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BLESSING
Physician Services

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HEALTH FACILITIES & SERVICES REVIEW BOARD

February 12, 2019

Ms. Courtney R. Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson, 2nd Floor
Springfield, IL 62761

Re: Opposition to CON 18-042, Quincy Medical Group Surgery Center in Quincy, Illinois

Dear Ms. Avery:

My name is Harsha Polavarapu, MD. I am a practicing colon and rectal surgeon with Blessing Physician Services, an affiliate of Blessing Health System. I also serve as the Physician Chairman of the Blessing Physician Services Board of Trustees, Chairman of the Department of Surgery at Blessing Hospital. I bring these perspectives to you in this letter opposing the above-referenced CON project.

Outpatient surgeries done at Blessing Hospital and the existing ASTC, owned by Blessing and managed by Quincy Medical Group (QMG), are 25 percent below the State's utilization standard. In its Certificate of Need, QMG says it will redirect 12,654 cases from existing facilities to the proposed new facility. This is over 1,000 cases more than all of QMG's outpatient volume at Blessing Hospital and the existing ASTC combined in 2017. This would literally reduce the outpatient surgeries at the existing ASTC to zero, as the ASTC had 10,804 total procedures in 2017, and reduce the outpatient volume at Blessing Hospital by over 40 percent, as the hospital performed 4,509 outpatient surgeries in 2017. Therefore, a third surgical option in Quincy will dramatically lower the utilization of existing facilities, representing an unnecessary duplication of services.

There has been little to no growth in the population of the region served by Blessing for over a decade. Quincy's population stands at 40,000 with 70,000 residents in Adams County. Between 2014 and 2016, the total hours of surgical and procedure time at the two existing facilities declined by over three percent. The opportunity for growth of demand and reversing this trend is virtually non-existent. This is another reason a third surgical option in Quincy is not needed.

If approved, this third surgical option would divert $41 million in revenue each year from the non-profit health system serving the region. Blessing Hospital is a Sole Community Health Provider and a loss of that staggering level would damage Blessing's ability to offer new technology and types of healthcare to the communities it serves and to provide critical safety net services. The nearest comprehensive inpatient provider is 100 miles from Blessing Hospital.

Finally, to continue to operate at a level the community needs and deserves, Blessing would be forced to reduce its workforce by a minimum of 400 people to survive a $41 million loss. In a region as small as the one Blessing serves, which is heavily agricultural, that loss would have a devastating downstream economic impact to the region.

For these reasons, I respectfully ask that the Health Facilities and Services Review Board deny CON application 18-042. Thank you for your consideration.

Sincerely,

Harsha

Harsha Polavarapu, MD

927 Broadway, P.O. Box 7005, Quincy, IL 62305-7005
217-224-6423 www.blessinghealth.org

BLESSING
Physician Services

A member of the Blessing Health System

January 23, 2019

Ms. Courtney R. Avery
Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson, 2nd Floor
Springfield, IL 62761

Re: Opposition to CON 18-042, Quincy Medical Group Surgery Center in Quincy, Illinois

Dear Ms. Avery:

After considerable deliberation, I am writing to voice my opposition to the proposed outpatient surgery center in Quincy, IL to be operated by the Quincy Medical Group. I am currently a gastroenterologist practicing in Quincy and have been for over 11 years. I have been an employee of Blessing Physician Services for my entire tenure. I have been in a solo practice during nearly the entire time and have built a busy and successful practice. I believe I have a unique perspective given that I have practiced 2-3 days per week alongside my competitors from QMG in the existing surgery center during this time. For this entire time, the surgery center has been under the control of QMG management, including the current medical director who is also a gastroenterologist.

I have spent a considerable amount of time over the past few months weighing the project, and I have been somewhat conflicted about it. Personally and professionally, having separation from the QMG physicians, and their management of the current surgery center, I believe would be beneficial to me. This would allow me more autonomy, and likely the chance to assume more leadership of the surgery center. I was born in Blessing hospital and I have lived in the region my entire life, with the exception of a few years where my training placed me elsewhere. Most of my extended family lives in the region, and all are cared for at Blessing hospital when inpatient care is needed, but many of their physicians are QMG providers. Therefore, I have been deliberating between the personal advantages the project may have against what I believe would be the negative impact for the region. I have decided the detriments to the community outweigh any personal benefits. I base this decision on the following observations. Prior to relocating to Quincy after finishing my training, I initially interviewed with QMG. I was concerned about the culture of the clinic, particularly being a for-profit entity. Although I understand that the bottom line is always important, the business of providing healthcare comes with a different set of ethical considerations than other business ventures, and I was concerned that profit may have been an excessively high priority for the organization. After interviewing at several other locations, I eventually interviewed with Blessing Physician Services, which at the time was fairly new, small, upstart organization. I was pleased to find an organization where I could practice medicine without concern for

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payer in the region where I grew up. I feel like my observations since that time have been validated seeing firsthand the conflicting business practices between QMG and Blessing. The Blessing organization continues to provide the vast majority of the care to the more vulnerable patients in our region such as the underinsured and uninsured. I regularly have requests to see patients from this population, who have been turned away from QMG. Many of these patients were previously under the care of a QMG provider when they possessed "better" insurance. I can recall one particularly troubling case when a gentleman had lost his insurance between an office visit with a QMG provider for an evaluation of significant rectal bleeding and his subsequent scheduled colonoscopy with that provider. He was turned away from the colonoscopy appointment when he was unable to pay a substantial upfront cost. The patient had to then schedule an office visit with me, which delayed the procedure. When the procedure was finally performed, he was found to have an advanced rectal cancer. The delay in diagnosis, due to the refusal to evaluate him based on his inability to pay, may have ultimately impacted his prognosis.

In order for the hospital to continue to provide services to the most vulnerable patients and subsidize less profitable services while remaining financially stable, there need to be profit centers to provide funds for these services. The surgery center is one of the most important profit centers for generating these funds. I have no doubt that should QMG be allowed to proceed with their own surgery center, they can offer lower costs to employers and insurers. This will allow QMG to skim the profitable business off the top, while leaving behind the underinsured and uninsured patients, and shifting the cost to provide less-profitable care entirely to Blessing. This may in the short term benefit those in the region with commercial insurance and Medicare, but in the long run I am certain that the cost to the community of a financially weakened non-for-profit hospital, which may be required to scale back services, is a net negative to everyone with perhaps the exception of the QMG's shareholders, including their out-of-state partial owners in Iowa.

I have also reviewed the CON application, and attended the public hearing, and I would like to rebut some points that I personally know to be erroneous. First, the contention that the current surgery center does not have availability and flexibility in scheduling is patently false. I have always been able to schedule my patients for the procedures they require in a timely fashion, whether it is in the endoscopy suite or in the OR if needed. I was recently able to easily obtain a block for scheduling patients in the surgery center OR without any difficulty. In addition, open blocks are still available in both the OR and in endoscopy if desired. One of the QMG board members stated at the hearing that they are unable to schedule patients past a certain hour. The staff has accommodated providers when asked to allow later scheduling. In fact, the only time I have found this to be a problem was when I wanted to schedule patients later in the day, after 4:00PM. The pushback I received was from the QMG medical director and QMG manager stating that this was not possible due to permit issues regulating the hours of operation, and that QMG locks the doors to the building after 6:00PM. Eventually, after researching the issue, I found that this was easily remedied by simply notifying the state to amend the permit allowing me to stay later in the afternoon when needed. This brings me to my next concern. It was stated at the hearing that QMG does not have true management over the surgery center. All the past and current managers of the surgery center are QMG employees including the medical director, as previously stated.

BLESSING
Physician Services

A member of the Blessing Health System

During my time here in Quincy I have regularly been relegated to receive fewer nursing resources and space in favor of QMG providers by the QMG surgery center management. I have lobbied to have the situation remedied by Blessing administrators only to have been told that the operation of the surgery center is under QMG purview. In my opinion, Blessing hospital has been quite hands off of the surgery center management allowing QMG to make the decisions.

For these reasons I would ask the Health Facilities and Services Review Board to deny the CON application for Quincy Medical Group Surgery Center.

Thank you for your consideration.

Sincerely,

Daniel L Moore, M.D.
Gastroenterology
Blessing Physician Services

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217-224-6423 www.blessinghealthsystem.org

February 12, 2019

Ms. Courtney R. Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson, 2nd Floor
Springfield, IL 62361

Re: Opposition to CON-18-042 Quincy Medical Group (QMG) Surgery Center in Quincy, IL

Dear Ms. Avery,

I am writing today as an employee of Blessing Hospital and a concerned citizen of the community in opposition to CON 18-042 with the Illinois Health Facilities and Services Review board regarding the Quincy Medical Group ASTC project.

As a consumer of healthcare in this community through both Quincy Medical Group and Blessing Health System, I am concerned with the addition of an unnecessary ambulatory surgery treatment center (ASTC), the cost of healthcare will drastically increase in our community. After reviewing the CON application personally, it is very evident the misleading information by Quincy Medical Group to justify the need for a separate ASTC, and now the addition of a Cancer Center. In my personal opinion, had Quincy Medical Group had the communities' best interest in mind, they would look at the current management structures of both the existing ASTC and Cancer Center(of which they currently operate) to look for improvements and put forth a good faith effort to work congruently with Blessing Health System, none of which they have done. Are they truly living out their mission, vision and values as an organization by doing this?

As you are probably more than well aware by the number of opposition letters and information put forth by the Blessing Health System regarding the loss of vital safety net services, as well as jobs in the community, I also oppose this project for these reasons. The loss of 400 jobs in a community this size can be detrimental. Individuals may be forced to move away from family and a community that they love in order to find equivalent employment. Taking away from vital safety net services such as behavior health, trauma services, charity care, and critical education programs for future medical practitioners(many of whom decide to practice here locally when they complete residency), drives individuals to seek care and employment elsewhere outside the community. Quincy Medical Group does not subsidize or give back to any of these safety net services or educational programs, yet reap the rewards of these community benefits on a daily basis in their organization through resources for their patients, nurses that graduate from the local nursing college and physicians who do rotations in their residency and decide to join their organization after completion. Are they ready to lose these services?

In closing, based on the discussions and concerns brought forth by Blessing Health System and multiple members of the community, compiled with the inaccuracies and misleading information brought forth by Quincy Medical Group in their CON application, I respectfully ask that you deny the request for CON 18-042 regarding the Quincy Medical Group ASTC project

Sincerely,

Jessica Moore

Jessica Moore, RN, BSN, MBA
Quincy, IL

February 12, 2019

Ms. Courtney R. Avery

Administrator

Illinois Health Facilities and Services Review Board

525 W. Jefferson, 2nd Floor

Springfield IL 62761

RE: Opposition to CON 18-042, Quincy Medical Group Surgery Center in Quincy, IL

Dear Ms. Avery:

My name is Cathy Campbell. I have worked at Blessing Hospital (Quincy IL) in the Hospital Medicine Department for the past 8 years. Prior to that, I had worked in Health Care 10 years. I am writing to express my opposition to CON 18-042.

The State of Illinois used five criteria to justify a new Surgery Center. This proposal does not meet numbers 1, 3, 4 or 5. If a person were to assume Quincy Medical Group's estimated numbers are accurate, they could meet number 2 which addresses utilization levels. Many of their numbers stated in their application seem suspiciously slanted to their favor and are vastly different than those of Blessing Hospital. Their proposed center would be unnecessary duplication of health services in the Quincy area. Quincy Medical Group compares Quincy to Springfield and St Louis – those are not good comparisons in any logical way!

If this proposal is approved, it will seriously hurt Blessing's revenues which endangers safety net services to behavioral Health care and also trauma care. This would also hinder the financial support Blessing Hospital contributes to Blessing-Rieman College of Nursing & Health Services and the SIU Family Medicine Residency Program located in Quincy.

I respectfully ask that the Health Facilities and Services Review Board deny CON application 18-042 proposed by Quincy Medical Group. Thank you for your consideration.

Respectfully

Cathy M. Campbell

Cathy M. Campbell

2/06/2019

Ms. Courtney R. Avery
Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson, 2nd Floor
Springfield, Illinois 62701

RE: Opposition to CON 18-042
Quincy Medical Group
Surgery Center in Quincy, Illinois

My name is Patricia A. Moritz, a senior citizen who retired from Blessing Hospital 11 years ago after 40 years of service. I worked in Fiscal Services and I've seen the growth and many benefits that Blessing Hospital has provided to the citizens of Quincy and the surrounding tri-state area.

In reading the many letters the board has received in support and opposition to the proposed Quincy Medical Surgery Center, I see the majority of support letters are from elected officials in our City and State. In the past few years we have lost several large retail businesses. The Quincy Mall has lost 3 major department stores. The former Bergners store, front and center in the mall is where Quincy Medical Center wants to build their Surgery Center. This building is no doubt an eyesore to our city fathers and they would love to have it occupied, perhaps generating potential customers to the mall and eliminating an eyesore.

The risk of losing of over 400 jobs and essential services such as Behavorial Medicine and the potential financial impact on the humanitarian services provided by Blessing Foundation for patients in need, far outweighs the city's need to occupy an empty building.

I respectfully ask that the Illinois Facilities and Services Review Board deny CON 18-042. Thank you for your consideration.

Respectfully Yours,

Pat A. Moritz

Patricia A. Moritz

217 653-1091

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February 13, 2019

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HEALTH FACILITIES & SERVICES REVIEW BOARD

Mrs. Courtney R Avery, Administrator
IL Health Facilities & Service Review Board
525 West Jackson, 3rd Floor
Springfield, IL 62761

RE: Opposition to CON 18-042 Quincy Medical Group Surgery Center in Quincy, Illinois.

Dear Mrs. Avery,

As a community member and employee of Blessing Health System, I oppose CON 18-042. I feel this addition of an ambulatory surgery center will be a duplication of service in our community. Quincy has not grown in population for 10+ years. The current volumes do not warrant this addition. Please take in to account the current volumes that do not warrant additional surgical beds to serve the population.

Both Blessing and Quincy Medical Group have excellent providers that serve the current region and feel that working together for the past 10 years to provide surgical services to our community has been successful. It would be in the best interest of our community to have the two entities continue to work together in providing these services.

I respectfully ask that the Health Facilities Review Board deny CON application 18-042.

Thank you for your time and consideration.

Sincerely,

Sarah A. Stegeman

Sarah A. Stegeman

(7)

Feb. 10, 2019

Ms. Courtney R. Avery, Administrator
Illinois Health Facilities and Services Review Board
525 W Jefferson, 2nd Floor
Springfield, IL 62761

Re: Opposition to CON 18-042, Quincy Medical Group Surgery Center in Quincy, IL.

Dear Ms. Avery:

I am Judy Milfs and I am a volunteer at Blessing Hospital and also on the executive board of Blessing Volunteers in Partnership which is the group that manages the Blessing Tea Room in the hospital.

I am very much against the need for a surgery center in the former Bergner's store in the Quincy Mall. For one thing QMG has not been able to utilize but 50 % of the surgery center they manage along with the hospital's so why build another surgery center. Another negative is that it will force the hospital to eliminate 400 jobs related to the existing surgery center. Another negative is that an ambulance will be needed when this new center is being utilized which I'm not sure that the city can afford to furnish. In spite of what has been printed in the local newspaper, QMG is only going to use 1/4 of the Bergner store abandoned space — not

Completely filling it as we were led to believe. Another negative is that 40% of QMG belongs to Unity Point out of Des Moines, Iowa. That means that 40% of the profit will be going out-of-town and not staying in Quincy.

I respectfully ask that the Health Facilities and Services Review Board deny CON application 18-042. Thank you for your consideration.

Sincerely,
Judy Mills

Judy Mills
2634 Midland Drive
Quincy, IL 62301

Ms. Courtney R. Avery
Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson, 2nd Floor
Springfield, IL 62761

Re: Opposition to CON 18-042, Quincy Medical Group Surgery Center in Quincy, Illinois

Ms. Avery,

My name is Christine Moore, and I am writing to you to voice some concerns I have regarding the application for a certificate of need that was submitted by Quincy Medical Group for a proposed ambulatory surgery center. I was born in Quincy, was raised locally, am currently a resident of Quincy, and have lived in the area most of my adult life.

I attended the public hearing in Quincy on January 24th, have read through the application online, and have developed some concerns. At the hearing it was revealed that QMG's contention on page 68 of the original application that they had offered an alternative solution under the heading "Undertake Joint Venture for New ASTC and Cardiac Catherization [sic] Service at 3347 Broadway Street." never actually happened. It was quite concerning to see an organization having created a scenario that never actually occurred for the purposes of propping up their application. I realize that they have since supplied a replacement page removing this falsehood from that page. The explanation in the letter accompanying the replacement page claims that this was language from a draft that was overlooked prior to final submission of the application. Small mistakes like typing errors, placing information in the wrong section of the form, or an inadvertent transposing of numbers that were overlooked from draft to final submission would be understandable human errors. The letter does not attempt to explain why a complete fabrication of facts would have ever been placed in the application, draft or otherwise. Also, this scenario is repeated on page 108 of the application: "In the case of the proposed ASTC, a cooperative venture has been proposed and rejected by the hospital." It seems odd that this was inadvertently placed in the application not once, but twice, and it does not appear that a replacement page has been submitted for the page on which this false scenario was repeated.

Another concerning point discussed at the hearing was regarding QMG's allegation on page 58 of the application that "operational practice at the existing ASTC drastically limits available surgery hours as the anesthesiology group retained by the owner of the ASTC does not allow cases to begin after 3PM." Dr. Joseph Meyer from Quincy Anesthesia Associates, the provider of anesthesia services for the existing surgery center, spoke at the hearing to say that no one from QMG (who manages the current surgery center) had ever approached anyone from his group to make any attempt to discuss this situation, and the group was unaware of any desire by QMG physicians to change or expand available surgery hours prior to the CON application. Again, it is concerning that, for the purposes of their application, QMG

chose to misrepresent the situation by offering as a "problem" something they clearly had made no attempts to solve in their role as the manager of the surgery center. Similarly, they alleged that another shortcoming of the current arrangement is "Lack of ASTC Availability for Urological Services and ENT Related Procedures and Limited Neurosurgery Services." (page 58 of application) As with the scheduling issues discussed above that were blamed on the anesthesia group, these services were revealed at the hearing to be QMG's responsibility as the manager of the current surgery center. So, distilling down QMG's argument relative to these problems, they seem to feel that, currently, the surgery center is being poorly managed yet they are the managers. It seems by making these points they have built a strong argument against themselves as being equipped to properly manage a surgery center. I am reminded of the old saying "physician, heal thyself."

A final issue discussed at the hearing was QMG's complaint with regard to medical records: "Lack of Immediate Access to QMG Patient's Complete Medical Record." (page 059 of application) Their claim was that medical record access is limited due to QMG and Blessing using different systems. While this is likely technically true, it was explained by Dr. Irshad Siddiqui that Blessing has made multiple offers of solutions to connect the two record systems, all of which have been denied by QMG and/or their Iowa-based partial owner Unity Point. If they truly considered this such a "problem" it seems they would have been more interested in pursuing a viable solution when it was offered.

After attending the hearing, I read through the application and some of the accompanying letters online and was left with further questions and concerns. In the section of the application where alternative solutions are presented, QMG offered an alternative solution under the heading "Modify Existing Lease Arrangement for Existing ASTC at 1118 Hampshire." This section stated; "QMG would like to take over ownership of the ASTC and made a proposal regarding the same to the owner of the existing ASTC." and; "If the owner were agreeable to the transaction, QMG would file a certificate of Exemption with the HFSRB to change ownership of the facility." (page 67 of application) This entire process is meant to determine if there exists a need for another surgery center in Quincy, which QMG contends there does. What they have essentially stated here, by admitting that they would be perfectly satisfied to take over ownership of the existing surgery center as-is, as an alternative to establishing a new one, is that no such need actually exists.

On page 58 of the application, in the description with the bullet point labeled "Lack of Patient Choice" the argument is made that 4 of 5 of the closest ASTCs are in or around Springfield, highlighting this as an inadequacy, presumably due to distance. It seems odd to contend that this distance is too great for patients to travel for scheduled, outpatient procedures when the transfer agreements submitted with the application are made with hospitals at the same or further distance (one in Springfield and one in Peoria) for transfers of "seriously ill patients" (page 91) from the proposed surgery center. It seems like a much greater inadequacy to have to transfer patients who become seriously ill over such a long distance for treatment that could potentially be critical.

On page 110 of the application, QMG proposes using a 50-75 mile radius to determine the population served by the proposed surgery center. When one looks at

this radius relative to Quincy, it becomes apparent that many patients residing that far outside of Quincy would be nearly or equal to half the distance between Quincy and another community with an existing surgery center, or actually closer to one of those other communities. Examples include, within Illinois; Springfield, Peoria, and parts of the St. Louis area in Illinois, and, outside of Illinois; Hannibal, St. Louis, Iowa City and Columbia, MO. Using this radius seems to pull in a population much of which already has choices for surgery center services at similar distance to them as Quincy.

On pages 139-165 several articles were submitted to accompany the application. With the exception of one, those articles were published by the Ambulatory Surgical Center Association. I have difficulty believing this is a source of unbiased information with regard to surgery centers.

Finally, I have concerns regarding QMG's ownership partner, Iowa-based Unity Point. As stated on page 38 of the application; "Unity Point Health will have approximately 40% ownership interest in Quincy Medical Group **Surgery Center.**" (bolding mine for emphasis) This statement is not describing a general, corporate relationship, but specifically states that Unity Point will have ownership interest in the surgery center itself. It concerns me as a citizen of Illinois, a state that is several years into financial struggles, that this appears to allow for the potential for profits generated at the proposed surgery center to leave our state. I do not feel that QMG has adequately explained this relationship as it pertains to the statement from the application citing Unity Point as a partial owner of the surgery center. Perhaps their current structure does not allow for a direct distribution of profits to Unity Point, as QMG claims, but as we have seen in points mentioned above, QMG has proven their willingness to make claims without merit. Also, if it is true that no profits will immediately go to Unity Point in Iowa, what assurances are there that this would remain the case going forward? The relationship between these organizations is not without its own pieces of questionable information submitted in this application process. From page 40 of the application; "40% **common** shares owned by Unity Point Health System. At the time the application was filed, Unity point Health held approximately 40% of Quincy Medical Group's **common** stock." (again, bolding mine) Then in a letter to the review board from QMG CEO Carol Brockmiller dated 2/7/2019, with a stated intention "to clarify Quincy Medical Group's relationship with Unity Point Health" the following is stated; "Unity Point currently owns approximately 40% of Quincy Medical Group's stock in the form of **preferred** shares. Quincy Medical Group physicians own the remaining shares of stock, or approximately 60% in the form of common shares." And "**Preferred** stock holders do not participate in the earnings of Quincy Medical Group." (once again, bolding mine) There is a major disconnect between these two descriptions of the type of stock that Unity Point holds as a partial owner, but there does not appear to have been any replacement page submitted to change the description as listed on the application. This letter only appears to have created greater confusion as to what the actual relationship is between these entities, leading to further questions about Unity Point's potential, now or in the future, to receive profits from the proposed surgery center, which would result in money leaving our state.

In listening to the testimony at the hearing and reading through the letters submitted to the board, there appear to be many valid reasons that I did not discuss here that question the need and outline the potential negative impact to the community of the proposed surgery center. I feel those points have been adequately addressed by others. As I have discussed above, this application contained a concerning number of "facts" that were misleading, confusing, or just blatantly false, along with several points that simply do not justify the need for this project. An application containing the number of inaccuracies that this one does is not only a testament to the character, or perhaps the competency, of the applicant, but also an affront to the integrity of the entire CON process. I hope the board will consider these reasons when making their final decision, and I am asking that the Health Facilities and Services Review Board deny the CON application for Quincy Medical Group Surgery Center.

Thank you for considering my comments.

Sincerely,

Christine Moore

February 7, 2019

Ms. Courtney R. Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson, 2nd Floor
Springfield, IL 62761

Re: Opposition to CON 18-042, Quincy Medical Group Surgery Center in Quincy, Illinois

Dear Ms. Avery:

My name is Connie Meyer. I am a Senior Secretary of Emergency Medical Services at Blessing Hospital and have been in that position for 38 years. I am writing this letter to oppose the CON for Quincy Medical Group to build a Surgery Center in Quincy Illinois. I have been a resident of Quincy IL all my life except for 3 years that I lived in Chicago while my husband was in Pharmacy School. I have been a patient of many QMG doctors during that time frame. I have had four surgeries at Blessing Hospital where I have been hospitalized after the surgeries. I certainly don't think there is a need for another surgery center in this area. To provide a duplicate service and lose other services as a result is not a good thing for the community.

What will happen to the many people in need of mental health care who might see their lives and their families' lives upset because they can no longer receive the care they need at Blessing when the funding is not available for this critical safety net service. The loss of this service along with other services would cause a big job loss at Blessing, probably 400 or more people will lose their job. Blessing provides service to everyone even the people who do not have the funds. That is why the surgery center at Blessing is so important. It brings in revenue to subsidize some of the other losses. Blessing Hospital is also a Trauma Center and having another surgery center in this area could very well cause the loss of this designation. It would force patients in emergency situations to be transported two hours or more away from the life-saving care they now receive at the hospital thus taking them away from the support of their loved ones. Please consider all the losses the community will lose just to have another surgery center that we don't need

I respectfully ask that the Health Facilities and Services Review Board deny CON application 18-042 (Quincy Medical Group Surgery Center). Thank you for your consideration.]

Respectfully,

Connie Meyer
2440 Cedar Creek Court
Quincy IL 62301
(217) 224-1627

February 5, 2019
1704 Josephine Place
Springfield IL 62704

Ms. Courtney Avery
Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street, Second Floor
Springfield IL 62761

Re: CON Application #18-042

Dear Ms. Avery:

I write in opposition to the application of Quincy Medical Group for a certificate of need (#18-042) for a second, free-standing ambulatory surgery center in Quincy, Illinois. I had an academic practice in family medicine for 30 years in Quincy prior to assuming a role in central administration for the SIU School of Medicine. I express my own opinion in this letter. Nothing in this letter should be construed as a statement from an organization. I base my opinion on my education, practice and experience as a past member of the Council on Graduate Medical Education, a council authorized by the U.S. Congress to make physician workforce recommendations to the Secretary of Health and Human Services, and to the two healthcare authorizing committees of Congress – the Senate Health, Education, Labor and Pensions Committee and the House Energy and Commerce Subcommittee on Health.

Quincy is a regional medical market whose medical needs have been ably served over the years by the Blessing Health System (Blessing), the Quincy Medical Group (QMG), the SIU Center for Family Medicine (CFM), and other independent groups of physicians and healthcare providers. More than 10 years ago, Blessing and QMG entered into a business arrangement regarding the current ambulatory surgery center in Quincy. Though estimates by each organization of the effective use of this center vary considerably, both organizational estimates show that the current ambulatory surgery center is far from fully utilized and has capacity to accommodate more patients and surgical cases in a region whose population is not growing.

The medical literature has provided much information about the expansion of medical services and competing ambulatory surgery centers. One article, which succinctly states the evidence regarding this issue, is found in the May 25, 2009 issue of the *Annals of Internal Medicine*. This article, entitled "The Cost Conundrum" and authored by surgeon Dr. Atul Gawande, contains data from a study of the healthcare in McAllen, Texas, and an analysis of

why the cost in McAllen is so much higher than in similar surrounding communities. Briefly, the costs in McAllen became so high because of the establishment of for-profit specialty-specific hospitals, free-standing imaging centers, and free-standing ambulatory surgery centers. The specialty hospitals and the duplicate imaging and surgery centers were less likely to provide services for the entire population and more likely to limit the range of services provided. In other words, they were less likely to serve those who are uninsured or receive public aid, and were more likely to emphasize procedures that have a greater margin of profit, such as gastrointestinal endoscopies and cardiac catheterizations. Employers incorrectly believed that increased competition between these centers and hospital-based centers would bring them a cost advantage. It did not. Quite the opposite is true – overall costs for the population rose, and everyone wound up paying more, while at the same time it became more difficult for those who need the care the most to get it. An overview of the proposal in Quincy unfortunately leads to the same conclusion. This proposal will move Quincy and the surrounding area further away from the Institute of Health Improvement Triple Aim of better population-based healthcare outcomes, lower per capita cost, and better healthcare experiences for all people.

Blessing has developed a system that optimizes healthcare access for all, that sponsors excellent training programs for healthcare professionals, and that meets the needs of the communities of west-central Illinois. The effect of a second ambulatory surgical center most certainly would pose a financial problem for Blessing, and would lessen Blessing's ability to reach all citizens, to support healthcare educational systems, and to meet the health needs of the area. My academic practice was with the SIU Quincy CFM. I have observed for three decades the value of the academic-community partnership between SIU and Blessing in Quincy. I also observed the value of the Blessing Rieman College of Nursing. These programs spur better systems of care, better education for the entire region, and a better healthcare workforce for the future. Blessing's financial and philosophical support is essential, and no duplicative program that would harm it should be approved.

Thank you for this opportunity to express my opinion.

Sincerely yours,

Jerry Kruse, MD, MSPH

Zakiah Sayeed Ali MD

2231 North Wilmar Drive, Quincy IL 62301 | 217 440 3331 | alabeti@gmail.com

February 8 2019

Ms. Courtney R Avery, Administrator

Illinois Health Facilities and Services Review Board

525 West Jefferson, 2nd Floor

Springfield IL 62761

Re: Opposition to CON 18-042, Quincy Medical Group Surgery Center in Quincy IL.

Dear Ms. Avery,

I am a retired Pathologist/Family physician, and have worked with and at Blessing Hospital since 1978. I have seen Blessing grow from a small hospital into a Medical Center over the last several decades. The Administrative staff along with the president and CEO of the hospital have been exemplary in their efforts to put this small river town on the map! I have seen the dedication of the physicians of the Emergency Room, Radiology, and Pathology, and marvel at how easily they are approachable. Physicians from the Cardiology, Family Practice, Pulmonary Medicine, are so humane and they call the patients after treatments and enquire after their health. One of the most pleasant experiences of the patients is how hospital's billing system works. We never have to question it. (unlike the system at QMG.)

When I was in practice, I would get about two or three patients almost every single day, who would transfer their records from QMG (Quincy Medical Group), because they did not feel welcome there. The physicians would stop at the door of the examining room, and tell the patients, "I have seen your results, you can leave now, and return in three months!" That's it. The patient was never EXAMINED! In my own case, I had gone to one of the 'better' internists there following an MI while I was abroad. I went to him to explain what had happened. He spent about twenty minutes with me, looked at the bills I had from UK, and how much I had to pay, and his remark was, "just as well you had the problem there, if you had the MI here, your bill would have been several thousand more!" And then he left the examining room. I was somewhat miffed that he didn't listen to my heart or check the rhythm

etc. Two days later, I called his office and asked the nurse to send me his office notes, which she did. I was embarrassed to see that the physician had dictated a detailed history and physical exam about me, when in actuality, he hadn't even touched me except to shake my hand. When a Center has physicians like these, I do not think that it is a necessity to have a separate surgical center. There have been numerous surgical "accidents" where a wrong knee or hip has been operated upon. Having one single surgical center in the hospital keeps everything in checks and balance. If we have a second surgery center, accidents like the ones mentioned above, will be pushed under the rug. For a town of this size, it is not necessary to have another center at a great expense to the local hospital, whereby it would lose a tremendous number of employees and suffer great monetary loss.

Majority of people I have talked to, have told me how foolish this step would be, to have a second surgical Center. Therefore, I respectfully ask that the Health Facilities and Services Review Board DENY the application of Quincy Medical Group Surgery Center. ONE CENTER IS ENOUGH FOR THIS TOWN. Thank you for your consideration.

Sincerely,

Zakiah S Ali MD

Mohamed S Ali
2231 North Wilmar Drive
Quincy IL 62301
217 430 8973
msaquincy@yahoo.com

MS. Courtney R Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson, 2nd Floor
Springfield IL 62761

February 8, 2019

RE: Opposition to CON18-042, Quincy Medical Group Surgery Center in Quincy IL.

Dear Ms Avery

My name is Mohamed S Ali. I am a retired Health Care Executive with a Master's degree in Health Administration. When I first came to Quincy in 1978, there were two hospitals, and now we have one. I worked in both the hospitals. I have seen what duplication of services does to efficiencies in labor, and various resources. One of the main reasons for the increase in health care costs is due to duplication.

My objection for this small town to have a second surgery center, is very simple—it is just not good for the community. Unemployment will go up, and Blessing hospital will not be able to provide all the services they are efficiently providing now. The current set up between Quincy Medical Group and Blessing hospital is working very well.

I respectfully ask that the Health Facilities and Services Review Board deny the CON application 18-042. (QMG application for Surgery Center.)

I thank you for consideration of this grave matter.

Sincerely,

Mohamed S Ali

Feb.6, 2019.

Ms. Courtney R. Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson. 2nd Floor
Springfield, IL. 62761

Re: Opposition to CON 18-043, Quincy Medical Group Surgery Center in Quincy, Illinois

Dear Ms. Avery:
My name is Jim Kaiser and I am a former heart patient of Blessing Hospital. My wife was employed at QMG for 46 years as a RN.

We are in objection to the QMG proposal based on a several of reasons. This a duplication of services. QMG present surgery center is only operating at 47 % capacity. There is plenty of room to expand at current location. This community is not large enough to support the planned site. This proposal is all about profits for an out of state organization not about improved care for the region. QMG doesn't even plan on using the entire building they want to convert to the surgery center.

I respectfully ask that the Health Facilities and Services Review Board deny CON application 18-042. Thank you for your consideration

Sincerely,

Peggy Kaiser Jim Kaiser

Jim Kaiser
Peggy Kaiser