



STATE OF ILLINOIS  
HEALTH FACILITIES AND SERVICES REVIEW BOARD

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<b>DOCKET NO:</b> H-11	<b>BOARD MEETING:</b> January 9, 2018	<b>PROJECT NO:</b> 17-059	<b>PROJECT COST:</b>
<b>FACILITY NAME:</b> Deerpath Orthopedic Surgical Center		<b>CITY:</b> Morris	Original: \$600,000
<b>TYPE OF PROJECT:</b> Non-Substantive			<b>HSA:IX</b>

**PROJECT DESCRIPTION:** The Applicant (Deerpath Orthopedic Surgical Center, LLC) proposes to add seven surgical specialties to an existing limited specialty Ambulatory Surgical Treatment Center ("ASTC"). The cost of the project is \$600,000. The expected completion date is December 31, 2018. Should this project be approved the facility will be a multi-specialty ASTC.

## **EXECUTIVE SUMMARY**

### **PROJECT DESCRIPTION:**

- The Applicant (Deerpath Orthopedic Surgical Center, LLC) proposes to add seven surgical specialties to an existing limited specialty Ambulatory Surgical Treatment Center (“ASTC”). The cost of the project is \$600,000. The expected completion date is December 31, 2018. Should this project be approved the facility will be a multi-specialty ASTC.
- In October 2002 Deerpath Orthopedic Surgical Center, LLC was approved as Permit #02-046. At the time the State Board approved the facility as a limited specialty ASTC providing orthopedic and podiatry specialties in approximately 6,940 GSF of space with two operating rooms.

### **WHY THE PROJECT IS BEFORE THE STATE BOARD:**

- This project is before the State Board because the project proposes a substantial change in scope or functional operation of a health care facility. (20 ILCS 3960).

### **PURPOSE OF THE PROJECT:**

- According to the Applicant the purpose of the project is to
  1. *Optimize the use of the facility capacity at Deerpath;*
  2. *Improve the patient experience by providing more convenience, shorter visit times, and lower costs while maintaining the coordination of patient care;*
  3. *Establish Deerpath ASTC as a primary site for Morris Hospital and Healthcare Centers' ambulatory surgery service; and*
  4. *Avoid duplicative services by coordination and consolidation of outpatient surgical facilities among the Hospital and the ASTC.”*

### **PUBLIC HEARING/COMMENT**

There was no public hearing requested and no opposition letters received by the State Board. Letters of support was received from the community. [See Appendix I at the conclusion of this report]

### **SUMMARY:**

- The Applicant addressed a total of 21 criteria and has successfully addressed them all.

**STATE BOARD STAFF REPORT**  
**Project #17-059**  
**Deerpath Orthopedic Surgical Center**

<b>APPLICATION/SUMMARY/CHRONOLOGY</b>	
Applicants	Deerpath Orthopedic Surgical Center, LLC
Facility Name	Deerpath Orthopedic Surgical Center
Location	1051 US Route 6, Morris, Illinois
Application Received	October 23, 2017
Application Deemed Complete	October 26, 2017
Operating Entity Licensee	Deerpath Orthopedic Surgical Center, LLC
Owner of the Site	Morris Hospital and Health Centers
Permit Holder	Deerpath Orthopedic Surgical Center, LLC
Total GSF	6,940 GSF
Financial Commitment Date	January 9, 2018
Completion Date	December 31, 2018
Approved for Expedited Review	No
Review Period Extended by the State Board Staff?	No
Can the Applicant request a deferral?	Yes

**I. Project Description**

The Applicant (Deerpath Orthopedic Surgical Center, LLC) proposes to add seven surgical specialties to an existing limited specialty Ambulatory Surgical Treatment Center (“ASTC”). The cost of the project is \$600,000. The expected completion date is December 31, 2018. Should this project be approved the facility will be a multi-specialty ASTC.

**II. Summary of Findings**

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

**III. General Information**

The Applicant is Deerpath Orthopedic Surgical Center, LLC. Deerpath Orthopedic Surgical Center, LLC is a domestic limited liability company operating a limited specialty ASTC with two operating rooms performing orthopedic and podiatry surgery.

#### **IV. Health Service Area**

Deerpath Orthopedic Surgical Center is located in the HSA IX Health Service Area and the A-13 Hospital Planning Area. HSA IX includes the counties of Grundy, Kankakee, Kendall, and Will. The A-13 Hospital Planning Area includes Grundy and Will Counties. There are four acute care hospitals in the A-13 Hospital Planning Area: Adventist Bolingbrook Hospital (Bolingbrook), Morris Hospital and Healthcare Centers (Morris), Presence Saint Joseph Medical Center (Joliet), and Silver Cross Hospital and Medical Centers (New Lenox). There are ten ASTCs in the HSA IX Health Service Area.

1. Deerpath Orthopedic Surgical Center, Morris
2. DMG Center for Pain Management, Naperville
3. Edward Plainfield Surgery Center, Plainfield
4. Healthsouth Amsurg Surgery Center, Joliet
5. Kendall Pointe Surgery Center, LLC, Oswego
6. Oak Surgical Institute, Bradley
7. Riverside Ambulatory Surgery Center, LLC, Bourbonnais
8. Silver Cross Ambulatory Treatment Center, New Lenox
9. Southwest Surgery Center, L.L.C., Mokena
10. The Center for Digestive Health, Bourbonnais

#### **V. Project Detail**

The Applicant proposes to expand its existing surgical services. The additional surgical cases are to be referred from the existing caseload from Morris Hospital & Healthcare Centers. The Applicant is proposing to add the following surgical specialties

1. Endoscopy:
2. ENT
3. Ophthalmology:
4. Urology:
5. GYN:
6. General Surgery:
7. Pain Management

Deerpath Orthopedic Surgical Center is an existing limited specialty ASTC located in Morris Illinois. Its current specialties include orthopedics and podiatry. The current utilization of Center's two operating rooms is approximately 29%, below the Board's target of 80%. Morris Hospital & Medical Healthcare Centers<sup>1</sup> owns 48% of Deerpath ASTC. According to the Applicant this project will coordinate the caseloads and facility capacities among Deerpath and Morris Hospital & Healthcare Centers. According to the Applicant it is the intent of Morris Hospital & Medical Centers and Deerpath ASTC to position the programs at both facilities for better coordination of patient care and more efficient use of resources. According to the

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• <sup>1</sup> Morris Hospital and Healthcare Centers is not considered an Applicant on this Application for Permit because it did not meet the requirements of (77 ILAC 1130.230 (a)).

Applicant “it has been determined that the referral of additional specialty volumes currently performed at Morris Hospital to Deerpath ASTC will assist both facilities and the greater community area in repositioning themselves for the continuing trends in healthcare delivery, and improve the patient experience and quality of care. Specifically, this project will:

- Optimize the use of the facility capacity at Deerpath;
- Improve the patient experience by providing more convenience, shorter visit times, and lower costs while maintaining the coordination of patient care;
- Establish Deerpath ASTC as a primary site for Morris Hospital and Healthcare Centers' ambulatory surgery service; and
- Avoid duplicative services by coordination and consolidation of outpatient surgical facilities among the Hospital and the ASTC.”

All the additional patient volume being proposed for Deerpath is to be referred from the caseload at Morris Hospital & Medical Centers. Per the Applicant Morris Hospital & Healthcare Centers is currently planning an extensive modernization project, above the CON capital threshold to be submitted for approval by the State Board in the summer of 2018. In its project planning Morris Hospital and Medical Centers will consolidate its surgical capacity to account for the caseload being deflected to Deerpath Orthopedic Surgical Center.

The table below provides the name of the entities or individuals with 5% or more interest in Deerpath Orthopedic Surgical Center, LLC.

Morris Hospital & Healthcare Centers	48.40%
Keith M. Rezin, MD	18.90%
Eric T Ortica, MD	10.84%
Raymond J Meyer, MD	10.84%
Kyle T. Pearson, D.P.M	5.00%

## VI. Project Uses and Sources of Funds

The Applicant is funding this project with a bank loan in the amount of \$600,000.

TABLE ONE Project Uses and Sources of Funds			
Use of Funds	Reviewable	Total	% of Total
Consulting and Other Fees	\$55,000	\$55,000	9.2%
Movable or Other Equipment (not in construction contracts)	\$527,500	\$527,500	87.9%
Other Costs To Be Capitalized (equipment contingency)	\$17,500	\$17,500	2.9%
Total Uses Of Funds	\$600,000	\$600,000	100.00%
Source Of Funds			
Other Funds and Sources (Bank Loan)	\$600,000	\$600,000	
Total Sources Of Funds	\$600,000	\$600,000	

<b>TABLE TWO</b> <b>Itemization of Project Costs</b> <b>Medical Equipment - New Specialties</b>	
Endoscopy (GI & EGO Scopes, Light Source, Screen, Pumps & Suction, Washer Disinfectant):	\$150,500
ENT (Instrument trays, Microscope)	\$23,000
Ophthalmology (Instrument trays, Microscope, Phaco) Urology (Cysto Instrument trays)	\$131,000
Urology	\$25,000
GYN { Instrument trays, Endoscope)	\$28,000
General Surgery (Laposcopic Tower, Instrument trays) Pain Management	\$120,000
Computer & Communications Upgrades	\$55,000

## **VII. Background of the Applicant**

### **A) Criterion 1110.1540(b)(1) & (3) – Background of the Applicant**

*An applicant must demonstrate that it is fit, willing and able, and has the qualifications, background and character to adequately provide a proper standard of health care service for the community. To demonstrate compliance with this criterion the Applicant must provide*

- A) A listing of all health care facilities currently owned and/or operated by the applicant in Illinois or elsewhere, including licensing, certification and accreditation identification numbers, as applicable;
- B) A listing of all health care facilities currently owned and/or operated in Illinois, by any corporate officers or directors, LLC members, partners, or owners of at least 5% of the proposed health care facility;
- C) Authorization permitting HFSRB and IDPH access to any documents necessary to verify the information submitted, including, but not limited to: official records of IDPH or other State agencies; the licensing or certification records of other states, when applicable; and the records of nationally recognized accreditation organizations. Failure to provide the authorization shall constitute an abandonment or withdrawal of the application without any further action by HFSRB.
- D) An attestation that the Applicant has had no *adverse action*<sup>2</sup> taken against any of the facilities that it owns or operates.

1. The Applicant has attested that there has been no adverse action taken against any of the facilities owned or operated by the Applicant[Application for Permit page 36-37]
2. The Applicant has authorized the Illinois Health Services Review Board and the Illinois Department of Public Health to have access to any documents necessary to verify information submitted in connections the applicants' certificate of need to establish a twelve station ESRD facility. The authorization includes, but is not limited to: official records of IDPH or other State agencies; the licensing or certification records of other states, when applicable; and the records of nationally recognized accreditation organizations. [Application for Permit pages 36-37]
3. The site is owned by Morris Hospital and Healthcare Centers and evidence of this can be found at page 26 of the application for permit.

<sup>2</sup> <sup>2</sup> "Adverse action is defined as a disciplinary action taken by IDPH, CMMS, or any other State or federal agency against a person or entity that owns or operates or owns and operates a licensed or Medicare or Medicaid certified healthcare facility in the State of Illinois. These actions include, but are not limited to, all Type "A" and Type "AA" violations." (77 IAC 1130.140)

4. The Applicant provided evidence that they were in compliance with Executive Order #2006-05 that requires *all State Agencies responsible for regulating or permitting development within Special Flood Hazard Areas shall take all steps within their authority to ensure that such development meets the requirements of this Order. State Agencies engaged in planning programs or programs for the promotion of development shall inform participants in their programs of the existence and location of Special Flood Hazard Areas and of any State or local floodplain requirements in effect in such areas. Such State Agencies shall ensure that proposed development within Special Flood Hazard Areas would meet the requirements of this Order.*
5. The proposed location of the ESRD facility is in compliance with the Illinois State Agency Historic Resources Preservation Act which requires *all State Agencies in consultation with the Director of Historic Preservation, institute procedures to ensure that State projects consider the preservation and enhancement of both State owned and non-State owned historic resources* (20 ILCS 3420/1).

**STATE BOARD STAFF FINDS THE PROPOSED PROJECT IN CONFORMANCE WITH CRITERION BACKGROUND OF THE APPLICANT (77 ILAC 1110.1430(b)(1) & (3))**

**VIII. Purpose of the Project, Safety Net Impact Statement, Alternatives to the Project**

**A) Criterion 1110.1540(a) – Purpose of the Project**

To demonstrate compliance with this criterion the Applicants must document that the project will provide health services that improve the health care or well-being of the market area population to be served. The applicant shall define the planning area or market area, or other area, per the applicant's definition.

**The Applicant stated the following:**

*“The Deerpath Orthopedic Surgical Center was established in 2003 as a limited specialty ASTC consisting of 2 operating rooms and providing orthopedic and podiatric services. It was established to provide limited services as a joint venture with Morris Hospital, the physicians and surgeons of Rezin Orthopedics and Sports Medicine and the surgeons of Centers for Foot and Ankle Surgery.*

*This expansion project is being coordinated with Morris Hospital & Healthcare Centers, also in Morris, about 1 mile from Deerpath. After detailed strategic and operational planning, it has been determined that the deflection of additional specialty volumes exclusively from Morris Hospital to Deerpath will assist both facilities and the greater community area in repositioning themselves for the continuing trends in healthcare delivery.*

*Once implemented this project will:*

1. *Optimize the facility utilization of the existing treatment capacity at Deerpath ASTC. Currently, Deerpath is operating at about 29 percent utilization. Within 2 years of project approval, Deerpath ASTC will be operating above the Board's targeted utilization of 75 percent;*
2. *Improve the patient experience by providing more convenience and lower costs for outpatient surgical cases currently performed at Morris Hospital; The total costs for procedures being deflected from hospital based to ASTC based are expected to be significantly lower for both the patient and the third party payor. Within the ASC (Ambulatory Surgery Center) the third party payer, Medicare, and the patient about 50*

- percent respectively, versus the HOPD (Hospital Outpatient Department). Additionally, it is expected that the total patient experienced perioperative times (registration/preop/procedure/recovery/discharge) will be reduced by at least 33 percent, consistent with published data. By optimizing the utilization at Deerpath ASTC, the fixed costs per case will be reduced such that the cost of providing services will be lowered.*
- 3. Avoid duplicative services and duplicative costs by coordination with Morris Hospital to consolidate and improve its surgical facilities.*

*Morris Hospital's surgical facilities were constructed circa 1960 and are in need of modernization. Modernization funds will not be expended at Morris Hospital to accommodate the case volume that is going to Deerpath. The deflection of cases to Deerpath is to utilize existing capacity, thereby improving its efficiencies and reducing facility duplication. This project will coordinate and consolidate the ambulatory surgical programs at Deerpath ASTC and Morris Hospital. This is directly responsive to the Board's statutory objective:*

*"... promotes through the process of comprehensive health planning the orderly and economic development of health care facilities in the State of Illinois to avoid unnecessary duplication of facilities or services;" (20 ILCS 3960/12)*

*The facility's Geographic Service Area (GSA) has been defined as the zip codes within a 45 minute drive time of the facility. Over 90 percent of the patients historically served reside in this GSA. It is estimated that this percentage will continue into the future.*

*Deerpath Orthopedic Surgical Center and Morris Hospital & Healthcare Centers are the only Hospital and ASTC facilities in Grundy County. By implementing this project Deerpath ASTC becomes a primary site of Morris Hospital's ambulatory surgery program. Together, Deerpath ASTC and Morris Hospital and Healthcare Centers will continue to develop comprehensive and consolidated health services for its patient population."*

## **B) Criterion 1110.230 (b) – Safety Impact Statement**

**To demonstrate compliance with this criterion the Applicants must document the safety net impact if any of the proposed project.** *Safety net services are the services provided by health care providers or organizations that deliver health care services to persons with barriers to mainstream health care due to lack of insurance, inability to pay, special needs, ethnic or cultural characteristics, or geographic isolation. [20 ILCS 3960/5.4]*

The project is a non-substantive project subject to a 60-day review. Non-Substantive projects are **all** projects not considered substantive or emergency projects. Substantive projects shall include no more than the following:

- 1. Projects to construct a new or replacement facility located on a new site; or a replacement facility located on the same site as the original facility and the costs of the replacement facility exceed the capital expenditure minimum.*
- 2. Projects proposing a new service or discontinuation of a service, which shall be reviewed by the Board within 60 days.*
- 3. Projects proposing a change in the bed capacity of a health care facility by an increase in the total number of beds or by a redistribution of beds among various categories of service or by a relocation of beds from one facility to another by more than 20 beds or more than 10% of total bed capacity, as defined by the State Board in the Inventory, whichever is less, over a 2-year period. [20 ILCS 3960/12]*



Emergency Projects are projects that are emergent in nature and must be undertaken immediately to prevent or correct structural deficiencies or hazardous conditions that may harm or injure persons using the facility, as defined at 77 Ill. Adm. Code 1110.40(a). [20 ILCS 3960/12(9)]

The Applicant did not provide charity care for patients for CY 2014, CY 2015 and CY 2016 as reported to the State Board as part of the Annual ASTC Survey.

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

**To demonstrate compliance with this criterion the Applicants must document that the proposed project is the most effective or least costly alternative for meeting the health care needs of the population to be served by the project.**

The Applicant considered two other alternatives to the proposed project.

**1. Alternative 1: Maintain All Surgical Services and Caseload at Morris Hospital & Healthcare Centers**

The Morris Hospital surgical facilities were constructed in the 1960's and are in need of upgrading and modernization. If the Hospital were to renovate its perioperative<sup>3</sup> facilities to accommodate the full expected caseload (without referrals to Deerpath) we currently estimate that the additional marginal costs of \$1,080,000 to \$1,620,000 in capital expenditures would be required. This includes overall accommodation of the caseload in facilities (procedure rooms and pre- and post-operative processing) as well as medical equipment upgrades and modernization (two to three treatment rooms at 1,200 DGSF each at \$450/sf renovation costs).

By maintaining these procedures in the Hospital, however, our system would not be responsive to the current and projected trends of the shifting venues for outpatient services from the Hospital-based to the ambulatory facility. Additionally, it would be contrary to Morris Hospital & Healthcare Centers' ongoing developments to maximize patient care in terms of quality, convenience and cost. Deerpath ASTC would remain substantially underutilized. For the above reasons, this Alternative was rejected.

**2. Alternative 2: Deflect Patient Caseload to Other ASTCs**

Our number one priority is the provision of the highest quality of patient care. For a number of years Morris Hospital & Healthcare Centers has been developing an integrated and comprehensive network of quality patient care services. This is evidenced by the development of 25 healthcare centers throughout the area including the development of a Radiation Therapy Center and the participation in the Deerpath Orthopedic Surgical Center.

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<sup>3</sup> Perioperative means pertaining or relating to the period of time surrounding a surgical procedure, including the preoperative, intraoperative, and postoperative periods.

Like Deerpath, there are other ASTC's in the area that may have underutilized capacity that could accommodate the deflected caseload. Such a deflection would allow cost savings with Morris Hospital's modernization program. However, it would require patients to travel outside of Grundy County and would create a discontinuity of patient care that is so important to positive clinical outcomes. Deerpath ASTC and Morris Hospital are the only ASTC and hospital located within Grundy County. For the above reasons, this Alternative was rejected.

**IX. Size of the Project, Projected Utilization, Assurances**

**A) Criterion 1110.234 (a) – Size of the Project**

The Applicant is not proposing construction or modernization of this facility. No new gross square footage is being added as part of this project.

**STATE BOARD STAFF FINDS THE PROPOSED PROJECT IN CONFORMANCE WITH CRITERION SIZE OF THE PROJECT (77 ILAC 1110.234 (a))**

**B) Criterion 1110.234 (b) – Projected Utilization**

To demonstrate compliance with this criterion the Applicant must document that the proposed facility will be in compliance with the State Board Standards published in Part 77 ILAC 1110 Appendix B two (2) years after project completion.

The Applicants have provided referral letters from physicians that will be referring patients to the ASTC for the new surgical specialties being added. Should those referrals materialize the ASTC will be at target occupancy within two years after project completion.

**STATE BOARD STAFF FINDS THE PROPOSED PROJECT IN CONFORMANCE WITH CRITERION PROJECTED UTILIZATION (77 ILAC 1110.234 (b))**

**C) Criterion 1110.234 (e) Assurances**

To demonstrate compliance with this criterion the Applicant representative who signs the CON application shall submit a signed and dated statement attesting to the applicant's understanding that, by the second year of operation after the project completion, the applicant will achieve and maintain the occupancy standards specified in 77 Ill. Adm. Code 1100 for each category of service involved in the proposal.

The Applicant has made the necessary attestation at pages 79-80 of the Application for Permit.

**STATE BOARD STAFF FINDS THE PROPOSED PROJECT IN CONFORMANCE WITH CRITERION ASSURANCE (77 ILAC 1110.234 (e))**

## **X. Non-Hospital Based Ambulatory Surgical Treatment Center Services**

### **A) Introduction**

- 1) *Ambulatory Surgical Treatment Centers required to be licensed pursuant to the Ambulatory Surgical Treatment Center Act [210 ILCS 5] are defined as healthcare facilities subject to the requirements of the Health Facilities Planning Act [20 ILCS 3960/3] and HFSRB rules (77 Ill. Adm. Code 1100, 1110, 1120 and 1130). Facilities devoted to abortion and related care, including those licensed as PSTCs under the ASTC Act are not subject to HFSRB rules related to Non-Hospital Based ASTCs. The addition of any other ASTC services (other than abortion-related services) will require a CON permit.*

### **B) Criterion 1110.1540(b)(1) & (3) - Background of the Applicant**

This criterion has been addressed above

### **C) Criterion 1110.1540(c)(2)(A) & (B) - Geographic Service Area Need**

**To demonstrate compliance with this criterion the Applicant must document that the ASTC services and the number of surgical/treatment rooms to be established, added or expanded are necessary to serve the planning area's population, based on the following:**

There are 75 zip codes within the 45-minute geographic service area. In 2016 the Applicant provided services to these patients from these zip codes. Approximately 90% of the patients that received care came from within the 45-minute geographic service area (See Table below).

<b>TABLE THREE</b>					
<b>Zip Code, City, County of Patients in Calendar Year 2016</b>					
<b>Zip Code</b>	<b>City</b>	<b>County</b>	<b>Patients</b>	<b>% Reported</b>	<b>In GSA</b>
60450	Morris	Grundy	156	24.11 %	Yes
61350	Ottawa	LaSalle	63	9.74%	Yes
61341	Marseilles	LaSalle	54	8.35%	Yes
60416	Coal City	Grundy	51	7.88%	Yes
61364	Streator	LaSalle	48	7.42%	No
60410	Channahon	Will	48	7.42%	Yes
60447	Minooka	Grundy	38	5.87%	Yes
61360	Seneca	LaSalle	23	3.55%	Yes
60420	Dwight	Livingston	19	2.94%	Yes
60408	Braidwood	Will	18	2.78%	Yes
60435	Joliet	Will	15	2.32%	Yes
60444	Mazon	Grundy	15	2.32%	Yes
60481	Wilmington	Will	14	2.16%	Yes
60404	Shorewood	Will	11	1.70%	Yes
60424	Gardner	Grundy	10	1.55%	Yes
60431	Joliet	Will	10	1.55%	Yes
61325	Grand Ridge	LaSalle	9	1.39%	Yes
60586	Plainfield	Will	9	1.39%	Yes

TABLE THREE Zip Code, City, County of Patients in Calendar Year 2016					
Zip Code	City	County	Patients	% Reported	In GSA
60541	Newark	Kendall	9	1.39%	Yes
60551	Sheridan	LaSalle	6	0.93%	Yes
60560	Yorkville	Kendall	6	0.93%	Yes
60548	Sandwich	DeKalb	5	0.77%	No
61342	Mendota	LaSalle	5	0.77%	No
60441	Lockport	Will	5	0.77%	Yes

**STATE BOARD STAFF FINDS THE PROPOSED PROJECT IN CONFORMANCE WITH CRITERION GEOGRAPHICAL SERVICE AREA NEED (77 ILAC 1110.1540(c)(2)(A) & (B))**

**D) Criterion 1110.1540(e) Service Demand – Expansion of Existing ASTC Service**

To demonstrate compliance with this criterion the Applicant must document that the number of surgical/treatment rooms to be added at an existing facility is necessary to reduce the facility's experienced high utilization and to meet a projected demand for service.

The Applicant has stated the purpose of this project is

1. To improve the utilization of an existing 2-room limited specialty ASTC;
2. Improve the patient experience by providing more convenience and lower costs for outpatient surgical cases currently performed at Morris Hospital;
3. Avoid duplicative services and duplicative costs by coordination with Morris Hospital to consolidate and improve its surgical facilities.

The Applicant provided seven physician's referral letters. All of the referrals will be coming from Morris Hospital and Healthcare Centers. The referral letters contained the number of referrals to Morris Hospital in the past year and the estimated number of referrals to DeerPath ASTC should the proposed project be approved. In addition, the name and specialty of the referring physician was provided as required as well as the physician's signature. The letter was notarized. The referral letters estimated between 90 to 98% of the patients to be referred to Deerpath ASTC will reside in the 45-minute geographical service area. No zip code information was provided for patients who were provided services by these physicians in 2016. As documented in Table Three above over 90% of the patients that were provided care in 2016 at the ASTC came from within the 45-minute geographical service area. Based upon the information provided in the application for permit it appears there is sufficient demand for the two operating to attain target occupancy.

<b>TABLE FOUR</b>				
<b>Summary of Physician Referral Letters</b>				
Specialties	Physician	FY 2016	FY 2017 <sup>(1)</sup>	Year 2
Endoscopy	Retnick	1,677	1,853	1,718
ENT	Divenere	107	139	121
Ophthalmology	Lelis	204	193	179
Urology	Cho	75	61	54
GYN	Toussaint	78	85	70
General Surgery	Oswalt	655	680	350
Pain Management	Estillo	242	174	174
Total		3,038	3,185	2,666
1. FY 2017 annualized numbers based upon the first three quarters of FY 2017				

**STATE BOARD STAFF FINDS THE PROPOSED PROJECT IN CONFORMANCE WITH CRITERION SERVICE DEMAND - EXPANSION (77 ILAC 1110.1540(e))**

**E) Criterion 1110.1540 (f) – Treatment Need Assessment**

To demonstrate compliance with this criterion

- 1) The applicant shall document that the proposed number of surgical/treatment rooms for each ASTC service is necessary to service the projected patient volume. The number of rooms shall be justified based upon an annual minimum utilization of 1,500 hours of use per room, as established in 77 Ill. Adm. Code 1100.
- 2) For each ASTC service, the applicant shall provide the number of patient treatments/sessions, the average time (including setup and cleanup time) per patient treatment/session, and the methodology used to establish the average time per patient treatment/session (e.g., experienced historical caseload data, industry norms or special studies).

The Applicant is not adding surgery/procedure rooms as part of this project. The facility has two operating rooms and three Phase I and five Phase II recovery stations. Based upon the information provided in the Application for Permit the Applicant will be at the State Board's target occupancy by second year (2020) after project completion.

<b>TABLE FIVE</b>				
<b>Time per Procedure</b>				
Specialties	Physician	Year 2	Time (Hours) <sup>(1)</sup>	Total Time
Endoscopy	Retnick	1,718	1	1,718
ENT	Divenere	121	1.4	169
Ophthalmology	Lelis	179	1	179
Urology	Cho	54	1.6	86
GYN	Toussaint	70	1.8	126
General Surgery	Oswalt	350	1.5	525

<b>TABLE FIVE</b>				
<b>Time per Procedure</b>				
Specialties	Physician	Year 2	Time (Hours) (1)	Total Time
Pain Management	Estillo	174	0.8	139
Total (New Specialties)		2,666		2,943
Existing		641		641
Total		3,307		3,584
1. Time per procedure from 2016 Morris Hospital and Healthcare Centers Annual Hospital Survey Outpatients				

**STATE BOARD STAFF FINDS THE PROPOSED PROJECT IN CONFORMANCE WITH CRITERION TREATMENT ROOM NEED ASSESSMENT (77 ILAC 1110.1540 (f))**

**F) Criterion 1110. 1540 (g) - Service Accessibility**

To demonstrate compliance with this criterion the Applicant must document that the proposed ASTC services being added are necessary to improve access for residents of the GSA. The applicant shall document that at least one of the following conditions exists in the GSA:

- 1) There are no other IDPH-licensed ASTCs within the identified GSA of the proposed project;
- 2) The other IDPH-licensed ASTC and hospital surgical/treatment rooms used for those ASTC services proposed by the project within the identified GSA are utilized at or above the utilization level specified in 77 Ill. Adm. Code 1100;
- 3) The ASTC services or specific types of procedures or operations that are components of an ASTC service are not currently available in the GSA or that existing underutilized services in the GSA have restrictive admission policies;
- 4) The proposed project is a cooperative venture sponsored by two or more persons, at least one of which operates an existing hospital. Documentation shall provide evidence that:
  - A) The existing hospital is currently providing outpatient services to the population of the subject GSA;
  - B) the existing hospital has sufficient historical workload to justify the number of surgical/treatment rooms at the existing hospital and at the proposed ASTC, based upon the treatment room utilization standard specified in 77 Ill. Adm. Code 1100;\
  - C) The existing hospital agrees not to increase its surgical/treatment room capacity until the proposed project's surgical/treatment rooms are operating at or above the utilization rate specified in 77 Ill. Adm. Code 1100 for a period of at least 12 consecutive months; and
  - D) The proposed charges for comparable procedures at the ASTC will be lower than those of the existing hospital.

- A) Morris Hospital and Healthcare Centers is currently providing outpatient surgical services to the 45-minute geographical service area.
- B) Morris Hospital and Healthcare Centers currently has four operating rooms and 3 procedure rooms and 2 minor procedure rooms. The four operating rooms are operating at approximately 112% of capacity based upon 50 weeks per year 7.5 hours per day 5 days a week or 7,500 hours. The Hospital's four operating rooms were utilized for 8,383 hours in 2016.

C) The Applicant stated the following:

*“The proposed project is a cooperative venture among Deerpath Orthopedic Surgical Center and Morris Hospital & Healthcare Centers. As the only Hospital and ASTC in Grundy County, both facilities serve patients with similar residencies (zip code origins). Morris Hospital currently provides outpatient services throughout Deerpath ASTC's GSA. Morris Hospital and Health Center agrees not to increase its surgical/treatment room capacity until the proposed project's surgical/treatment rooms are operating at or above the utilization rate specified in 77 Ill. Adm. Code 1100 for a period of at least 12 consecutive months. The project will improve the patient experience by providing more convenience and lower costs for comparable outpatient surgical cases currently performed at Morris Hospital. The total costs for procedures being deflected from hospital based to ASTC based are expected to be significantly lower for both the patient and the 3rd party payor.*

D) Based upon the information provided in the Application for Permit the charges at the ASTC will be lower than the Hospital Outpatient Charges.

**STATE BOARD STAFF FINDS THE PROPOSED PROJECT IN CONFORMANCE WITH CRITERION SERVICE ACCESSIBILITY (77 ILAC 1110.1540 (f))**

**F) Criterion 1110.1540(i (1) & (2) - Staffing**

To demonstrate compliance with this criterion the Applicant must document that relevant clinical and professional staffing needs for the proposed project were considered and that the staffing requirements of licensure and the Joint Commission or other nationally recognized accrediting bodies can be met.

**The Applicant stated the following in regards to this criterion:**

*“This project is a joint venture between Deerpath Orthopedic Surgical Center and Morris Hospital & Healthcare Centers, both in Morris Illinois. Both are existing facilities and appropriately staffed. Given the history of recruitment for the two facilities, no problems are anticipated in the maintenance and/or recruitment/transfer of staff to accommodate this consolidation of surgical programs.*

**Medical Director**

*The Medical Director for Deerpath Orthopedic Surgical Center is Dr. Ray Meyer, MD, Board Certified in Orthopedic Surgery by the American Board of Orthopaedic Surgery. Deenpath ASTC assures that all surgeons practicing at the Center are appropriately credentialed in their specialties.”*

Based upon the information provided in the Application for Permit and reviewed by the State Board Staff it appears that there will appropriate staff at the ASTC.

**STATE BOARD STAFF FINDS THE PROPOSED PROJECT IN CONFORMANCE WITH CRITERION STAFFING (77 ILAC 1110.1540(i)(1) & (2))**

**G) Criterion 1110.1540(j) - Charge Commitment**

To demonstrate compliance with this criterion the Applicant must submit the following:

- 1) a statement of all charges, except for any professional fee (physician charge); and
- 3) a commitment that these charges will not be increased, at a minimum, for the first two years of operation unless a permit is first obtained pursuant to 77 Ill. Adm. Code 1130.310(a).

The Applicant provided the statement and a commitment that charges will not be increased for the first two years of operation unless a permit is first obtained. See Table below for detail of charges for certain procedures. The complete master charge list was provided at pages 61-78 of the Application for Permit.

**STATE BOARD STAFF FINDS THE PROPOSED PROJECT IN CONFORMANCE WITH CRITERION CHARGE COMMITMENT (77 ILAC 1110.1540(j) )**



**TABLE SIX**  
**Comparison of Charges at ASTC and HOPD**

Specialty	Procedure Code	Description	ASTC			HOPD		
			Medicare	Co-Pay	Total	Medicare	Co-Pay	Total
Ophthalmology	66984	Cataract Surgery	\$788	\$197	\$985	\$1,600	\$402	\$2,010
ENT	42450	Excision of Sublingual Gland	\$1,642	\$411	\$2,053	\$3,352	\$838	\$4,190
Gastroenterology (GI)	44389	Colonoscopy w/Biopsy	\$382	\$96	\$478	\$780	\$195	\$976
Gastroenterology (GI)	43239	EGD W/Biopsy	\$305	\$76	\$381	\$622	\$155	\$777
Urology	52318	Removal of Bladder Stone	\$1,402	\$351	1,751	\$2,862	\$715	\$3,577
GYN	58565	Hysteroscopy Sterilization	\$1,448	\$362	\$1,810	\$2,954	\$739	\$3,693
General Surgery	47562	Laprosopic/Cholecystectomy	\$1,643	\$411	\$2,054	\$3,353	\$838	\$4,191
Pain Management	64481	Epidural Injection	\$278	\$70	\$348	\$568	\$142	\$710
Orthopedic	29873	Knee Arthroscopy Surgery	\$982	\$246	\$1,228	2,004	\$501	\$2,505
Podiatry	28285	Hammertoe	\$982	\$246	1228	\$2,004	\$501	\$2,505

**Appendix I**  
**Letters of Support**

**H) Criterion 1110.1540(k) - Assurances**

To demonstrate compliance with this criterion

1. the Applicant must attest that a peer review program exists or will be implemented that evaluates whether patient outcomes are consistent with quality standards established by professional organizations for the ASTC services, and if outcomes do not meet or exceed those standards, that a quality improvement plan will be initiated.
2. The applicant shall document that, in the second year of operation after the project completion date, the annual utilization of the surgical/treatment rooms will meet or exceed the utilization standard specified in 77 Ill. Adm. Code 1100. Documentation shall include, but not be limited to, historical utilization trends, population growth, expansion of professional staff or programs (demonstrated by signed contracts with additional physicians) and the provision of new procedures that would increase utilization.

The Applicant has made the necessary attestation at pages 79-80 of the Application for Permit.

**STATE BOARD STAFF FINDS THE PROPOSED PROJECT IN  
CONFORMANCE WITH CRITERION ASSURANCES (77 ILAC  
1110.1540(k))**

## **XI. FINANCIAL VIABILITY**

### **A) Criterion 1120.120 - Availability of Funds**

To demonstrate compliance with this criterion the Applicant must document that sufficient resources are available to fund the proposed project.

The Applicant is funding this project with a bank loan in the amount of \$600,000 from First Midwest Bank. The Applicant provided a letter from First Midwest Bank signed by Jeffrey T. Rzasa, **Senior Vice President** that stated:

*“Please be advised that Deerpath Orthopedic Surgical Center, LLC, has been approved for an equipment loan, not to exceed \$600,000, for its service expansion project at 1051 West Rt. 6 Morris, IL. 60450. The loan will be amortized up to 84 months, at fixed interest rate of 200bps over the 5 year Treasury, at the time of closing. It is understood that the funds will not be drawn upon until the expansion project is approved by the Health Facilities and Service Review Board.”*

The Applicant did not have audited financial statements but financial statements reviewed by an independent accountant. Reviewed financial statements include applying analytical procedures to management’s financial data and making inquiries of company management. A review is substantially less in scope than an audit, the objective of which is the expression of an opinion regarding the financial statements as a whole.

Deerpath Orthopedic Surgical Center Accountant’s Review Report		
	2016	2015
Cash	\$632,980	\$438,086
Current Assets	\$1,258,293	\$1,012,320
Total Assets	\$1,295,174	\$1,048,506
Current Liabilities	\$909,746	\$819,218
Members Equity	\$385,428	\$229,288
Net Patient Revenue	\$2,036,792	\$2,043,497
Expense	\$1,712,052	\$1,744,891
Operating Income	\$324,740	\$298,606
Other income	-\$606	-\$1,305
Net Income	\$324,134	\$297,301

From the information provided in the Application for Permit it appears that resources are available to fund this project

**STATE BOARD STAFF FINDS THE PROPOSED PROJECT IN CONFORMANCE WITH CRITERION AVAILABILITY OF FUNDS (77 ILAC 1110.120))**

**B) Criterion 1110.130 - Financial Viability**

To demonstrate compliance with this criterion the Applicant must document that they have an “A” or better bond rating or qualify for the financial viability waiver.

The Applicant does not have an “A” or better bond rating and does not qualify for the financial viability waiver; therefore financial ratios for the Applicant must be provided.

The financial ratio analysis assesses the financial position of an applicant, both historically and prospectively. The financial ratios analyzed are 1) current assets to current liabilities; 2) net margin percentage 3) long term debt to equity; 4) projected debt service 5) days cash on hand and 6) cushion ratio. If an Applicants’ ratios meet the State Board Standard the Applicant can be expected to be financially viable.

The Applicant is in compliance with all of the State Board Standards for all years presented except for the current ratio. The current ratio makes two assumptions. The current ratio assumes that the inventory (\$252,063) that the company has on hand will be liquidated at the price at which it is present on the balance sheet. The current ratio also assumes that the debtors of the firm will pay it on time (State of Illinois?)

While the Applicant does not meet the current ratio for all years presented it does appear that the Applicant has the wherewithal to repay the \$600,000 loan and provide a proper standard of care to the community. This conclusion is supported by the Letter from First Midwest Bank that confirms should the certificate of need be granted the \$600,000 loan has been approved, and the State Board’s Staff review of the independent auditor’s review of the financial statements.

		Historical			Projected	
	State Standard	2014	2015	2016	Year 1	Year 2
Current Ratio	1.5 or more	1.4	1.2	1.4	3.9	4.1
New Margin Percentage	3.5% or more	12.00%	15.00%	15.00%	45.00%	47.00%
Percent Debt to Total Capitalization	80% or less	N/A	N/A	N/A	26.00%	22.00%
Projected Debt Service Coverage	1.75 or more	N/A	N/A	N/A	32	35
Days Cash on Hand	45 days or more	138	92	136	101	150
Cushion Ratio	3.0 or more	N/A	N/A	N/A	4.5	7

1. NA – Not Applicable - Deerpath did not have any debt for period 2014-2016

**STATE BOARD STAFF FINDS THE PROPOSED PROJECT IN CONFORMANCE WITH CRITERION FINANCIAL VIABILITY (77 ILAC 1120.130)**

## **XII. ECONOMIC FEASIBILITY**

### **A) Criterion 1120.140(a) – Reasonableness of Financing Arrangements**

### **B) Criterion 1120.140(b) – Terms of Debt Financing**

To demonstrate compliance with this criterion the Applicant must document that the total estimated project costs and related costs will be funded in total or in part by borrowing because:

- A) A portion or all of the cash and equivalents must be retained in the balance sheet asset accounts in order to maintain a current ratio of at least 2.0 times for hospitals and 1.5 times for all other facilities; or
- B) Borrowing is less costly than the liquidation of existing investments, and the existing investments being retained may be converted to cash or used to retire debt within a 60-day period and; and
- C) That the selected form of debt financing for the project will be at the lowest net cost available.

As documented above, the Applicant is funding this project with a bank loan in the amount of \$600,000 from First Midwest Bank. The Applicant has provided the necessary attestation that borrowing is less costly than the liquidation of existing investments, and the existing investments being retained may be converted to cash or used to retire debt within a 60-day period and that the selected form of debt financing for the project will be at the lowest net cost available.

**STATE BOARD STAFF FINDS THE PROPOSED PROJECT IN CONFORMANCE WITH CRITERIA REASONABLENESS OF FINANCING ARRANGEMENTS AND TERMS OF DEBT FINANCING (77 ILAC 1120.140(a) & (b))**

### **C) Criterion 1120.140(c) – Reasonableness of Project Costs**

To demonstrate compliance with this criterion the Applicant must document that the project meets the standards in Part 1120 Appendix A.

The Applicant proposes \$55,000 in consulting and other fees. The State Board does not have a standard for those costs

The Applicant proposes \$545,000 for equipment (\$527,500 + \$17,500 = \$545,000). The State Board Standard for 2017 is \$461,632 per operating room or a total of \$923,263.

The Applicant proposes \$17,500 in contingency costs for equipment. The State Board only has a contingency cost for construction and modernization costs. Contingency costs have been included in the equipment line item for this criterion.

The Applicant has met the requirements established in Part 1120 Appendix A for this project.

**STATE BOARD STAFF FINDS THE PROPOSED PROJECT IN CONFORMANCE WITH CRITERION REASONABLENESS OF PROJECT COSTS (77 ILAC 1120.140(c))**

**D) Criterion 1120.140(d) - Projected Operating Costs**

To demonstrate compliance with this criterion the Applicant must provide the projected direct annual operating costs for the first full fiscal year at target utilization but no more than two years following project completion. Direct cost means the fully allocated costs of salaries, benefits and supplies for the service.

The Applicant is estimating \$1,000 in direct operating costs per case for 2020. The Applicant has met the requirements of this criterion.

**STATE BOARD STAFF FINDS THE PROPOSED PROJECT IN CONFORMANCE WITH CRITERION PROJECTED OPERATING COSTS (77 ILAC 1120.140(d))**

**E) Criterion 1120.140(e) - Total Effect of the Project on Capital Costs**

To demonstrate compliance with this criterion the Applicant must provide the total projected annual capital costs for the first full fiscal year at target utilization but no more than two years following project completion.

The estimated capital costs per case are \$34 based upon the information provided in the Application for Permit. The Applicant has met the requirements of this criterion.

**STATE BOARD STAFF FINDS THE PROPOSED PROJECT IN CONFORMANCE WITH CRITERION TOTAL EFFECT OF THE PROJECT ON CAPITAL COSTS (77 ILAC 1120.140(e))**

## **Appendix I**

### **Letters of Support**

Letters of Support were received from:

- Ruth Colby, CEO and President of Silver Cross Hospital and Medical Center
- Thomas J. Vana President and CEO of Kurtz Ambulance Service
- Robert Erickson, President and CEO of Presence Saint Joseph Medical Center
- Thomas J. Dohm, FACHE, Morris Hospital and Healthcare Centers
- Mary K. Sheehan, CEO, Joliet Area Community Hospice
- Michael F. Rittorf, Past Chairman Morris Hospital and Healthcare Centers
- Christopher S. Ward, Owner Heritage Woods
- Richard P. Kopczick, Mayor Morris, Illinois
- Nancy E. Norton, President & CEO, of the Grundy Economic Development Council
- Philip J. Jass, Public Health Administrator for the Grundy County Health Department
- John B. Roth, MD
- Christina Van Yperen, Executive Director of the Grundy County Chamber of Commerce & Industry
- Sheldon R. Sobol, Associate Circuit Judge
- David Allen Welter, State Representative, 75<sup>th</sup> District
- Carol Harrington, retired employee Morris Hospital and Healthcare Centers
- Carol A. Havel, employee Morris Hospital and Healthcare Centers
- Dr. Robert P. Marino, Medical Director, Morris Hospital
- Missy Durkin, YMCA Executive Director

#### **All of the letters expressed the following:**

“I am writing to express my support for the Expansion of Services project at the Deerpath Orthopedic Surgical Center in Morris. This project will allow the Center to become a full service ambulatory surgery ASTC and coordinate with Morris Hospital's network of healthcare services. It will enhance the operations of both facilities, as they are the only Hospital and ASTC in Grundy County. The benefits of this project include:

1. Improvement to the patient experience by providing convenience, and lower cost-options while maintaining coordination of patient care;
2. Establishing Deerpath ASTC as a key site for Morris Hospital and Healthcare Centers' ambulatory surgery services; and
3. Avoiding duplicative services through coordination and consolidation of outpatient surgical facilities among the Hospital and the ASTC.

I urge you to support the approval of the Certificate-of-Need application for Deerpath Orthopedic Surgical Center in Morris. Approval of the application will increase access for surgical services in Grundy County and support the needs of the community.”

## 17-059 Deerpath Orthopedic Surgical Center - Morris





**Reference Numbers** Facility Id 7002785  
Health Service Area 009 Planning Service Area 063  
Deerpath Orthopedic Surgical Center, LLC  
1051 West US Route 6  
Morris, IL 60450

Number of Operating Rooms 2  
Procedure Rooms 0  
Exam Rooms 0  
Number of Recovery Stations Stage 1 3  
Number of Recovery Stations Stage 2 5

**Administrator** **Date Complete**  
Michele Ultis, BSN, RN 3/6/2017

**Contact Person** **Telephone**  
Michele Ultis, BSN, RN 815-318-5614

**Registered Agent**  
Keth M. Rezin, MD

**Property Owner**  
Morris Hospital and Healthcare Centers

**Legal Owner(s)**

Eric T. Ortinau, MD  
Keith M. Rezin, MD  
Kyle T. Pearson, DPM  
Morris Hospital and Healthcare Centers  
Paul Bishop, DPM  
Raymond J. Meyer, MD  
Thomas Rappette, DPM

**Type of Ownership**  
Limited Liability Company (RA required)

**HOSPITAL TRANSFER RELATIONSHIPS**

HOSPITAL NAME	NUMBER OF PATIENTS
Morris Hospital and Healthcare Centers, Morris	2

**STAFFING PATTERNS**

PERSONNEL	FULL-TIME EQUIVALENTS
Administrator	1.00
Physicians	0.00
Nurse Anesthetists	0.00
Director of Nurses	0.00
Registered Nurses	5.00
Certified Aides	0.00
Other Health Profs.	1.00
Other Non-Health Profs	1.00
<b>TOTAL</b>	<b>8.00</b>

**DAYS AND HOURS OF OPERATION**

Monday	9
Tuesday	9
Wednesday	9
Thursday	9
Friday	9
Saturday	0
Sunday	0

**NUMBER OF PATIENTS BY AGE GROUP**

AGE	MALE	FEMALE	TOTAL
0-14 years	5	7	12
15-44 years	105	80	185
45-64 years	175	193	368
65-74 years	60	75	135
75+ years	20	37	57
<b>TOTAL</b>	<b>365</b>	<b>392</b>	<b>757</b>

**NUMBER OF PATIENTS BY PRIMARY PAYMENT SOURCE**

PAYMENT SOURCE	MALE	FEMALE	TOTAL
Medicaid	10	21	31
Medicare	65	113	178
Other Public	1	2	3
Insurance	288	256	544
Private Pay	1	0	1
Charity Care	0	0	0
<b>TOTAL</b>	<b>365</b>	<b>392</b>	<b>757</b>

**NET REVENUE BY PAYOR SOURCE FOR FISCAL YEAR**

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense	Charity Care Expense as % of Total Net Revenue
9.7%	1.4%	0.3%	82.9%	5.8%	100.0%		
180,574	25,656	5,081	1,548,469	107,454	1,867,234	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 Surgery	0	0.00	0.00	0.00	0.00
Laser Eye Surgery	0	0.00	0.00	0.00	0.00
Neurological	0	0.00	0.00	0.00	0.00
OB/Gynecology	0	0.00	0.00	0.00	0.00
Ophthalmology	0	0.00	0.00	0.00	0.00
Oral/Maxillofacial	0	0.00	0.00	0.00	0.00
Orthopedic	663	359.00	198.00	557.00	0.84
Otolaryngology	0	0.00	0.00	0.00	0.00
Pain Management	0	0.00	0.00	0.00	0.00
Plastic	0	0.00	0.00	0.00	0.00
Podiatry	94	66.00	31.00	97.00	1.03
Thoracic	0	0.00	0.00	0.00	0.00
Urology	0	0.00	0.00	0.00	0.00
TOTAL	757	425.00	229.00	654.00	0.86

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 Catheterizat	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

Leading Locations of Patient Residence

Zip Code	City	County	Patients
60450	Morris	Grundy	156
61350	Ottawa	LaSalle	63
61341	Marseilles	LaSalle	54
60416	Coal City	Grundy	51
61364	Streator	LaSalle	48
60410	Channahon	Will	48
60447	Minooka	Grundy	38
61360	Seneca	LaSalle	23
60420	Dwight	Livingston	19
60408	Braidwood	Will	18
60435	Joliet	Will	15
60444	Mazon	Grundy	15
60481	Wilmington	Will	14
60404	Shorewood	Will	11
60424	Gardner	Grundy	10
60431	Joliet	Will	10
61325	Grand Ridge	LaSalle	9
60586	Plainfield	Will	9
60541	Newark	Kendall	9
60551	Sheridan	LaSalle	6
60560	Yorkville	Kendall	6
60548	Sandwich	DeKalb	5
61342	Mendota	LaSalle	5
60441	Lockport	Will	5