



Transcript of **Public Hearing - Project No. 16-002**

Date: March 14, 2016

Case: State of Illinois Health Facilities and Services Review Board

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ILLINOIS DEPARTMENT OF PUBLIC HEALTH
HEALTH FACILITIES AND SERVICES REVIEW BOARD
BEFORE HEARING OFFICER JUAN MORADO, JR.

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IN RE: :
Public Comments Regarding :
Application to Establish : Project No. 16-002
a 68-Bed Long-Term Care :
Facility by Transitional :
Care of Fox Valley. :

-----x

PUBLIC HEARING
Aurora, Illinois
Monday, March 14, 2016
10:04 a.m.

Job No.: 106049

Pages: 1 - 22

Reported by: Melanie L. Humphrey-Sonntag,
CSR, RDR, CRR, CRC, FAPR

Public Hearing - Project No. 16-002
Conducted on March 14, 2016

2

1 HEARING held at the location of:

2

3 AURORA CITY COUNCIL CHAMBERS

4 22 East Downer Place

5 Aurora, Illinois 60505

6 (630) 256-4636

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13 Before Melanie L. Humphrey-Sonntag, a Certified
14 Shorthand Reporter, Registered Diplomate Reporter,
15 Certified Realtime Reporter, and a Notary Public in
16 and for the State of Illinois.

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Public Hearing - Project No. 16-002
Conducted on March 14, 2016

3

1 PRESENT:

2 ILLINOIS HEALTH FACILITIES AND SERVICES
3 REVIEW BOARD, by
4 JUAN MORADO, JR., Public Hearing Officer
5 SENATOR BRAD BURZYNSKI, Board Member
6 JEANNIE MITCHELL, Assistant General Counsel
7 525 West Jefferson Street
8 Second Floor
9 Springfield, Illinois 62761
10 (217) 782-3516

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Public Hearing - Project No. 16-002
Conducted on March 14, 2016

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P R O C E E D I N G S

HEARING OFFICER MORADO: Good morning.

My name's Juan Morado and I'm going to be the Hearing Officer today for the Illinois Health Facilities and Services Review Board. Present with me today is Board Member Brad Burzynski and Assistant General Counsel Jeannie Mitchell.

On behalf of the Health Facilities and Services Review Board, I'd like to thank you for attending this public hearing on Transitional Care of Fox Valley, Aurora.

As per the rules of the Illinois Health Facilities and Services Review Board, there was a legal notice that was published, and I'm going to go ahead and read that into the record today.

"Project No. 16-002, Transitional Care of Fox Valley, Aurora. In accordance with the requirements of the Illinois Health Facilities Planning Act, notice is given of a modification of an application for permit for the proposed establishment of a 68-bed long-term care facility from Transitional Care of Fox Valley, 4020-4090 East New York Street, Aurora, Illinois. The estimated project cost is \$15,903,691.

Public Hearing - Project No. 16-002
Conducted on March 14, 2016

5

1 "The application is considered a Type A
2 modification and was modified on February 25th,
3 2016. The modification consisted of the addition of
4 two coapplicants. This project is tentatively
5 scheduled to be heard at the May 10th, 2016, State
6 Board meeting."

7 The public hearing taking place today is
8 pursuant to 20 ILCS 3960. The hearing is scheduled
9 for Monday, March 14, at 10:00 a.m., and sign-in
10 occurred this morning from 9:30 to 10:00. It is
11 being held at the Aurora City Council, 44 East
12 Downer Place, Second Floor, Aurora, Illinois. The
13 public hearing is being conducted by staff for the
14 Health Facilities and Services Review Board, again
15 pursuant to that Health Facilities Planning Act.

16 The hearing is open to the public and will
17 afford an opportunity for parties with an interest
18 to present written and/or verbal comment relevant to
19 the project. All allegations or assertions should
20 be relevant to the need for the proposed project and
21 be supported with two copies of documentation or
22 materials that are printed or typed on paper sized
23 8 1/2 by 11.

24 Please note that, in order to ensure that

Public Hearing - Project No. 16-002
Conducted on March 14, 2016

6

1 the Health Facilities and Services Review Board
2 public hearings protect the privacy and maintain the
3 confidentiality of an individual's health
4 information, covered entities as defined by the
5 Health Insurance Portability and Accountability Act
6 of 1996 -- such as hospital providers, health plans,
7 health clearinghouses -- submitting oral or written
8 testimony that disclose protected health information
9 of individuals shall have a valid written
10 authorization from that individual. The
11 authorization shall cover the -- shall allow the
12 covered entity to share the individual's protected
13 information at this meeting.

14 If you have not had an opportunity to sign
15 in yet, you can see Ms. Mitchell. She'll have you
16 fill out one of the sheets. We're going to be
17 asking that you limit your testimony, and we're
18 going to be calling participants in numerical order.
19 Prior to beginning your remarks, please clearly
20 state and spell your full name for the court
21 reporter. After you have concluded your remarks, if
22 you have copies, please provide those to us up here.

23 And that's about it. So thank you very much
24 for coming today.

Public Hearing - Project No. 16-002
Conducted on March 14, 2016

7

1 We are going to begin today's proceedings
2 with a representative from Transitional Care of Fox
3 Valley.

4 And, Ms. Court Reporter, is it better for
5 this microphone or that one --

6 THE COURT REPORTER: That one.

7 HEARING OFFICER MORADO: If we can have you
8 use this microphone up here.

9 So if somebody from Transitional Care wanted
10 to come begin.

11 MR. CLOCH: You have everything in writing.

12 HEARING OFFICER MORADO: You want to do it
13 in writing? Okay. Then we'll just go in order.

14 We have Cam Lanning.

15 MS. LANNING: Good morning, everybody. My
16 name is Cam Lanning -- it's C-a-m L-a-n-n-i-n-g --
17 and I'm currently the administrator at The Grove of
18 Fox Valley in Aurora, and I oppose this project.

19 The approval of the Transitional Care
20 facility would be detrimental to my facility. We
21 provide the exact same services, and any claim that
22 these services are not available is untrue. It
23 would be impossible for this facility to be
24 successful without taking patients from my facility

Public Hearing - Project No. 16-002
Conducted on March 14, 2016

8

1 and from other facilities in the area, which is
2 already a highly competitive market.

3 If patients go somewhere else, it would be
4 devastating to my facility. We put \$2 million into
5 our facility last year. We serve the entire skilled
6 community, and this project proposes to serve only
7 one small portion, the high-reimbursement,
8 short-term patients.

9 We serve not only the Medicare and insurance
10 patients but we serve the Medicaid and public aid
11 patients. We would not be able to survive if these
12 short-term patients were taken away from us. This
13 means operations become less viable and certainly
14 have negative repercussions.

15 In short, they're attempting to add another
16 facility into an already-saturated market, and they
17 are only planning to focus on the most lucrative
18 patients, something that will ultimately ruin
19 skilled nursing care in Aurora and the surrounding
20 areas.

21 Thank you.

22 HEARING OFFICER MORADO: Thank you.

23 MS. LANNING: Thank you.

24 HEARING OFFICER MORADO: Lisa Williams.

Public Hearing - Project No. 16-002
Conducted on March 14, 2016

9

1 MS. WILLIAMS: Good morning. My name is
2 Lisa Williams, W-i-l-l-i-a-m-s.

3 I am currently the administrator of Symphony
4 at The Tillers, a very well-known, five star
5 facility that provides full structure of care not
6 only to the short-term rehab facility patients,
7 pulmonary, cardiac, full range of rehab programs
8 along with private-pay long-term care.

9 I'm opposing the project. As myself and my
10 competitors, we're competing daily in the market,
11 and we share around. Currently our facility is
12 probably about at 80 percent capacity, which we have
13 many open beds where we can serve the community.

14 Allowing this project will affect possible
15 employment for the community. As I was previously
16 on the other side and opened a high-end transitional
17 care facility in another community, I am very well
18 aware what the impact to the center has made to my
19 competitors in the market, which had caused them to
20 decrease beds to allow to care for other patients in
21 their community.

22 As I live in the community, I am aware that
23 the need -- what the needs are, and that's not
24 another short-term care facility.

Public Hearing - Project No. 16-002
Conducted on March 14, 2016

10

1 Thank you.

2 HEARING OFFICER MORADO: Thank you.

3 Mr. Fred Berkovits.

4 MR. BERKOVITS: Good morning. My name is
5 Fred Berkovits, B-e-r-k-o-v-i-t-s. I am a regional
6 director of operations for Bria of Geneva, and I'm
7 here to oppose the proposed project.

8 Geneva is a family-owned business. We're
9 licensed for 107 beds. We serve both the long-term
10 Medicaid population as well as the short-term rehab
11 population. Any claim that these services are not
12 available is untrue. We have private rooms,
13 semiprivate rooms. We do short-term rehabilitation.
14 We have a cardiac program; we have a CHF program; we
15 have a wound care program. In essence, we provide
16 the exact same services as those proposed, yet we're
17 running at an average census of 80 percent or less.

18 Moreover, if this subset of patients is
19 taken away from us, it will significantly impact our
20 viability in the community. The short-term rehab
21 patient is necessary not only for the viability of
22 our facility but also for the viability of the
23 necessary long-term care needed in the community.

24 We have strong relationships with the local

Public Hearing - Project No. 16-002
Conducted on March 14, 2016

11

1 hospitals and physicians' groups, and drawing this
2 population away from our facility will impact the
3 willingness of our physicians to care for the rest
4 of our patients.

5 In addition, we have experienced serious
6 staffing issues in this community. Recruiting and
7 retaining quality CNAs and nurses is a major
8 challenge, and we work desperately daily to properly
9 staff our facility. Allowing this project to go
10 forward will only make staffing more difficult.

11 In conclusion, it's impossible for the
12 proposed facility to succeed without taking patients
13 away from our facility and the other existing
14 facilities in the community because we all have the
15 capacity to serve this resident population.

16 Thank you.

17 HEARING OFFICER MORADO: Thank you.

18 Jennifer Davis.

19 MS. DAVIS: Good morning. I'm Jennifer
20 Davis, D-a-v-i-s. I'm the director of business
21 development and clinical nurse liaison for Community
22 Nursing & Rehab Center in Naperville.

23 Community is a Joint Commission-accredited
24 preferred provider in the Illinois Health Partners

Public Hearing - Project No. 16-002
Conducted on March 14, 2016

12

1 ACO. We're located a few minutes from the proposed
2 site of this project, which, if approved, the
3 facility would have a devastating effect on our
4 ability to provide in the planning area.

5 The applicant misrepresents the services
6 provided by our facility as well as the other area
7 facilities. In their application they state they
8 will provide skilled nursing, intensive rehab,
9 specialized programs in orthopedics, wound care, and
10 cardiac rehab and state that no existing skilled
11 nursing facility in the area provides the level of
12 care proposed by the applicant. This is a false
13 claim. It shows a total lack of understanding as to
14 what services the existing area facilities provide.

15 At Community Nursing & Rehab Center, we
16 specialize in all the services listed by the
17 applicant. In addition, our medical staff includes
18 pulmonary, cardiac, infectious disease, nephrology,
19 and wound care specialists who round at our facility
20 as well as seven-day-a week nurse practitioner
21 coverage.

22 In my role as director of business
23 development, I focus on our utilization as well as
24 the utilization of the other area providers. Over

Public Hearing - Project No. 16-002
Conducted on March 14, 2016

13

1 the last 12 months, there has been a substantial
2 decrease in the length of stay of the patients
3 receiving postacute care in our facility. This is
4 due to the focus of the ACOs to discharge patients
5 home earlier or to a lower-cost setting. As such,
6 our average census has had a considerable decrease.
7 In addition, the efforts to send patients home from
8 the hospital with home health and other community-
9 based services has had a negative impact on the
10 occupancy of area postacute providers.

11 This trend will only continue, and, as such,
12 any projected increased need for more skilled
13 nursing services can easily be met by the area
14 providers, who are all below the Board's target
15 utilization of 90 percent.

16 A few years ago a similar project in this
17 exact area was denied by the Board due to
18 underutilization of the area facilities. Since that
19 time, as I mentioned, the overall utilization of the
20 area facilities has declined. As such, if a similar
21 project received an intent to deny a few years ago,
22 then today, with even lower utilization at area
23 facilities, this project should certainly be denied.

24 I respectfully ask the Board to deny this

Public Hearing - Project No. 16-002
Conducted on March 14, 2016

14

1 project's application as it would have a devastating
2 impact on our facility and will duplicate services
3 already being provided by Community Nursing & Rehab
4 as well as other high-quality facilities in the
5 area.

6 Thank you.

7 HEARING OFFICER MORADO: Thank you.

8 Elliot Triplett.

9 MR. TRIPLETT: Good morning. My name is
10 Elliot Triplett -- first name is E-l-l-i-o-t; last
11 name is T-r-i-p-l-e-t-t -- and I'm here on behalf of
12 the Springs at Monarch Landing, which is located in
13 Planning Area C-7, the same applicant as
14 Transitional Care of Fox Valley.

15 I'm here today in opposition of Transitional
16 Care of Fox Valley's project on behalf of Monarch
17 Landing, which is home to over 500 residents and the
18 employer of over 350 employees.

19 The Springs at Monarch Landing is a five
20 star-rated 96-bed skilled nursing facility. Our
21 community opened in November of 2014 to serve the
22 most acute and long-term care needs of residents
23 that we have at Monarch Landing and also in the
24 greater Naperville area. Our building was designed

1 to have six separate living areas featuring
2 predominantly residential rooms with en suite baths,
3 lounge areas, and country kitchens all within a
4 warm, healing setting.

5 This unique design is in a smaller scale,
6 catering to 16 individuals each, which enables each
7 person to focus on their own health, social, and
8 emotional needs. Currently two of these areas are
9 dedicated to providing personalized postacute
10 services to residents discharging from the hospital
11 and requiring additional nursing care and therapy
12 services in order to return to their homes.

13 In addition, upon occupancy stabilization,
14 which is anticipated for early 2017, postacute
15 services will consume more than two-thirds of these
16 areas and provide services to 60 individuals on a
17 daily basis.

18 Transitional Care of Fox Valley claims that
19 their project is filling a service need currently
20 not available within the geographic area. That's
21 simply not true. The Springs at Monarch Landing is
22 designed both physically and programmatically to
23 care for older adults within a postacute setting.
24 If the certificate of need is granted to

Public Hearing - Project No. 16-002
Conducted on March 14, 2016

16

1 Transitional Care of Fox Valley, we anticipate that
2 occupancy will be negatively impacted, which will
3 cause serious financial implications for our
4 organization and our ability to provide excellent
5 care and services.

6 Monarch Landing is committed to maintaining
7 our five star rating as deemed by CMS but to -- in
8 order to achieve the economy of scale that was
9 presented by this project when it was first
10 approved. When you consider the various factors
11 required to gain approval for a skilled nursing
12 facility's certificate of need, such as the ability
13 to provide new services or impact to competitor
14 utilization, it is clear that Transitional Care of
15 Fox Valley does not meet this criteria.

16 We respectfully ask that the Board deny the
17 request for Project 16-002.

18 Thank you.

19 HEARING OFFICER MORADO: Thank you.

20 MS. MITCHELL: Mr. Triplett -- sorry. Can I
21 have your --

22 HEARING OFFICER MORADO: We have Teresa
23 McDaniel.

24 MS. MC DANIEL: Good morning. My name is

Public Hearing - Project No. 16-002
Conducted on March 14, 2016

17

1 Teresa McDaniel. It's T-e-r-e-s-a; McDaniel,
2 M-c-D-a-n-i-e-l.

3 We are -- I am representing -- I'm vice
4 president of clinical integration representing
5 Residential Health Care Group. We are a joint-
6 owned agency with an owner-operator in Naperville
7 and Elmhurst. We provide skilled nursing and rehab,
8 hospice, and palliative in the communities in Kane,
9 Kendall, DuPage County, south suburban Cook,
10 northern Will, and Lake.

11 My purpose in being here is to make the
12 Board understand that we are working very diligently
13 with our preferred providers, skilled nursing
14 facilities, and we're doing this in regards to the
15 initiatives that CMS is actually driving, in that
16 all health care providers are in the process of
17 redesigning care models in order for us to improve
18 quality and reduce costs.

19 At Residential we work closely with, also,
20 the Medicare conveners that help to manage financial
21 costs and quality over time, and with that they're
22 in the -- their focus is really to reduce
23 unnecessary utilization.

24 It takes a lot of man hours, a lot of

Public Hearing - Project No. 16-002
Conducted on March 14, 2016

18

1 resources for us to be able to manage within the
2 preferred skilled facilities. Adding an additional
3 skilled facility into this particular saturated
4 network just makes it very, very difficult for us to
5 manage the quality, manage the cost, I guess,
6 overall, and, really, focus on the patient care and
7 the community needs.

8 Collectively, we've been charged to be
9 accountable to improve our partnerships through
10 communication, which is more likely information
11 exchanges which, again, are very disparate systems.
12 They're very siloed. The additional Transitional
13 Care unit facility would actually just, again,
14 complicate matters in regards to the ability to
15 provide good care across the continuum. There's a
16 lot of sharing that gets on -- that is involved and,
17 again, we're focused on outcomes.

18 So we are asking the Board to reconsider and
19 oppose the facility itself to decrease the
20 unnecessary provider utilization and to really focus
21 on the quality and the cost of the care that we're
22 already providing.

23 Thank you.

24 HEARING OFFICER MORADO: Thank you.

Public Hearing - Project No. 16-002
Conducted on March 14, 2016

19

1 Okay. We have a number of written comments.
2 They're going to be going into the record, as well.

3 I'd just like to take this chance to see if
4 there's anyone who has not testified who would like
5 an opportunity to do so.

6 (No response.)

7 HEARING OFFICER MORADO: Okay. Hearing
8 none, is there anyone who has provided testimony
9 that would like to provide additional testimony?

10 (No response.)

11 HEARING OFFICER MORADO: Please note that
12 this project is tentatively scheduled for
13 consideration by the Board at its May 10th meeting.
14 That meeting will be held at the Marriott Conference
15 Center in Normal, Illinois.

16 The Board also has a meeting on March 29th at
17 the Bolingbrook golf course in Bolingbrook,
18 Illinois, at 2001 Rodeo Drive. All this information
19 is available on our website at www.hfsrb.illinois.gov,
20 and so you can check that website for more details
21 and possible agenda changes.

22 I'm going to ask that you please prepare to
23 take note of some of the following times and dates.
24 The times and dates that I'm going to be reading off

Public Hearing - Project No. 16-002
Conducted on March 14, 2016

20

1 to you now are with regard to providing written
2 comment for the March 29th meeting.

3 Tomorrow the State Board will be posting its
4 State Board staff reports, and those reports will be
5 made available via the Internet and our website.
6 The public may submit written responses in support
7 of or in opposition to the findings of the Illinois
8 Health Facilities and Services Review Board staff.
9 The public will have until 9:00 a.m. March 21st,
10 2016, to respond.

11 The Internet address, again, to access those
12 reports is www.hfsrb.illinois.gov. Written comments
13 and responses should be sent to the attention of
14 Courtney Avery, the Board administrator of the
15 Illinois Health Facilities and Services Review
16 Board, 525 West Jefferson Street, second floor, at
17 Springfield, Illinois 62761.

18 Are there any questions?

19 (No response.)

20 HEARING OFFICER MORADO: Okay. We're going
21 to keep the hearing open just for a few more
22 minutes, see if anyone else shows up before we close
23 it out. But if you don't have any questions,
24 thank you for being here today.

Public Hearing - Project No. 16-002
Conducted on March 14, 2016

21

1 (A recess was taken from 10:24 a.m. to
2 10:50 a.m.)

3 HEARING OFFICER MORADO: Is there anyone
4 else who would like to give testimony at this public
5 hearing?

6 Please, one at a time.

7 UNIDENTIFIED MALE: No rush; right?

8 HEARING OFFICER MORADO: Seeing as though
9 there are none, I hereby deem this public hearing
10 complete.

11 Thank you.

12 MR. SILBERMAN: Thank you.

13 (Off the record at 10:50 a.m.)
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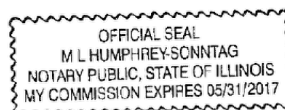
CERTIFICATE OF SHORTHAND REPORTER

I, Melanie L. Humphrey-Sonntag, Certified
Shorthand Reporter No. 084-004299, CSR, RDR, CRR,
CRC, FAPR, and a Notary Public in and for the County
of Kane, State of Illinois, the officer before whom
the foregoing proceedings were taken, do certify
that the foregoing transcript is a true and correct
record of the proceedings, that said proceedings
were taken by me stenographically and thereafter
reduced to typewriting under my supervision, and
that I am neither counsel for, related to, nor
employed by any of the parties to this case and have
no interest, financial or otherwise, in its outcome.

IN WITNESS WHEREOF, I have hereunto set my
hand and affixed my notarial seal this 14th day of
March, 2016.

My commission expires: May 31, 2017





Notary Public in and for the
State of Illinois

A			B
ability 12:4 16:4,12 18:14	22:17 afford 5:17	19:4,8 20:22 21:3 applicant 12:5,12,17 14:13	based 13:9
able 8:11 18:1	After 6:21	application 1:8 4:20 5:1 12:7 14:1	basis 15:17
about 6:23 9:12	again 5:14 18:11,13,17 20:11	approval 7:19 16:11	baths 15:2
access 20:11	agency 17:6	approved 12:2 16:10	because 11:14
accordance 4:17	agenda 19:21	area 8:1 12:4,6,11,14,24 13:10,13,17,18,20,22 14:5,13,24 15:20	become 8:13
Accountability 6:5	ago 13:16,21	areas 8:20 15:1,3,8,16	beds 9:13,20 10:9
accountable 18:9	ahead 4:15	around 9:11	been 13:1 18:8
achieve 16:8	aid 8:10	asking 6:17 18:18	before 1:3 2:13 20:22 22:6
ACO 12:1	all 5:19 11:14 12:16 13:14 15:3 17:16 19:18	assertions 5:19	begin 7:1,10
ACOs 13:4	allegations 5:19	Assistant 3:6 4:7	beginning 6:19
across 18:15	allow 6:11 9:20	attempting 8:15	behalf 4:8 14:11,16
Act 4:19 5:15 6:5	Allowing 9:14 11:9	attending 4:10	being 5:11,13 14:3 17:11 20:24
actually 17:15 18:13	along 9:8	attention 20:13	below 13:14
acute 14:22	already 8:2 14:3 18:22	Aurora 1:14 2:3,5 4:11,17,23 5:11,12 7:18 8:19	Berkovits 10:3,4,5
add 8:15	already-saturated 8:16	authorization 6:10,11	better 7:4
Adding 18:2	also 10:22 14:23 17:19 19:16	available 7:22 10:12 15:20 19:19 20:5	Board 1:2 3:3,5 4:5,6,9,13 5:6 5:14 6:1 13:17,24 16:16 17:12 18:18 19:13,16 20:3,4,8,14 20:16
addition 5:3 11:5 12:17 13:7 15:13	and/or 5:18	average 10:17 13:6	Board's 13:14
additional 15:11 18:2,12 19:9	another 8:15 9:17,24	Avery 20:14	Bolingbrook 19:17,17
address 20:11	anticipate 16:1	aware 9:18,22	both 10:9 15:22
administrator 7:17 9:3 20:14	anticipated 15:14	away 8:12 10:19 11:2,13	Brad 3:5 4:6
adults 15:23	any 7:21 10:11 13:12 20:18 20:23 22:13	a.m 5:9 20:9	Bria
affect 9:14	anyone		
affixed			

10:6 building 14:24 Burzynski 3:5 4:6 business 10:8 11:20 12:22 B-e-r-k-o-v-i-t-s 10:5	22:7 challenge 11:8 CHAMBERS 2:3 chance 19:3 changes 19:21 charged 18:8 check 19:20 CHF 10:14 City 2:3 5:11 claim 7:21 10:11 12:13 claims 15:18 clear 16:14 clearinghouses 6:7 clearly 6:19 clinical 11:21 17:4 CLOCH 7:11 close 20:22 closely 17:19 CMS 16:7 17:15 CNAs 11:7 coapplicants 5:4 Collectively 18:8 come 7:10 coming 6:24	comment 5:18 20:2 comments 1:7 19:1 20:12 commission 22:20 Commission-accredi... 11:23 committed 16:6 communication 18:10 communities 17:8 community 8:6 9:13,15,17,21,22 10:20,23 11:6,14,21 11:23 12:15 13:8 14:3,21 18:7 competing 9:10 competitive 8:2 competitor 16:13 competitors 9:10,19 complete 21:10 complicate 18:14 concluded 6:21 conclusion 11:11 conducted 5:13 Conference 19:14 confidentiality 6:3 consider 16:10 considerable 13:6 consideration 19:13	considered 5:1 consisted 5:3 consume 15:15 continue 13:11 continuum 18:15 conveners 17:20 Cook 17:9 copies 5:21 6:22 correct 22:8 cost 4:24 18:5,21 costs 17:18,21 Council 2:3 5:11 counsel 3:6 4:7 22:12 country 15:3 County 17:9 22:5 course 19:17 court 6:20 7:4,6 Courtney 20:14 cover 6:11 coverage 12:21 covered 6:4,12 CRC 1:24 22:5 criteria 16:15 CRR
C			
C 4:1 calling 6:18 Cam 7:14,16 capacity 9:12 11:15 cardiac 9:7 10:14 12:10,18 care 1:9,11 4:10,16,21,22 7:2,9,19 8:19 9:5,8,17 9:20,24 10:15,23 11:3 12:9,12,19 13:3 14:14 14:16,22 15:11,18,23 16:1,5,14 17:5,16,17 18:6,13,15,21 case 22:13 catering 15:6 cause 16:3 caused 9:19 census 10:17 13:6 center 9:18 11:22 12:15 19:15 certainly 8:13 13:23 certificate 15:24 16:12 22:1 Certified 2:13,15 22:3 certify			

1:24 22:4 CSR 1:24 22:4 currently 7:17 9:3,11 15:8,19 C-a-m 7:16 C-7 14:13	19:20 detrimental 7:20 devastating 8:4 12:3 14:1 development 11:21 12:23 difficult 11:10 18:4 diligently 17:12 Diplomate 2:14 director 10:6 11:20 12:22 discharge 13:4 discharging 15:10 disclose 6:8 disease 12:18 disparate 18:11 documentation 5:21 doing 17:14 Downer 2:4 5:12 drawing 11:1 Drive 19:18 driving 17:15 due 13:4,17 DuPage 17:9 duplicate 14:2 D-a-v-i-s 11:20	4:1,1 earlier 13:5 early 15:14 easily 13:13 East 2:4 4:22 5:11 economy 16:8 effect 12:3 efforts 13:7 Elliot 14:8,10 Elmhurst 17:7 else 8:3 20:22 21:4 emotional 15:8 employed 22:13 employees 14:18 employer 14:18 employment 9:15 en 15:2 enables 15:6 ensure 5:24 entire 8:5 entities 6:4 entity 6:12 essence 10:15 Establish 1:8	establishment 4:21 estimated 4:23 even 13:22 everybody 7:15 everything 7:11 exact 7:21 10:16 13:17 excellent 16:4 exchanges 18:11 existing 11:13 12:10,14 experienced 11:5 expires 22:20 E-l-l-i-o-t 14:10
D			F
D 4:1 daily 9:10 11:8 15:17 DANIEL 16:24 dates 19:23,24 Davis 11:18,19,20 day 22:17 declined 13:20 decrease 9:20 13:2,6 18:19 dedicated 15:9 deem 21:9 deemed 16:7 defined 6:4 denied 13:17,23 deny 13:21,24 16:16 DEPARTMENT 1:1 design 15:5 designed 14:24 15:22 desperately 11:8 details	E		facilities 1:2 3:2 4:5,8,13,18 5:14,15 6:1 8:1 11:14 12:7,14 13:18,20,23 14:4 17:14 18:2 20:8 20:15 facility 1:10 4:21 7:20,20,23 7:24 8:4,5,16 9:5,6,11 9:17,24 10:22 11:2,9 11:12,13 12:3,6,11,19 13:3 14:2,20 18:3,13 18:19 facility's 16:12 factors 16:10 false 12:12 family-owned 10:8 FAPR

1:24 22:5 featuring 15:1 February 5:2 few 12:1 13:16,21 20:21 fill 6:16 filling 15:19 financial 16:3 17:20 22:14 findings 20:7 first 14:10 16:9 five 9:4 14:19 16:7 floor 3:8 5:12 20:16 focus 8:17 12:23 13:4 15:7 17:22 18:6,20 focused 18:17 following 19:23 foregoing 22:7,8 forward 11:10 Fox 1:11 4:11,17,22 7:2,18 14:14,16 15:18 16:1 16:15 Fred 10:3,5 full 6:20 9:5,7	Geneva 10:6,8 geographic 15:20 give 21:4 given 4:19 go 4:14 7:13 8:3 11:9 going 4:3,14 6:16,18 7:1 19:2 19:2,22,24 20:20 golf 19:17 good 4:2 7:15 9:1 10:4 11:19 14:9 16:24 18:15 granted 15:24 greater 14:24 Group 17:5 groups 11:1 Grove 7:17 guess 18:5	19:7,7,11 20:20,21 21:3,5,8,9 hearings 6:2 held 2:1 5:11 19:14 help 17:20 here 6:22 7:8 10:7 14:11,15 17:11 20:24 hereby 21:9 hereunto 22:16 highly 8:2 high-end 9:16 high-quality 14:4 high-reimbursement 8:7 home 13:5,7,8 14:17 homes 15:12 hospice 17:8 hospital 6:6 13:8 15:10 hospitals 11:1 hours 17:24 Humphrey-Sonntag 1:23 2:13 22:3	14:2 16:13 impacted 16:2 implications 16:3 impossible 7:23 11:11 improve 17:17 18:9 includes 12:17 increased 13:12 individual 6:10 individuals 6:9 15:6,16 individual's 6:3,12 infectious 12:18 information 6:4,8,13 18:10 19:18 initiatives 17:15 insurance 6:5 8:9 integration 17:4 intensive 12:8 intent 13:21 interest 5:17 22:14 Internet 20:5,11 involved 18:16 issues 11:6 itself 18:19
G	H	I	J
G 4:1 gain 16:11 General 3:6 4:7	heard 5:5 hearing 1:3,13 2:1 3:4 4:2,4,10 5:7,8,13,16 7:7,12 8:22,24 10:2 11:17 14:7 16:19,22 18:24	ILCS 5:8 Illinois 1:1,14 2:5,16 3:2,9 4:4 4:12,18,23 5:12 11:24 19:15,18 20:7,15,17 22:6,24 impact 9:18 10:19 11:2 13:9	Jeannie 3:6 4:7 Jefferson

3:7 20:16 Jennifer 11:18,19 Job 1:21 joint 11:23 17:5 JR 1:3 3:4 Juan 1:3 3:4 4:3	limit 6:17 Lisa 8:24 9:2 listed 12:16 live 9:22 living 15:1 local 10:24 located 12:1 14:12 location 2:1 long-term 1:9 4:21 9:8 10:9,23 14:22 lot 17:24,24 18:16 lounge 15:3 lower 13:22 lower-cost 13:5 lucrative 8:17 L-a-n-n-i-n-g 7:16	market 8:2,16 9:10,19 Marriott 19:14 materials 5:22 matters 18:14 MC 16:24 McDaniel 16:23 17:1,1 means 8:13 Medicaid 8:10 10:10 medical 12:17 Medicare 8:9 17:20 meet 16:15 meeting 5:6 6:13 19:13,14,16 20:2 Melanie 1:23 2:13 22:3 Member 3:5 4:6 mentioned 13:19 met 13:13 microphone 7:5,8 million 8:4 minutes 12:1 20:22 misrepresents 12:5 Mitchell 3:6 4:7 6:15 16:20 models 17:17 modification 4:19 5:2,3	modified 5:2 Monarch 14:12,16,19,23 15:21 16:6 Monday 1:15 5:9 months 13:1 Morado 1:3 3:4 4:2,3 7:7,12 8:22,24 10:2 11:17 14:7 16:19,22 18:24 19:7,11 20:20 21:3,8 Moreover 10:18 morning 4:2 5:10 7:15 9:1 10:4 11:19 14:9 16:24 M-c-D-a-n-i-e-l 17:2
K Kane 17:8 22:6 keep 20:21 Kendall 17:9 kitchens 15:3			
L L 1:23 2:13 22:3 lack 12:13 Lake 17:10 Landing 14:12,17,19,23 15:21 16:6 Lanning 7:14,15,16 8:23 last 8:5 13:1 14:10 legal 4:14 length 13:2 less 8:13 10:17 level 12:11 liaison 11:21 licensed 10:9	M maintain 6:2 maintaining 16:6 major 11:7 MALE 21:7 man 17:24 manage 17:20 18:1,5,5 March 1:15 5:9 19:16 20:2,9 22:18		N N 4:1 name 6:20 7:16 9:1 10:4 14:9 14:10,11 16:24 name's 4:3 Naperville 11:22 14:24 17:6 necessary 10:21,23 need 5:20 9:23 13:12 15:19 15:24 16:12 needed 10:23 needs 9:23 14:22 15:8 18:7 negative 8:14 13:9 negatively 16:2 neither 22:12 nephrology

12:18 network 18:4 new 4:23 16:13 none 19:8 21:9 Normal 19:15 northern 17:10 notarial 22:17 Notary 2:15 22:5,23 note 5:24 19:11,23 notice 4:14,19 November 14:21 number 19:1 numerical 6:18 nurse 11:21 12:20 nurses 11:7 nursing 8:19 11:22 12:8,11,15 13:13 14:3,20 15:11 16:11 17:7,13 O O 4:1 occupancy 13:10 15:13 16:2 occurred 5:10 officer 1:3 3:4 4:2,4 7:7,12 8:22,24 10:2 11:17 14:7 16:19,22 18:24 19:7,11 20:20 21:3,8 22:6 Okay	7:13 19:1,7 20:20 older 15:23 one 6:16 7:5,6 8:7 21:6 open 5:16 9:13 20:21 opened 9:16 14:21 operations 8:13 10:6 opportunity 5:17 6:14 19:5 oppose 7:18 10:7 18:19 opposing 9:9 opposition 14:15 20:7 oral 6:7 order 5:24 6:18 7:13 15:12 16:8 17:17 organization 16:4 orthopedics 12:9 other 8:1 9:16,20 11:13 12:6 12:24 13:8 14:4 otherwise 22:14 outcome 22:14 outcomes 18:17 overall 13:19 18:6 own 15:7 owned 17:6 owner-operator 17:6 P P	4:1 Pages 1:22 palliative 17:8 paper 5:22 participants 6:18 particular 18:3 parties 5:17 22:13 Partners 11:24 partnerships 18:9 patient 10:21 18:6 patients 7:24 8:3,8,10,11,12,18 9:6,20 10:18 11:4,12 13:2,4,7 percent 9:12 10:17 13:15 permit 4:20 person 15:7 personalized 15:9 physically 15:22 physicians 11:1,3 place 2:4 5:7,12 planning 4:19 5:15 8:17 12:4 14:13 plans 6:6 please 5:24 6:19,22 19:11,22 21:6 population 10:10,11 11:2,15	Portability 6:5 portion 8:7 possible 9:14 19:21 postacute 13:3,10 15:9,14,23 posting 20:3 practitioner 12:20 predominantly 15:2 preferred 11:24 17:13 18:2 prepare 19:22 present 3:1 4:5 5:18 presented 16:9 president 17:4 previously 9:15 printed 5:22 Prior 6:19 privacy 6:2 private 10:12 private-pay 9:8 probably 9:12 proceedings 7:1 22:7,9,9 process 17:16 program 10:14,14,15 programmatically 15:22 programs
---	---	--	---

9:7 12:9 project 1:8 4:16,24 5:4,19,20 7:18 8:6 9:9,14 10:7 11:9 12:2 13:16,21,23 14:16 15:19 16:9,17 19:12 projected 13:12 project's 14:1 properly 11:8 proposed 4:20 5:20 10:7,16 11:12 12:1,12 proposes 8:6 protect 6:2 protected 6:8,12 provide 6:22 7:21 10:15 12:4,8 12:14 15:16 16:4,13 17:7 18:15 19:9 provided 12:6 14:3 19:8 provider 11:24 18:20 providers 6:6 12:24 13:10,14 17:13,16 provides 9:5 12:11 providing 15:9 18:22 20:1 public 1:1,7,13 2:15 3:4 4:10 5:7,13,16 6:2 8:10 20:6,9 21:4,9 22:5,23 published 4:14 pulmonary 9:7 12:18 purpose 17:11	pursuant 5:8,15 put 8:4 Q quality 11:7 17:18,21 18:5,21 questions 20:18,23 R R 4:1 range 9:7 rating 16:7 RDR 1:24 22:4 read 4:15 reading 19:24 really 17:22 18:6,20 Realtime 2:15 received 13:21 receiving 13:3 recess 21:1 reconsider 18:18 record 4:15 19:2 21:13 22:9 Recruiting 11:6 redesigning 17:17 reduce 17:18,22 reduced 22:11 regard 20:1	Regarding 1:7 regards 17:14 18:14 regional 10:5 Registered 2:14 rehab 9:6,7 10:10,20 11:22 12:8,10,15 14:3 17:7 rehabilitation 10:13 related 22:12 relationships 10:24 relevant 5:18,20 remarks 6:19,21 repercussions 8:14 Reported 1:23 reporter 2:14,14,15 6:21 7:4,6 22:1,4 reports 20:4,4,12 representative 7:2 representing 17:3,4 request 16:17 required 16:11 requirements 4:18 requiring 15:11 resident 11:15 residential 15:2 17:5,19 residents	14:17,22 15:10 resources 18:1 respectfully 13:24 16:16 respond 20:10 response 19:6,10 20:19 responses 20:6,13 rest 11:3 retaining 11:7 return 15:12 Review 1:2 3:3 4:5,9,13 5:14 6:1 20:8,15 right 21:7 Rodeo 19:18 role 12:22 rooms 10:12,13 15:2 round 12:19 ruin 8:18 rules 4:12 running 10:17 rush 21:7 S S 4:1 same 7:21 10:16 14:13 saturated 18:3 scale 15:5 16:8
---	--	--	--

scheduled 5:5,8 19:12 seal 22:17 second 3:8 5:12 20:16 see 6:15 19:3 20:22 Seeing 21:8 semiprivate 10:13 SENATOR 3:5 send 13:7 sent 20:13 separate 15:1 serious 11:5 16:3 serve 8:5,6,9,10 9:13 10:9 11:15 14:21 service 15:19 services 1:2 3:2 4:5,9,13 5:14 6:1 7:21,22 10:11,16 12:5,14,16 13:9,13 14:2 15:10,12,15,16 16:5,13 20:8,15 set 22:16 setting 13:5 15:4,23 seven-day-a 12:20 shall 6:9,11,11 share 6:12 9:11 sharing 18:16 sheets 6:16	She'll 6:15 short 8:15 Shorthand 2:14 22:1,4 short-term 8:8,12 9:6,24 10:10,13 10:20 should 5:19 13:23 20:13 shows 12:13 20:22 side 9:16 sign 6:14 significantly 10:19 sign-in 5:9 SILBERMAN 21:12 siloed 18:12 similar 13:16,20 simply 15:21 Since 13:18 site 12:2 six 15:1 sized 5:22 skilled 8:5,19 12:8,10 13:12 14:20 16:11 17:7,13 18:2,3 small 8:7 smaller 15:5 social 15:7	some 19:23 somebody 7:9 something 8:18 somewhere 8:3 sorry 16:20 south 17:9 specialists 12:19 specialize 12:16 specialized 12:9 spell 6:20 Springfield 3:9 20:17 Springs 14:12,19 15:21 stabilization 15:13 staff 5:13 11:9 12:17 20:4,8 staffing 11:6,10 star 9:4 16:7 star-rated 14:20 state 2:16 5:5 6:20 12:7,10 20:3,4 22:6,24 stay 13:2 stenographically 22:10 Street 3:7 4:23 20:16 strong 10:24 structure 9:5	submit 20:6 submitting 6:7 subset 10:18 substantial 13:1 suburban 17:9 succeed 11:12 successful 7:24 suite 15:2 supervision 22:11 support 20:6 supported 5:21 surrounding 8:19 survive 8:11 Symphony 9:3 systems 18:11 T take 19:3,23 taken 8:12 10:19 21:1 22:7 22:10 takes 17:24 taking 5:7 7:24 11:12 target 13:14 tentatively 5:4 19:12 Teresa 16:22 17:1 testified
---	--	--	---

19:4 testimony 6:8,17 19:8,9 21:4 thank 4:9 6:23 8:21,22,23 10:1,2 11:16,17 14:6 14:7 16:18,19 18:23 18:24 20:24 21:11,12 therapy 15:11 Tillers 9:4 time 13:19 17:21 21:6 times 19:23,24 today 4:4,6,15 5:7 6:24 13:22 14:15 20:24 today's 7:1 Tomorrow 20:3 total 12:13 transcript 22:8 transitional 1:10 4:10,16,22 7:2,9 7:19 9:16 14:14,15 15:18 16:1,14 18:12 trend 13:11 Triplett 14:8,9,10 16:20 true 15:21 22:8 two 5:4,21 15:8 two-thirds 15:15 Type 5:1 typed 5:22 typewriting 22:11	T-e-r-e-s-a 17:1 T-r-i-p-l-e-t-t 14:11 U ultimately 8:18 under 22:11 understand 17:12 understanding 12:13 underutilization 13:18 UNIDENTIFIED 21:7 unique 15:5 unit 18:13 unnecessary 17:23 18:20 untrue 7:22 10:12 use 7:8 utilization 12:23,24 13:15,19,22 16:14 17:23 18:20 V valid 6:9 Valley 1:11 4:11,17,22 7:3,18 14:14 15:18 16:1,15 Valley's 14:16 various 16:10 verbal 5:18 viability 10:20,21,22 viable 8:13	vice 17:3 W want 7:12 wanted 7:9 warm 15:4 website 19:19,20 20:5 week 12:20 well-known 9:4 West 3:7 20:16 we'll 7:13 we're 6:16,17 9:10 10:8,16 12:1 17:14 18:17,21 20:20 we've 18:8 WHEREOF 22:16 Williams 8:24 9:1,2 willingness 11:3 WITNESS 22:16 work 11:8 17:19 working 17:12 wound 10:15 12:9,19 writing 7:11,13 written 5:18 6:7,9 19:1 20:1,6 20:12 www.hfsrb.illinois.gov 19:19 20:12 W-i-l-l-i-a-m-s	9:2 X x 1:5,12 Y year 8:5 years 13:16,21 York 4:23 \$ \$15,903,691 4:24 \$2 8:4 0 084-004299 22:4 1 1 1:22 1/2 5:23 10th 5:5 19:13 10:00 5:9,10 10:04 a.m 1:16 10:24 a.m 21:1 10:50 a.m 21:2,13 106049 1:21 107 10:9 11 5:23 12 13:1 14
--	---	--	---

1:15 5:9			
14th	5		
22:17	500		
16	14:17		
15:6	525		
16-002	3:7 20:16		
1:8 4:16 16:17	6		
1996	60		
6:6	15:16		
	60505		
2	2:5		
20	62761		
5:8	3:9 20:17		
2001	630		
19:18	2:6		
2014	68-bed		
14:21	1:9 4:21		
2016	7		
1:15 5:3,5 20:10 22:18	782-3516		
2017	3:10		
15:14 22:20	8		
21st	8		
20:9	5:23		
217	80		
3:10	9:12 10:17		
22	9		
1:22 2:4	9:00		
25th	20:9		
5:2	9:30		
256-4636	5:10		
2:6	90		
29th	13:15		
19:16 20:2	96-bed		
	14:20		
3			
31			
22:20			
350			
14:18			
3960			
5:8			
4			
4020-4090			
4:22			
44			
5:11			