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DOCKET NO: G-3	BOARD MEETING: March 29, 2016	PROJECT NO: 16-001	PROJECT COST: Original: \$133,202,791
ll -	Hospital South Campus MOB	CITY: Orland Park	
TYPE OF PROJECT	Γ: Non-Substantive		HSA: VII

PROJECT DESCRIPTION: The applicants (The St. George Corporation and Palos Community Hospital) are proposing new construction and modernization as an expansion of its South Campus outpatient complex in Orland Park, Illinois at a cost of \$133,202,791. The anticipated completion date is June 30, 2019.

EXECUTIVE SUMMARY

PROJECT DESCRIPTION:

- The applicants (The St. George Corporation and Palos Community Hospital) are proposing new construction and modernization as an expansion of its South Campus outpatient complex in Orland Park, Illinois at a cost of \$133,202,791. The South Campus is approximately ten (10) minutes from Palos Community Hospital. The anticipated completion date is June 30, 2019.
- The Project includes three (3) components: the construction of a four (4) story 107,760 gross square foot medical office building to include physician offices and diagnostic and treatment space for a variety of medical specialties; a 16,000 gross square foot three story building connection joining two (2) existing office buildings and the new MOB, which will span three floors, and a 125,000 gross square foot below-grade parking garage.

WHY THE PROJECT IS BEFORE THE STATE BOARD:

- This project is before the State Board because the project is "by or on behalf of a health care facility" (Palos Community Hospital) and is in excess of the capital expenditure minimum of \$12,797,313 (20 ILCS 3960).
- The State Board does not have <u>need</u> criteria for projects that do not have inpatient services or establish a category of service. While the Palos Health and Fitness Center will be demolished, its closure is not subject to the jurisdiction of the HFSRB and there is no determination made on the need for this Fitness Center by the State Board Staff in this report.

PURPOSE OF THE PROJECT:

• According to the applicants "the proposed establishment of the South Campus MOB is to expand the existing Orland Park campus is in response to the continued health care needs of a growing and aging population and changes in the health care delivery system."

PUBLIC COMMENT:

• A public hearing on this project was held on February 18, 2016. Board Staff (Juan Morado and Jeannie Mitchell) conducted the public hearing. The hearing was held at 10:00 a.m. at Orland Park Civic Center, 14750 Ravinia Avenue, Orland Park, Illinois. State Board member John McGlasson was the State Board Representative. A total of 320 individuals registered their attendance. Eleven (11) individuals spoke in support and fifty one (51) individuals spoke in opposition. One (1) individual was neutral.

CONCLUSION:

• The applicants have met all of the requirements of the State Board.

STATE BOARD STAFF REPORT

Project #16-001

Palos Community Hospital South Campus MOB

APPLICATION SUMMARY/CHRONOLOGY		
Applicants	The St. George Corporation, Palos Community Hospital	
Facility Name	Palos Community Hospital South Campus MOB	
Location	Southwest Corner of 153 rd Street and West Avenue,	
	Orland Park, Illinois	
Application Received	January 4, 2016	
Application Deemed Complete	January 4, 2016	
Review Period Ends	March 4, 2016	
Permit Holder	Palos Community Hospital	
Operating Entity/Licensee	Palos Community Hospital	
Owner of the Site	Palos Community Hospital	
Project Financial Commitment Date	February 16, 2018	
Gross Square Footage	248,760 GSF	
Project Completion Date	June 30, 2019	
Can Applicants Request Another Deferral?	Yes	
Has the Application been extended by the State Board?	No	

I. The Proposed Project

The applicants (The St. George Corporation and Palos Community Hospital) are proposing new construction and modernization as an expansion of its South Campus outpatient complex in Orland Park, Illinois at a cost of \$133,202,791. The anticipated completion date is June 30, 2019.

II. Summary of Findings

- A. The State Board Staff finds the proposed project appears to be in conformance with the provisions of Part 1110.
- B. The State Board Staff finds the proposed project appears to be in conformance with the provisions of Part 1120.

III. General Information

Palos Community Hospital is an Illinois not-for-profit corporation whose sole corporate member is The St. George Corporation. The Hospital is a licensed 425-bed acute care facility located in Palos Heights, Illinois, providing inpatient, outpatient, and emergency care services primarily to residents of the southwest suburban of Chicago. St George Corporation is an Illinois not-for-profit corporation whose purpose is to solicit and receive contributions on behalf of Palos Community Hospital and St George Wellness Center support educational activities related to rendering health care services, promote scientific research relating to the care of the sick, and to support the Hospital and Wellness Center and their respective purposes. The proposed project is located in the

HSA VII Service Area and the A-04 Hospital Planning Area in Cook County. HSA VII service Area includes Suburban Cook and DuPage County. A-04 Hospital Planning Area includes the City of Chicago Community Areas of West Pullman, Riverdale, Hegewisch, Ashburn, Auburn Gresham, Beverly, Washington Heights, Mount Greenwood, and Morgan Park; Cook County Townships of Lemont, Stickney, Worth, Lyons, Palos, Calumet, Thornton, Bremen, Orland, Rich and Bloom Project obligation will occur after permit issuance. The project is a non-substantive project subject to 1110 and 1120 review.

IV. Project Details

Palos Community Hospital proposes a new construction and modernization project as an expansion of its South Campus outpatient complex in Orland Park at 15300 West Avenue, southwest corner of 153rd Street and West Avenue. The Project includes three (3) components: the construction of a four (4) story 107,760 gross square foot medical office building to include physician offices and diagnostic and treatment space for a variety of medical specialties; a 16,000 gross square foot three story building connection joining two existing office buildings and the new MOB, which will span three floors, and a 125,000 gross square foot below-grade parking garage. Site improvements include access roadway improvements. The MOB will primarily house physician medical offices and exam rooms, offering an array of physician and related ancillary services. The "building connector" will provide hallway connections joining two existing office buildings at a lower level, ground level and 2nd and 3rd floors. Each of the existing buildings will undergo modifications necessary to accommodate the building connector.

V. Project Costs and Sources of Funds

The total cost of the project is \$133,202,791 and it is being funded by cash and securities.

TABLE ONE			
Project Costs and Sources of Funds			
Project Costs and Sources of Funds	Non	Total	
	Reviewable		
Preplanning Costs	\$197,394	\$197,394	
Site Survey and Soil Investigation	\$103,500	\$103,500	
Site Preparation	\$7,478,263	\$7,478,263	
Off Site Work	\$1,236,000	\$1,236,000	
New Construction Contracts	\$71,203,228	\$71,203,228	
Modernization Contracts	\$6,123,364	\$6,123,364	
Contingencies	\$8,038,828	\$8,038,828	
Architectural/Engineering Fees	\$6,000,000	\$6,000,000	
Consulting and Other Fees	\$890,000	\$890,000	
Movable or Other Equipment (not in construction contracts)	\$31,598,433	\$31,598,433	
Other Costs To Be Capitalized	\$333,781	\$333,781	
Total	\$133,202,791	\$133,202,791	
Cash and Securities	\$133,202,791	\$133,202,791	

TABLE ONE		
Project Costs and Sources of Funds		
Project Costs and Sources of Funds	Non	Total
	Reviewable	
Source: Application for Permit page 50		

VI. Cost Space Requirements

The applicants are proposing a 296,310 GSF of space with 228,547 GSF of new construction and 47,550 GSF of modernized space.

TABLE TWO					
	Cost Space Chart				
Department/Area	Cost	Proposed	New	Modernization	
			Construction		
Physician Offices exam treatment	\$25,318,635	48,675	48,675		
Reception Registration	\$571,350	1,402	1,402		
Storage Supplies	\$1,261,085	3,824	3,824		
Patient lockers toilets	\$727,650	2,110	2,110		
Staff lockers lounges	\$914,160	2,804	2,804		
Public Toilet	\$465,450	1,280	1,280		
MEP Facilities housekeeping	\$7,621,901	9,940	9,940		
Communications IT electric	\$500,980	1,080	1,080		
Entry, circulation, waiting	\$6,967,290	16,432	16,432		
Parking	\$17,144,144	125,000	125,000		
Building Connectors	\$9,710,583	16,000	16,000		
Connector Renovations	\$1,699,500	6,000		6,000	
Building Façade	\$4,423,864	41,550		41,550	
Building Gross		20,213	20,213		
Total Costs	\$77,326,592	296,310	248,760	47,550	

- Total space includes 123,760 bgsf of MOB space, 125,000 bgsf of new parking structure,
- Building Connectors line item includes a new main lobby and new circulation and building connectors on multiple levels.
- Connector Renovations includes area that requires modification to accept new building connectors on multiple levels. Program will not be modified through this work.
- Building facade renovations includes the area of the building that will be required to be accessed as part of
 upgrading the building envelope. Program will not be modified through this work.
- MEP Facilities and housekeeping includes area for a new central plant that will service the existing facility as well as the new ACC.

Source: Application for Permit page 50

VII. <u>Background of the Applicants</u>

A) Criterion 1110.530 (b) (1) (3) - Background of the Applicants

The site of the proposed South Campus MOB complies with the requirements of Illinois Executive Order #2006-5. The proposed site is in compliance with Section 4 of the Illinois State Agency Historic Resources Preservation Act (20 ILCS 3420/1 et. seq. The applicants authorized the Health Facilities and Services Review Board ("HFSRB") and the Illinois Department of Public Health ("IDPH") access to any documents necessary to verify information submitted as part of this application for permit and authorized HFSRB and IDPH to obtain any additional

information or documents from other government agencies which HFSRB or IDPH deem pertinent to process this application for permit.

VIII. Purpose of the Project, Safety Net Impact, Alternatives

A) Criterion 1110.230 (a) – Purpose of the Project

The applicants stated the following:

"The Applicants proposed establishment of the South Campus MOB to expand the existing Orland Park campus is the culmination of focused planning, in response to the continued health care needs of a growing and aging population and changes in the health care delivery system. It is anticipated to provide improved access to quality, coordinated, efficient and cost effective services for the residents of the Southwest Suburban communities of metropolitan Chicago.

Palos Community Hospital has been the primary health care provider for the Orland Park community for more than 40 years. The hospital, which is approximately six miles from the South Campus, was originally constructed as a 265 bed hospital. Over the years, it has grown to a licensed capacity of 425 beds. Palos Community Hospital is recognized as one of the top hospitals in the area through the delivery of quality inpatient and outpatient medical services, behavioral health programs, home health services and a wide range of community education and preventative services. With a medical staff of more than 500 physicians in a broad range of specialties, Palos has developed outstanding clinical programs in cardiovascular services, orthopedics, primary care and behavioral health delivered in safe modern facilities with advanced technology.

Increasing Population Growth in the Palos Service Area

Anticipating the growing demand for outpatient care and in response to population growth, Palos was among the first hospitals in the area to expand to satellite facilities. Through the construction of the first primary care center satellite facility on the South Campus in 1985, along with subsequent expansions in 1988 and 1999, Palos responded to this growth with quality diagnostic and treatment services for both medical and behavioral health issues while assuring the presence of a primary care and specialist physician complement. Today, the South Campus houses the Immediate Care Center, outpatient lab and imaging services, outpatient behavioral health services including partial hospitalization and chemical dependency programs, pharmacy, infusion and cancer treatment services, and more than 70 physician and dentist offices. Population growth in Planning Area A-04, along with the corresponding need for medical services has been steady and is projected to continue. Historically, the population in Palos' service area, which consists of 25 communities located within Planning Area A-04 as well as parts of Cook and Will Counties, has increased 25% since 1990, from 498,185 residents in 1990 to 625,010 residents in 2015. This growth is projected to remain strong for the next ten years with the most rapid growth expected in those residential markets which are less mature - areas like

Frankfort, New Lenox, Mokena, Lockport and Homer Glen. In the Applicant's key markets 10 year growth projections exceed 12%. In addition to population increases, this population of the market served by Palos Community Hospital is aging. The percentage of residents in the Palos service area in the 60+ age cohort is higher than the State average, and in ten years, 28% of the area's population will be over 60 years old. Given the aging population and the disease states associated with aging (e.g., cancer, cardiovascular conditions and degenerative."

Loyola Affiliation

The South Campus MOB also allows Palos and Loyola to more fully develop their affiliation. Loyola has projected the placement of 25 FTE physicians in multiple specialties all with demonstrated market need to be located on the South Campus. Palos continues to grow its primary care and specialist physician complement as well. This mix of academic and community based physicians will allow patients to receive high quality coordinated care from two highly regarded health care systems at a lower cost to patients and payers through integration that will reduce duplicative treatments and testing. Beyond the programmatic aspects of the project, the South Campus MOB will include all elements of an infrastructure intended to improve patient access, wayfinding, energy efficient operations and flexibility for adaptation to new and evolving delivery models. This will include a new parking structure, roadways and facility updates" (See Application for Permit 63-66)

B) Criterion 1110.230 (b) – Safety Net Impact Statement

This is considered a non-substantive project, and by statute no safety impact statement is required for non-substantive projects.

TABLE THREE Palos Community Hospital CHARITY CARE				
	2012	2013	2014	
Net Patient Revenue	\$311,344,001	\$315,296,194	\$340,954,308	
Amount of Charity Care (charges)	\$26,480,804	\$24,617,511	\$21,535,736	
Cost of Charity Care \$6,553,999 \$5,888,760 \$5,172,296				
2.11% 1.87% 1.52%				
Source: Application for Permit page 106.				

C) Criterion 1110.230 (c) – Alternatives to the Proposed Project

The Applicants explored two options prior to determining to establish the South Campus MOB.

The options considered are:

- Locate the medical office building on the Palos main campus;
- Locate the medical office building elsewhere in the geographic service area;

1. Establish Medical Office Building on the Palos Main Campus

A primary purpose of the South Campus MOB is to respond to evolving health care needs of a growing population and changes in the health care delivery system, to provide improved access to quality, coordinated, efficient and cost effective services to the residents of the Southwest Suburban community of metropolitan Chicago. Although Palos' main campus is located in Palos Heights, its geographic service area is centered in Orland Park. Developing services on the South Campus allows for the expansion of facilities to more fully expand Palos' affiliation with Loyola through the development of physician office space and radiation therapy services. Loyola has projected the placement of 25 FTE physicians in multiple specialties all with demonstrated market need to be located on the South Campus. Palos continues to grow its primary care and specialist physician complement as well. This mix of academic and community based physicians will allow patients to receive high quality coordinated care from two highly regarded health care systems at a lower cost to patients and payers through integration that will reduce duplicative treatments and testing.

2. Establish the Medical Office Building Elsewhere in the Geographic Service Area

Palos was among the first hospitals in the area to expand to satellite facilities. In 1985, Palos established its primary care center satellite facility on the South Campus. Subsequent expansions in 1988 and 1999 expanded the services offered on the South Campus to include quality diagnostic treatment services for both medical and behavioral issues while assuring the presence of an excellent primary care and specialist physician complement. Today, the South Campus houses the Immediate Care Center, outpatient lab and imaging services, outpatient behavioral health services, including partial hospitalization and chemical dependency programs, pharmacy, infusion and cancer treatment services, and more than 70 physician and dentist offices. The proposed South Campus MOB will complement the existing services already provided on the South Campus by adding a women's health clinic, cardiac diagnostic services, health and wellness, radiation therapy, and additional clinic space for physicians. Establishing a medical office building elsewhere in the geographic service area will result in unnecessary and costly duplication of services. It is counter to the goals of the affiliation to provide the right service for the patient at the right location at the right time. Loyola projects the placement of 25 FTE physicians in multiple specialties all with demonstrated market need to be located on the South Campus. Palos continues to grow its primary care and specialist physician complement as well. The mix of academic and community based physicians will allow patients to receive high quality coordinated care from two highly regarded health care systems at a lower cost to patients and payers through integration that will reduce duplicative treatments and testing. It gives patients greater access to Loyola's renowned specialty care services, such as neurosciences and oncology, while ensuring continued access to Palos' primary care network. Establishing a medical office building elsewhere in the geographic service area

would result in unnecessary and costly duplication of services and is contrary to the goals of the Palos-Loyola affiliation. (Application for Permit pages 67-68)

IX. Size of the Project, Projected Utilization, Assurances

- A) Criterion 1110.234 (a) Size of the Project
- B) Criterion 1110.234 (b) Projected Utilization
- C) Criterion 1110.234 (e) Assurances

The applicants are not proposing any services in which the State Board has developed standards.

X. <u>FINANCIAL VIABILITY</u>

A) Criterion 1120.120 - Availability of Funds

The applicants are proposing to finance this project with cash of \$133,202,791. The applicants provided audited financial statements at *pages 74-97 of the application for permit*. As can be seen from the Table below there is sufficient cash that has been designated for Capital Projects to fund this project.

Palos Community Hospital		
Years Ended December 31, 2014 and 2013		
(In thousands)		
	2014	2013
Cash	\$11,617	\$18,039
Current Assets	\$90,053	\$109,690
PPE	\$440,373	\$388,228
Investments designated for Capital Projects	\$294,155	\$282,855
Total Assets	\$875,766	\$830,547
Current Liabilities	\$105,870	\$128,025
LTD	\$374,051	\$338,351
Total Liabilities	\$517,881	\$507,359
Patient Revenue	\$340,954	\$315,287
Total Revenue	\$378,318	\$350,487
Expenses	\$339,957	\$342,885
Excess of Revenues Over Expenses	\$39,164	\$8,264
Source: 2014 Audited Financial Statements pages 74-97 of the application		
for permit.		

B) Criterion 1120.130 - Financial Viability

The applicants are funding this project from internal sources and no financial viability ratios are required.

XI. <u>ECONOMIC FEASIBILITY</u>

A) Criterion 1120.140 (a) - Reasonableness of Financing Arrangements

B) Criterion 1120.140 (b) - Terms of Debt Financing

Terrence Moisan, M.D. President of Palos Community Hospital attested that the total estimated project costs will be funded entirely with cash and other liquid assets. (See Application for Permit pages 99-100)

C) Criterion 1120.140 (c) - Reasonableness of Project Costs

The State Board does not have standards for these costs for projects that do not have an inpatient component, do not establish any category of service or clinical services other than categories of service. Below is presented an itemization of each cost. (See Application for Permit pages 47-48)

<u>Preplanning Costs</u> are \$197,364 and are less than one percent (1%) of construction, modernization, contingencies, and movable equipment costs of \$116,963,853.

<u>Site Survey, Soil Investigation and Site Preparation Costs</u> are \$7,581,763 and are 8.8% of new construction, modernization and contingencies costs. These costs include the following:

Site Survey and Investigation	\$75,000
Geo Tech	\$25,000
Arborist	\$3,500
Site Work	\$6,087,763
Site Signage	\$154,500
Landscape	\$1,236,000
Total	\$7,581,763

Offsite Work Costs are \$1,236,000. These costs include the following:

Roadway & Signaling Improvement	\$721,000
Electric Gas Sewer Water Upgrades	\$515,000
Total	\$1,236,000

New Construction Costs and a Proportional Share of Contingencies are \$78,323,551 or \$314.85 per GSF. These costs include the following:

MOB	\$36,726,600
Garage	\$17,144,144
New Entry Canopy & Connectors	\$9,710,583
MEP Upgrades	\$7,621,901
Total	\$71,203,228
Contingency	\$7,120,323
Total	\$78,323,551

<u>Modernization Costs and a Proportionate Share of Contingencies</u> are \$ \$7,041,869 or \$148.09. These costs include the following:

Building Façade Modification \$4,423,864
Interior Renovations for Connections \$1,699,500
Total \$6,123,364
Contingencies \$918,505
Total \$7,041,869

<u>Contingencies costs</u> are \$8,038,828. These costs are 10.4% of new construction and modernization costs.

<u>Architectural and Engineering Costs</u> are \$6,000,000. These costs are 7.76% of new construction and modernization costs.

<u>Consulting and other costs</u> are \$890,000. These costs are 1.15% of new construction and modernization costs. These costs include the following:

Materials Testing	\$320,000
3rd Party Reviews & Commissioning	\$200,000
CON Consultants	\$75,000
Marketing	\$50,000
Permits Plan Review Fees	\$145,000
Legal Consultants	\$100,000
Total	\$890,000

<u>Movable or Other Equipment Costs</u> are \$31,598,433. These costs include the following:

MOB Medical Equipment	\$24,029,900
MOB FFE	\$2,457,453
Interior Signage	\$168,000
Art	\$100,000
Low Voltage, Computers, Servers, IT Sec.	\$4,843,080
Total	\$31,598,433

Other Costs to be Capitalized is \$333,781. These costs include the following:

Activation Fees	\$125,000
Builders Risk	\$208,781
Total	\$333,781

- D) Criterion 1120.140 (d) Direct Operating Costs
- E) Criterion 1120.140 (e) Projected Capital Costs

The State Board does not have standards for these costs for projects that do not have an inpatient component, do not establish any category of service or any clinical services other than categories of service.

16-001 Palos Community Hospital South Campus MOB - Orland Park



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Hospital Profile - C	CY 2014	Palos Co	mmunity Ho	spital			Palos	Height	S	Page 1
		General Inform		-		Patients by			Patients by Et	
ADMINISTRATOR NA	ME: Terrenc	e Moisan, MD			WI	hite	 86	6.4% Hi	spanic or Lating	
ADMINSTRATOR PHO	ONE 708-923	3-5000			Bla	ack	3	8.2% No	ot Hispanic or L	atino: 81.79
OWNERSHIP:		Palos Community Hospital				nerican Indian			nknown:	16.89
OPERATOR:		Palos Community Hospital			Asian		().5% —		
MANAGEMENT:		Profit Corporation		₹	Ha	waiian/ Pacific		0.0%	IDPH Number	: 3210
CERTIFICATION:	None	, , , , , , , , , , , , , , , , , , , ,	,			known		9.9%	HPA	A-04
FACILITY DESIGNATI	ON: Genera	l Hospital							HSA	7
ADDRESS		South 80th Avenu	ie CIT	Y: Palos He	eights	COUNTY:	Suburba	an Cook C		
			Facility Utiliza	tion Data by	/ Category	of Service			•	
Clinical Service	Authorize CON Bed	s Setup and	Peak		•	Observation	Average Length	Average Daily	CON Occupancy	Staffed Bed Occupancy
	12/31/201		Census	Admissions	Days	Days	of Stay	Census	Rate %	Rate %
Medical/Surgical	306	257	257	14,848	70,131	8,828	5.3	216.3	70.7	84.2
0-14 Years				5	7					
15-44 Years				1,125	3,556					
45-64 Years				3,298	13,942					
65-74 Years				3,134	15,281					
75 Years +				7,286	37,345					
Pediatric	15	15	15	341	804	254	3.1	2.9	19.3	19.3
Intensive Care	36	24	23	2,492	5,499	0	2.2	15.1	41.8	62.8
Direct Admission				1,688	3,378					
Transfers				804	2,121					
Obstetric/Gynecology	28	28	22	1,029	2,526	406	2.8	8.0	28.7	28.7
Maternity				1,029	2,526					
Clean Gynecology				0	0					
, 0,							0.0	0.0	0.0	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 Acute Mental Illness	43	38	32	1,448	6,531	0	0.0 4.5	0.0 17.9	41.6	47.1
Rehabilitation	0	0	0	0	0,331	0	0.0	0.0	0.0	0.0
Long-Term Acute Car		0	0	0	0	0	0.0	0.0	0.0	0.0
Dedcated Observation	0	0	0	U	0	0	0.0	0.0	0.0	0.0
Facility Utilization	428			19,354	85,491	9,488	4.9	260.2	60.8	
,			(Includes ICU I	•	,					
			Inpatier	nts and Outp	atients Se	erved by Payor	Source			
	Medicare	Medicaid	Other Public	Private In:	surance	Private Pay		Cha	arity Care	Totals
	60.9%	6.3%	0.0%		28.6%	0.2%			3.9%	
Inpatients	11789	1228	0		5542	47			748	19,354
	41.3%	8.8%	0.0%		47.9%	0.8%			1.3%	
Outpatients	114330	24329	0		32597	2263			3586	277,105
Financial Year Reporte	<u>ed:</u> 1/1/2014	to 12/31/201	4 <u>Inpatie</u>	nt and Outp	atient Net	Revenue by P	ayor Sour	ce	Charite	Total Charity
	Medicare	Medicaid	Other Public	Private In	surance	Private Pay	•	Totals	Care	Care Expense
Inpatient	55.0%	9.1%	0.0%		35.9%	0.0%	1	00.0%	Expense	5,172,296
Revenue (\$)	85,408,840	14,202,274	0.070	EE :	756,081	57,758		24,953	2,962,744	Total Charity
				55,	-	•			2,902,744	Care as % of
Outpatient	39.8%	3.6%	0.0%		56.5%	0.1%	1	00.0%		Net Revenue
Revenue (\$)	73,817,214	6,588,101	0	104,8	374,303	249,737	185,52	29,355	2,209,552	1.5%
<u>B</u>	irthing Data			<u>Newl</u>	orn Nurs	ery Utilization			Organ Trai	nsplantation
Number of Total Birth	s:	8	72		Level I	Level II	Lev	/el II+	Kidney:	0
Number of Live Births	s:	8	68 Beds		26			0	Heart:	0
Birthing Rooms:			0 Patient	Davs	1,767			0	Lung:	0
Labor Rooms:			Λ	lewborn Patio	,	331		2, 098	Heart/Lung:	0
Delivery Rooms:			0	iowboiii Falli	on Days		4	£,030	Pancreas:	0
Labor-Delivery-Recov	ery Rooms:		0	L	aboratory	Studies			Liver:	0
Labor-Delivery-Recov	ery-Postpartum	Rooms:	26 Inpatie	nt Studies			662	2,368	Total:	0
0.0			2 Outpat				FO	750		•
C-Section Rooms: CSections Performed			87 Studies	ient Studies			520	3,750		

lospital Profile -	ital Profile - CY 2014 Palos Community Hospital								Page 2				
				<u>Surge</u>	ry and Opera	ting Room U	<u>tilization</u>						
Surgical Specialty		<u>Operating</u>	Rooms		Surgica	al Cases	<u>s</u>	Surgical Hours			Hours per Case		
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient		
Cardiovascular	0	0	2	2	300	0	1354	0	1354	4.5	0.0		
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0		
General	0	0	12	12	1298	1082	3456	2050	5506	2.7	1.9		
Gastroenterology	0	0	0	0	10	2	19	6	25	1.9	3.0		
Neurology	0	0	0	0	0	0	0	0	0	0.0	0.0		
OB/Gynecology	0	0	0	0	196	604	566	1020	1586	2.9	1.7		
Oral/Maxillofacial	0	0	0	0	9	26	28	59	87	3.1	2.3		
Ophthalmology	0	0	0	0	2	889	4	1248	1252	2.0	1.4		
Orthopedic	0	0	0	0	1311	664	3643	1434	5077	2.8	2.2		
Otolaryngology	0	0	0	0	20	138	32	228	260	1.6	1.7		
Plastic Surgery	0	0	0	0	157	476	271	790	1061	1.7	1.7		
Podiatry	0	0	0	0	72	104	107	266	373	1.5	2.6		
Thoracic	0	0	0	0	155	18	376	26	402	2.4	1.4		
Urology	0	0	0	0	284	690	446	1146	1592	1.6	1.7		
Totals	0	0	14	14	3814	4693	10302	8273	18575	2.7	1.8		
SURGICAL RECOV	/ERY STAT	TIONS	Stag	e 1 Recov	ery Stations	15	Sta	age 2 Recove	ery Stations	55			

<u>Dedicated and Non-Dedicated Procedure Room Utilzation</u>												
	Procedure Rooms				Surgical Cases			Surgical Hours			Hours per Case	
Procedure Type	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient	
Gastrointestinal	0	0	4	4	2051	4564	1852	2964	4816	0.9	0.6	
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	
Multipurpose Non-Dedicated Rooms												
Minor Surgery	0	0	1	1	53	606	70	536	606	1.3	0.9	
	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	No 1 Level 2	Total Cath Labs (Dedicated+Nondedicated labs): Cath Labs used for Angiography procedures Dedicated Diagnostic Catheterization Lab	2 1
Operating Rooms Dedicated for Trauma Care Number of Trauma Visits: Patients Admitted from Trauma	0 0 0	Dedicated Interventional Catheterization Labs Dedicated EP Catheterization Labs	0
Emergency Service Type:	Comprehensive 26	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	50,684 15,255 50,684	Total Cardiac Cath Procedures: Diagnostic Catheterizations (0-14) Diagnostic Catheterizations (15+) Interventional Catheterizations (0-14): Interventional Catheterization (15+)	2,207 0 1,399 0 522
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:	286 252
Outpatient Service Data Total Outpatient Visits Outpatient Visits at the Hospital/ Campus: Outpatient Visits Offsite/off campus	277,105 157,665 119,440	Pediatric (0 - 14 Years): Adult (15 Years and Older): Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases:	0 252 162

Diagnostic/Interventional Equipment	entional Equipment			<u>Examinations</u> <u>Therapeutic Equipment</u>					Therapies/
	Owned Co	ontract	Inpatient	Outpt	Contract		Owned Contract		<u>Treatments</u>
General Radiography/Fluoroscopy	10	0	23,819	44,205	0	Lithotripsy	(0	0
Nuclear Medicine	3	0	1,735	3,241	0	Linear Accelerator	(0	0
Mammography	3	0	18	8,705	0	Image Guided Rad Therapy			0
Ultrasound	10	0	6,886	12,423	0	Intensity Modulated Rad Thrp			0
Angiography	2	0				High Dose Brachytherapy	(0	0
Diagnostic Angiography			68	50	0	Proton Beam Therapy	(0	0
Interventional Angiography			896	650	0	Gamma Knife	(0	0
Positron Emission Tomography (PET)	0	0	0	0	0	Cyber knife	(0	0
Computerized Axial Tomography (CAT)	3	0	7,038	25,178	0				
Magnetic Resonance Imaging	1	0	2,155	2,646	0				