

Courtney Avery, Administrator 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. Avery,

I am writing in opposition of Quincy Medical Group Hospital. I've been a business owner for the past 40 years and a proud member of this community. I want to see our region grow, but it needs to be smart growth. We also need a strong hospital and we're very fortunate to have that in Blessing. We do not achieve better care or growth by adding a second, unnecessary hospital. The middle of a pandemic is not the time to disrupt an already fragile health care system in this region or to put additional strain on the healthcare safety net.

I have seen firsthand the incredible charitable work that Blessing provides. There are no less than 17,000 residents in our county that live below the poverty level. Blessing serves everyone, regardless of their income and ability to pay. They don't turn anyone away, they never have and never will. Blessing also supports our community by investing in the region's social safety net, by supporting food and nutrition efforts and helping open a sensory room for autistic children among countless other efforts to help everyone in our community stay healthy and safe.

We do not need a second hospital in our community, we do not have the population to appropriately support it. Twenty one percent of rural hospitals are at risk of closing. Opening a second hospital, during this time, is an unnecessary gamble in a region that does not have a demonstrable need for additional hospital beds. A second hospital would not increase choice or quality of care, instead it would strain an already limited talent pool and resources, diminishing our ability to receive consistent, high quality care.

The proposed second hospital is not needed and would only add stress to our region's healthcare system. I encourage you to oppose Quincy Medical Group Hospital, project #20-044.

Sincerely,

Ronald L. Brink

President

4/5/2021

Courtney Avery, Adminstrator Illinois Health Facilities and Services Review Board 525 West Jefferson, Second Floor Springfield, IL 62761

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

Another hospital in Quincy Illinois will cost the area millions of dollars/year and stress limited healthcare resources.

For 120 years (1873 to 1993) Quincy Illinois had two hospitals. Due to changes in the practice of hospital medicine/reimbursement, Quincy could no longer support two hospitals. Starting in 1983, I practiced in Blessing and St. Mary's hospital. This meant running between two delivery floors, two Emergency rooms, two ICUs, medicine, pediatric floors, etc. It also meant duplication of resources/confusion as where to take ambulance patients depending on call lists. There were two: medical staff offices for credentialling, pharmacy/therapeutics committees, infection control committees, nutritional committees, department meetings, executive committee meetings, etc. Each one of these required a duplication of hospital personnel. It was a waste of physician and hospital resources.

Eventually, all medical staff/personnel became focused with just one hospital. Quincy now leads the region in heart, stroke, trauma, hip fracture care, antimicrobial safety, dental care access, etc.

Now in 2021, Quincy Medical Group (QMG) is proposing a non-profit physician-led small format hospital. Most of the time, QMG physicians have been in leadership/decision making of Blessing as chairs of departments, presidents of the medical staff and on the hospital board. The QMG physicians have not defined what more they want.

QMG did build a physician-led/financed ambulatory surgery center about 15 years ago, it struggled financially. Blessing was asked to take over management and pay QMG rent for 10 plus years to stabilize their financial health. QMG is now building another physician led surgicenter at the mall. All physicians serving the communities will need to be privileged at each hospital to assure access to care. This will begin the waste of resources as in 1993.

More importantly, if this QMG hospital is approved, it will impact the financial viability of both Blessing and this new hospital. A specially designated hospital receives a fraction more than normal Medicare reimbursement which helps them survive. Blessing is a rural sole community hospital as there is no hospital within 25 miles. This designation will go away and cost the area over \$7 million/year.

Small hospitals like Carthage Memorial Hospital and Illini Community Hospital are Critical Access Hospitals (CAH) which receive 101% of reasonable costs so they can survive and serve the community. Keokuk Area Hospital was neither a specially designated hospital like Blessing nor a CAH. It failed financially. UnityPoint Healthcare, QMG partner took Keokuk over but has now stepped away.

Examining the financial stability of hospitals, this QMG hospital seems to be doomed like their original ambulatory surgery center on Maine street and would become a financial failure like Keokuk Area Hospital.

"Cherry picking" patients that are not public aid or no pay, just specific Medicare procedures that pay at least costs and upfront self-pay plastic surgery are ways that the QMG small format hospital could survive. There have been times when QMG has refused to take public aid. In the 1990's, several Adams

County non-profit safety net providers worked with the Illinois Center for Rural Health to have Adams County designated as a Health Professional Shortage Area which allowed rural health clinics and federally qualified health centers to provide primary care services to all. Public aid does not pay enough for the cost of specialty care. When one cannot get a patient into a needed specialist, it worsens the patients' health status, negatively impacts community healthcare status, and increases cost of care. From my view, this is the main reason Blessing Physician Services began. Currently there are two QMG departments refusing to take new public aid patients.

Public aid cancer treatments are reimbursed pennies on the dollar of cost. There have been times when QMG Cancer Center public aid patients (which has an infusion center) ends up at Blessing Infusion center. The patient is served by Blessing, Blessing does everything to maximize the reimbursement, but they suffer the financial loss. Some of the \$7 million/year Blessing receives helps offset these losses somewhat.

I must say that QMG physicians are excellent, see all patients regardless of payor source in Blessing Hospital. Always when I made a physician-to-physician call, every urgent patient was seen in the office. It is the realities of a broken healthcare system that pays so poorly for specialty care that 100% public aid specialty office is financially unsustainable.

Examining Quincy Medical Group's history of physician led ambulatory surgery center failure, the cost shifting, limiting access to no pay/public aid patients, is their business plan to "cherry pick" the monied/insured? If so, it would harm the area and it would transform healthcare in the region in an unbelievably bad way.

With extremely limited healthcare dollars available, we need to learn from history and the financial reality of hospital care in the region. Hopefully, the Certificate of Need will not be granted for the QMG hospital and we can continue to work together to better healthcare in the region.

Thank you for understanding how a QMG small-format hospital would harm the healthcare of Adams County and the region.

Debra M. Phillips, MD (retired)

Courtney Avery, Administrator 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. Avery,

I am writing in opposition of Quincy Medical Group Hospital. The middle of a pandemic is not the time to disrupt an already fragile healthcare system in this region or to put additional strain on the healthcare safety net.

I am concerned that a second, unnecessary hospital will have an adverse impact on the over 17,000 people in Adams County who rely on Medicaid for their healthcare. Blessing serves everyone, regardless of their income and ability to pay. They don't turn anyone away, they never have and never will. The second hospital does not guarantee that those in need will receive care.

I am concerned with the addition of another hospital in Quincy, Illinois. Quincy did have 2 hospitals at one time. When St. Mary's Hospital could no longer sustain itself, Blessing stepped in to acquire it. When Quincy Medical Group but it's new facility on 1118 Hampshire and added a surgery center in such building, QMG had difficulty managing and maintaining the surgical aspect of such building. Blessing was asked to step in to manage the surgery center at QMG. When Unity Point, which is part of QMG, took over the Keokuk Hospital in Keokuk, Iowa, once again Blessing was asked to step in to acquire the hospital and keep the hospital going in that community. When QMG opened their own hospice program, it failed. Blessing already had and still has an exceptional hospice program and so Blessing assisted with managing the fall out of QMG's hospice patients. In my personal opinion, Quincy does not need another hospital since Blessing has ample beds, staff and programs to help the tri-state communities. Blessing maintained all staff during COVID without furloughing anyone. Blessing was here for their employees and the community during a pandemic and will be here for whatever will come in the future. Thank you for taking the time to read my letter.

The proposed small-format hospital is not needed and would only add stress to our region's healthcare system. I encourage you to oppose Quincy Medical Group Hospital, project #20-044.

Thank you, Michelle Schafer Blessing Hospital Basco, IL 62313 Courtney Avery, Administrator Illinois Health Facilities and Services Review Board 525 West Jefferson, Second Floor Springfield, IL 62761

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Dear Ms. Avery,

I am writing in opposition of Quincy Medical Group Hospital. The middle of a pandemic is not the time to disrupt an already fragile healthcare system in this region or to put additional strain on the healthcare safety net.

Twenty one percent of rural hospitals are at risk of closing. Opening an additional hospital, during this time, is an unnecessary gamble in a region that does not have a demonstrable need for additional hospital beds. Our community is already over bedded by at least 75 beds. A small-format hospital, would not increase choice or quality of care, instead it would strain an already limited talented pool and resources, diminishing our ability to receive consistent, high quality care.

Blessing Health System has been a strong leader in our community and was on the frontlines in battle against the COVID-19 pandemic. Blessing has worked tirelessly over the past 11 months to keep all of our communities safe and healthy. Because of their deep connections to the community and relying on their first in class experts, Blessing acted quickly and smartly. They renovated their facility to create 87 rooms with the ability to care for up to 130 patients requiring negative pressure isolation, they also set up a hotline staffed by registered nurses who help callers with questions about COVID-19, including discussing any symptoms they might be experiencing and they also stood up a drive-thru facility for COVID-19 testing.

The proposed small-format hospital is not needed and would only add stress to our region's healthcare system. I encourage you to oppose Quincy Medical Group Hospital, project #20-044.

Thank you, Carol Phillips Blessing Hospital Quincy, illinois 62301