Chairpeison Delva Savage Delevois Health Facility Planning Board 525 West Jeffeison Steet, Second Floor Springfield, Se. 62761 Reference: Q.M.G. Hospital-Project 20-044 Dear his. Savoge, I am writing this labler in opposition to the above proposed project, QMG, Hospital. As a boin & loised resident of our Quency Community and a woman of 77 years of ages we just do not keed another hospital, especially a small-format hospital. This hospital would not be able to Rondle the needs of our Vulnerable from + neighbors. Those needing montal health treatment, the high risk mothers & bobis, thama and critical care concerns would not be able to receive the services be two miles away from Blessing Hospital!

my husband and I remember well the years we did have two posstals and our population is declining, so we have less needs for more hospital beds. Futhernous my concern is that Q.M.B. is no longer the locally Owned physician group we have known for 85 years but is now controlled by a for-profet checago based Company with substantial private equity investment! The uneeded beds and sewices will weaken our community healthcare system by such. The loss of federal frending will happen to Blessing if another hospital would open and in our present time of extreme funding essues from our government

Our present Blessing Hospital provides the services well that are needed for Quency and surrounding Courties! Thank upe for receiving my letter and please know I am writing their to supposed the preservation of our healthcare Community and the small format hospital proposed by Q.M.G. would rendermine our community healthcare services! Senceuly. Emily Peterson 2607 Kinga Points S.W. Querkey. Dl. 62305

March 31, 2022 1704 Josephine Place Springfield IL 62704

April Simmons, Legal Counsel Illinois Health Facilities and Services Review Board 525 West Jefferson, Second Floor Springfield, IL 62761

Re: Quincy Medical Group Hospital, Project #20-044

Dear Ms. Simmons,

I write in opposition to a certificate of need for the proposed Quincy Medical Group Hospital.

I am a family physician, medical educator, and public health physician, certified by the American Board of Family Medicine. I hold the MD and MSPH (Masters of Science in Public Health) degrees. I practiced family medicine in Quincy, Illinois, for 31 years before taking a position in academic medical administration. I have dedicated my life to the practice of medicine that is more effective (better outcomes), more efficient (lower per capita cost), more equitable (better access for all) and more enjoyable. I was appointed and for four years served on the U.S. Department of Health and Human Services Council on Graduate Medical Education, the major advisory group on physician workforce needs to the Secretary, the Senate Health, Education, Labor and Pension Committee, and the House Energy and Commerce Subcommittee on Health.

There are three major reasons that the proposed Quincy Medical Group Hospital should not be approved:

Abundant data in the medical literature show that physician-owned, specialty hospitals worsen population-based health outcomes, increase per capita costs and lead to inequitable divides in care based on race, ethnicity and socio-economic status. I will cite only one article, The Cost Conundrum, by Atul Gawande at this link:
 https://www.newyorker.com/magazine/2009/06/01/the-cost-conundrum
 which follows this letter. This is the story of McAllen, Texas, a story that will surely follow in Quincy, Illinois, should the CON for this hospital be approved.

- 2. Quincy Medical Group was recently purchased by Duly Health and Care, a for-profit physician group that is backed by a private equity company. Once again, there is abundant evidence that the involvement of private equity groups in health care leads to increased overall health care costs, higher costs for citizens in the specific community, poorer access, and poorer population-based health outcomes. Oftentimes, patients become pawns in the health care chess game, becoming no more than a commodity to be traded.
- 3. Blessing Hospital has an official designation as a Sole Community Provider. Should the QMG Hospital be approved, this designation would most certainly be at risk. Historically, that designation has brought \$6 million to \$8 million in extra funding per year into the Quincy area.

Recently, Quincy Medical Group abandoned a perfectly good ambulatory surgical center, received a CON for a new one, and pledged a 30% drop in surgical costs in the community that has not been realized. Blessing Hospital responded with a new ambulatory surgical center. As you see, a race is on, a race that will surely end in higher expense and worse outcomes for the people of the Quincy area. The HFSRB should do its duty to stop this race.

All of the people involved in Quincy are of good character and have the best interests of the community at heart. Someone, however, needs to properly evaluate the perverse incentives that now drive our medical system and make decisions that rather drive quality and cost-effectiveness. In this case, it has come down to the HFSRB to make that decision. I urge you to not grant the certificate of need.

Sincerely yours,

Jerry Kruse, MD, MSPH

217-494-0250

jerryelwoodkruse@gmail.com

Chairperson Debra Savage
Illinois Health Facility Planning Board
525 West Jefferson, Second Floor
Springfield, Il 62761
REFERENCE - QMG Hospital Project 20-044

Dear Chairperson Savage,

My husband and I are writing this letter to encourage you to deny the CON for Quincy Medical Group to build a second hospital in Quincy, Illinois.

I am a retired registered nurse with over 45 years of nursing experience in the Quincy community. I've been serving the Quincy community my entire career. The first 20 years of my career, I was at St. Mary Hospital and the last 25 years at Blessing Hospital.

In 1993 the community boards of both Blessing and St. Mary Hospital came together and made the decision that the community could only support one hospital. We understood that if we wanted to keep up with advances in medicine and to bring nonavailable services to Quincy we would need to consolidate to one hospital. We did this to save patients from driving 2-3 hours. We knew that we needed to bring critical cancer and heart care close to home, both are leading health issues in our community. We did this to bring the best care.

Our population is basically declining since the 1990's, so we do not understand how Quincy Medical Group believes the community can support two hospitals? This issue has already been addressed once.

In the past as Quincy Medical Group has duplicated services already provided at the hospital I have questioned their "cherry picking" of patients. Where the existing Blessing Hospital has continued to provide standard level of care 24/7 to everyone regardless of their ability to pay. Blessing doesn't turn anyone away. Blessing needs the federal funding that comes from being a sole community provider, because they will be caring for the most vulnerable of our community.

My husband spent 30 years in law enforcement in Quincy, IL and frequently was involved in assisting health care professionals in trauma care, cardiac care, and overdoses among other emergencies. Is the 25 bed hospital going to be able to provide the same level of care or will they be diverting patients to the larger Blessing Hospital? Will there be wasted minutes if someone shows up with a heart attack or stroke and needing emergent cardiac catherization, heart surgery or emergent neurosurgery requiring transfer to Blessing Hospital if the services are not available at the 25 bed hospital? To us safe, quality care is of high importance to our community. There proposed hospital would only be 2 miles from Blessing Hospital.

Before I retired in 2018 I remember seeing state reports that indicated west central Illinois already had more than enough hospital beds for the population served. I do not think this data would have changed significantly in the past three years.

My husband and I volunteer over 800 hours (even more during the Covid-19 pandemic) per year in the community at various agencies such as United Way, Open Hands Food Bank, Kiwanis Sewing Masks for public schools, Blessing Hospital, Quincy Hospitality House, and the COVID-19 vaccination center among others. We know how important it is for the community to come together to meet the needs of people living in our community and to listen to the voices of those people. Therefore, we support the

April 2, 2022

Chairperson Debra Savage
Illinois Health Facility Planning Board
525 West Jefferson
Second Floor
Springfield IL 62761

Reference - QMG Hospital Project 20-044

I am writing to oppose QMG Hospital Project 20-044. My opposition is based on the following.

- There is already an established hospital that cares for the population of Quincy and the surrounding region. A second hospital would result in duplication of services. This would cause costs to rise. The additional beds are not needed to provide services to our region.
- Many of the services that Blessing Hospital provides to residents may go away. You are not able to provide services at a loss if funding and profitable services are curtailed.
- I question whether or not, due to QMG being controlled by an out-of-town for-profit
 organization, all residents would be allowed to use their services, if they lack the ability to pay
 for said services. Examples may include those in need of mental health treatment, high risk
 mothers and babies, and those needing trauma and critical care. If this were to occur, this would
 place additional stress on the current hospital.
- Is another hospital needed in such close proximity to a current hospital? I'm not sure if this
 applies, but I believe in the recent past that a new hospital had to be at least 25 miles from a
 current hospital.

Thanks for considering my reasons for opposing this project.

Robert Walton 1311 S 21st St Quincy IL