labs used for Angiography procedures Dedicated Diagnostic Catheterization Lab	0 0
Operating Rooms Dedicated for Trauma Care Number of Trauma Visits: Patients Admitted from Trauma	0 0 0	Dedicated Diagnostic Catheterization Labs Dedicated Interventional Catheterization Labs Dedicated EP Catheterization Labs	0
Emergency Service Type:	Comprehensive	Cardiac Catheterization Utilization	
Number of Emergency Room Stations Persons Treated by Emergency Services: Patients Admitted from Emergency: Total ED Visits (Emergency+Trauma):	12,441 1,171 12,441	Total Cardiac Cath Procedures: Diagnostic Catheterizations (0-14) Diagnostic Catheterizations (15+)	0 0 0
Free-Standing Emergency Center	1	Interventional Catheterizations (0-14): Interventional Catheterization (15+)	0
Beds in Free-Standing Centers Patient Visits in Free-Standing Centers Hospital Admissions from Free-Standing Center		EP Catheterizations (15+) <u>Cardiac Surgery Data</u> Total Cardiac Surgery Cases:	0
Outpatient Service Data Total Outpatient Visits Outpatient Visits at the Hospital/ Campus:	42,967 34,684	Pediatric (0 - 14 Years): Adult (15 Years and Older): Coronary Artery Bypass Grafts (CABGs)	0
Outpatient Visits Offsite/off campus	8,283	performed of total Cardiac Cases :	0

Diagnostic/Interventional Equipment	gnostic/Interventional Equipment		Exa	minatio	<u>ons</u>	Therapeutic Equipment			Therapies/
	Owned Co	ontract	Inpatient	Outpt	Contract		Owned	Contract	<u>Treatments</u>
General Radiography/Fluoroscopy	6	0	1,796	8,011	0	Lithotripsy	() 1	92
Nuclear Medicine	0	1	0	0	492	Linear Accelerator	(0	0
Mammography	1	0	0	2,007	0	Image Guided Rad Thera	ару		0
Ultrasound	2	0	435	2,302	0	Intensity Modulated Rad	Thrp		0
Angiography	0	0				High Dose Brachytherapy	(0	0
Diagnostic Angiography			0	0	0	Proton Beam Therapy	(0	0
Interventional Angiography			0	0	0	Gamma Knife	(0	0
Positron Emission Tomography (PET)	0	0	0	0	0	Cyber knife	(0	0
Computerized Axial Tomography (CAT)	1	0	671	3,631	0				
Magnetic Resonance Imaging	0	1	0	0	393				

Hospital Profile - C			Regional Ho	ospital			Red E	Bud		Page 1		
Ownership, Ma	nagement and	General Inforn	nation			Patients by	Race		Patients by Et	hnicity		
ADMINISTRATOR NAM	IE: Shane V	Vatson			W	hite	99		ispanic or Latino			
ADMINSTRATOR PHO	NE 618-282	-5107			Bla	ack	().2% N	ot Hispanic or L	atino: 100.09		
OWNERSHIP:	Red Bud	d Illinois Hospita	I Company LLC		Ar	nerican Indian	().0% U	nknown:	0.0		
OPERATOR:	Red Bud	d Illinois Hospita	I Company LLC		As	sian	().1% -				
MANAGEMENT:		Liability Compar	•			awaiian/ Pacific		0.0%	IDPH Number			
CERTIFICATION:		Access Hospital			Ur	nknown	(0.0%	HPA	F-07		
FACILITY DESIGNATION		_							HSA	5		
ADDRESS	325 Spri	ng Street		Y: Red Bud		COUNTY:	: Randol _l	oh County				
	Authorize	d Peak Beds	Facility Utiliza	tion Data by	/ Category	of Service	Average	Average	CON	Staffed Bed		
Clinical Service	CON Bed 12/31/201	s Setup and	Peak Census	Admissions	Inpatient Days	Observation Days	Length of Stay	Daily Census	Occupancy Rate %	Occupancy Rate %		
Medical/Surgical	25	25	25	617	1,929	338	3.7	6.2	24.8	24.8		
0-14 Years				0	0							
15-44 Years				52	131							
45-64 Years				97	241							
65-74 Years				116	366							
75 Years +				352	1,191							
Pediatric	0	0	0	0	0	0	0.0	0.0	0.0	0.0		
Intensive Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0		
Direct Admission				0	0							
Transfers				0	0							
Obstetric/Gynecology	0	0	0	0	0	0	0.0	0.0	0.0	0.0		
Maternity				0	0							
Clean Gynecology				0	0							
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0		
ong Term Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0		
Swing Beds			12	256	3,245		12.7	8.9				
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 Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0		
Dedcated Observation	0					0						
Facility Utilization	25			873	5,174	338	6.3	15.1	60.4			
			(Includes ICU L									
			-	-		erved by Payor	r Source					
	Medicare	Medicaid	Other Public	Private In		Private Pay		Cha	arity Care	Totals		
Inpatients	68.1%	4.3%	0.5%		26.2%	0.3%			0.6%			
Impatients	441	28	3		170	2			4	648		
Outpatients	46.1% 14728	13.8% 4422	1.1% 348		36.9% 11791	2.0%			0.1%	04.040		
Ein and in I Variable Day and						641 Revenue by P	lavor Sou	.00	18	31,948 Total Charity		
Financial Year Reported				•		•	•		Charity	Care Expense		
	Medicare	Medicaid	Other Public	Private In	surance	Private Pay		Totals	Care	27,020		
Inpatient Revenue (\$)	71.1%	10.8%	1.8%		16.0%	0.3%	1	00.0%	Expense			
itevenue (ψ)	4,810,850	729,832	121,213	1,	084,011	20,576	6,7	66,482	15,575	Total Charity Care as % of		
Outpatient	25.9%	6.1%	9.3%		57.3%	1.4%	1	00.0%		Net Revenue		
Revenue (\$)	4,314,688	1,022,202	1,557,720	9,5	550,584	236,855		32,049	11,445	0.1%		
Ri	rthing Data			Newl	horn Nurs	ery Utilization			Organ Trai	nsplantation		
Number of Total Births			0	INCWI		-			_	-		
Number of Live Births:			0 0 Reds		Level I	Level II		/el II+	Kidney: Heart:	0		
Birthing Rooms:) DCu3) (0	Heart: Lung:	0		
Labor Rooms:			Λ	•) ()	0	Heart/Lung:	0		
Delivery Rooms:			0 Total N	ewborn Pati	ent Days			0	Pancreas:	0		
-	ary Roome:		0	1	aboratory	Studies			Liver:	0		
	TIVINUUIIIS.		U	=	v. utor y	J.44100			LIVEI.	U		
Labor-Delivery-Recove	•	Roome:	0 Innation	nt Studios			4	3 003				
Labor-Delivery-Recove C-Section Rooms:	•	Rooms:	•	nt Studies ent Studies				3,003 3,830	Total:	0		

Hospital Profile -	CY 2014	Re	d Bud	Regiona	al Hospital			Red E	Bud		Page 2
				Surge	ry and Opera	ting Room U	tilization_				
Surgical Specialty		Operating Ro	ooms		Surgica	al Cases	<u>s</u>	Surgical Hou	<u>rs</u>	Hours p	er Case
	Inpatient	Outpatient Co	mbined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	0	0	0	0	0	0	0	0.0	0.0
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	2	2	20	135	27	129	156	1.4	1.0
Gastroenterology	0	0	0	0	26	487	14	191	205	0.5	0.4
Neurology	0	0	0	0	0	0	0	0	0	0.0	0.0
OB/Gynecology	0	0	0	0	3	75	12	96	108	4.0	1.3
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	0	0	0	0	0	0	0	0.0	0.0
Orthopedic	0	0	0	0	1	21	2	19	21	2.0	0.9
Otolaryngology	0	0	0	0	0	23	0	11	11	0.0	0.5
Plastic Surgery	0	0	0	0	0	0	0	0	0	0.0	0.0
Podiatry	0	0	0	0	0	2	0	3	3	0.0	1.5
Thoracic	0	0	0	0	0	0	0	0	0	0.0	0.0
Urology	0	0	0	0	0	0	0	0	0	0.0	0.0
Totals	0	0	2	2	50	743	55	449	504	1.1	0.6
SURGICAL RECOVERY STATIONS Stage 1 Recovery			ery Stations	4	Sta	age 2 Recove	ery Stations	4			

<u>Dedicated and Non-Dedicated Procedure Room Utilzation</u>												
		Procedure Rooms			<u>Surgical</u>	al Cases	<u> </u>	Surgical Hou	<u>rs</u>	Hours per Case		
Procedure Type	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient	
Gastrointestinal	0	0	1	1	26	487	14	191	205	0.5	0.4	
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0	
Pain Management	0	0	0	0	0	0	0	0	0	0.0	0.0	
Cystoscopy	0	0	0	0	0	0	0	0	0	0.0	0.0	
			<u>Mu</u>	ıltipurp	ose Non-De	edicated Roo	ms_					
	0	0	0	0	0	0	0	0	0	0.0	0.0	
	0	0	0	0	0	0	0	0	0	0.0	0.0	
	0	0	0	0	0	0	0	0	0	0.0	0.0	

Emergency/Trauma	Care		Cardiac Catheterization Labs	
Certified Trauma Center Level of Trauma Service	Level 1	No Level 2	Total Cath Labs (Dedicated+Nondedicated labs): Cath Labs used for Angiography procedures	0 0
Operating Rooms Dedicated for Tra Number of Trauma Visits: Patients Admitted from Trauma	uma Care	0 0 0	Dedicated Diagnostic Catheterization Lab Dedicated Interventional Catheterization Labs Dedicated EP Catheterization Labs	0 0 0
Emergency Service Type: Number of Emergency Room Static Persons Treated by Emergency Ser Patients Admitted from Emergency: Total ED Visits (Emergency+Traum	vices:	Basic 0 6,268 731 6,268	Cardiac Catheterization Utilization Total Cardiac Cath Procedures: Diagnostic Catheterizations (0-14) Diagnostic Catheterizations (15+)	0 0 0
Free-Standing Em Beds in Free-Standing Centers Patient Visits in Free-Standing Centers Hospital Admissions from Free-Standing	ters		Interventional Catheterizations (0-14): Interventional Catheterization (15+) EP Catheterizations (15+) <u>Cardiac Surgery Data</u> Total Cardiac Surgery Cases:	0 0
Outpatient Service Total Outpatient Visits Outpatient Visits at the Hospital/ Outpatient Visits Offsite/off camp	Campus:	31,948 31,948 0	Pediatric (0 - 14 Years): Adult (15 Years and Older): Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	0 0

Diagnostic/Interventional Equipment		Exa	minatio	<u>ns</u>	Therapeutic Equipment		Therapies/		
	Owned Co	ontract	Inpatient	Outpt	Contract		Owned	Contract	<u>Treatments</u>
General Radiography/Fluoroscopy	2	0	574	6,231	0	Lithotripsy	(0	0
Nuclear Medicine	0	1	0	0	217	Linear Accelerator	(0	0
Mammography	1	0	0	1,302	0	Image Guided Rad Thera	ару		0
Ultrasound	2	0	157	1,247	0	Intensity Modulated Rad	Thrp		0
Angiography	0	0				High Dose Brachytherapy	(0	0
Diagnostic Angiography			0	0	0	Proton Beam Therapy	(0	0
Interventional Angiography			0	0	0	Gamma Knife	(0	0
Positron Emission Tomography (PET)	0	0	0	0	0	Cyber knife	(0	0
Computerized Axial Tomography (CAT)	1	0	152	1,798	0				
Magnetic Resonance Imaging	0	1	17	433	0				

Heavital Brafile C	/ 204 /	Union Co	vuntu Haanit	ol.			Anna			Dogo 1
Hospital Profile - C			ounty Hospit	aı		Detients by	Anna		Detients by E	Page 1
Ownership, Man	_		<u>nation</u>		14/1	Patients by		7.40/ 1.1	Patients by Et	
ADMINISTRATOR NAM						hite			ispanic or Latino	
ADMINSTRATOR PHON			S			ack 			ot Hispanic or L	
OWNERSHIP:		ounty Hospital [nerican Indian			nknown:	0.0%
OPERATOR:		nity Health Syst	ems, Inc.			ian		0.3% —		
MANAGEMENT:		t Corporation	1			waiian/ Pacific		0.0%	IDPH Number	_
CERTIFICATION:		Access Hospital			Un	ıknown	(0.5%	HPA	F-07
FACILITY DESIGNATIO ADDRESS		Hospitai h Main Street	CIT	Y: Anna		COUNTY	: Union C	County	HSA	5
ADDRESS	ST7 NOIL	ii Maiii Stieet			. Cotomor		. Official C	Journey		
	Authorize	d Peak Beds	Facility Utiliza	tion Data by			Average	Average	CON	Staffed Bed
Clinical Service	CON Beds 12/31/2014		Peak Census	Admissions	Inpatient Days	Observation Days	Length of Stay	Daily Census	Occupancy Rate %	Occupancy Rate %
Medical/Surgical	25	25	16	610	3,212	249	5.7	9.5	37.9	37.9
0-14 Years				3	3					
15-44 Years				54	168					
45-64 Years				123	470					
65-74 Years				123	829					
75 Years +				307	1,742					
Pediatric	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Intensive Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Direct Admission				0	0					
Transfers				0	0					
Obstetric/Gynecology	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Maternity	_	-	-	0	0	-				
Clean Gynecology				0	0					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	22	22	17	4	5,215	0	1,303.8	14.3	64.9	64.9
	22	22			,		-		04.9	04.9
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 Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedcated Observation	0					0				
Facility Utilization	47			614	8,427	249	14.1	23.8	50.6	
			(Includes ICU I			/				
				ts and Outp	oatients Se	erved by Payo	<u>r Source</u>			
	Medicare	Medicaid	Other Public	Private In	surance	Private Pay		Cha	arity Care	Totals
Inpatients	65.7%	5.2%	6.1%		20.8%	2.1%			0.0%	
Impatients	401	32	37		127	13			0	610
Outpatients	28.5%	25.7%	16.1%		25.8%	3.8%			0.0%	
Cutpatients	10922	9860	6173		9890	1463			6	38,314
Financial Year Reported.	1/1/2014	to 12/31/20	14 <u>Inpatie</u> i	nt and Outp	atient Net	Revenue by P	ayor Sou	rce	Charity	Total Charity
	Medicare	Medicaid	Other Public	Private In	surance	Private Pay		Totals	Care	Care Expense
Inpatient	33.3%	43.2%	2.4%		14.0%	7.1%		00.0%	Expense	37,912
Revenue (\$)		3,813,937		1					0	Total Charity
	2,945,349	3,613,937	214,076	1,	235,667	629,241	0,0	38,270		Care as % of
Outpatient	26.5%	3.0%	19.9%		44.3%	6.4%	1	00.0%		Net Revenue
Revenue (\$)	4,211,461	472,609	3,160,941	7,0	056,639	1,013,764	15,9°	15,414	37,912	0.2%
<u>Bir</u>	thing Data			Newl	born Nurs	ery Utilization			Organ Tran	nsplantation
Number of Total Births:			0		Level I	Level II	Le	vel II+	Kidney:	0
Number of Live Births:			0 Beds		(0	Heart:	0
Birthing Rooms:			0 Patient	Davs	(0	Lung:	0
Labor Rooms:			Λ	ewborn Pati		,	•	0	Heart/Lung:	0
Delivery Rooms:			0	ewboili Fall	on Days			U	Pancreas:	0
Labor-Delivery-Recover	ry Rooms:		0	L	.aboratory	<u>Studies</u>			Liver:	0
Labor-Delivery-Recover	ry-Postpartum	Rooms:	0 Inpatie	nt Studies				8,916	Total:	0
C-Section Rooms:			0 Outpat	ent Studies			5	3,203		J
CSections Performed:			0 Studies	Performed	Under Cor	ntract		8.102		

8,102

0

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А	n	n	а	

Surgery and Operating Room Utilization												
Surgical Specialty		<u>Operating</u>	Rooms		<u>Surgica</u>	al Cases	<u>s</u>	Surgical Hou	<u>rs</u>	Hours p	er Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient	
Cardiovascular	0	0	0	0	0	0	0	0	0	0.0	0.0	
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0	
General	0	0	2	2	14	344	26	370	396	1.9	1.1	
Gastroenterology	0	0	0	0	0	0	0	0	0	0.0	0.0	
Neurology	0	0	0	0	0	0	0	0	0	0.0	0.0	
OB/Gynecology	0	0	0	0	0	0	0	0	0	0.0	0.0	
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0	
Ophthalmology	0	0	0	0	0	0	0	0	0	0.0	0.0	
Orthopedic	0	0	0	0	0	0	0	0	0	0.0	0.0	
Otolaryngology	0	0	0	0	0	0	0	0	0	0.0	0.0	
Plastic Surgery	0	0	0	0	0	0	0	0	0	0.0	0.0	
Podiatry	0	0	0	0	0	0	0	0	0	0.0	0.0	
Thoracic	0	0	0	0	0	0	0	0	0	0.0	0.0	
Urology	0	0	0	0	0	0	0	0	0	0.0	0.0	
Totals	0	0	2	2	14	344	26	370	396	1.9	1.1	
SURGICAL RECOVERY STATIONS Stage 1 I			e 1 Recov	ery Stations	0	Sta	age 2 Recove	ery Stations	0			

Dedicated and Non-Dedicated Procedure Room Utilzation												
	Procedure Rooms			<u>Surgic</u>	al Cases	9	Surgical Hou	<u>rs</u>	Hours per Case			
Procedure Type	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient	
Gastrointestinal	0	0	0	0	0	0	0	0	0	0.0	0.0	
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0	
Pain Management	0	0	0	0	0	0	0	0	0	0.0	0.0	
Cystoscopy	0	0	0	0	0	0	0	0	0	0.0	0.0	
			<u>M</u> u	ıltipurp	ose Non-De	dicated Roo	ms_					
	0	0	0	0	0	0	0	0	0	0.0	0.0	
	0	0	0	0	0	0	0	0	0	0.0	0.0	
	0	0	0	0	0	0	0	0	0	0.0	0.0	

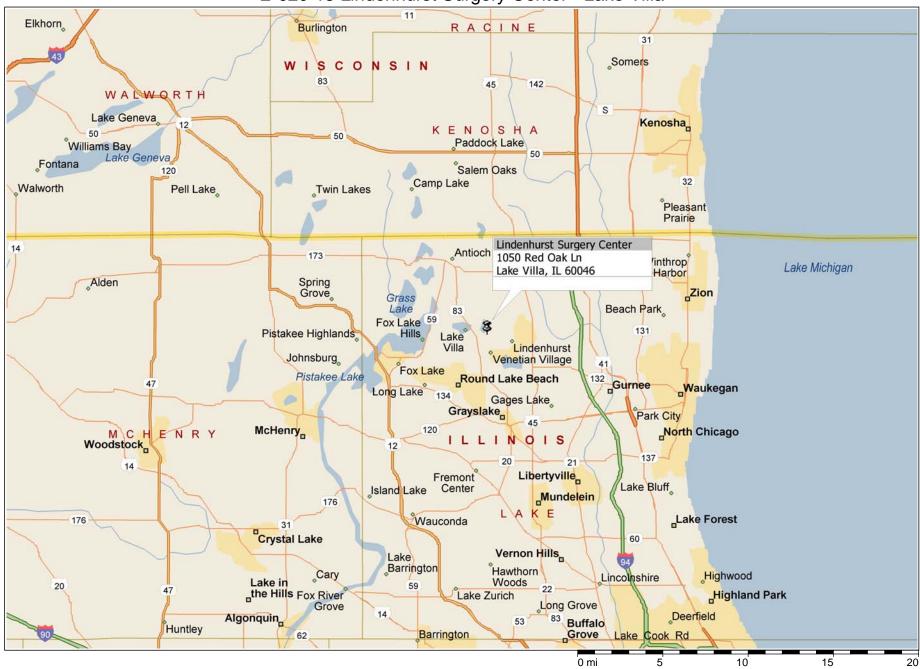
Emergency/Trauma Care		Cardiac Catheterization Labs				
Certified Trauma Center Level of Trauma Service Leve	No el 1 Level 2	Total Cath Labs (Dedicated+Nondedicated labs): Cath Labs used for Angiography procedures	0 0			
Operating Rooms Dedicated for Trauma Care Number of Trauma Visits: Patients Admitted from Trauma	0 0 0	Dedicated Diagnostic Catheterization Lab Dedicated Interventional Catheterization Labs Dedicated EP Catheterization Labs	0 0 0			
Emergency Service Type: Number of Emergency Room Stations Persons Treated by Emergency Services: Patients Admitted from Emergency: Total ED Visits (Emergency+Trauma): Free-Standing Emergency Cen	Comprehensive 0 7,943 399 7,943	Cardiac Catheterization Utilization Total Cardiac Cath Procedures: Diagnostic Catheterizations (0-14) Diagnostic Catheterizations (15+) Interventional Catheterizations (0-14): Interventional Catheterization (15+)	0 0 0 0 0 0			
Beds in Free-Standing Centers Patient Visits in Free-Standing Centers Hospital Admissions from Free-Standing Center Outpatient Service Data Total Outpatient Visits Outpatient Visits at the Hospital/ Campus: Outpatient Visits Offsite/off campus	38,308 38,308 0	EP Catheterizations (15+) Cardiac Surgery Data Total Cardiac Surgery Cases: Pediatric (0 - 14 Years): Adult (15 Years and Older): Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases:	0 0 0 0			

Diagnostic/Interventional Equipment	<u>Examinations</u>				<u>ns</u>	Therapeutic Equipment			Therapies/
	Owned Co	ontract	Inpatient	Outpt	Contract		Owned	Contract	<u>Treatments</u>
General Radiography/Fluoroscopy	4	0	279	6,555	0	Lithotripsy	(0	0
Nuclear Medicine	0	1	0	0	105	Linear Accelerator	(0	0
Mammography	1	0	0	875	0	Image Guided Rad Thera	ару		0
Ultrasound	1	0	90	891	0	Intensity Modulated Rad	Thrp		0
Angiography	0	0				High Dose Brachytherapy	(0	0
Diagnostic Angiography			0	0	0	Proton Beam Therapy	(0	0
Interventional Angiography			0	0	0	Gamma Knife	(0	0
Positron Emission Tomography (PET)	0	0	0	0	0	Cyber knife	(0	0
Computerized Axial Tomography (CAT)	1	0	98	2,633	0				
Magnetic Resonance Imaging	1	0	18	610	0				

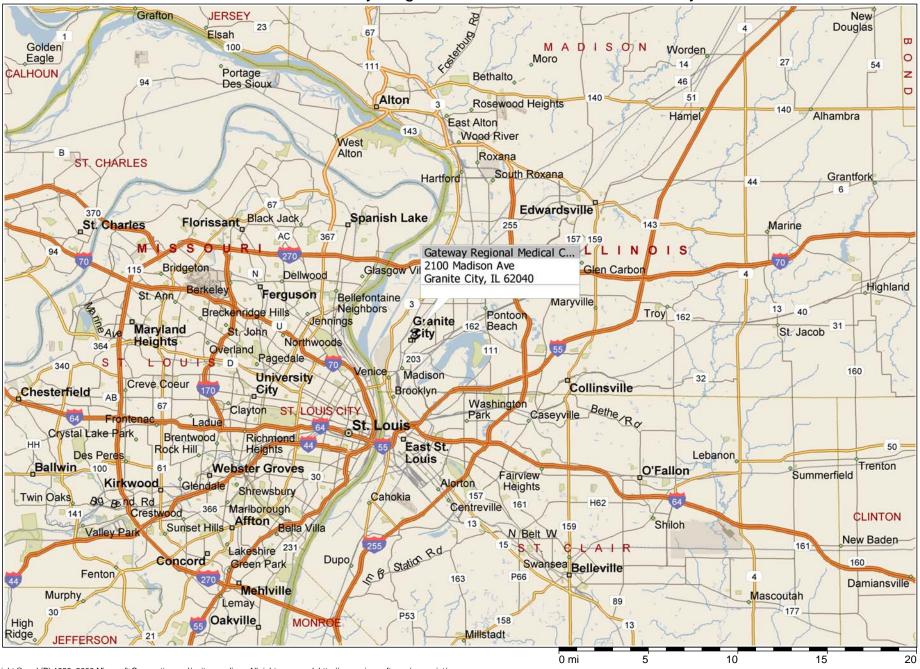
E-019-15 MetroSouth Medical Center - Blue Island



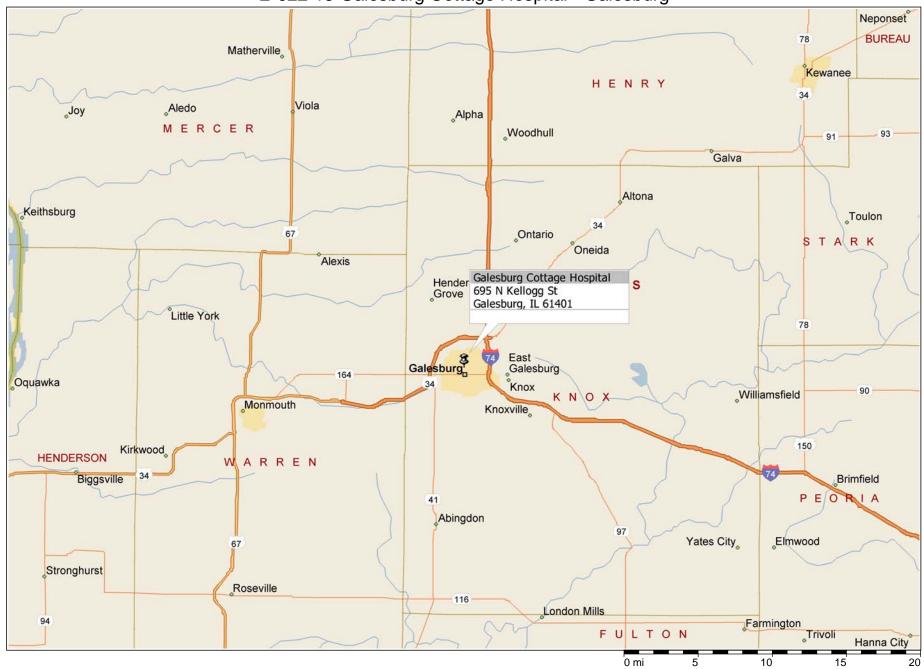
E-020-15 Lindenhurst Surgery Center - Lake Villa



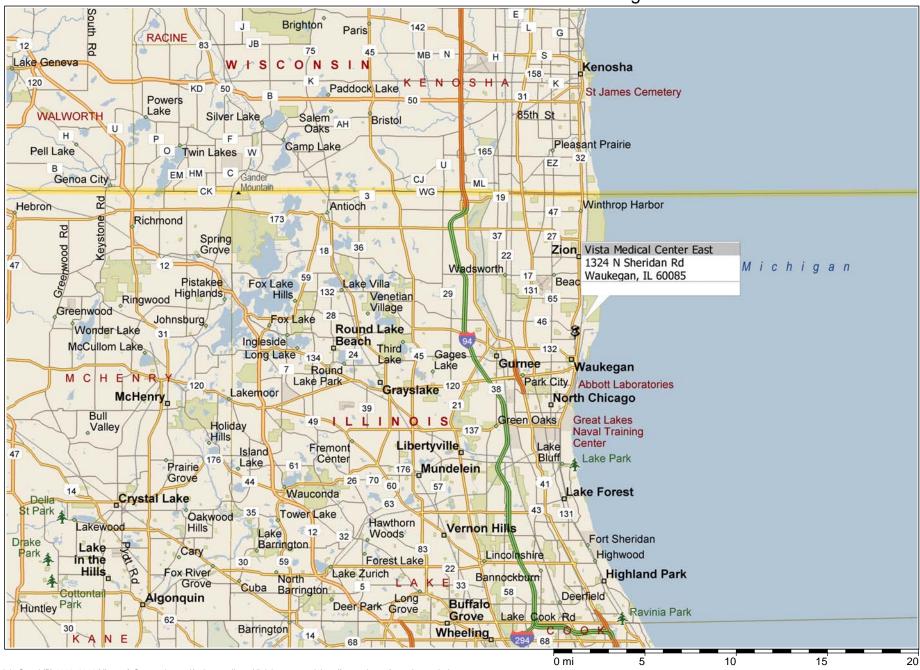
E-021-15 Gateway Regional Medical Center - Granite City



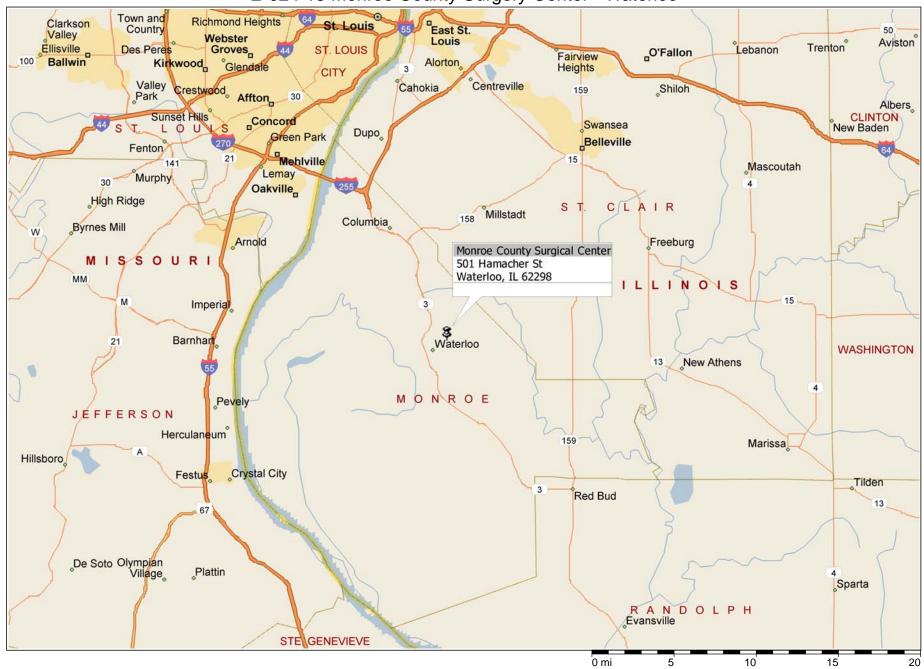
E-022-15 Galesburg Cottage Hospital - Galesburg



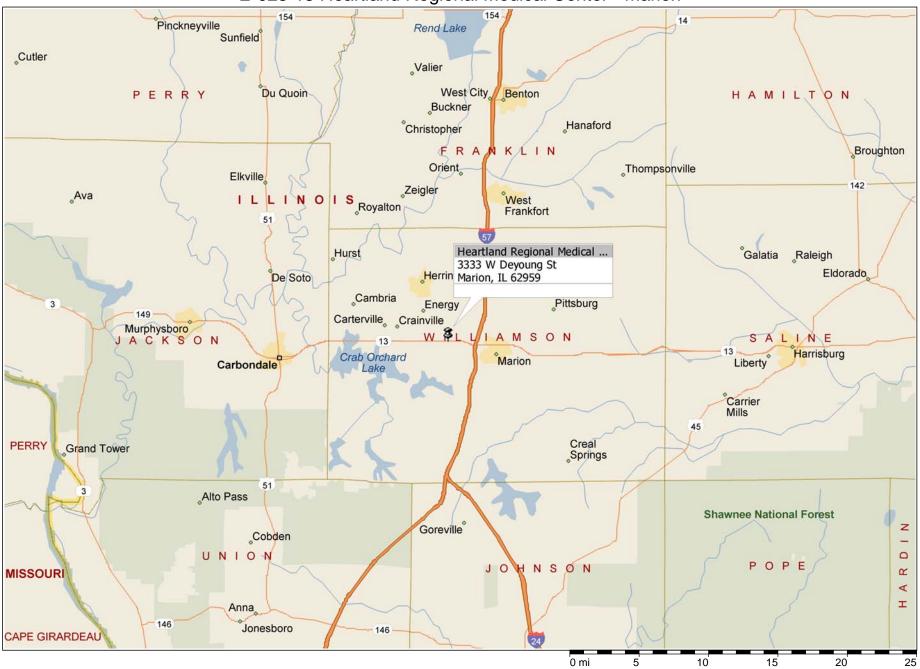
E-023-15 Vista Medical Center East - Waukegan



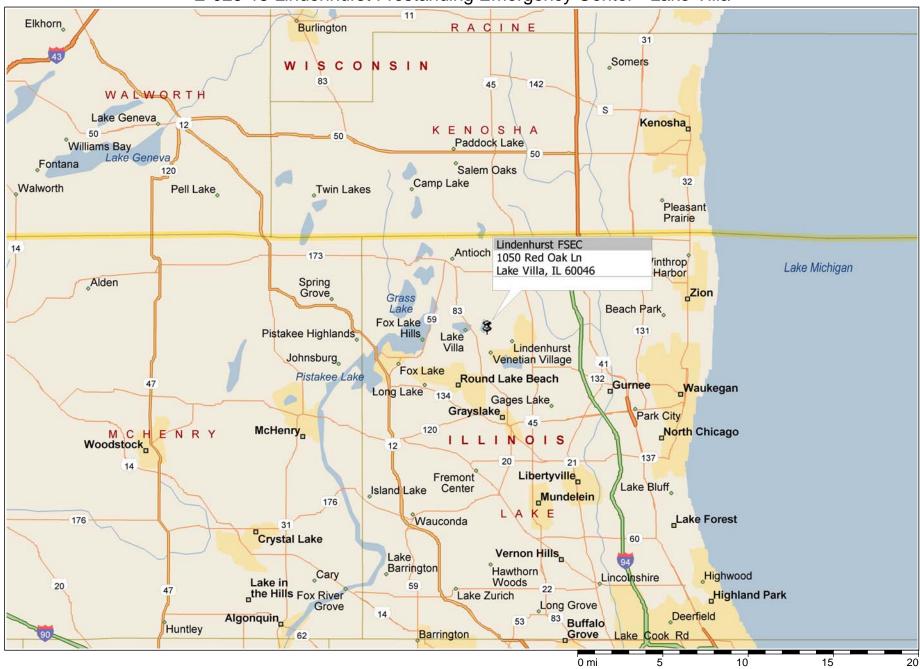
E-024-15 Monroe County Surgery Center - Waterloo



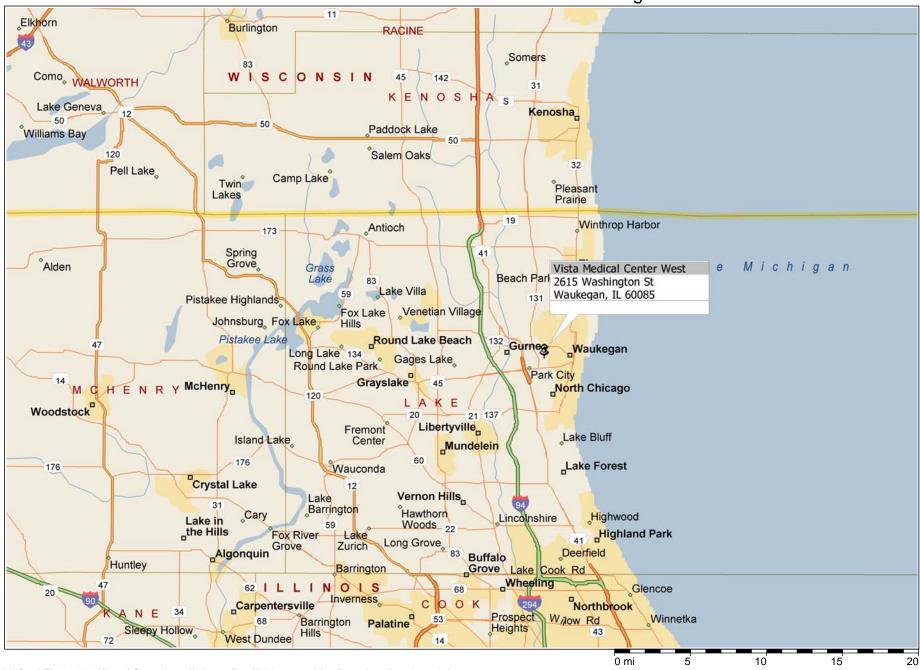
E-025-15 Heartland Regional Medical Center - Marion



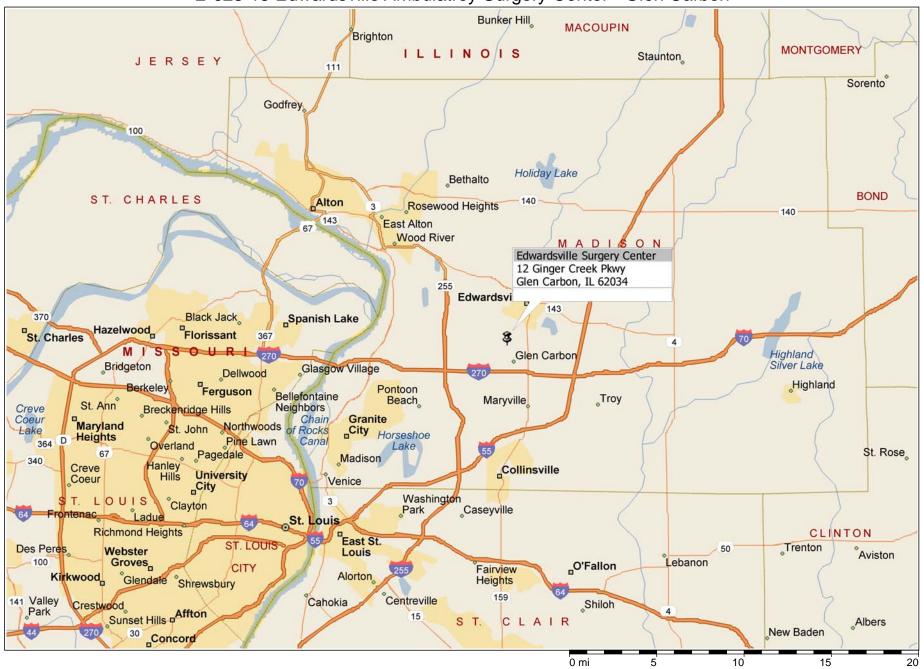
E-026-15 Lindenhurst Frestanding Emergency Center - Lake Villa



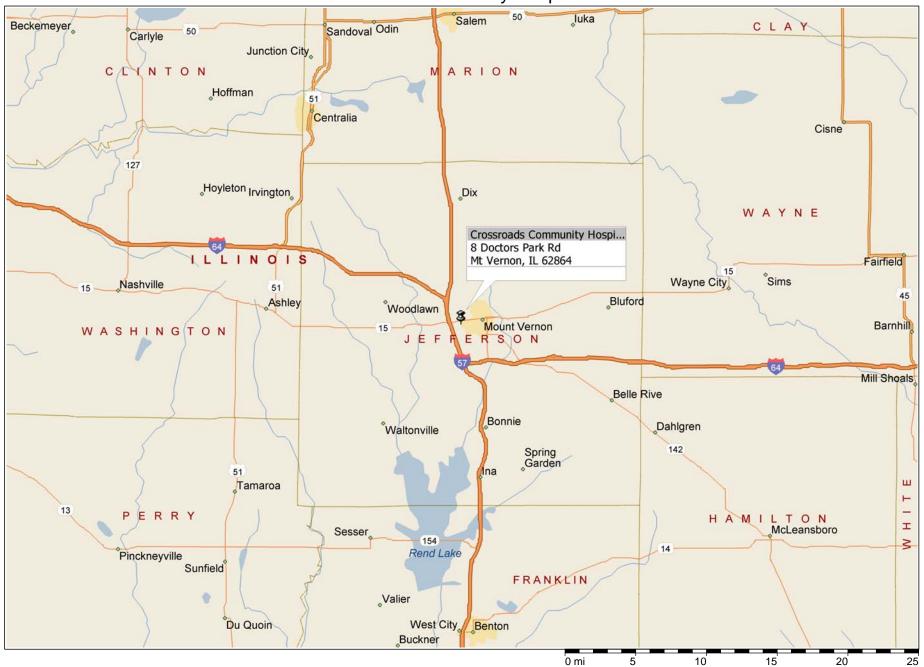
E-027-15 Vista Medical Center West - Waukegan



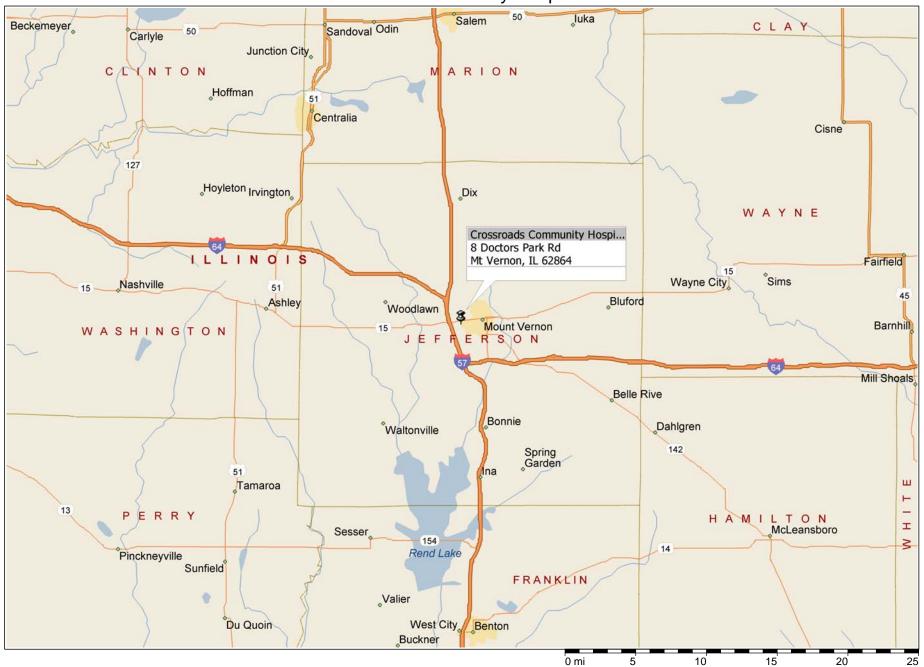
E-028-15 Edwardsville Ambulatroy Surgery Center - Glen Carbon



E-029-15 Crossroads Community Hospital - Mt. Vernon



E-029-15 Crossroads Community Hospital - Mt. Vernon



E-030-15 Red Bud Regional Hospital - Red Bud Sunset Hills Albers 30 Concord New Baden Swansea Dupo Fenton Belleville Mehlville LOU Mascoutah Murphy Oakville High Ridge 158 Millstadt Columbia Byrnes Mill S C Arnold Okawville Freeburg MM Imperial WASHINGTON Barnhar Waterloo New Athens Red Bud Regional Hospital Pevely NROE 325 Spring St Red Bud, IL 62278 Herculaneum **JEFFERSON** warissa Festus Hillsboro Crystal City Tilden Red Bud Coulterville De Soto Plattin Sparta Olympian Village Evansville PERRY RANDOLPH Cutler Valles Mines Percy MISSOURI Steeleville Ste. Willisville Genevieve STE. GENEVIEVE 150 67 ST. FRANCOIS

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